

JAN 23 2026

A BILL FOR AN ACT

RELATING TO STAFFING STANDARDS AT HEALTH CARE FACILITIES.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:

1 SECTION 1. The legislature finds that the health and
2 safety of the State's residents depend on ensuring that
3 registered nurses are supported in providing high-quality,
4 patient-centered care. The legislature further finds that
5 adequate nurse-to-patient staffing ratios are critical to
6 achieving this goal, as they directly impact patient safety,
7 reduce nurse burnout, and promote nurse retention in the health
8 care workforce.

9 The legislature recognizes that improving nurse-to-patient
10 staffing ratios leads to better patient outcomes, enhanced care
11 quality, and a more sustainable health care system. By
12 establishing minimum nurse-to-patient staffing ratios and
13 requiring hospitals to implement and adhere to enforceable
14 staffing plans, the State can protect its health care workforce,
15 reduce staff turnover, and ensure that patients receive the
16 safe, timely care they deserve.

17 Accordingly, the purpose of this Act is to:



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- 1 (1) Require each hospital to establish a hospital
2 registered nurse staffing committee and implement a
3 hospital registered nurse staffing plan, with minimum
4 registered nurse staffing standards, adopted by the
5 staffing committee on an annual basis;
- 6 (2) Require hospital registered nurse staffing committees
7 to receive, review, evaluate, and respond to reports
8 and complaints regarding deviations from an adopted
9 hospital registered nurse staffing plan;
- 10 (3) Establish a variance process that allows hospitals to
11 temporarily deviate from their minimum registered
12 nurse staffing standards under limited circumstances;
- 13 (4) Establish an enforcement framework to be administered
14 by the department of labor and industrial relations,
15 including review of staffing plans, complaint
16 investigations, administrative appeals, and civil
17 penalties for violations;
- 18 (5) Prohibit retaliation against registered nurses,
19 patients, and other persons who report staffing
20 concerns or participate in enforcement proceedings;
21 and



1 "Hospital registered nurse staffing committee" or "staffing
2 committee" means the committee established by a hospital under
3 section -11.

4 "Hospital registered nurse staffing committee charter" or
5 "staffing committee charter" means the charter adopted by a
6 hospital registered nurse staffing committee under
7 section -13.

8 "Hospital registered nurse staffing plan" or "staffing
9 plan" means a plan adopted by a hospital registered nurse
10 staffing committee under section -14.

11 "Patient care unit" means any unit or area of the hospital
12 that provides patient care.

13 "Registered nurse" means a person licensed under section
14 457-7.

15 § -2 **Rules.** The department shall adopt rules pursuant
16 to chapter 91 to effectuate the purposes of this chapter.

17 **PART II. HOSPITALS; REGISTERED NURSE STAFFING PLANS**

18 § -11 **Hospital registered nurse staffing committee;**
19 **membership.** (a) No later than September 1, 2026, each hospital
20 shall establish a hospital registered nurse staffing committee.



1 (b) A majority of the members of the staffing committee
2 shall be registered nurses who are nonsupervisory,
3 nonmanagerial, and currently providing direct patient care.
4 These members shall be appointed by the collective bargaining
5 representative or representatives of the registered nurses;
6 provided that if there is no collective bargaining
7 representative, the members shall be selected by their peers.

8 (c) The remaining members of the staffing committee shall
9 be appointed by the hospital administration; provided that these
10 members shall include the hospital's chief financial officer,
11 chief nursing officer, and patient care unit directors or
12 managers, or their respective designees.

13 (d) The staffing committee shall be co-chaired by two
14 members. One co-chair shall be selected from among the
15 registered nurse members of the staffing committee and the other
16 co-chair shall be selected from among the members appointed by
17 the hospital administration.

18 (e) Except as otherwise provided in this part, the
19 presence of a majority of the members of the staffing committee
20 shall constitute a quorum for the transaction of business.
21 Except as otherwise provided in this part, the staffing



1 committee may act by a majority vote of the members present and
2 voting at a meeting at which a quorum is present.

3 (f) Participation in staffing committee business by
4 hospital staff shall occur during the staff's scheduled work
5 time and shall be compensated at the staff's appropriate rate of
6 pay. Staffing committee members shall be relieved of all other
7 work duties while attending committee meetings. The hospital
8 shall provide additional staffing relief as necessary to enable
9 members to attend staffing committee meetings.

