

CHAPTER 202

PROFESSIONS AND OCCUPATIONS

SENATE BILL 08-188

BY SENATOR(S) Boyd, Bacon, Gibbs, Groff, Keller, Schwartz, Shaffer, Tapia, Tochtrop, Williams, and Windels;
also REPRESENTATIVE(S) Pommer, Green, Kefalas, Labuda, Madden, McFadyen, McGihon, Merrifield, Middleton, Primavera,
Riesberg, Stafford, and Todd.

AN ACT

CONCERNING THE ESTABLISHMENT OF A PILOT PROGRAM FOR COLORADO HOSPITALS TO COLLABORATE WITH DIRECT-CARE NURSES IN ORDER TO MODEL PROFESSIONAL NURSING PRACTICE INVOLVEMENT IN ISSUES OF IMPORTANCE TO NURSING, AND MAKING AN APPROPRIATION THEREFOR.

Be it enacted by the General Assembly of the State of Colorado:

SECTION 1. Legislative declaration. (1) The general assembly hereby finds and declares that:

(a) Evidence has indicated that involving nurses in decision-making that affects nursing practice is beneficial;

(b) Nursing participation needs to be evident at both the organizational level and at the direct care or unit level;

(c) Nurses, in providing direct care, have critical information and knowledge to provide in planning for patient care and they need to be key participants in the planning process;

(d) The nursing work environment includes multiple factors that impact nursing satisfaction and care; and

(e) The identification of an effective model or models for professional nursing practice involvement in decision-making and planning for staffing and other issues related to patient care has to have demonstrated value and efficacy before implementation on a larger scale.

Capital letters indicate new material added to existing statutes; dashes through words indicate deletions from existing statutes and such material not part of act.

(2) Therefore, it is the intent of the general assembly to form a pilot program implementation committee to set forth guiding principals for the establishment of a pilot program for hospitals and their direct-care nursing staff to model professional nursing practice involvement in the decision-making and planning for patient care. It is the intent that the pilot program include involvement of professional nurses providing direct care at the unit level and at the hospital level in the decision-making process and planning for staffing and in issues of importance to nursing.

SECTION 2. Article 38 of title 12, Colorado Revised Statutes, is amended BY THE ADDITION OF A NEW PART to read:

PART 3
PILOT PROGRAM IMPLEMENTATION COMMITTEE

12-38-301. Pilot program implementation committee for direct-care nurse decision-making - members - funding - definitions - repeal. (1) THERE IS HEREBY ESTABLISHED THE PILOT PROGRAM IMPLEMENTATION COMMITTEE, REFERRED TO IN THIS PART 3 AS THE "COMMITTEE", TO FORMULATE GUIDING PRINCIPLES FOR THE PURPOSE OF DEVELOPING AND IMPLEMENTING A PILOT PROGRAM FOR HOSPITALS AND THEIR DIRECT-CARE NURSES TO MODEL PROFESSIONAL NURSING PRACTICE INVOLVEMENT IN THE DECISION-MAKING PROCESSES IN PLANNING FOR STAFFING AND ISSUES OF IMPORTANCE TO NURSING. THE PILOT PROGRAM SHALL MODEL THE EFFECTIVE PARTICIPATION OF DIRECT CARE NURSES IN DECISION-MAKING PROCESSES AT THE UNIT AND HOSPITAL LEVEL. BASED UPON STUDY DESIGN OF THE RESEARCH AND FINDINGS OF THE STUDY, IN CONSULTATION WITH THE PRINCIPAL INVESTIGATOR, THE COMMITTEE MAY DEVELOP RECOMMENDATIONS FOR BEST PRACTICES AND IMPLEMENTATION STRATEGIES. THE COMMITTEE SHALL DEVELOP AND OVERSEE THE PILOT PROGRAM AND SHALL HAVE THE FOLLOWING RESPONSIBILITIES:

- (a) AT THE FIRST MEETING, CHOOSE TWO COCHAIRPERSONS, BY CONSENSUS OF THE COMMITTEE;
- (b) HIRE A THIRD-PARTY ADMINISTRATOR TO ADMINISTER ALL ASPECTS OF THE PROGRAM;
- (c) RAISE FUNDS TO IMPLEMENT THE PILOT PROGRAM;
- (d) IDENTIFY THE FOCUS AREAS AND AGREE TO THE PILOT PROGRAM DESIGN, METHODOLOGY, AND RESEARCH EVALUATION PLAN, WITH THE GUIDANCE OF RESEARCHERS;
- (e) DEVELOP IMPLEMENTATION STRUCTURES AND TIME LINES FOR THE PILOT PROGRAM;
- (f) HIRE A RESEARCH ADVISOR TO ASSIST IN THE STUDY DESIGN;
- (g) HIRE A PRINCIPAL INVESTIGATOR TO DEVELOP, IMPLEMENT, AND EVALUATE THE PILOT PROGRAM;

(h) EVALUATE THE PILOT PROGRAM FINDINGS AND ESTABLISH A PLAN TO DISSEMINATE THE FINDINGS; AND

(i) BASED UPON STUDY DESIGN OF THE COMMITTEE, IN CONSULTATION WITH A PRINCIPAL INVESTIGATOR, SELECT HOSPITALS TO PARTICIPATE IN THE PILOT PROGRAM.

