

# THE PATIENT SAFETY ACT

## THE PATIENT SAFETY ACT - PA HOUSE BILL 106 - WOULD CREATE SAFE STAFFING STANDARDS IN HOSPITALS ACROSS THE STATE TO ADDRESS THE CHRONIC NURSE SHORT STAFFING CRISIS

### House Bill 106

Introduced by prime cosponsors Reps. Thomas L. Mehaffie, III (R), and Kathleen C. Tomlinson (R), and Bridget Kosierowski (D), a nurse herself. On June 28, 2023, HB106 passed the PA House, 119-84 including 19 Republicans.

### Senate Bill 247

Introduced by prime cosponsor Sen. Maria Collett (D), a nurse herself.

### Bill Basics

The Patient Safety Act - House Bill 106 - would limit the number of patients an RN can be assigned depending on the level of care the patient requires. HB106 mandates these minimum nurse-to-patient staffing standards per unit.

UNIT	NURSE-TO-PATIENT MINIMUM STANDARD
Emergency Department (ER)	1:4 or fewer; 1:1 or fewer for critical trauma patients in the ER
Intensive Care Unit (ICU)	1:2 or fewer
Labor and Delivery	1:2 or fewer if the patients are not in active labor or experiencing complications, or in immediate postpartum. 1:1 if the patient is in active labor or if the patient is at any stage of labor and is experiencing complications; or initiating epidural anesthesia and circulation for cesarean delivery.
Postpartum, Antepartum and Well-Baby Nursery	1:6 or fewer, counting mother and baby as separate patients.
Operating Room (OR)	1:1
Oncology	1:4 or fewer
Post-Anesthesia Care Unit	1:2 or fewer
Intermediate Care Unit	1:3 or fewer
Medical-Surgical (Med/Surg)	1:4 or fewer
Cardiac Telemetry Unit	1:3 or fewer
Pediatric Unit	1:3 or fewer
Presurgical and Admissions / Ambulatory Surgical Unit	1:4 or fewer
Conscious Sedation	1:1
Burn Unit	1:2 or fewer

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continued on reverse

<b>UNIT</b>	<b>NURSE-TO-PATIENT MINIMUM STANDARD</b>
Other Specialty Units	1:4 or fewer
Psychiatric Unit	1:4 or fewer
Rehabilitation Unit	1:5 or fewer

## **PLUS:**

### **Safe Harbor**

HB 106 would protect a direct care registered nurse from adverse action by the health care facility if the direct care registered nurse accepts an assignment despite objection over the ratios prescribed.

### **On-Ramp for Rural Hospitals**

Non rural hospitals would have one year to come into compliance with the law's requirements; rural hospitals would have two years.

### **Use of Penalty Monies**

Any Monies (for penalties) collected under the bill would be used for a Grant Program within the Department of Health for the purpose of recruitment and retention of nurses in rural and high medical assistance hospitals.

### **Staffing Transparency**

The hospital must post in a physical location in each unit and a publicly accessible internet website a list of all available nursing staff and staffing requirements on a day-to-day and shift-by-shift basis.

### **Staffing Plans**

All hospitals would be required to develop hospital-wide staffing plans, which would be updated at least annually, more often as needed.

**These limits were set by nurses to ensure a minimum standard of care that every Pennsylvanian deserves. PASNAP, the Pennsylvania State Nurses Association, Nurses of Pennsylvania, SEIU Healthcare Pennsylvania and many other organizations all support this legislation.**

***“This legislation is an important part of keeping hospital patients safe and ensuring they receive the best care possible. In addition, the Patient Safety Act represents an excellent way for hospitals to make an investment in patient care that will pay dividends in overall savings.”***



*Pennsylvania Association of Staff Nurses & Allied Professionals*