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Oregon Nurse Staffing Advisory Board (NSAB)
 Wednesday, April 26, 2023
 1:00 PM – 3:15 PM

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Meeting Minutes

Cochair	Uzo Izunagbara, DNP, MSN, MHA, RN (presiding)
Members present	Jenni Word, RN; Barbara Merrifield, MSN, RN; Joel Hernandez, RN; Kelsey Betts, RN; Shannon Edgar, RN, MBA; Lace Velk, RN; Mariah Hayes, MN, RN, NE-BC; Todd Luther, RN, CEN; Becky Wise, RN
Members absent	Chandra Ferrell, CNA
PHD staff present	Dana Selover, MD, MPH; Anna Davis, JD; Kimberly Voelker, MPH; Wendy Edwards; Austin Schmidt; Karyn Thrapp; Tip McIntosh

Guests present	Kyle Furukawa (Good Shepherd); Donell Owens (Kaiser Sunnyside); Lori Oliver (Legacy Randall Children’s Hospital); Danielle Meyer (OAHHS); Erica Swartz (OHSU); Christy Simila, Therese Hooft (ONA); Deidre Green (retired); Shauna Cline (Saint Alphonsus Baker City); Anna LaRosa (Saint Alphonsus Ontario); Jennifer Peterson (St. Anthony); Rocio Ceja-Bolanos (Virginia Garcia MHC)
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Agenda Item 1	<i>Call to Order</i>
<p>The meeting was conducted as an online Zoom meeting with computer and phone audio options. The meeting was called to order and members were notified that the meeting would be shorter than usual. Board co-chair greeted board members.</p>	

Agenda Item 2	<i>Minutes</i>
<p>Board co-chair asked whether there were any edits, corrections, or questions about the minutes from the January 2023 Quarterly NSAB meeting.</p> <p>Motion to approve January minutes as written: Lace Velk Seconded: Mariah Hayes Motion passed.</p>	

Agenda Item 3	<i>Membership & Program Updates</i>
<p>K. Voelker updated the board on members who completed their first term and were eligible for a second term. K. Voelker provided clarification on how to reapply through Workday. They listed the members eligible for renewal.</p> <p>K. Voelker stated there were vacancies for a nurse manager co-chair and for a nurse manager member. Direct care members were also encouraged to apply for the board because applications will be valid for two years and having applications in the pool is useful when vacancies arise.</p> <p>K. Voelker presented a slide about Board Member Compensation and encouraged board members to reach out if they had any questions.</p> <p>A. Davis provided updates on the open position for a nurse staffing surveyor.</p> <p>K. Voelker updated the board that the NSAB was moving to in-person meetings twice per year.</p> <p>Board co-chair asked the board for feedback on moving to in-person meetings.</p> <p>Board member stated that they would like hybrid meetings and in-person meetings, as long as they had enough time to plan for work schedules and travel.</p> <p>A. Davis clarified that any members unable to attend in-person were always welcome to join the meeting remotely.</p> <p>Board co-chair asked OHA to plan the NSAB October meeting as a hybrid meeting.</p> <p>Board member asked why the April 2023 NSAB meeting was shorter than normally scheduled.</p> <p>A. Davis informed the board about pending nurse staffing legislation that could significantly change the current nurse staffing law. OHA had decided not to invite any guests to speak to the current law because the legislation could change those requirements. Further, guests could not speak to the pending legislation as pending legislation may be changed in the legislative process.</p> <p>K. Voelker stated that usual agenda items were given the same amount of time as previous meetings.</p>	

Agenda Item 4	<i>2023 Legislative Session and Status Updates</i>
<p>K. Voelker suggested that the 2023 Legislative Session agenda meeting be tabled until D. Selover could join the meeting.</p> <p>Board co-chair moved the meeting along to agenda item 5 (Status updates).</p> <p><i>2023 Legislative Session</i></p> <p>Meeting returned to agenda item from agenda item 7 (Nurse staffing surveyors discusses survey activities).</p> <p>D. Selover provided updates on the 2023 Legislative Session and explained OHA's that OHA reviewed bills that could impact its work and that OHA had no position for or against any bills except those sponsored by the agency. HB2697, which proposed changes to the current nurse staffing law, had been moved to Joint Ways and Means Committee because it had a fiscal impact.</p> <p>Board member asked D. Selover if they felt HB 2697 was straightforward and unambiguous.</p> <p>D. Selover answered that there were some areas in the bill where additional clarity was likely needed.</p> <p>Board member asked if there were updates on civil monetary penalties (CMPs) under the current law after OHA had spoken with Department of Justice (DOJ).</p> <p>D. Selover stated there were no updates at this time.</p> <p>A. Davis stated that there were more complications to issuing CMPs than originally foreseen by OHA and the NSAB, and OHA was working through DOJ's recommendations.</p> <p>Board member asked if there was a possibility to speak with DOJ on how to interpret or enforce HB 2697, if it passed.</p> <p>D. Selover explained that OHA provides their analysis to legislators and that the DOJ is available to help interpret legislation.</p> <p>There were no additional questions or comments about the 2023 Legislative Session.</p>	

Agenda Item 5	<i>Status Updates</i>
<p><i>Nurse Staffing Surveys</i></p>	

K. Voelker presented the Nurse Staffing Survey dashboard, which included information about the number of hospitals surveyed and Plan of Correction (POC) status for surveys completed in Cycle 2 (2021 – 2023). They also clarified a typo for the board.

