

HB 2697 STAFF MEASURE SUMMARY

House Committee On Behavioral Health and Health Care

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Meeting Dates: 2/28, 3/28, 4/4

WHAT THE MEASURE DOES:

Requires hospitals to establish hospital technical and service staffing committees to develop written hospital-wide staffing plans. Establishes minimum standards for hospital staffing plans with respect to direct care registered nurses. Modifies hospital nurse staffing committee requirements, including process if committee is unable to reach agreement on staffing plan within 90 days. Requires Oregon Health Authority (OHA) to establish online portal for hospital staff to file complaint regarding hospital's failure to adopt staffing plan. Requires OHA to impose specified civil penalties for failure to implement staffing plan or correct staffing plan violation. Requires OHA to post hospital staffing plans and complaints filed against hospital on website. Establishes private cause of action for hospital staff and labor organizations against hospital for failure to have or comply with staffing plan. Requires OHA to review compliance with hospital staffing plans during in-person site inspections of hospital and establishes process for developing plan of correction. Requires home health agencies to establish home health nurse staffing committee and implement written home health staffing plan. Establishes private cause of action for home health nurse or labor organization against home health agency for failure to have or comply with staffing plan. Requires OHA to impose specified civil penalties for failure to implement home health agency staffing plan or correct staffing plan violation. Requires hospital technical and service staffing plans and home health agency staffing plans be submitted to OHA within three months and approved or rejected by OHA within six months of effective date.

FISCAL: *May have fiscal impact, but no statement yet issued.*

REVENUE: *May have revenue impact, but no statement yet issued.*

ISSUES DISCUSSED:

- Prevalence of burnout among health care workers
- Impacts of staffing ratios in California
- Impacts of workforce shortages on ability to staff hospitals
- Impacts of COVID-19 on workforce and capacity in all health care settings
- Differences in providing care in urban vs. rural areas
- Differences in establishing staffing levels for providers vs. technical staff
- Calculation of mandated staffing ratios

EFFECT OF AMENDMENT:

No amendment.

BACKGROUND:

In 2015, the Legislative Assembly passed Senate Bill 469 updating Oregon's nurse staffing laws, including requiring hospitals to establish hospital nurse staffing committees to develop and approve hospital nurse staffing plans. The measure provided factors for hospital nurse staffing committees to consider when developing nurse staffing plans and required the Oregon Health Authority (OHA) to audit hospitals to determine compliance with staffing plan requirement. Senate Bill 469 also established the Nurse Staffing Advisory Board in OHA to provide advice on the administration of the state's nurse laws and identify trends, opportunities, and concerns related to nurse staffing.

HB 2697 STAFF MEASURE SUMMARY

House Bill 2697 would require the establishment of hospital technical staff, hospital service staff, and home health agency nurse staff committees and staffing plans, as well as establish minimum standards for staffing plans in regards to direct care registered nurses.