

Senate Bill 469

Sponsored by Senator MONNES ANDERSON, Representative GREENLICK; Senators DEVLIN, ROSENBAUM, STEINER HAYWARD, Representatives KENNEMER, NOSSE (Pre-session filed.)

SUMMARY

The following summary is not prepared by the sponsors of the measure and is not a part of the body thereof subject to consideration by the Legislative Assembly. It is an editor's brief statement of the essential features of the measure **as introduced**.

Makes changes to laws governing hospital nursing staff, including laws setting forth composition of hospital nurse staffing committees and laws governing content of written hospital-wide staffing plans.

Establishes Nurse Staffing Advisory Board within Oregon Health Authority for purposes related to administration of laws governing hospital nursing staff.

Declares emergency, effective on passage.

A BILL FOR AN ACT

1
2 Relating to staffing of hospitals; creating new provisions; amending ORS 441.030, 441.162, 441.164,
3 441.166, 441.170 and 441.180; and declaring an emergency.

4 **Be It Enacted by the People of the State of Oregon:**

HOSPITAL NURSE STAFFING COMMITTEES

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8 **SECTION 1. (1)(a) For each hospital there shall be established a hospital nurse staffing**
9 **committee. Each committee shall:**

10 **(A) Consist of an equal number of hospital nurse managers and direct care registered**
11 **nurses;**

12 **(B) Include at least one direct care registered nurse from each hospital nurse specialty**
13 **or unit; and**

14 **(C) Include as a nonvoting member at least one direct care staff member who is not a**
15 **registered nurse and whose services are covered by a written hospital-wide staffing plan that**
16 **meets the requirements of ORS 441.162.**

17 **(b) If the direct care registered nurses who work at a hospital are represented by a un-**
18 **ion, the union shall select the members of the committee who are direct care registered**
19 **nurses.**

20 **(c) If the direct care registered nurses who work at a hospital are not represented by a**
21 **union, the direct care registered nurses belonging to a hospital nurse specialty or unit shall**
22 **select each member of the committee who is a direct care registered nurse from that spe-**
23 **cialty or unit.**

24 **(2) A hospital nurse staffing committee shall develop a written hospital-wide staffing plan**
25 **in accordance with ORS 441.162. The committee's primary goals in developing the staffing**
26 **plan shall be to ensure that the hospital is staffed with an adequate number of nurses to**
27 **meet the health care needs of patients and patients' families. The committee shall review**
28 **and modify the staffing plan in accordance with section 5 of this 2015 Act.**

NOTE: Matter in **boldfaced** type in an amended section is new; matter [*italic and bracketed*] is existing law to be omitted. New sections are in **boldfaced** type.

1 (3) A majority of the voting members of a hospital nurse staffing committee constitutes
 2 a quorum for the transaction of business.

3 (4)(a) A decision made by a hospital nurse staffing committee must be made by a vote
 4 of a majority of the voting members of the committee. If a quorum of voting members
 5 comprises an unequal number of hospital nurse managers and direct care registered nurses,
 6 only an equal number of hospital nurse managers and direct care registered nurses may
 7 vote.

8 (b) If the voting members of a hospital nurse staffing committee cannot reach agreement
 9 on the staffing plan, the cochairs of the committee may notify the Oregon Health Authority
 10 of the impasse. If the authority is notified of an impasse under this paragraph, the authority
 11 shall require within 30 calendar days that the minimum number of nursing staff for the unit
 12 be adjusted in accordance with ratios prescribed by the Nurse Staffing Advisory Board es-
 13 tablished under section 2 of this 2015 Act.

14 (c) Ratios prescribed under paragraph (b) of this subsection:

15 (A) Must be based on national speciality standards; and

16 (B) Remain in effect until the hospital nurse staffing committee reaches agreement on
 17 the staffing plan.

18 (5) A hospital nurse staffing committee shall have two cochairs. One cochair shall be a
 19 hospital nurse manager elected by the members of the committee who are hospital nurse
 20 managers and one cochair shall be a direct care registered nurse elected by the members
 21 of the committee who are direct care registered nurses.

22 (6) A hospital nurse staffing committee shall meet:

23 (a) At least once every three months; and

24 (b) At any time and place specified by a majority of the voting members of the commit-
 25 tee.