10 § -12 **Hospital registered nurse staffing committee;**
11 **primary responsibilities.** The primary responsibilities of the
12 hospital registered nurse staffing committee shall include:

- 13 (1) Annually developing and adopting a hospital registered
14 nurse staffing plan;
- 15 (2) Conducting a semiannual review of the hospital
16 registered nurse staffing plan; and
- 17 (3) Receiving, reviewing, evaluating, and responding to
18 reports and complaints regarding registered nurse
19 assignments that deviate from the hospital registered
20 nurse staffing plan in effect.



1 § -13 Hospital registered nurse staffing committee
2 charter; adoption; filing. (a) No later than January 1, 2027,
3 each hospital registered nurse staffing committee shall adopt a
4 hospital registered nurse staffing committee charter that
5 governs the procedures by which the staffing committee carries
6 out its responsibilities. The charter shall include:

7 (1) Roles and responsibilities of the staffing committee;

8 (2) Schedule for monthly staffing committee meetings, with
9 provisions allowing for additional meetings as needed;

10 (3) Operating procedures of the staffing committee,
11 including procedures to:

12 (A) Ensure regular attendance of members and presence
13 of necessary quorum, including requiring that the
14 members receive at least thirty days' advance
15 notice of meetings;

16 (B) Receive, review, evaluate, and respond to reports
17 and complaints, including:

18 (i) Recordkeeping procedures, including
19 documentation of the date each report or
20 complaint is received; the staffing
21 committee's initial, contingent, and final



- 1 dispositions; and any contingency staffing
2 plans or corrective action plans adopted by
3 the staffing committee;
- 4 (ii) Procedures to ensure complaints are resolved
5 no later than ninety days after receipt by
6 the staffing committee, with provisions
7 allowing for an extension of that period by
8 a majority vote of the staffing committee;
- 9 (iii) Review process that affords any hospital
10 staff involved in a complaint, and upon the
11 request of the staff, their collective
12 bargaining representative, an opportunity to
13 be heard; and
- 14 (iv) Notice requirements, including providing
15 complainants with written notice of the
16 outcome of their complaint;
- 17 (D) Conduct quarterly reviews of:
- 18 (i) Hospital staff turnover rates, including
19 turnover among newly hired hospital staff
20 during the first year of employment; and



- 1 (ii) The hospital's workforce development
2 programs;
- 3 (4) Standards governing the staffing committee's adoption
4 of meeting documentation, including meeting minutes,
5 attendance records, and description of actions taken;
6 and
- 7 (5) Record retention policies requiring staffing committee
8 records to be maintained for a minimum period of three
9 years; provided that the policies shall be consistent
10 with the hospital's document retention policies.
- 11 (b) No later than January 1, 2027, each staffing committee
12 shall file its charter with the department. Thereafter, each
13 staffing committee shall file its charter with the department
14 within thirty days after adoption of any revisions to the
15 charter. A hospital registered nurse staffing committee charter
16 shall not be deemed properly filed unless it contains all
17 information required under subsection (a).

18 **§ -14 Hospital registered nurse staffing plan; minimum**
19 **registered nurse staffing standard; adoption; filing; penalty.**

- 20 (a) No later than July 1, 2027, and annually thereafter, the
21 hospital registered nurse staffing committee shall develop a



1 hospital-wide patient care unit- and shift-based hospital
2 registered nurse staffing plan. The staffing plan shall serve
3 as the primary means of ensuring that the hospital is staffed
4 sufficiently to meet the health care needs of patients and
5 protect the health and safety of patients and hospital staff.

6 (b) The hospital registered nurse staffing plan shall:

7 (1) Be based on patient needs;

8 (2) Be in a form prescribed by the department, with all
9 applicable fields completed; provided that the
10 staffing plan may also include a description of the
11 hospital, including its size and facility type, and
12 the additional resources available to support unit-
13 level patient care;

14 (3) Incorporate minimum registered nurse staffing
15 standards recommended by professional specialty
16 organizations, as posted on the online dashboard
17 developed and maintained by the center for nursing
18 pursuant to section 304A-1406(5), including minimum
19 nurse-to-patient ratios for each hospital unit that
20 are equal to or exceed the minimum ratios recommended
21 by the professional specialty organizations; provided



1 that the staffing standards incorporated into the
2 staffing plan shall be those recommended by
3 professional specialty organizations selected by a
4 majority vote of the staffing committee; provided
5 further that the minimum registered nurse staffing
6 standards shall include, at minimum, those recommended
7 by the professional specialty organizations
8 specifically listed in section 304A-1406(5);

9 (4) Consider the following factors:

10 (A) Patient census, including the total number of
11 patients assigned to the unit on each shift, and
12 patient activity, including patient admissions,
13 discharges, and transfers;

