

HOUSE BILL No. 4101

February 1, 2005, Introduced by Reps. Wojno, Byrnes, Accavitti, Hood, Gonzales, Sak, Gleason and Plakas and referred to the Committee on Health Policy.

A bill to amend 1978 PA 368, entitled
"Public health code,"
by amending section 21513 (MCL 333.21513), as amended by 2002 PA
125, and by adding section 21525.

THE PEOPLE OF THE STATE OF MICHIGAN ENACT:

1 Sec. 21513. The owner, operator, and governing body of a
2 hospital licensed under this article:

3 (a) Are responsible for all phases of the operation of the
4 hospital, selection of the medical staff, and quality of care
5 rendered in the hospital.

6 (b) Shall cooperate with the department in the enforcement of
7 this part, and require that the physicians, dentists, and other

1 personnel working in the hospital who are required to be licensed
2 or registered are in fact currently licensed or registered.

3 (c) Shall assure that physicians and dentists admitted to
4 practice in the hospital are granted hospital privileges consistent
5 with their individual training, experience, and other
6 qualifications.

7 (d) Shall assure that physicians and dentists admitted to
8 practice in the hospital are organized into a medical staff to
9 enable an effective review of the professional practices in the
10 hospital for the purpose of reducing morbidity and mortality and
11 improving the care provided in the hospital for patients. The
12 review shall include the quality and necessity of the care provided
13 and the preventability of complications and deaths occurring in the
14 hospital.

15 (e) Shall not discriminate because of race, religion, color,
16 national origin, age, or sex in the operation of the hospital
17 including employment, patient admission and care, room assignment,
18 and professional or nonprofessional selection and training
19 programs, and shall not discriminate in the selection and
20 appointment of individuals to the physician staff of the hospital
21 or its training programs on the basis of licensure or registration
22 or professional education as doctors of medicine, osteopathic
23 medicine and surgery, or podiatry.

24 (f) Shall assure that the hospital adheres to medical control
25 authority protocols according to section 20918.

26 (g) Shall assure that the hospital develops and maintains a
27 plan for biohazard detection and handling.

1 (H) SHALL ASSURE THAT THE HOSPITAL DEVELOPS AND MAINTAINS A
2 STAFFING PLAN ACCORDING TO SECTION 21525.

3 SEC. 21525. (1) THE DEPARTMENT MAY REFUSE TO LICENSE A
4 HOSPITAL UNDER THIS PART IF THE HOSPITAL FAILS TO DEVELOP AN ACUITY
5 SYSTEM THAT IS APPROVED BY THE DEPARTMENT OR TO SUBMIT AN ANNUAL
6 STAFFING PLAN AS PRESCRIBED UNDER THIS SECTION. THE DEPARTMENT
7 SHALL PROMULGATE RULES PRESCRIBING THE PROCESS FOR APPROVING A
8 HOSPITAL'S ACUITY SYSTEM AND STAFFING PLAN AND ANY OTHER RULES
9 REASONABLY NECESSARY TO CARRY OUT ITS FUNCTIONS AND DUTIES UNDER
10 THIS SECTION.

11 (2) THE STAFFING PLAN SHALL BE BASED ON REASONABLE PROJECTIONS
12 DERIVED FROM THE PATIENT CENSUS AND NURSING CARE NEEDS WITHIN EACH
13 HOSPITAL UNIT FOR THE PREVIOUS YEAR AND SHALL TAKE INTO
14 CONSIDERATION ANY FORESEEABLE CHANGES WITHIN THE HOSPITAL UNIT FOR
15 THE NEXT YEAR. THE STAFFING PLAN SHALL INCLUDE, AT A MINIMUM, THE
16 FOLLOWING NURSE-TO-PATIENT RATIOS:

17 (A) ONE NURSE FOR EACH PATIENT IN AN OPERATING ROOM OR TRAUMA
18 EMERGENCY UNIT.

19 (B) ONE NURSE FOR EVERY 2 PATIENTS IN EACH CRITICAL CARE UNIT
20 INCLUDING, BUT NOT LIMITED TO, A LABOR AND DELIVERY UNIT OR A
21 POSTANESTHESIA UNIT.

22 (C) ONE NURSE FOR EVERY 3 PATIENTS IN AN ANTEPARTUM, EMERGENCY
23 ROOM, PEDIATRICS, STEP-DOWN, OR TELEMETRY UNIT.

24 (D) ONE NURSE FOR EVERY 4 PATIENTS IN AN INTERMEDIATE CARE
25 NURSERY OR A MEDICAL, SURGICAL, OR ACUTE CARE PSYCHIATRIC UNIT.

26 (E) ONE NURSE FOR EVERY 5 PATIENTS IN A REHABILITATION UNIT.

27 (F) ONE NURSE FOR EVERY 6 PATIENTS IN A POSTPARTUM OR WELL-

1 BABY NURSERY UNIT.

2 (3) THE DEPARTMENT MAY ESTABLISH MINIMUM NURSE-TO-PATIENT
3 RATIOS FOR ANY OTHER HOSPITAL UNIT NOT INCLUDED UNDER SUBSECTION
4 (2).

