Testimony of the Board of Nursing

Before the House Committee on Health Wednesday, March 20, 2024 10:30am a.m. Conference Room 329 and Videoconference

On the following measure: H.R. 167, REQUESTING THE DEPARTMENT OF HEALTH TO CONVENE A HEALTH CARE FACILITIES LABOR STANDARDS WORKING GROUP TO RESEARCH, ASSESS, AND MAKE RECOMMENDATIONS ON THE BEST PRACTICES IN LABOR STANDARDS THAT CAN BE IMPLEMENTED AT HOSPITALS, CARE HOMES, AND DIALYSIS FACILITIES IN THE STATE.

Chair Belatti and Members of the Committee:

My name is Chelsea Fukunaga, and I am the Executive Officer of the Board of Nursing (Board). The Board takes no position on this measure and offers comments.

The purpose of this resolution is for the Department of Health to convene a health care facilities labor standards working group to research, assess, and make recommendations on the best practices in labor standards that can be implemented at hospitals, care homes, and dialysis facilities in the State. The working group is requested to research, assess, and make recommendations on: (1) potential benefits and impacts associated with the implementation and enforcement of labor standards at hospitals, care homes, and dialysis facilities in the State, including but not limited to the establishment and enforcement of: (a) minimum staffing standards; (b) hospital staffing committees; and (c) mandatory meal breaks, rest breaks, and overtime standards; (2) best practices in labor standards that can be implemented at hospitals, care homes, and dialysis facilities in the State; and (3) any other issues that may arise, pursuant to the direction of the working group.

As a general matter, the Board notes that it lacks the subject matter expertise necessary to lead the requested working group. The Board's familiarity with the nursing profession is limited to consumer protection aspects of safeguarding life and health through standardizing and enforcing nursing requirements. The Board does not presently have any staff with specific expertise, any particular knowledge of, or experience in matters relating to: health care facility labor standards, minimum staffing

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standards, hospital staffing committees, mandatory meal breaks, rest breaks, and overtime standards that would allow the Board to appropriately comment or make any definitive recommendations regarding solutions or suggestions regarding best practices in labor standards.

Rather than having a Board member chair the proposed working group, the Board respectfully suggests that the measure be amended to include other relevant parties to participate in this study. The Board notes that the Legislative Reference Bureau (LRB) conducts policy and legal research and would be an appropriate impartial and neutral entity to conduct the study. Accordingly, the Board suggests that the LRB review other states where similar measures have been implemented and consult with other industry stakeholders to develop recommendations for best practices.

If the Committee still wishes for the Board's participation in this matter, the Board respectfully requests that the measure be amended to limit the Board's involvement to a consultative capacity, should any questions or concerns arise regarding licensing or regulatory functions of the Board.

If the scope of the Board's involvement is narrowed in the manner described above, the Board believes that the services requested under this measure would be manageable, provided that the Board's workload is not adversely impacted by other legislation that may be passed out during this session.

Thank you for the opportunity to testify on this bill.



Written Testimony Presented Before the House Committee on Health & Homelessness March 20, 2024 at 10:30 A.M. Conference Room 329 and via Videoconference by Laura Reichhardt, APRN, AGPCNP-BC, FAAN Director, Hawai'i State Center for Nursing University of Hawai'i at Mānoa

Comments on HCR 187 / HR 167

Chair Belatti, Vice Chair Takenouchi, and members of the Committee, thank you for the opportunity to testify on HCR 187 and HR 167. The Hawai'i State Center for Nursing provides comments.

This measure aims to convene a working group to research, assess, and make recommendations on (1) the potential benefits and impacts associated with the implementation and enforcement of labor standards at hospitals, care homes, and dialysis facilities in the State, including but not limited to the establishment and enforcement of minimum staffing standards, hospital staffing committees, and mandatory meal breaks, rest breaks, and overtime standards; (2) Best practices in labor standards that can be implemented at hospitals, care homes, and dialysis facilities in the State; and (3) Any other issues that may arise, pursuant to the direction of the working group.

The Hawai'i State Center for Nursing (HSCN) recognizes the importance of safe staffing standards. Further, in order to best determine the potential benefits and impacts of such approaches described in this resolution, the HSCN recommends a study is conducted before convening a working group to assess findings and make recommendations to the Legislature. Therefore, HSCN agrees with the approach proposed by the Hawai'i Board of Nursing.

