

## SENATE BILL NO. 372

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A BILL FOR AN ACT ENTITLED: "AN ACT ESTABLISHING SAFE STAFFING STANDARDS FOR NURSES; CREATING NURSE STAFFING COMMITTEES IN HOSPITALS TO PROTECT AND ENHANCE THE SAFETY AND QUALITY OF PATIENT CARE; AND PRESCRIBING MINIMUM NURSE-TO-PATIENT RATIOS."

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:

**NEW SECTION. Section 1. Nurse staffing plan -- hospital staffing committee -- report to department.** (1) Each hospital licensed by the department of public health and human services shall, in coordination with its staffing committee as required in subsection (2), develop a nurse staffing plan that promotes a collaborative hospital practice and enhances patient care. The safe nurse staffing plan must:

- (a) prescribe the minimum professional nurse skill mix for each patient care unit in the hospital, including:
  - (i) the ratio of patients to registered nurses providing direct patient care for each unit, which must meet the minimum nurse-to-patient ratios prescribed in [section 2];
  - (ii) a description of any differences between the staffing levels prescribed in the staffing plan and actual staffing levels for each unit, how the hospital intends to meet the staffing levels prescribed in the nurse staffing plan, and whether the hospital will adjust staffing levels in future staffing plans;
  - (iii) the method used by the hospital to determine and adjust direct patient care nurse staffing levels; and
  - (iv) a description of supporting personnel assisting in each patient care unit;
- (b) identify the hospital's employment practices concerning the use of temporary and traveling nurses;
- (c) establish the hospital's process for internal review of the nurse staffing plan, including review

1 by the staffing committee, and any other review;

2 (d) identify how the hospital and its staffing committee receive input from direct care staff, including  
3 nurses and other members of the hospital's patient care team, in the development of the nurse staffing plan;

4 (e) be updated annually by the staffing committee; and

5 (f) receive majority approval of the staffing committee.

6 (2) (a) Each hospital licensed by the department shall establish a staffing committee to prepare  
7 and approve by majority vote the nurse staffing plan required in subsection (1).

8 (b) (i) At least 50% of the membership of a staffing committee must consist of registered nurses  
9 employed by the hospital in nonsupervisory roles and whose primary responsibility is to provide direct patient  
10 care.

11 (ii) Except as provided in subsection (c), for hospitals in which nurses are represented through  
12 collective bargaining, the collective bargaining agent shall select the members prescribed in subsection  
13 (2)(b)(i).

14 (c) If a hospital has an existing committee whose membership consists of at least 50% registered  
15 nurses who are employed by the hospital and whose primary responsibility is to provide direct patient care, the  
16 hospital may designate that committee as the hospital's staffing committee.

17 (3) Each hospital licensed by the department shall post in each care unit a copy of the hospital's  
18 nurse staffing plan in a location that is visible, conspicuous, and accessible to staff, patients, and the public.

19 (4) (a) Each hospital licensed by the department shall maintain accurate records of the ratios of  
20 direct care registered nurses to patients in each unit for each shift, including:

21 (i) the number of patients in each unit on each shift;

22 (ii) the number of direct care registered nurses assigned to each patient in each unit on each shift;

23 and

24 (iii) the number of supporting personnel in each unit on each shift.

25 (b) The records of the ratios of direct care registered nurses to patients must be available to the  
26 hospital staff, the staff's collective bargaining agents, the patients, the general public, and the department on  
27 request.

28 (5) Each hospital licensed by the department shall submit to the department annually its nurse

1 staffing plan with a written certification that the plan provides adequate and appropriate delivery of health care  
2 services.

3 (6) As used in this section, "nurse" means a person who:

4 (a) holds a valid license to practice as a registered professional nurse pursuant to the  
5 requirements of Title 37, chapter 8;

6 (b) provides direct care to patients; and

7 (c) is engaged in the practice of nursing as defined in 37-8-102.

8

9 **NEW SECTION. Section 2. Minimum nurse-to-patient ratios.** (1) A hospital licensed by the  
10 department of public health and human services may not assign a nurse:

11 (a) in an emergency room, to more than four nontrauma or noncritical care patients or to more than  
12 one trauma or critical care patient, except in circumstances that require two or more nurses to be assigned to  
13 one patient;

14 (b) in an intensive care unit, to more than two patients, except when circumstances require one or  
15 more nurses to be assigned to one patient;

16 (c) in a labor and delivery unit:

17 (i) to more than one patient experiencing complications or who is actively in labor; or

18 (ii) to more than two patients who are not experiencing complications or who are not actively in  
19 labor;

20 (d) in a postpartum unit or nursery, to more than six patients, counting mother and baby each as  
21 separate patients;

22 (e) in an operating room, to more than one patient;

23 (f) in an oncology unit, to more than five patients;

24 (g) in a postanesthesia care unit, to more than two patients;

25 (h) in an intermediate care unit, to more than four patients;

26 (i) in a medical-surgical unit, to more than five patients;

27 (j) in a cardiac telemetry unit, to more than four patients;

28 (k) in a psychiatric unit, to more than six patients; and

1 (l) in a pediatric unit, to more than four patients.

2 (2) As used in this section, "nurse" has the same meaning as provided in [section 1].

3  
4 NEW SECTION. **Section 3. Codification instruction.** [Sections 1 and 2] are intended to be codified  
5 as an integral part of Title 50, chapter 5, and the provisions of Title 50, chapter 5, apply to [sections 1 and 2].

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