26 (7) Hospital nurse staffing committee meetings shall be open to:

27 (a) The hospital nursing staff;

28 (b) Other hospital and direct care staff subject to the staffing plan developed by the
 29 committee; and

30 (c) If the direct care staff who work at the hospital are represented by a union, union
 31 representatives.

32 (8) Minutes of hospital nurse staffing committee meetings must:

33 (a) Include vote counts and specify how each voting member voted;

34 (b) Summarize the evidence on which the committee relied in making a decision and the
 35 reasons given for making the decision; and

36 (c) Be made immediately available to hospital nursing staff and other hospital staff upon
 37 request.

38 (9) A hospital shall release a member of a hospital nurse staffing committee described in
 39 subsection (1)(a)(A) and (B) of this section from the member's regular work duties, and
 40 provide the member with paid time and coverage for the member's work duties, to attend
 41 hospital nurse staffing committee meetings.

42
 43 **NURSE STAFFING ADVISORY BOARD**

44
 45 **SECTION 2.** (1)(a) The Nurse Staffing Advisory Board is established within the Oregon

1 **Health Authority, consisting of 13 members appointed by the Governor.**

2 **(b) Of the 13 members of the board:**

3 **(A) Four must be direct care registered nurses;**

4 **(B) Four must be hospital nurse managers;**

5 **(C) One must be a direct care staff member whose services are covered by a written**
 6 **hospital-wide staffing plan that meets the requirements of ORS 441.162;**

7 **(D) One must represent hospitals;**

8 **(E) One must be a representative from a labor organization that represents registered**
 9 **nurses; and**

10 **(F) Two must be members of the public who are not health care practitioners and are**
 11 **not employed by a health care practitioner or health care facility.**

12 **(c) To the extent practicable, board members shall be appointed to ensure that:**

13 **(A) The board represents the cultural and geographic diversity of this state; and**

14 **(B) The members of the board who are direct care registered nurses represent a diverse**
 15 **range of nursing specialties.**

16 **(d) The term of office of each board member is three years, but a member serves at the**
 17 **pleasure of the Governor. Before the expiration of the term of a member, the Governor shall**
 18 **appoint a successor whose term begins January 1 next following. A member is eligible for**
 19 **reappointment, but may not serve more than two consecutive terms. If there is a vacancy**
 20 **for any cause, the Governor shall make an appointment to become immediately effective for**
 21 **the unexpired term.**

22 **(2) The board shall:**

23 **(a) Provide advice to the authority on the administration of ORS 441.162 to 441.170;**

24 **(b) Identify trends and problems related to hospital nursing staff levels;**

25 **(c) Make recommendations to the authority on the basis of those trends and problems;**
 26 **and**

27 **(d) Prescribe ratios pursuant to section 1 (4)(b) of this 2015 Act in the event that the**
 28 **voting members of a hospital nurse staffing committee established pursuant to section 1 of**
 29 **this 2015 Act cannot reach agreement on the staffing plan.**

30 **(3) A majority of the members of the board constitutes a quorum for the transaction of**
 31 **business.**

32 **(4) Official action by the board requires the approval of a majority of the members of the**
 33 **board.**

34 **(5) The board shall elect one of its members to serve as chairperson.**

35 **(6) The board shall meet:**

36 **(a) At least once every two months; and**

37 **(b) At any time and place specified by the call of the chairperson or of a majority of the**
 38 **members of the board.**

39 **(7) The board may adopt rules necessary to for the operation of the board.**

40 **(8) The board shall submit a report on the administration of ORS 441.162 to 441.170 in the**
 41 **manner provided in ORS 192.245 to an interim committee of the Legislative Assembly related**
 42 **to health no later than September 15 of each year. The board may include in its report rec-**
 43 **ommendations for legislation.**

44 **(9) Members of the board are not entitled to compensation, but may be reimbursed for**
 45 **actual and necessary travel and other expenses incurred by them in the performance of their**

1 **official duties in the manner and amounts provided for in ORS 292.495. Claims for expenses**
 2 **shall be paid out of funds appropriated to the authority for purposes of the board.**

3 **SECTION 3. Notwithstanding the term of office specified by section 2 of this 2015 Act,**
 4 **of the members first appointed to the Nurse Staffing Advisory Board:**