(2) (a) THE COMMITTEE SHALL BE MADE UP OF THE PRINCIPAL INVESTIGATOR HIRED PURSUANT TO PARAGRAPH (g) OF SUBSECTION (1) OF THIS SECTION AND THE FOLLOWING MEMBERS WHO SHALL BE APPOINTED BY THEIR RESPECTIVE ORGANIZATIONS:

(I) TWO MEMBERS FROM A STATEWIDE ASSOCIATION REPRESENTING HOSPITALS;

(II) TWO MEMBERS FROM A PROFESSIONAL NURSING ORGANIZATION;

(III) TWO MEMBERS FROM A LABOR ORGANIZATION THAT REPRESENTS WORKERS IN THE SERVICE INDUSTRY WHO ARE DIRECT-CARE NURSES;

(IV) TWO MEMBERS FROM AN ORGANIZATION OF NURSE LEADERS;

(V) TWO MEMBERS FROM A NURSING EDUCATION ORGANIZATION;

(VI) ONE MEMBER FROM THE COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT;

(VII) ONE MEMBER FROM AN ORGANIZATION THAT PROMOTES NURSING EXCELLENCE AND PROFESSIONAL AND EDUCATIONAL OPPORTUNITIES FOR NURSES IN COLORADO; AND

(VIII) TWO MEMBERS APPOINTED BY THE GOVERNOR WHO ARE AT-LARGE NURSES AND HAVE NO KNOWN AFFILIATION WITH ANOTHER GROUP REPRESENTED ON THE COMMITTEE.

(b) THE RESEARCH ADVISOR SELECTED BY THE COMMITTEE, WHO MAY ALSO SERVE AS THE PRINCIPAL INVESTIGATOR, SHALL BE A DOCTORATE-LEVEL NURSING RESEARCHER CURRENTLY INVOLVED IN RESEARCH WITH NURSING WORK ENVIRONMENT ISSUES. THE RESEARCH ADVISOR OR THE PRINCIPAL INVESTIGATOR SHALL ENSURE THE RESEARCH INTEGRITY OF THE PROJECT.

(c) EACH HOSPITAL THAT IS CHOSEN TO PARTICIPATE IN THE PILOT PROGRAM SHALL APPOINT A DIRECT-CARE NURSE REPRESENTATIVE AND MAY APPOINT AN ADDITIONAL REPRESENTATIVE TO SERVE IN AN ADVISORY CAPACITY TO THE COMMITTEE.

(d) MEMBERS OF THE COMMITTEE SHALL NOT BE ENTITLED TO REIMBURSEMENT FOR EXPENSES INCURRED IN THE PERFORMANCE OF THEIR DUTIES OR TO PAYMENT OF PER DIEM FOR ATTENDANCE AT MEETINGS.

(3) (a) ON OR BEFORE SIXTY DAYS AFTER THE EFFECTIVE DATE OF THIS PART 3, BUT NO LATER THAN JULY 1, 2008, ALL APPOINTMENTS TO THE COMMITTEE SHALL

BE MADE.

(b) THE COMMITTEE SHALL MEET AS NECESSARY, BUT BEGINNING NO LATER THAN THIRTY DAYS AFTER APPOINTMENTS TO THE COMMITTEE ARE MADE. THE COMMITTEE SHALL BE CONVENED BY AN INTERIM ADMINISTRATOR APPOINTED BY THE STATE BOARD OF NURSING.

(c) WITHIN SIX MONTHS FOLLOWING CONFIRMATION OF SUFFICIENT FUNDING BY THE COMMITTEE, THE COMMITTEE SHALL DEVELOP THE PILOT PROGRAM. THE PILOT PROGRAM SHALL BE COMPLETE WITHIN EIGHTEEN MONTHS AFTER THE COMMITTEE COMPLETES A FINAL PILOT DESIGN.

(d) THE COMMITTEE SHALL REPORT ITS PROGRESS AND THE PROGRESS OF THE PILOT PROGRAM TO THE GENERAL ASSEMBLY WITHIN ONE YEAR AFTER THE FIRST MEETING AND REPORT THE FINAL PILOT PROGRAM REPORT AND ANY RECOMMENDATIONS FOR BEST PRACTICES AND IMPLEMENTATION STRATEGIES FOR COLORADO'S HOSPITALS TO THE HEALTH AND HUMAN SERVICES COMMITTEES OF THE GENERAL ASSEMBLY OR THEIR SUCCESSOR COMMITTEES.

