

SENATE BILL REPORT

SB 6279

As of January 19, 2006

Title: An act relating to posting staffing levels at nursing homes.

Brief Description: Requiring posting of staff levels at nursing homes.

Sponsors: Senators Regala and McAuliffe.

Brief History:

Committee Activity: Health & Long-Term Care: 1/18/06.

SENATE COMMITTEE ON HEALTH & LONG-TERM CARE

Staff: Sharon Swanson (786-7447)

Background: Nursing homes must ensure that a sufficient number of qualified staff are available to safely provide the necessary care and services.

Currently, nursing homes must have a registered nurse on duty directly supervising resident care a minimum of sixteen hours per day, seven days per week. A registered nurse or licensed practical nurse must be on duty directly supervising resident care the remaining eight hours per day, seven days per week.

Directly supervising is defined in the Washington Administrative Code 388.97.115 as meaning "the supervising individual is on the premises and is quickly and easily available to provide necessary assessments and other direct care of residents and provide oversight of supervised staff."

Summary of Bill: Nursing homes must compile information related to the number and type of health care providers who are directly responsible for resident care and the ratio of these health care providers to residents for each shift.

The information must be adjusted within a reasonable amount of time after each shift has begun to reflect the actual staffing level and the actual ration of health care providers to residents.

The nursing home must post the information in a visible and accessible place in the residential area and submit it to the Department of Social and Health Services (DSHS) every twelve months.

DSHS must publish an annual report of the information for public distribution.

Appropriation: None.

Fiscal Note: Requested on January 11, 2006.

Committee/Commission/Task Force Created: No.

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

Testimony For: Consumers should have access to as much information as possible. Information about the numbers of staff on a particular shift, staff to patient ratio, and whom to call in the event of an emergency are vital pieces of information that should be readily available to consumers. Consumers want to know the ratio for the unit where their loved one is and individual shifts, rather than monthly averages. A consumer may choose to spend extra time with a family member if he or she knows a particular shift is short staffed. They should have the right to make an informed choice.

Testimony Against: Currently, nursing homes are required to post the number and type of credentialed providers for each shift in order to comply with federal standards. Adding the additional burden of updating a posting to reflect how many staff are actually on shift at any given time is too cumbersome. Nursing homes are already dealing with funding shortages and staff shortages. Resources should be applied to patient care, not paperwork. The bill does not take into consideration patient acuity. Straight numbers will not tell the entire story. Without understanding patient acuity, numbers are meaningless. With federal regulations in place, the requirements created by this bill are redundant and unnecessary.

Who Testified: PRO: Hilke Faber, Resident Councils of Washington; Kary Hyre, Long Term Care Ombudsman.

CON: Julie Peterson, Washington Association of Housing and Services for the Aging; Jonathan Eames, Health Care Association; Noni Gray, Avalon Health Care.