5 (1) **Four shall serve for a term ending January 1, 2017;**

6 (2) **Four shall serve for a term ending January 1, 2018; and**

7 (3) **Five shall serve for a term ending January 1, 2019.**

8
 9 **STAFFING PLANS**

10
 11 **SECTION 4.** ORS 441.162 is amended to read:

12 441.162. (1) [A] **Each** hospital shall [*be responsible for the implementation of a*] **implement the**
 13 **written hospital-wide staffing plan for nursing services that has been developed and approved by**
 14 **the hospital nurse staffing committee under section 1 of this 2015 Act.** [*The staffing plan shall*
 15 *be developed, monitored, evaluated and modified by a hospital staffing plan committee. To the extent*
 16 *possible, the committee shall:*]

17 [(a) *Include equal numbers of hospital nurse managers and direct care registered nurses;*]

18 [(b) *Include at least one direct care registered nurse from each hospital nurse specialty or unit, to*
 19 *be selected by direct care registered nurses from the particular specialty or unit. The hospital shall*
 20 *define its own specialties or units; and*]

21 [(c) *Have as its primary consideration the provision of safe patient care and an adequate nursing*
 22 *staff pursuant to ORS chapter 441.*]

23 [(2) *The hospital shall evaluate and monitor the staffing plan for effectiveness and revise the*
 24 *staffing plan as necessary as part of the hospital's quality assurance process. The hospital shall*
 25 *maintain written documentation of these quality assurance activities.*]

26 [(3)] (2) The [*written*] staffing plan [*shall*] **must:**

27 (a) Be based on an accurate description of individual and aggregate patient needs and require-
 28 ments for nursing care [*and include a periodic quality evaluation process to determine whether the*
 29 *staffing plan is appropriately and accurately reflecting patient needs over time.*];

30 (b) Be based on the specialized qualifications and competencies of the nursing staff. [*The skill*
 31 *mix and the competency of the staff shall ensure that the nursing care needs of the patients are met*
 32 *and shall ensure patient safety.*] **and provide for the skill mix and level of competency necessary**
 33 **to ensure that the hospital is staffed with an adequate number of nurses to meet the health**
 34 **care needs of patients and patients' families;**

35 (c) Be consistent with nationally recognized evidence-based standards and guidelines established
 36 by professional nursing specialty organizations and **the Nurse Staffing Advisory Board;**

37 (d) Recognize differences in patient [*acuteness.*] **acuity;**

38 [(d)] (e) Establish minimum numbers of nursing staff, including licensed practical nurses and
 39 certified nursing assistants, required [*on specified shifts. At least one registered nurse and one other*
 40 *nursing staff member must be on duty in a unit when a patient is present.*] **for each shift of each**
 41 **hospital nurse unit; and**

42 [(e)] (f) Include a formal process for evaluating and initiating limitations on admission or di-
 43 version of patients to another [*acute care facility*] **hospital** when, in the judgment of [*the*] **a** direct
 44 care registered nurse, there is an inability to meet patient care needs or a risk of harm to [*existing*
 45 *and new*] patients.

1 **(3) For purposes of establishing minimum numbers of nursing staff pursuant to sub-**
 2 **section (2)(e) of this section, a staffing plan:**

3 **(a) Must require at least one registered nurse and one other nursing staff member to be**
 4 **on duty in a hospital nurse unit when a patient is present;**

5 **(b) Must provide adequate nursing staff for each shift to meet the health care needs of**
 6 **patients continuously present at a unit and admitted to, transferred to or discharged from**
 7 **a unit;**

8 **(c) Must require additional nursing staff if a nursing staff member is performing a duty**
 9 **not related to the nursing staff member’s patient care assignment or is on a rest break or**
 10 **lunch break; and**

11 **(d) May not base nursing staff requirements on external benchmarking data.**

12 **(4) Each hospital shall submit its staffing plan to the Oregon Health Authority in a**
 13 **manner prescribed by the authority.**

14 *[(4) The hospital shall maintain and post a list of on-call nursing staff or staffing agencies to*
 15 *provide replacement for nursing staff in the event of vacancies. The list of on-call nurses or agencies*
 16 *must be sufficient to provide replacement staff.]*