5 (4) A HOSPITAL SHALL POST IN A CONSPICUOUS PLACE READILY
6 ACCESSIBLE TO THE PUBLIC A NOTICE THAT IS DEVELOPED AND PROVIDED BY
7 THE DEPARTMENT AND THAT OUTLINES THE MANDATORY MINIMUM NURSE-TO-
8 PATIENT RATIOS REQUIRED TO BE MAINTAINED UNDER THIS SECTION. THE
9 NOTICE SHALL INCLUDE INFORMATION ABOUT THE CONFIDENTIAL REPORTING
10 SYSTEM ESTABLISHED UNDER SUBSECTION (6). UPON REQUEST, THE HOSPITAL
11 SHALL PROVIDE COPIES OF THE STAFFING PLAN FILED WITH THE DEPARTMENT
12 TO THE PUBLIC.

13 (5) EACH HOSPITAL UNIT SHALL MAINTAIN A DAILY LOG THAT
14 REFLECTS THE NUMBER OF PATIENTS ADMITTED, RELEASED, AND PRESENT IN
15 THE UNIT, THE ACUITY LEVEL OF THE PATIENTS IN THE UNIT, THE NUMBER
16 OF REGISTERED PROFESSIONAL NURSES AND LICENSED PRACTICAL NURSES ON
17 DUTY IN THE UNIT, AND THE AVERAGE NURSE-TO-PATIENT RATIO FOR THAT
18 DAY. THESE RECORDS SHALL BE RETAINED FOR A PERIOD OF 7 YEARS AND
19 SHALL BE MADE AVAILABLE TO THE DEPARTMENT AND THE PUBLIC UPON
20 REQUEST, PROVIDED THAT THE INFORMATION RELEASED COMPLIES WITH
21 APPLICABLE STATE AND FEDERAL PRIVACY LAWS AND REGULATIONS.

22 (6) THE DEPARTMENT SHALL DEVELOP AND IMPLEMENT A CONFIDENTIAL
23 SYSTEM THAT IS AVAILABLE TO THE PUBLIC FOR REPORTING A HOSPITAL'S
24 FAILURE TO COMPLY WITH ITS STAFFING PLAN OR ANY OTHER REQUIREMENTS
25 UNDER THIS SECTION. THE DEPARTMENT SHALL INVESTIGATE EACH COMPLAINT
26 RECEIVED AND SHALL NOTIFY THE COMPLAINANT IN WRITING OF THE RESULTS
27 OF A REVIEW OR INVESTIGATION OF THE COMPLAINT AND ANY ACTION

1 PROPOSED TO BE TAKEN. IF THE DEPARTMENT DETERMINES THAT A HOSPITAL
2 FAILED TO MAINTAIN ITS STAFF IN ACCORDANCE WITH THE STAFFING PLAN
3 AND STAFFING STANDARDS ESTABLISHED UNDER THIS SECTION, THE
4 DEPARTMENT MAY ASSESS THE HOSPITAL AN ADMINISTRATIVE FINE OF NOT
5 MORE THAN \$1,000.00 FOR EACH VIOLATION OR FOR EACH DAY THAT THE
6 VIOLATION CONTINUES.

7 (7) IF A HOSPITAL FAILS TO SUBMIT AN ANNUAL STAFFING PLAN AS
8 REQUIRED UNDER THIS SECTION, THE DEPARTMENT SHALL ASSESS THE
9 HOSPITAL AN ADMINISTRATIVE FINE OF UP TO \$10,000.00 FOR EACH
10 VIOLATION AND, IF THE STAFFING PLAN REMAINS UNFILED, FOR EACH DAY
11 OF CONTINUED NONCOMPLIANCE.

12 (8) AS USED IN THIS SECTION:

13 (A) "ACUITY SYSTEM" MEANS A SYSTEM ESTABLISHED TO MEASURE AND
14 PREDICT THE HOSPITAL'S NURSING CARE NEEDS FOR ITS PATIENTS IN EACH
15 HOSPITAL UNIT BASED ON THE SEVERITY OF THE ILLNESSES, THE NEED FOR
16 SPECIALIZED EQUIPMENT AND TECHNOLOGY, THE INTENSITY OF NURSING
17 INTERVENTIONS REQUIRED, AND THE COMPLEXITY OF THE CLINICAL JUDGMENT
18 NEEDED TO DESIGN, IMPLEMENT, AND EVALUATE A PATIENT CARE PLAN. IT
19 SHALL INCLUDE A MEANS TO ADDRESS FLUCTUATIONS IN PATIENT LEVELS AND
20 NURSING CARE NEEDS DUE TO OTHER HOSPITAL UNIT ACTIVITY INCLUDING,
21 BUT NOT LIMITED TO, DISCHARGES, TRANSFERS, AND ADMISSIONS.

22 (B) "DEPARTMENT" MEANS THE DEPARTMENT OF COMMUNITY HEALTH.

23 (C) "HOSPITAL UNIT" MEANS EACH PATIENT CARE COMPONENT WITHIN A
24 HOSPITAL.

25 (D) "STAFFING PLAN" MEANS A WRITTEN PLAN THAT ESTABLISHES THE
26 MINIMUM SPECIFIC NUMBER OF REGISTERED PROFESSIONAL NURSES AND
27 LICENSED PRACTICAL NURSES REQUIRED FOR EACH HOSPITAL UNIT BASED ON

1 THE NURSING CARE NEEDS OF THAT UNIT TO ENSURE SUFFICIENT NURSING
2 STAFF TO PROVIDE ADEQUATE PROTECTION AND CARE FOR ALL OF THE
3 HOSPITAL'S PATIENTS.