Board co-chair asked why the dashboard showed 14 hospitals with accepted POCs and 15 hospitals with approved POCs.

K. Voelker acknowledged this typo and clarified that 15 hospitals had accepted POCs. They also explained that of the 41 hospitals surveyed, 35 had completed or were in the process of completing on their POCs. The other six hospitals were awaiting their survey reports.

Board co-chair asked about the continued value of the NSAB's current work and procedures, knowing that the law may be changed in the coming months.

A. Davis stated it was premature to discuss what might be done in the future and that the NSAB and OHA would discuss next steps after any legislation had passed.

There were no further questions about the survey dashboard.

Nurse Staffing Complaint Investigations

K. Voelker presented the Nurse Staffing Complaint Investigations dashboard, showing the number of investigations completed since 2016, number of investigations with one complaint or multiple complaints, percentage of how many allegations were substantiated, and the number of hospitals investigated since the January 2023 NSAB meeting. They also presented the status of POCs for completed complaint investigations.

K. Voelker explained that OHA had developed a backlog of complaints due to survey pauses in 2020 and 2021. They noted that OHA had made strides to catch up on its backlog.

Board member asked for the timeframe in the complaint dashboard and how many complaints had been investigated.

K. Voelker answered that 126 complaints had been investigated between 2016 and April 18th, 2023. They stated that OHA had almost eliminated its backlog.

A. Davis reiterated that the complaint dashboard showed all complaints investigated from 2016 to present day. They also noted that when the law changed in 2015, OHA did not have the resources to conduct all required nurse staffing activities.

K. Voelker also mentioned that the NSAB originally recommended prioritizing surveys over complaint investigations.

Board co-chair asked about feedback OHA received from DOJ related to the complaint backlog.

A. Davis answered that OHA is unable to disclose that information because it would result in OHA waiving its attorney-client privilege. They reiterated the difficulty of surveying each hospital once every three years and investigating all complaints within 60 days. They stated that DOJ would likely not be able to give advice on which requirement to meet because they were both requirements in statute.

Board co-chair asked surveyor vacancies and how that affected meeting requirement timelines.

A. Davis noted the legislature provided more funds in 2021 to hire additional surveyors, but that it took time to hire and train surveyors; additional funding improves the backlog, but the improvements take time.

Board member sympathized with the long training period and wondered about promoting surveyor retention. They also recommended prioritizing complaints over triennial surveys.

Board member supported the idea of reprioritizing nurse staffing complaints over triennial surveys.

Board member also supported the idea of prioritizing complaints over surveys.

There were no additional questions or comments about complaints.

Nurse Staffing Revisits

K. Voelker presented the Nurse Staffing Revisit dashboard, which reflected information about revisits combined with full nurse staffing surveys, how many hospitals have had repeat noncompliance citations, standalone revisits, and how many hospitals had passed their revisits or were in the POC process.

There were no questions or comments about revisits.

Agenda Item 6	<i>Committee Updates</i>
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Rules Review Committee

K. Voelker updated the board on the Rules Review Committee activities and stated that one or two more meetings would be needed for the Committee to complete its task as described in the committee charter.

Board member asked about the relationship between the Rules Review Committee and the Rules Advisory Committee (RAC).

A. Davis explained that the Rules Review Committee was generating ideas for a future RAC, which would be composed of board members and other affected parties, including individuals representing communities likely to be affected by the rules. They provided more information about the RAC process.

K. Voelker noted that the RAC process included the public submitting comments and OHA responding to those comments.

There were no additional questions or comments related to the Rules Review Committee.

Agenda Item 7	<i>Nurse Staffing Surveyor(s) Discusses Survey Activities.</i>
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Nurse staffing surveyors, W. Edwards, K. Thrapp, and A. Schmidt, introduced themselves to the board.

Board co-chair asked for A. Schmidt to clarify whether they were the only dedicated nurse staffing surveyor.

A. Schmidt clarified that they only do nurse staffing work, while the other surveyors also do federal and state work unrelated to nurse staffing.

Board member asked for an update on the onsite unit interviews and OHA's ability to speak to direct care nurses during the surveys.

W. Edwards explained that from their experience, there hadn't been a change in OHA's process.

A. Schmidt answered that the SurveyMonkey's are built with intention of having bedside nurses and other staff able to voice their concerns because OHA was not able to talk to everyone while they were onsite.

Board co-chair asked surveyors if they had any difficulty finding a charge nurse or other primary staff with substantial knowledge about nurse staffing practices. They expressed preference for onsite interviews over survey questionnaires.

W. Edwards explained that prior to the survey, OHA provides information about the type of information that will be needed during the survey and that OHA will need to interview a direct care nurse who is familiar with the nurse staffing plan and daily staffing. Usually, when arriving that the unit, there is somebody made available to speak with the surveyors.