17 **(5)(a) An employer may not impose upon unionized nursing staff any changes in wages, hours**
 18 **or other terms and conditions of employment pursuant to a staffing plan [developed or modified under**
 19 **subsection (1) of this section] unless the employer first provides notice to and, [on] upon request,**
 20 **bargains with the union as the exclusive collective bargaining representative of the nursing staff in**
 21 **the bargaining unit.**

22 **(b) A staffing plan [developed or modified under subsection (1) of this section] does not create,**
 23 **preempt or modify a collective bargaining agreement or require a union or employer to bargain over**
 24 **the staffing plan while a collective bargaining agreement is in effect.**

25 **SECTION 5. (1) A hospital nurse staffing committee established pursuant to section 1 of**
 26 **this 2015 Act shall review the written hospital-wide staffing plan developed by the committee**
 27 **under ORS 441.162:**

28 **(a) At least once every year; and**

29 **(b) At any other date and time specified by a majority of the voting members of the**
 30 **committee.**

31 **(2) In reviewing a staffing plan, a hospital nurse staffing committee shall consider:**

32 **(a) Patient outcomes;**

33 **(b) Complaints regarding staffing, including complaints about a delay in direct care**
 34 **nursing or an absence of direct care nursing;**

35 **(c) The number of hours of nursing care provided through a hospital nurse unit compared**
 36 **to the number of patients served by the hospital nurse unit during a 24-hour time period;**

37 **(d) The aggregate hours of mandatory overtime worked by the nursing staff;**

38 **(e) The aggregate hours of voluntary overtime worked by the nursing staff;**

39 **(f) Hours of mandatory and voluntary overtime worked by individual members of the**
 40 **nursing staff;**

41 **(g) The percentage of shifts for each hospital nurse unit staffed differently than required**
 42 **by the staffing plan; and**

43 **(h) Any other matter determined by the hospital nurse staffing committee to be neces-**
 44 **sary to ensure that the hospital is staffed with an adequate number of nurses to meet the**
 45 **health care needs of patients and patients’ families.**

(3) Upon reviewing a staffing plan, a hospital nurse staffing committee shall:

(a) Report whether the staffing plan ensures that the hospital is staffed with an adequate number of nurses to meet the health care needs of patients and patients' families; and

(b) Modify the staffing plan as necessary to ensure that the hospital is staffed with an adequate number of nurses to meet the health care needs of patients and patients' families.

(4) Reports made and staffing plans modified pursuant to this section must be provided to the Oregon Health Authority in a manner prescribed by the authority.

REPLACEMENT STAFF

SECTION 6. ORS 441.166 is amended to read:

441.166. (1) When a hospital learns about the need for replacement staff, the hospital shall make every reasonable effort to obtain registered nurses, licensed practical nurses or certified nursing assistants for unfilled hours or shifts before requiring a registered nurse, licensed practical nurse or certified nursing assistant to work overtime.

(2) Except as provided in subsection (3) of this section, a hospital may not require a registered nurse, licensed practical nurse or certified nursing assistant to work:

(a) Beyond the agreed-upon and prearranged shift, regardless of the length of the shift;

(b) More than 48 hours in any hospital-defined work week; [or]

(c) More than 12 [consecutive] hours in a 24-hour time period[, except that a hospital may require an additional hour of work beyond the 12 hours if:];

[(A) A staff vacancy for the next shift becomes known at the end of the current shift; or]

[(B) There is a potential harm to an assigned patient if the registered nurse, licensed practical nurse or certified nursing assistant leaves the assignment or transfers care to another.]

(d) During the 10-hour time period immediately following a 24-hour time period during which the registered nurse, licensed practical nurse or certified nursing assistant worked 12 or more hours; or

(e) Any portion of an assignment to work overtime if the registered nurse, licensed practical nurse or certified nursing assistant informs the hospital that continued work by the registered nurse, licensed practical nurse or certified nursing assistant will jeopardize patient or hospital staff safety.

(3) A hospital may require an additional hour of work beyond the work authorized under subsection (2) of this section if:

(a) A staff vacancy for the next shift becomes known at the end of the current shift; or

(b) There is a potential harm to an assigned patient if the registered nurse, licensed practical nurse or certified nursing assistant leaves the assignment or transfers care to another registered nurse, licensed practical nurse or certified nursing assistant.