Thank you for the opportunity to testify on this resolution. Your advocacy on behalf of nurses' wellbeing and patient outcomes is greatly appreciated.





Wednesday, March 20, 2024 at 10:30 am Conference Room 329

House Committee on Health and Homelessness

- To: Chair Della Au Belatti Vice Chair Jenna Takenouchi
- From: Hilton R. Raethel President and CEO Healthcare Association of Hawaii

Re: Submitting comments with concerns <u>HCR 187/HR 167, Requesting the Department of Health to convene a health care</u> <u>facilities labor standards working group to research, assess, and make</u> <u>recommendations on the best practices in labor standards that can be implemented at</u> <u>hospitals, care homes, and dialysis facilities in the state</u>

The Healthcare Association of Hawaii (HAH), established in 1939, serves as the leading voice of healthcare on behalf of 170 member organizations who represent almost every aspect of the health care continuum in Hawaii. Members include acute care hospitals, skilled nursing facilities, home health agencies, hospices, assisted living facilities and durable medical equipment suppliers. In addition to providing access to appropriate, affordable, high-quality care to all of Hawaii's residents, our members contribute significantly to Hawaii's economy by employing over 30,000 people statewide.

We are submitting **comments with strong concerns** regarding HCR 187/HR 167, which would request the Hawaii Department of Health (DOH) to convene a working group to discuss and make recommendations on best practices for labor standards in the state. This resolution specifically identifies staff to patient ratios and requests that the group provide recommendations on implementing ratios and other items typically included in negotiations between employees and their employers. This would lead to the DOH recommending legislative proposals on collective bargaining issues. Further, the working group does not formally request the presence of any healthcare employers or other organizations in the state, including any post-acute care organizations such as skilled nursing homes or home-and-community-based long-term care settings such as community care foster homes.

We are concerned that this resolution, as drafted, does not address the core issues impacting RN shortages in the state of Hawaii. As stated in other forums, we do not believe that mandated, prescriptive nurse to patient ratio policies are supported by the data to improve care or resolve the workforce shortage. In fact, mandated ratios can have the perverse effect of reducing access to care through the closure of beds or units, and decreased access to service.

Affiliated with the American Hospital Association, American Health Care Association, National Association for Home Care and Hospice, American Association for Homecare and Council of State Home Care Associations California, which is the only state to have mandated ratios, has a nursing workforce shortage of 20,000-30,000 people, and worse health outcomes than Hawaii.

There is a genuine workforce shortage of nearly 1,000 registered nurses in the state. This shortage affects not just hospitals, but our post-acute care members, including nursing facilities, home health agencies, hospice agencies, and assisted living facilities. We believe that more investment should be made to address this shortage, and to also work on recruiting, training, and retaining individuals who support the nursing profession.

We are also concerned that the gathering of a working group of parties across various employers and different unions to discuss items typically addressed in collective bargaining units will not be fruitful. Instead, we believe a review of evidence-based research conducted through a study—rather than a convening of parties adverse to each other who are in current or future collective bargaining negotiations—would be more useful.

Therefore, we would support efforts to have a study completed by an independent entity, such as the Legislative Reference Bureau, on best practices for staffing and workforce development. We would suggest that the study could focus on how organizations implement safe staffing standards based on acuity, along with successful efforts in other states to address the workforce shortage.

Thank you for your continued interest in improving healthcare access and workforce in the state.

<u>HR-167</u>

Submitted on: 3/19/2024 12:25:58 PM Testimony for HLT on 3/20/2024 10:30:00 AM

Submitted By	Organization	Testifier Position	Testify
Carrie Oliveira	Individual	Comments	Written Testimony Only

Comments:

Aloha,

This bill designates that the chairperson of the Hawaii Board of Nursing (BON) shall be a member of and chair this working group.

All members of the BON, including its Chair, are volunteer private citizens. No member of the BON is employed by any state agency identified as members of the working group in this bill. As such, all of the time and profesional services (e.g., setting agendas, meeting facilitation, report writing/editing/designing) will all be provided to this working group at the personal expense of the Chair. Moreover, given that BON members are generally employed in full-time roles, the chair would be required to take time off from his or her regular employment to be available to perform the functions of leading the working group during the state's normal business hours. The loss of work time and the donation of professional services has the potential to be financially deleterious to the individual.

An amendment to designate a state agency and its employees to convene and lead the working group would address these problems.

Mahalo for your consideration.

Carrie M. Oliveira, Ph.D.