(4) IN THE DEVELOPMENT OF THE PILOT PROGRAM, THE COMMITTEE SHALL CONSIDER THE FOLLOWING:

(a) A STUDY DESIGN THAT MAY INCLUDE AN EXPLORATORY, DESCRIPTIVE, OR EVALUATION STUDY;

(b) METHODOLOGY GUIDED BY A RESEARCH EXPERT IN NURSING WORK ENVIRONMENT THAT INCLUDES STANDARDIZED DATA COLLECTION, TOOLS FOR MEASUREMENT, AND EVALUATION OF MODEL EFFECTIVENESS;

(c) A STUDY TIME FRAME GUIDED BY THE RESEARCH PLAN;

(d) FUNDING FROM PUBLIC AND PRIVATE SOURCES THAT SHALL BE APPROVED BY A CONSENSUS OF THE MEMBERS OF THE COMMITTEE;

(e) THE IDENTIFICATION OF KEY FOCUS AREAS FOR INCLUSION IN THE PILOT PROGRAM DETERMINED BY A CONSENSUS OF COMMITTEE MEMBERS;

(f) THE IDENTIFICATION OF EFFECTIVE MODELS FOR DIRECT-CARE NURSE INVOLVEMENT IN DECISION-MAKING PROCESSES FOR STAFFING AND OTHER ISSUES RELATED TO PATIENT CARE;

(g) THE DEVELOPMENT OF A RESEARCH STUDY TO EVALUATE THE EFFECTIVENESS OF THE MODEL AS APPLIED IN THREE TO FOUR UNITS IN THREE TO FOUR HOSPITALS IN COLORADO;

(h) THE IMPACT ON HOSPITALS, THAT MAY INCLUDE THE INCORPORATION OF EXISTING GOVERNING STRUCTURES AS WELL AS THE CONSIDERATION OF THE SIMILAR CHARACTERISTICS OF HOSPITALS AS WELL AS THE DIFFERENCES IN SIZE, LOCATION, AND PATIENT POPULATION;

(i) A DETAILED PLAN TO EVALUATE THE PILOT PROGRAM;

(j) A REVIEW OF THE SAMPLING STRATEGY AS PREPARED BY THE RESEARCH ADVISOR OR PRINCIPAL INVESTIGATOR;

(k) THE ESTABLISHMENT OF A PLAN TO DISSEMINATE THE FINDINGS OF THE PILOT PROGRAM TO NURSES AND APPROPRIATE ENTITIES, INCLUDING THE HEALTH AND HUMAN SERVICES COMMITTEES OF THE GENERAL ASSEMBLY OR THEIR SUCCESSORS; AND

(l) THE DISSEMINATION OF ANY IDENTIFIED BEST PRACTICES RECOMMENDATIONS WITH IMPLEMENTATION STRATEGIES FOR COLORADO'S HOSPITALS.

(5) THE PROJECT ADMINISTRATOR SHALL BE RESPONSIBLE FOR COORDINATING THE ADMINISTRATIVE ASPECTS OF THE STUDY DESIGN AND THE IMPLEMENTATION OF THE PILOT PROGRAM WITH THE COMMITTEE, INCLUDING, BUT NOT LIMITED TO, OBTAINING GIFTS, GRANTS, AND DONATIONS; COORDINATION OF PROJECT OBJECTIVES AND TIME LINES; DISSEMINATING FINAL REPORT INFORMATION; AND ANY OTHER ADMINISTRATIVE ACTIVITIES NECESSARY FOR THE OPERATION OF THE COMMITTEE.

(6) PRIOR TO THE IMPLEMENTATION OF THE PILOT PROGRAM, THE COMMITTEE SHALL CERTIFY THAT THERE IS SUFFICIENT AVAILABLE GIFTS, GRANTS, AND DONATIONS AVAILABLE TO FUND THE PILOT PROGRAM. THE COMMITTEE IS AUTHORIZED TO ACCEPT GIFTS, GRANTS, AND DONATIONS FOR THE PURPOSES OF THIS PART 3.

(7) FOR THE PURPOSES OF THIS PART 3, "DIRECT-CARE NURSE" MEANS A REGISTERED NURSE WHO IS ENGAGED IN DIRECT PATIENT CARE IN AN INPATIENT HOSPITAL UNIT SETTING FOR AT LEAST FIFTY PERCENT OF HIS OR HER WORKING HOURS.

(8) THIS PART 3 IS REPEALED, EFFECTIVE JULY 1, 2011.

SECTION 3. Appropriation - adjustments to the 2008 long bill. (1) In addition to any other appropriation, there is hereby appropriated, out of any moneys in the general fund not otherwise appropriated, to the department of regulatory agencies, for allocation to the division of registrations, for the fiscal year beginning July 1, 2008, the sum of sixty-seven thousand four hundred dollars (\$67,400), or so much thereof as may be necessary, for the implementation of this act.

(2) For the implementation of this act, the general fund appropriation to the controlled maintenance trust fund made in section 23 of the annual general appropriation act, for the fiscal year beginning July 1, 2008, shall be decreased by sixty-seven thousand four hundred dollars (\$67,400).

SECTION 4. Safety clause. The general assembly hereby finds, determines, and declares that this act is necessary for the immediate preservation of the public peace, health, and safety.

Approved: May 6, 2008