[(3)(a)] **(4)(a)** Time spent in required meetings or receiving education or training shall be included as hours worked for purposes of subsection (2) of this section.

[(b) Time spent on call but away from the premises of the employer may not be included as hours worked for purposes of subsection (2) of this section.]

[(c)] **(b)** Time spent on call or on standby when the registered nurse, licensed practical nurse or certified nursing assistant is required to be at the premises of the employer shall be included as hours worked for purposes of subsection (2) of this section.

(c) Time spent on call but away from the premises of the employer may not be included

1 as hours worked for purposes of subsection (2) of this section.

2 (5) A hospital may not schedule nonemergency elective cases during a shift when:

3 (a) The hospital unit is not staffed;

4 (b) The procedure would require the use of on-call staff not present at the hospital; or

5 (c) The procedure would require the nurse to work beyond the prearranged shift.

6 [(4)] (6) The provisions of this section do not apply to nursing staff needs:

7 (a) In the event of a national or state emergency or circumstances requiring the implementation
8 of a facility disaster plan; or

9 (b) In emergency circumstances identified by the Oregon Health Authority by rule.[: or]

10 [(c) If a hospital has made reasonable efforts to contact all of the on-call nursing staff or staffing
11 agencies on the list described in ORS 441.162 and is unable to obtain replacement staff in a timely
12 manner.]

13
14 **HOSPITAL POSTINGS**

15
16 **SECTION 7. (1) A hospital shall post a notice summarizing the provisions of ORS 441.162,
17 441.166 and 441.168 in a conspicuous place on the premises of the hospital.**

18 (2) A hospital shall post in a clearly visible place for each hospital nurse unit:

19 (a) A list of on-call nursing staff or staffing agencies sufficient to provide replacement
20 nursing staff for the unit in the event of vacancies; and

21 (b) The current nurse-to-patient ratio for the unit, to be updated at the beginning of each
22 shift, and the nurse-to-patient ratio required by the written hospital-wide staffing plan de-
23 scribed in ORS 441.162.

24 (3) A hospital shall post in a clearly visible place in each patient room a reference to the
25 laws of this state that govern hospital nursing staff and the manner in which a person may
26 report a violation of the laws.

27
28 **RECORDS**

29
30 **SECTION 8. A hospital shall keep and maintain records necessary to demonstrate com-
31 pliance with ORS 441.162 to 441.170. For purposes of this section, the Oregon Health Au-
32 thority shall adopt rules specifying the content of the records and the form and manner of
33 keeping, maintaining and disposing of the records. A hospital must provide records kept and
34 maintained under this section to the authority upon request.**

35
36 **ENFORCEMENT**

37
38 **SECTION 9. (1) For the sole purpose of verifying compliance with the requirements of
39 ORS 441.162 to 441.170 and 441.192, the Oregon Health Authority shall conduct annual random
40 audits of not less than 20 percent of all hospitals in this state. Surveys made by private ac-
41 crediting organizations may not be used in lieu of audits required by this section.**

42 (2) The authority shall audit each hospital in this state once every five years.

43 (3) When conducting an audit pursuant to this section, the authority shall:

44 (a) Provide notice of the audit to the cochairs of the hospital nurse staffing committee
45 established pursuant to section 1 of this 2015 Act;

1 (b) If the registered nurses who work at the hospital are represented by a union, provide
2 notice of the audit to the union;

3 (c) Interview both cochair of the hospital nurse staffing committee;

4 (d) If the authority interviews any other voting member of the hospital nurse staffing
5 committee, interview an equal number of hospital nurse managers and direct care registered
6 nurses; and

7 (e) Review any other hospital record and conduct any other interview or site visit that
8 is necessary to verify that the hospital is in compliance with the requirements of ORS 441.162
9 to 441.170 and 441.192.

10 (4) The authority shall compile and maintain for public inspection an annual report of
11 audits conducted pursuant to this section.

12 (5) The costs of audits required by this section may be paid out of funds from licensing
13 fees paid by hospitals under ORS 441.020.