14 (B) Patient acuity, patient type, and the nature and
15 complexity of care required on each shift;

16 (C) The experience of, and number and relative
17 percentages of, nursing and ancillary health
18 personnel;

19 (D) Level of experience and specialty certification
20 or training of nursing personnel providing care;

21 (E) Applicable national standards, if any;



- 1 (F) Patient access to timely and appropriate care;
- 2 (G) Need for specialized or intensive equipment;
- 3 (H) Architecture and physical layout of the patient
- 4 care unit, including but not limited to the
- 5 placement of patient rooms, treatment areas,
- 6 nursing stations, medication preparation areas,
- 7 and equipment;
- 8 (I) Availability of non-registered nurse personnel
- 9 who support nursing services on the unit;
- 10 (J) Ability to comply with the terms of an applicable
- 11 collective bargaining agreement and relevant
- 12 state and federal laws and rules, including those
- 13 regarding meals and rest breaks, overtime, and
- 14 on-call shifts; and
- 15 (K) Hospital finances and resources; and
- 16 (5) Not reduce, supersede, or otherwise diminish any
- 17 standards or requirements imposed by state or federal
- 18 law or rules, or by any applicable collective
- 19 bargaining agreement.
- 20 (c) No later than July 1, 2027, and annually thereafter,
- 21 the staffing committee shall adopt a staffing plan developed



1 pursuant to subsection (a), by a majority vote of the members
2 present and voting at a meeting at which a quorum is present;
3 provided that a vote to adopt the staffing plan shall be valid
4 only if the number of registered nurse members present and
5 voting exceeds the number of members appointed by the hospital
6 administration who are present and voting.

7 (d) Notwithstanding any law to the contrary, if a staffing
8 plan is not adopted pursuant to subsection (c), the staffing
9 plan most recently adopted shall remain in effect; provided that
10 the hospital shall be subject to the following daily fines until
11 a new staffing plan is adopted:

12 (1) \$100 per day for:

13 (A) Hospitals certified as critical access hospitals;

14 (B) Hospitals with fewer than twenty-five licensed
15 acute care beds in operation; and

16 (C) Hospitals certified by the Centers for Medicare
17 and Medicaid Services as sole community hospitals
18 that have fewer than one hundred licensed acute
19 care beds, have a level III adult trauma center
20 designation from the department of health, and
21 are owned and operated by the State; and



1 (2) \$5,000 per day for all other hospitals.

2 (e) The staffing committee shall conduct a semiannual
3 review of the staffing plan and revise the plan as necessary.
4 The review shall assess the hospital's ability to meet the
5 minimum registered nurse staffing standards in the staffing plan
6 and address patient care needs, and consider other relevant
7 information, including information provided by the chief
8 executive officer pursuant to subsection (f).

9 (f) Before the adoption of a new staffing plan or
10 semiannual review thereof, the chief executive officer of the
11 hospital shall submit a report to the staffing committee. The
12 report shall include:

- 13 (1) Status of the hospital's implementation of the
14 staffing plan;
- 15 (2) Evidence-based staffing information, including
16 nursing-sensitive quality indicators collected by the
17 hospital, patient surveys, and the hospital's
18 recruitment and retention efforts; and

19 (3) Any proposed revisions to the staffing plan.

20 (g) No later than July 1, 2027, each hospital shall
21 properly file its staffing plan with the department and



1 thereafter, each hospital shall file its staffing plan annually
2 and within thirty days after adoption of any revisions to the
3 staffing plan. A staffing plan shall not be deemed properly
4 filed unless all applicable fields of the form prescribed by the
5 department are completed.

6 (h) No later than January 1, 2027, the department shall
7 develop, in consultation with stakeholders, including hospitals
8 and labor organizations, a form for hospital registered nurse
9 staffing plans; provided that the form shall, at minimum,
10 provide for the factors described in subsection (b) and be
11 structured to allow patients and the public to clearly
12 understand and compare staffing patterns and actual staffing
13 levels across facilities.

14 (i) For the purposes of this section, "acuity" means the
15 level of patient need for nursing care, as determined by a
16 nursing assessment.

17 § -15 **Department review.** (a) The department shall
18 review each hospital registered nurse staffing committee charter
19 filed by a staffing committee to determine whether the charter:

20 (1) Is properly filed in a timely manner; and



1 (2) Includes all information required under
2 section -13.

3 (b) The department shall review each hospital registered
4 nurse staffing plan filed by a hospital to determine whether the
5 staffing plan:

6 (1) Is properly filed in a timely manner;

7 (2) Is in the form prescribed by the department; and

8 (3) Incorporates the minimum registered nurse staffing
9 standards recommended by professional specialty
10 organizations, as required in section -14(b)(3).

