

SENATE BILL REPORT

SB 5537

As Reported by Senate Committee On:
Health & Long Term Care, February 16, 2023

Title: An act relating to establishing the Washington state hospital patient care unit staffing innovation collaborative.

Brief Description: Establishing the Washington state hospital patient care unit staffing innovation collaborative.

Sponsors: Senators Cleveland, Rivers, Dhingra, Mullet, Muzzall, Hunt, Wellman and Wilson, C..

Brief History:

Committee Activity: Health & Long Term Care: 2/10/23, 2/16/23 [DP-WM, w/oRec].

Brief Summary of Bill

- Establishes the Washington State Hospital Patient Care Unit Staffing Innovation Collaborative.

SENATE COMMITTEE ON HEALTH & LONG TERM CARE

Majority Report: Do pass and be referred to Committee on Ways & Means.

Signed by Senators Cleveland, Chair; Robinson, Vice Chair; Rivers, Ranking Member; Muzzall, Assistant Ranking Member; Dhingra, Holy, Randall and Van De Wege.

Minority Report: That it be referred without recommendation.

Signed by Senators Conway and Padden.

Staff: Greg Attanasio (786-7410)

Background: The University of Washington Center for Health Workforce Studies (center) provides the following:

This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not part of the legislation nor does it constitute a statement of legislative intent.

- conducts relevant health workforce research and policy analysis in collaboration with federal and state agencies;
- provides consultation to local, state, regional and national policy makers on health workforce issues;
- develops and refines analytical methods for measuring state health workforce supply and requirements;
- contributes to the understanding of health workforce issues and findings; and
- disseminates study results for application by policymakers.

Summary of Bill: The Washington State Hospital Patient Care Unit Staffing Innovation Collaborative (collaborative) is established for enhancing the understanding of innovative hospital staffing and care delivery models, including those that integrate on-site team-based care delivery, use of patient monitoring equipment and technology, and virtual or remote care delivery.

The Department of Health must contract with the center to facilitate and provide staff to the collaborative. The membership of the collaborative must consist of:

- four representatives of small, medium, and large hospitals, urban and rural hospitals, and public and private hospitals from regions across the state, to be selected by the Washington State Hospital Association (WSHA);
- four representatives of hospital patient care unit staff working in small, medium, and large hospitals, urban and rural hospitals, and public and private hospitals from regions across the state, to be selected by the Washington State Nurses Association, SEIU Healthcare 1199NW, and UFCW 21;
- one member representing a master of health administration program in Washington;
- one member representing a master of nursing program in Washington;
- one member representing patients who have been hospitalized within the last 12 months;
- one member representing physicians practicing in hospitals selected by the Washington State Medical Association; and
- one member who is an expert in the use of technology for patient care delivery in hospitals.

The collaborative must convene by December 1, 2023, and select co-chairs from among the members.

By December 1, 2023, WSHA must survey hospitals in Washington and report to the center on Washington hospitals' existing use of innovative hospital staffing and care delivery models. By December 1, 2024, the center must review innovative hospital staffing and care delivery models explored by national organizations analyzing hospital staffing and care delivery innovations.

The collaborative must review the information collected by WSHA and the center and:

- identify and analyze innovative hospital staffing and care delivery models;

- evaluate the feasibility of broad-based implementation of identified innovative hospital staffing and care delivery models;
- select which models should be disseminated across the state; and
- explore and make recommendations on whether to create a technical assistance center to support hospitals in implementing or expanding models.

The collaborative must inform the relevant professional associations, labor organizations, governing boards or commissions, and the appropriate policy and fiscal committees of the Legislature of any recommendations for broader dissemination of innovative hospital staffing models or pilot projects identified for implementation by no later than December 1, 2025, December 1, 2026, and December 1, 2027.

Appropriation: None.

Fiscal Note: Available.

Creates Committee/Commission/Task Force that includes Legislative members: No.

Effective Date: Ninety days after adjournment of session in which bill is passed.

Staff Summary of Public Testimony: PRO: This bill creates a place to explore best practices and innovations and how to implement those best practices. The center includes workforce experts and provides objective analysis and feedback. Innovation is needed because hiring and graduating more nurses will not solve the problem alone.

CON: The fundamentals of nursing must be protected. More could be done currently and a collaborative is not necessary to put in statute. A budget proviso would be a better approach. Talking about ideas is not going to solve the existing problems.

Persons Testifying: PRO: Senator Annette Cleveland, Prime Sponsor; Lisa Thatcher, Washington State Hospital Association; Jennifer Graham, RN, MultiCare Health System; Dana Nelson-Peterson, RN, Virginia Mason Franciscan Health; Renee Rassilyer-Bomers, RN, Providence Swedish; Vickie Swanson, RN, Olympic Medical Center; Ian Goodhew, UW Medicine.

CON: Anita Dalton; Lindsey Grad, SEIU Healthcare 1199NW.

Persons Signed In To Testify But Not Testifying: No one.