Board member asked if surveyors ask the interviewee they speak with for their name, role, and duration of employment. They also asked whether the surveyor knew if the interviewee was a traveler nurse.

W. Edwards answered that surveyors are provided this information during the interview.

Board member expressed concern about the hospital selecting the direct care nurse who OHA interviews.

K. Thrapp clarified that the onsite interview has always involved interviewing a direct care nurse who works on the unit about the staffing plan, staffing processes, and daily practices. K. Thrapp further explained their experience about the interview process. They also reminded the board that surveyors do not include hospital leadership staff in the direct care interview.

Board co-chair asked whether OHA saw complaints about noncompliance for units that had recently received a nurse staffing survey.

K. Voelker explained that complaint investigations are often combined with a full nurse staffing survey when they are submitted before the survey begins. They clarified that OHA has not experienced a situation where they had conducted a survey, then shortly thereafter received a complaint that OHA had missed noncompliance during that survey.

A. Davis agreed that OHA had not seen this situation.

Board co-chair thanked OHA for providing more information about consistency during the survey process. They asked nurse manager members for their insight on the nurse staffing process.

Board member stated they were not involved their hospital's recent survey, so they do not have any context from a nurse leader standpoint.

Board member also stated that their unit was not selected for survey at their hospital, so they do not have any feedback on how Cycle 2 procedures were different from Cycle 1.

Board member noted their hospital had not yet received its Cycle 2 survey.

Board co-chair asked surveyors if they had noticed any trends related to the Public Health Emergency (PHE) and whether hospitals were still using crisis standards of care and facility disaster plans.

K. Thrapp answered that they personally had only conducted one nurse staffing survey since December 2022, but stated that since then, hospitals were operating under their regular nurse staffing plans.

W. Edwards expressed that the last two nurse staffing surveys that they personally conducted, the hospitals were operating under their usual nurse staffing plans.

Board co-chair noted that they had heard hospitals using non-patient care units to address high census without going through the nurse staffing committee. They asked whether this was reflected in nurse staffing reports.

K. Thrapp answered that they did not see this practice at the hospital they had surveyed in 2023.

W. Edwards answered that they had not seen that practice in the two surveys they had completed in 2023.

A. Schmidt stated that they had not seen that practice on the nurse staffing surveys they had been on.

A. Davis noted that some units that had overflow spaces within their nurse staffing plans.

Board co-chair expressed concern that overflow units were being missed during the nurse staffing surveys since surveyors may not know they existed unless a staff member told them during the survey.

K. Thrapp explained OHA's process for identifying spaces where nurses were assigned to provide direct patient care and whether those places had a nurse staffing plan. They explained that surveyors intentionally elicit that information through a variety of ways for on-campus and off-campus before they select which units to survey. Because of this selection process OHA identifies where care is happening even if that is not a unit covered by a nurse staffing plan.

Board co-chair suggested surveyors directly ask whether the hospital was using any overflow spaces.

Board member expressed concern about changes to staffing practices that were not approved by the nurse staffing committee, particularly as it related to overflow units.

Board members thanked the surveyors for their time.

Agenda Item 8	<i>Emerging Issues in Nurse Staffing</i>
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Board co-chair initiated a round robin with K. Voelker facilitating time and asked the board whether they had experienced any changes in nurse staffing practices in preparation of the public health emergency ending May 11th.

Board member, J. Word, answered there were no changes made and they had not deviated from their approved plan during the pandemic

Board member, K. Betts, answered that they were still seeing a large use of traveler nurses in their facility.

Board member, J. Hernandez, cited issues their facility faced such as missed breaks, short staffing, and issues with their staffing plan.

Board member, L. Velk, noted that they had experienced their hospital making unilateral decisions related to patient placement and staffing. They expressed concern that these issues would continue after the end of the PHE.

Board member, T. Luther, answered that their facility was currently using their pre-pandemic staffing plan.

Board member, M. Hayes, stated their traveler staff numbers were lower than before.

Board member, S. Edgar, answered that both of their campuses were working within their nurse staffing plans. They stated they were still using traveler nurses because it was difficult to recruit nurses in rural areas.

Board member, B. Wise, answered that their facility was no longer using emergency staffing and echoed the issue for rural health care and its reliance on city health care staffing.

Board member, B. Merrifield, answered that their facility had remained within their nurse staffing plan and that they had lowered their use of traveler nurses.

Board co-chair answered that they have been noticing the on-off nature of the overflow units and stated that there was a lack of preplanning regarding patient safety.

Agenda Item 9	<i>Public Comment</i>
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K. Voelker initially reminded the board and the public that each comment had a time limit of two minutes.

K. Furukawa was called to make a public comment but was no longer present in the meeting.

K. Voelker invited those who wish to make a public comment to post in the chat.

There was no comment.

Board co-chair thanked the board and adjourned the NSAB meeting.

Agenda Item 10	<i>Meeting Adjourned</i>
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Approved by NSAB on July 26, 2023

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