11 (c) The department shall post on its website:

12 (1) Each hospital registered nurse staffing committee
13 charter filed with the department;

14 (2) Each hospital registered nurse staffing plan filed
15 with the department; and

16 (3) A list of hospitals and staffing committees that
17 failed to file a charter or staffing plan in
18 compliance with this part.

19 **§ -16 Hospital registered nurse staffing plan;**
20 **implementation; complaints to staffing committee. (a)**

21 Beginning July 1, 2027, each hospital shall implement its



1 hospital registered nurse staffing plan adopted pursuant to
2 section -14 and assign hospital staff to each patient care
3 unit in accordance with the staffing plan.

4 (b) Shift-to-shift adjustments in staffing levels shall be
5 made only as permitted by the staffing plan and by appropriate
6 hospital personnel responsible for overseeing patient care
7 operations. Any individual assigned to a patient care unit who
8 objects to a shift-to-shift adjustment may submit a complaint to
9 the staffing committee.

10 (c) Any registered nurse, collective bargaining
11 representative, patient, or other person may report to, or file
12 a complaint with, the staffing committee regarding any deviation
13 from the staffing plan relating to the assignment of registered
14 nurses in a patient care unit.

15 (d) The staffing committee shall develop procedures to
16 receive, review, evaluate, and respond to reports and complaints
17 submitted pursuant to subsections (b) and (c), including
18 procedures to dismiss a complaint that is not substantiated by
19 sufficient information and to determine whether a deviation
20 confirmed by the staffing committee has been resolved by the
21 hospital. All complaints submitted to the staffing committee



1 shall be reviewed, regardless of the form or manner in which the
2 complaint is submitted.

3 § -17 **Hospital registered nurse staffing plan; posting.**

4 Each hospital shall post, in a publicly accessible area of each
5 patient care unit, its hospital registered nurse staffing plan
6 and the staffing schedule for the applicable shift currently in
7 effect, including the relevant clinical staffing for that shift.
8 Each hospital shall make the staffing plan and current staffing
9 levels available to patients and visitors upon request.

10 § -18 **Variance.** (a) The department may grant a
11 hospital a variance, not to exceed thirty days, from the minimum
12 registered nurse staffing standards set forth in a hospital
13 registered nurse staffing plan adopted pursuant to
14 section -14, upon a finding of good cause. For the purposes
15 of this subsection, "good cause" means circumstances in which a
16 hospital establishes that compliance with the minimum registered
17 nurse staffing standards is not feasible and granting a variance
18 will not result in a significant adverse effect on the health,
19 safety, and welfare of the patients and hospital staff.

20 (b) A hospital seeking a variance shall submit a written
21 application to the department. The application shall include:



- 1 (1) A statement justifying the variance and establishing
2 good cause, including an explanation of the hospital's
3 inability to comply with the minimum registered nurse
4 staffing standards in its staffing plan;
- 5 (2) Proposed alternative minimum registered nurse staffing
6 standards to apply during the variance period;
- 7 (3) Identification of the group or groups of hospital
8 staff for whom the variance is sought;
- 9 (4) Evidence that the claimed infeasibility, together with
10 the underlying supporting data, was discussed by the
11 hospital registered nurse staffing committee on at
12 least two occasions, including a statement from the
13 staffing committee describing areas of consensus and
14 areas of disagreement, if any; and
- 15 (5) Evidence that no later than ten working days before
16 submitting the variance application, the hospital
17 provided hospital staff that will be affected by the
18 variance and if applicable, their collective
19 bargaining representatives with:
 - 20 (A) A copy of the variance application;



1 (B) Information regarding their right to be heard by
2 the department during the variance application
3 review process;

4 (C) Information regarding the process for submitting
5 a written request for reconsideration pursuant to
6 subsection (g); and

7 (D) Department's address, phone number, or other
8 contact information.

9 (c) When warranted by the circumstances of the
10 application, the department shall afford the hospital, affected
11 hospital staff, and if applicable, their collective bargaining
12 representatives, an opportunity to submit oral or written
13 testimony during the variance application review process.

14 (d) No later than fifteen days after receipt of a complete
15 variance application, the department shall issue a written
16 decision and order granting or denying the variance; provided
17 that the department may extend this fifteen-day period by
18 providing advance written notice to the hospital and if
19 applicable, the collective bargaining representatives of
20 affected hospital staff. The notice shall state the
21 justification for and duration of the extension, which shall not



1 exceed an additional fifteen days. The hospital shall provide
2 notice of any extension to affected hospital staff.

