

SUMMARY OF NO. 13-05

This proposed law would limit how many patients could be assigned to a registered nurse in Massachusetts hospitals and certain other health-care facilities, but not rehabilitation or long-term care facilities. The maximum number of patients per registered nurse would be:

- In units with intensive care and critical care patients: 1, or 2 if the nurse assessed each patient's condition as stable.
- In units with step-down/intermediate care patients: 3.
- In units with post anesthesia care patients: 1 patient under anesthesia; 2 patients post anesthesia.
- In units with operating room patients: 1 patient under anesthesia; 2 patients post anesthesia.
- In the emergency department: 1 critical or intensive care patient, or 2 if the nurse assessed each patient's condition as stable; 2 urgent non-stable patients; 3 urgent stable patients; or 4 non-urgent stable patients.
- In units with pediatric, medical, surgical, telemetry, or observational/outpatient treatment patients: 4.
- In units with psychiatric, transitional care, or rehabilitation patients: 5.
- In units with maternity patients: (a) active labor patients: 1 per nurse; (b) during birth: 1 mother per nurse, and

1 baby per nurse; (c) immediate postpartum: 1 mother and 1 baby per nurse, and in the case of multiple births, 1 additional baby per nurse; (d) postpartum: 6 patients per nurse; (e) intermediate care: 3 babies per nurse, plus a 4th if the nurse assessed each baby's condition as stable; (f) well babies: 6 per nurse.

- In any other unit: 4 patients per nurse.

The hospital or other covered facility would have to follow these limits without reducing the staffing levels of other personnel who affect the quality of patient care. The proposed law would not override any collective bargaining agreement or other contract in effect on July 1, 2015 that set higher patient limits, but the proposed law's limits would take effect after any such agreement or contract expired.

The Health Policy Commission would have to report a violation of patient assignment limits to the Attorney General, who could file suit to enforce the proposed law and obtain a civil penalty of \$25,000 for each day a violation continued after the Commission notified the hospital or other covered facility. The proposed law's requirements would be suspended during a state or nationally declared public health emergency. The Commission would issue regulations to implement the proposed law.

The proposed law would take effect on July 1, 2015. The

proposed law states that if any of its parts were declared invalid, the other parts would stay in effect.