14 **SECTION 10.** (1) For purposes of ensuring compliance with ORS 441.162 to 441.170, the
15 Oregon Health Authority shall:

16 (a) Within 60 days of receiving a complaint against a hospital for violating a provision
17 of ORS 441.162 to 441.170, conduct an on-site investigation of the hospital; and

18 (b) Within 60 days of issuing an order requiring a hospital to implement a plan to correct
19 a violation of ORS 441.162 to 441.170, conduct an on-site investigation of the hospital to en-
20 sure compliance with the plan.

21 (2) When conducting an investigation of a hospital to ensure compliance with ORS 441.162
22 to 441.170, the authority shall:

23 (a) Provide notice of the investigation to the cochair of the hospital nurse staffing
24 committee established pursuant to section 1 of this 2015 Act;

25 (b) If the registered nurses who work at the hospital are represented by a union, provide
26 notice of the investigation to the union;

27 (c) Interview both cochair of the hospital nurse staffing committee; and

28 (d) If the authority interviews any other voting member of the hospital nurse staffing
29 committee, interview an equal number of hospital nurse managers and direct care registered
30 nurses.

31 (3) When conducting an investigation of a hospital to ensure compliance with ORS 441.162
32 to 441.170, the authority may:

33 (a) Take evidence;

34 (b) Take the depositions of witnesses in the manner provided by law in civil cases;

35 (c) Compel the appearance of witnesses in the manner provided by law in civil cases;

36 (d) Require answers to interrogatories; and

37 (e) Compel the production of books, papers, accounts, documents and testimony pertain-
38 ing to the matter under investigation.

39 (4) The authority may issue subpoenas to compel compliance with the provisions of sub-
40 section (3) of this section. If any person fails to comply with a subpoena issued under this
41 subsection, or refuses to testify on matters on which the person may lawfully be interro-
42 gated, a court may compel obedience as provided in ORS 183.440.

43 **SECTION 11.** The Oregon Health Authority shall post on a website maintained by the
44 authority:

45 (1) Written hospital-wide staffing plans submitted to the authority pursuant to ORS

1 **441.162 or section 5 of this 2015 Act;**

2 **(2) Reports submitted to the authority pursuant to section 5 of this 2015 Act;**

3 **(3) Reports of audits described in section 9 of this 2015 Act;**

4 **(4) Any report made pursuant to an investigation of whether a hospital is in compliance**
 5 **with ORS 441.162 to 441.170;**

6 **(5) Any order requiring a hospital to implement a plan to correct a violation of ORS**
 7 **441.162 to 441.170; and**

8 **(6) Any order imposing a civil penalty against a hospital or suspending or revoking the**
 9 **license of a hospital pursuant to ORS 441.170.**

10
 11 **CONFORMING AMENDMENTS**
 12

13 **SECTION 12.** ORS 441.164 is amended to read:

14 441.164. Upon request of a hospital, the Oregon Health Authority may grant [*variances in*] a
 15 **variance to** the written **hospital-wide** staffing plan requirements [*based on patient care needs or the*
 16 *nursing practices of the hospital*] **described in ORS 441.162 if the variance is necessary to ensure**
 17 **that the hospital is staffed with an adequate number of nurses to meet the health care needs**
 18 **of patients and patients' families.**

19 **SECTION 13.** ORS 441.170 is amended to read:

20 441.170. (1) The Oregon Health Authority may impose civil penalties in the manner provided in
 21 ORS 183.745 or suspend or revoke a license of a hospital for a violation of any provision of ORS
 22 441.162 [*or 441.166*] **to 441.170.** The authority shall adopt by rule a schedule establishing the amount
 23 of civil penalty that may be imposed for [*any*] a violation of ORS 441.162 [*or 441.166*] **to 441.170**
 24 when there is a reasonable belief that safe patient care has been or may be negatively impacted[.
 25 A], **except that a** civil penalty [*imposed under this subsection*] may not exceed \$5,000. Each vio-
 26 lation of a [*nursing staff*] **written hospital-wide staffing** plan shall be considered a separate vio-
 27 lation. Any license that is suspended or revoked under this subsection shall be suspended or revoked
 28 as provided in ORS 441.030.

29 (2) The authority shall maintain for public inspection records of any civil penalties or license
 30 suspensions or revocations imposed on hospitals penalized under subsection (1) of this section.