3 (e) Upon a finding of good cause, the department shall
4 grant the variance. The decision and order granting the
5 variance shall include:

6 (1) Alternative minimum registered nurse staffing
7 standards approved;

8 (2) Basis for the department's finding of good cause;

9 (3) Group or groups of hospital staff affected by the
10 variance; and

11 (4) Period for which the variance is valid; provided that
12 the variance period shall not exceed thirty days from
13 the date of issuance.

14 A decision and order denying the variance shall state the
15 basis for the denial.

16 (f) Upon issuance of a decision and order, the department
17 shall provide written notice to the hospital and if applicable,
18 the collective bargaining representatives of affected hospital
19 staff. The hospital shall provide the notice to affected
20 hospital staff.



1 (g) Any hospital, affected hospital staff, or if
2 applicable, the collective bargaining representative of affected
3 hospital staff aggrieved by a decision and order of the
4 department may file a written request for reconsideration with
5 the director no later than five days after receipt of the
6 written notice issued pursuant to subsection (f). The request
7 shall state the grounds upon which the reconsideration is being
8 sought. Upon receipt of a timely request for reconsideration
9 and a finding that reasonable grounds for reconsideration exist,
10 the director may grant reconsideration and, as appropriate,
11 afford interested parties an opportunity to be heard; provided
12 that the department's decision and order shall remain in effect
13 pending completion of the reconsideration process, which shall
14 be completed no later than ten days after the director's receipt
15 of the request.

16 (h) The director may revoke or terminate a variance order
17 at any time; provided that:

18 (1) The reconsideration process under subsection (g), if
19 invoked, is completed; and

20 (2) Written notice is provided to the hospital and if
21 applicable, the collective bargaining representative



1 of affected hospital staff at least five days before
2 the effective date of the revocation or termination.
3 The hospital shall provide the notice to affected
4 hospital staff.

5 (i) If the department finds that immediate action is
6 necessary pending further review, the department may issue a
7 temporary variance, which shall remain in effect until the
8 department determines whether good cause exists to grant a
9 variance. A hospital shall not be required to satisfy the
10 requirements in subsection (b)(4) to obtain a temporary
11 variance. If a temporary variance is granted, the department
12 shall issue a final decision and order granting or denying the
13 variance within the fifteen-day period specified in subsection
14 (d), and no extension of that period shall be permitted. The
15 duration of the temporary variance shall be counted toward the
16 thirty-day maximum variance period specified in subsection
17 (e)(4).

18 (j) Any hospital granted a variance pursuant to this
19 section shall:

20 (1) No later than five days after receipt of the
21 department's written notice approving the variance,



1 provide written notice to affected hospital staff of
2 the variance period and the minimum registered nurse
3 staffing standards applicable during that period;

4 (2) Make the information described in paragraph (1)
5 readily accessible to all hospital staff for the
6 duration of the variance period; and

7 (3) Comply with the applicable minimum registered nurse
8 staffing standards and all other terms and conditions
9 of the variance during the variance period.

10 (k) The director may establish additional variance
11 eligibility criteria by rule.

12 § -19 **Complaints; investigations; contingency staffing**
13 **plan; corrective action plan; exceptions.** (a) Any person may
14 file a complaint with the department alleging a violation of
15 this part; provided that no complaint shall be filed after the
16 expiration of sixty days after the date:

17 (1) Upon which the alleged violation occurred; or

18 (2) Of the last occurrence in a pattern of ongoing
19 violations.

20 (b) Upon receipt of a timely complaint, the department
21 shall investigate the allegations in the complaint and, no later



1 than ninety days after the filing of the complaint, issue either
2 a citation and notice of assessment or notice of case closure;
3 provided that, for good cause, the department may extend this
4 ninety-day period by providing advance written notice to the
5 hospital and the complainant, specifying the justification for
6 and duration of the extension.

7 (c) If the department finds, based on its investigation,
8 that a violation has occurred, the department shall issue a
9 citation and notice of assessment; provided that a hospital
10 shall not be found in violation of section -14 or -16(a)
11 if:

- 12 (1) The department finds that the deviation from the
13 requirements of this chapter resulted from
14 unforeseeable emergent circumstances; and
- 15 (2) In case of a deviation from the staffing standards set
16 forth in the hospital registered nurse staffing plan,
17 the hospital demonstrates through documentation that
18 the hospital, after consultation with its hospital
19 registered nurse staffing committee, made reasonable
20 efforts to obtain and retain sufficient staffing to



1 meet the required staffing assignments but was unable
2 to do so.

