HOUSE BILL REPORT HB 2501

As Reported by House Committee On:

Labor & Workforce Development

Title: An act relating to mandatory overtime for employees of health care facilities.

Brief Description: Placing restrictions on mandatory overtime for employees of health care facilities.

Sponsors: Representatives Green, Cody, Jinkins, Ryu, Lytton, Sells, Reykdal, Kirby, Van De Wege, Moeller, Darneille, Miloscia, Santos and Roberts.

Brief History:

Committee Activity:

Labor & Workforce Development: 1/24/12, 1/27/12 [DPS].

Brief Summary of Substitute Bill

- Extends the prohibition on mandatory overtime in health care facilities to additional employees.
- Modifies exceptions to the prohibition on mandatory overtime related to prescheduled on-call time and completion of patient care procedures.

HOUSE COMMITTEE ON LABOR & WORKFORCE DEVELOPMENT

Majority Report: The substitute bill be substituted therefor and the substitute bill do pass. Signed by 8 members: Representatives Sells, Chair; Reykdal, Vice Chair; Green, Kenney, Miloscia, Moeller, Ormsby and Roberts.

Minority Report: Do not pass. Signed by 5 members: Representatives Condotta, Ranking Minority Member; Shea, Assistant Ranking Minority Member; Fagan, Taylor and Warnick.

Staff: Alexa Silver (786-7190).

Background:

Both federal and state minimum wage laws establish requirements related to overtime work. These laws require that covered employees receive overtime pay for hours worked over 40

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hours per week. With some exceptions, these wage laws do not prohibit an employer from requiring employees to work overtime.

One exception prohibits covered health care facilities from requiring overtime for registered nurses and licensed practical nurses who are involved in direct patient care and are paid an hourly wage. Health care facilities covered by this prohibition on mandatory overtime are hospitals, hospices, rural health care facilities, psychiatric hospitals, some nursing homes, and facilities owned or operated by prisons and jails that provide health care services to inmates in the custody of the Department of Corrections. In the context of this prohibition, overtime means work in excess of an agreed upon, regularly scheduled shift of not more than 12 hours in a 24-hour period or 80 hours in a 14-day period.

The prohibition on mandatory overtime does not apply to overtime work that occurs:

- because of an unforeseeable emergency or disaster;
- because of prescheduled on-call time;
- when the employer documents reasonable efforts to obtain staffing; or
- when an employee must work overtime to complete a patient care procedure already in progress where the employee's absence would have an adverse effect on the patient.

Summary of Substitute Bill:

The prohibition on mandatory overtime in health care facilities applies to surgical technologists, diagnostic radiologic technologists, cardiovascular invasive specialists, respiratory technicians, and certified nursing assistants. The prohibition applies to employees who are covered by a collective bargaining agreement in addition to those who receive an hourly wage.

For health care facilities owned and operated by prisons and jails, the requirement that the facility provide care "to inmates" in state custody is deleted.

The exceptions to the prohibition on mandatory overtime are modified. The exception for prescheduled on-call time applies only if the prescheduled on-call time is necessary for immediate and unanticipated patient care emergencies. The employer may not use prescheduled on-call time to fill chronic or foreseeable staff shortages. Employers also may not schedule non-emergency procedures that would require overtime.

Substitute Bill Compared to Original Bill:

The substitute bill removes state v	reterans' homes from the list of covered health care
facilities that may not require emp	ployees to work overtime.

Appropriation: None.

Fiscal Note: Available. New fiscal note requested on January 27, 2012.

Effective Date of Substitute Bill: The bill takes effect 90 days after adjournment of the session in which the bill is passed.

Staff Summary of Public Testimony:

(In support) This bill is important for the safety of patients and workers. It would extend protections to technicians and certified nursing assistants that are already offered to nurses. It is critical that all members of the patient care team get the rest and care they need to give patients the best care. More errors and injuries happen during long shifts. These employees should be rested as they inject dyes, assist surgeries, and administer medications. Mandatory overtime should not be used as a tool to fix chronic short staffing; it should only be used in emergency cases.

(Opposed) Hospitals need flexibility to provide quality patient care. Certain units need the ability to work 24 hours a day, seven days a week. Some staff members only work on call, and part-time nurses frequently take on-call time from full-time staff who do not want it. A nurse who takes on-call time may take a sick day the next day. This bill will worsen patient safety, because if care for non-emergent patients is delayed because appropriate staff people are not available, the patients may go to emergency status. On-call staff works well, because the patient population is unpredictable. Rural hospitals, in particular, rely on on-call time to function, since the number of patients fluctuates and is unpredictable.

Persons Testifying: (In support) Erin Adamson and Sharon Ness, United Food and Commercial Workers Local 21; and John Tweedy, Washington State Nurses Association.

(Opposed) Patrice Tynes, Vanessa Kahle, and Todd Strumwasser, Swedish Hospital; and Brenda West, Mark Reed Hospital.

Persons Signed In To Testify But Not Testifying: None.

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