31 [*(3) The authority shall conduct an annual random audit of not less than seven percent of all*
 32 *hospitals in this state solely to verify compliance with the requirements of ORS 441.162, 441.166 and*
 33 *441.192. Surveys made by private accrediting organizations may not be used in lieu of the audit re-*
 34 *quired under this subsection. The authority shall compile and maintain for public inspection an annual*
 35 *report of the audit conducted under this subsection.]*

36 [*(4) The costs of the audit required under subsection (3) of this section may be paid out of funds*
 37 *from licensing fees paid by hospitals under ORS 441.020.]*

38 **SECTION 14.** ORS 441.030 is amended to read:

39 441.030. (1) The Oregon Health Authority or the Department of Human Services may assess a
 40 civil penalty and, pursuant to ORS 479.215, shall deny, suspend or revoke a license, in any case
 41 where the State Fire Marshal, or the representative of the State Fire Marshal, certifies that there
 42 is a failure to comply with all applicable laws, lawful ordinances and rules relating to safety from
 43 fire.

44 (2) The authority may:

45 (a) Assess a civil penalty or deny, suspend or revoke a license of a health care facility other

1 than a long term care facility in any case where it finds that there has been a substantial failure
 2 to comply with ORS 441.015 to 441.063 or the rules or minimum standards adopted under ORS
 3 441.015 to 441.063.

4 (b) Assess a civil penalty or suspend or revoke a license issued under ORS 441.025 for failure
 5 to comply with an authority order arising from a health care facility’s substantial lack of compliance
 6 with the provisions of ORS 441.015 to 441.063[,] **or** 441.162 [*or 441.166*] **to 441.170** or the rules
 7 adopted under ORS 441.015 to 441.063[,] **or** 441.162 [*or 441.166*] **to 441.170**.

8 (c) Suspend or revoke a license issued under ORS 441.025 for failure to pay a civil penalty im-
 9 posed under ORS 441.170.

10 (3) The department may:

11 (a) Assess a civil penalty or deny, suspend or revoke a long term care facility’s license in any
 12 case where it finds that there has been a substantial failure to comply with ORS 441.015 to 441.063
 13 or 441.087 or the rules or minimum standards adopted under ORS 441.015 to 441.063 or 441.087.

14 (b) Assess a civil penalty or suspend or revoke a long term care facility’s license issued under
 15 ORS 441.025 for failure to comply with a department order arising from a long term care facility’s
 16 substantial lack of compliance with the provisions of ORS 441.015 to 441.063, 441.084 or 441.087 or
 17 the rules adopted under ORS 441.015 to 441.063, 441.084 or 441.087.

18 (c) Suspend or revoke a license issued under ORS 441.025 for failure to pay a civil penalty im-
 19 posed under ORS 441.710.

20 (d) Order a long term care facility licensed under ORS 441.025 to restrict the admission of pa-
 21 tients when the department finds an immediate threat to patient health and safety arising from
 22 failure of the long term care facility to be in compliance with ORS 441.015 to 441.063, 441.084 or
 23 441.087 and the rules adopted under ORS 441.015 to 441.063, 441.084 or 441.087.

24 (4) Any long term care facility that has been ordered to restrict the admission of patients pur-
 25 suant to subsection (3)(d) of this section shall post a notice of the restriction, provided by the de-
 26 partment, on all doors providing ingress to and egress from the facility, for the duration of the
 27 restriction.

28 **SECTION 15.** ORS 441.180 is amended to read:

29 441.180. (1) A hospital shall post a notice summarizing the provisions of ORS [*441.162, 441.166,*
 30 *441.168,*] 441.174, 441.176, 441.178 and 441.192 in a conspicuous place on the premises of the hospital.
 31 The notice must be posted where notices to employees and applicants for employment are custom-
 32 arily displayed.

33 (2) Any hospital that willfully violates this section is subject to a civil penalty not to exceed
 34 \$500. Civil penalties under this section shall be imposed by the Oregon Health Authority in the
 35 manner provided by ORS 183.745.

36
 37 **SERIES PLACEMENT**

38
 39 **SECTION 16.** Sections 1, 2, 5 and 7 to 11 of this 2015 Act are added to and made a part
 40 of ORS 441.162 to 441.170.

41
 42 **IMPLEMENTATION**

43
 44 **SECTION 17.** (1) For purposes of this section, “hospital” has the meaning given that term
 45 in ORS 441.160.