3 (d) If the violation found by the department pertains to
4 the hospital's compliance with its staffing plan:

5 (1) No later than thirty days after the department's
6 issuance of a citation and notice of assessment, the
7 hospital shall:

8 (A) Implement a contingency staffing plan. Upon the
9 issuance of the citation and notice of
10 assessment, the hospital shall report to the
11 hospital registered nurse staffing committee its
12 assessment of staffing needs and proposed plan to
13 address those needs. Upon receipt of the report,
14 the staffing committee shall develop a
15 contingency staffing plan to address the
16 identified staffing needs. The hospital shall
17 implement and remain in compliance with the
18 contingency staffing plan until the department
19 approves a corrective action plan submitted
20 pursuant to subparagraph (B); and



- 1 (B) Submit a corrective action plan to the department
2 for approval. The corrective action plan shall:
3 (i) Be developed in consultation with the
4 staffing committee; and
5 (ii) Describe the corrective actions the hospital
6 will implement to remedy the violation and
7 prevent recurrence;
- 8 (2) The department shall review the corrective action plan
9 submitted by the hospital and issue a written notice
10 approving, approving with modifications, or rejecting
11 the plan. The department shall not approve a
12 corrective action plan that fails to remedy the
13 violations found;
- 14 (3) The hospital shall implement an approved corrective
15 action plan and demonstrate compliance for a period of
16 ninety consecutive days, unless otherwise directed by
17 the department; and
- 18 (4) Any hospital that fails to timely submit a corrective
19 action plan, fails to obtain the department's approval
20 of a corrective action plan, or fails to remain in
21 compliance with an approved corrective action plan



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1 shall be subject to the following daily fines for each
2 violation found by the department, until the
3 department determines that the hospital has complied
4 with an approved corrective action plan for a period
5 of ninety consecutive days:

6 (A) \$100 per day for:

- 7 (i) Hospitals certified as critical access
8 hospitals;
- 9 (ii) Hospitals with fewer than twenty-five
10 licensed acute care beds in operation; and
- 11 (iii) Hospitals certified by the Centers for
12 Medicare and Medicaid Services as sole
13 community hospitals that have fewer than one
14 hundred licensed acute care beds, have a
15 level III adult trauma center designation
16 from the department of health, and are owned
17 and operated by the State; and

18 (B) \$5,000 per day for all other hospitals;

19 provided that the department may reduce the total
20 amount of accrued fines upon a determination that the



1 hospital has remained in compliance with an approved
2 corrective action plan for ninety consecutive days.

3 (e) The department shall issue a notice of case closure
4 if:

5 (1) The department finds, based on its investigation, that
6 the alleged violation did not occur or cannot be
7 substantiated by evidence;

8 (2) A violation that has been found by the department has
9 been remedied and any assessed fines have been paid;

10 or

11 (3) The complaint has otherwise been resolved.

12 The notice of case closure shall include the basis of the
13 department's determination.

14 (f) Any citation, notice, or other document issued by the
15 department pursuant to this section shall be sent to the last
16 known addresses of the complainant and hospital by certified or
17 registered mail, return receipt requested, and deliverable to
18 the addressee only.

19 (g) Nothing in this section shall be construed to limit
20 the department's authority to initiate an investigation or take



1 enforcement actions on its own motion or pursuant to any other
2 law.

3 (h) For the purpose of this section:

4 "Reasonable efforts" means that the hospital has exhausted
5 and documented the following efforts and nevertheless remains
6 unable to obtain required staffing coverage:

- 7 (1) Soliciting qualified hospital staff who are currently
8 working to volunteer for additional work hours;
9 (2) Contacting qualified hospital staff who have indicated
10 availability to work additional hours;
11 (3) Seeking coverage through per diem staff; and
12 (4) Seeking personnel from a contracted temporary staffing
13 agency to the extent permitted by law and any
14 applicable collective bargaining agreement; provided
15 that the hospital customarily utilizes a contracted
16 temporary staffing agency.

17 "Unforeseeable emergent circumstances" means:

- 18 (1) Any unforeseen national, state, or county emergency;
19 or
20 (2) Activation of a hospital's disaster plan.



1 § -20 **Appeals.** (a) Any person aggrieved by a citation
2 and notice of assessment issued by the department pursuant to
3 this part may appeal the citation and notice of assessment by
4 filing a notice of appeal with the director within thirty days
5 after the person's receipt of the citation and notice of
6 assessment issued and sent by the department pursuant to
7 section -19.

8 (b) The timely filing of a notice of appeal pursuant to
9 this section shall stay the effectiveness of the citation and
10 notice of assessment until issuance of an initial order by the
11 hearing officer; provided that if the initial order is appealed,
12 the stay shall remain in effect until issuance of a decision and
13 order by the director.

14 (c) Upon receipt of a timely notice of appeal, the
15 director shall assign the matter to a hearings officer to
16 conduct a hearing and issue an initial order. The hearing shall
17 be conducted de novo and in accordance with chapter 91.

18 (d) Any party aggrieved by an initial order may file a
19 petition for administrative review with the director within
20 thirty days after service of the initial order.



1 (e) The director shall conduct administrative review in
2 accordance with chapter 91, and upon completion of the review,
3 issue a written findings of fact, conclusions of law, decision,
4 and order, which shall be subject to judicial review in
5 accordance with chapter 91.

6 (f) Any citation, notice of assessment, or order that is
7 not appealed within the time periods specified in this section
8 or chapter 91 shall be final and binding, and shall not be
9 subject to further administrative or judicial review.

10 (g) A hospital that fails, without good cause, to permit
11 adequate inspection of records requested by the department
12 within a reasonable time during an investigation conducted
13 pursuant to this part shall be precluded from using those
14 records in any appeal under this section.

15 § -21 **Retaliation prohibited.** No hospital shall
16 discharge, expel, threaten, intimidate, take adverse employment
17 action, or otherwise discriminate or retaliate against:

18 (1) A registered nurse for performing any duties or
19 responsibilities in connection with the hospital
20 registered nurse staffing committee;



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1 (2) A registered nurse, patient, or any other person for
2 opposing, reporting, or submitting a complaint to the
3 staffing committee, hospital administration, or a
4 public body regarding that person's concerns about a
5 hospital's compliance with this chapter, including
6 registered nurse assignments;

7 (3) A registered nurse, patient, or any other person for
8 testifying, assisting, or participating in any
9 proceeding relating to a hospital's compliance with
10 this chapter, including investigations, hearings, and
11 inquiries held by a public body, and court actions; or

12 (4) A registered nurse for refusing to work overtime that
13 is not required by law or an applicable collective
14 bargaining agreement.

15 § **-22 Violation; penalty.** (a) Except as otherwise
16 provided in this part, any hospital that fails to file a
17 hospital registered nurse staffing plan with the department
18 pursuant to section -14 or any hospital registered nurse
19 staffing committee that fails to file its staffing committee
20 charter pursuant to section -13 shall be fined \$25,000.



1 (b) Any hospital that otherwise violates this chapter
2 shall be fined:

3 (1) Not more than \$1,000 for each of the first three
4 violations;

5 (2) \$2,500 for the fourth violation; and

6 (3) \$5,000 for the fifth and each subsequent violation.

7 (c) At any time, the department may waive or reduce a
8 civil penalty assessed under this section if the director
9 determines that the hospital has taken corrective action to
10 resolve the violation.

11 (d) Any action taken to impose or collect the penalty
12 provided for in this chapter shall be considered a civil action.

13 (e) The department shall:

14 (1) Maintain for public inspection records of all civil
15 penalties imposed on hospitals and all other
16 administrative actions taken by the department against
17 hospitals pursuant to this chapter; and

18 (2) Post on its website all violations of this chapter
19 found by the department.

20 § -23 **Critical access hospitals.** Nothing in this part
21 shall be construed to impose unreasonable burdens on critical



1 access hospitals, as designated pursuant to title 42 United
2 States Code section 1395i-4. Critical access hospitals may
3 develop flexible approaches to comply with the requirements of
4 this part, including but not limited to having their hospital
5 registered nurse staffing committees meet or conduct business by
6 video conference, telephone, or electronic communication."

7 SECTION 3. Section 304A-1404, Hawaii Revised Statutes, is
8 amended by amending subsection (b) to read as follows:

9 "(b) The dean of the school of nursing and dental hygiene,
10 or the dean's designee, shall direct the activities of the
11 center for nursing. There shall be an advisory board composed
12 of [~~nine~~] twelve voting members, a majority of whom shall be
13 nurses or representatives of nursing organizations, appointed by
14 the governor pursuant to section 26-34 to staggered terms,
15 including:

16 (1) Five members who are nurses with an active Hawaii
17 nursing license, including but not limited to:

18 (A) A nursing executive;

19 (B) An advanced practice registered nurse;

20 (C) A nurse affiliated with a nurse collective
21 bargaining organization; and



- 1 (D) A doctorally-prepared nurse educator or a
2 doctorally-prepared nurse researcher; ~~and~~
- 3 (2) Four members who have a background or experience in
4 health care delivery, finance, workforce,
5 representation of hospitals and acute care hospitals
6 of the State, and community agencies or consumer
7 groups~~[-]~~; and
- 8 (3) Three members who are elected officers or governing
9 board members of a labor organization representing
10 registered nurses in the State.

11 The center may invite other members of the public with specific
12 backgrounds to participate as ex officio, nonvoting members."

13 SECTION 4. Section 304A-1406, Hawaii Revised Statutes, is
14 amended to read as follows:

15 "~~+~~§304A-1406~~+~~ **Center for nursing; functions.** The
16 center for nursing shall:

- 17 (1) Collect and analyze data and prepare and disseminate
18 written reports and recommendations regarding the
19 current and future status and trends of the nursing
20 workforce;



- 1 (2) Conduct research on best practices and quality
2 outcomes;
- 3 (3) Develop a plan for implementing strategies to recruit
4 and retain nurses; ~~and~~
- 5 (4) Research, analyze, and report data related to the
6 retention of the nursing workforce[+]; and
- 7 (5) Develop and maintain a current, publicly accessible,
8 online dashboard that tracks and displays staffing
9 standards recommended by the following professional
10 specialty organizations:
- 11 (A) American Association of Critical-Care Nurses;
12 (B) Emergency Nurses Association;
13 (C) Association of Women's Health, Obstetric and
14 Neonatal Nurses;
15 (D) American Society of PeriAnesthesia Nurses;
16 (E) Association of periOperative Registered Nurses;
17 (F) Oncology Nursing Society;
18 (G) Academy of Medical-Surgical Nurses;
19 (H) American Psychiatric Nurses Association;
20 (I) Society of Pediatric Nurses; and
21 (J) American Nephrology Nurses Association;



1 provided that the center for nursing may, in
2 consultation with its advisory board, track and post
3 on the online dashboard staffing standards for a
4 nursing specialty or sub-specialty established or
5 recommended by regulation or statute in other states,
6 by recognized authorities in other countries, and by
7 other professional associations."

8 SECTION 5. There is appropriated out of the general
9 revenues of the State of Hawaii the sum of \$ or so
10 much thereof as may be necessary for fiscal year 2026-2027 to
11 implement and enforce section 2 of this Act.

12 The sum appropriated shall be expended by the department of
13 labor and industrial relations for the purposes of this Act.

14 SECTION 6. There is appropriated out of the general
15 revenues of the State of Hawaii the sum of \$ or so
16 much thereof as may be necessary for fiscal year 2026-2027 for
17 the center for nursing to develop and maintain an online
18 dashboard pursuant to section 4 of this Act.

19 The sum appropriated shall be expended by the university of
20 Hawaii for the purposes of this Act.



S.B. NO. 2763

Report Title:

DLIR; Center for Nursing; Hospitals; Hospital Registered Nurse Staffing Committee; Hospital Registered Nurse Staffing Plan; Nurse-to-Patient Ratio; Civil Penalties; Appeals; Rules; Appropriations

Description:

Requires each hospital to establish a Hospital Registered Nurse Staffing Committee by 9/1/2026. Requires the Staffing Committee to adopt and file a Staffing Committee Charter with the Department of Labor and Industrial Relations by 1/1/2027. Requires the Department to develop a Hospital Registered Nurse Staffing Plan Form by 1/1/2027. Requires each Staffing Committee to adopt and file a Staffing Plan, including minimum registered nurse staffing standards, with the Department by 7/1/2027, and annually thereafter. Requires hospitals to implement their Staffing Plan by 7/1/2027, and post the Staffing Plan and staffing schedules in publicly accessible areas. Requires Staffing Committees to receive, review, evaluate, and respond to reports and complaints regarding deviations from the Staffing Plan. Establishes a variance process allowing hospitals to temporarily deviate from their minimum registered nurse staffing standards. Establishes an enforcement framework to be administered by the Department, including review of Staffing Plans, complaint investigations, administrative appeals, and civil penalties for violations. Prohibits retaliation against certain persons who report staffing concerns or participate in enforcement proceedings. Increases the membership of the Center for Nursing Advisory Board to include three elected officers or governing board members of a labor organization representing registered nurses in the State. Requires the Center for Nursing to develop and maintain an online dashboard of staffing standards recommended by certain professional specialty organizations. Requires the Department to adopt rules. Appropriates funds.

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