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**Oregon Nurse Staffing Advisory Board (NSAB)**

*Wednesday, August 30, 2017*

*1:00 PM – 5:00 PM*

Meeting Minutes

Cochairs	Susan King, MS, RN, CEN, FAAN (Presiding); Carol Bradley, MSN, RN, CENP
Members present	Trece Gurrad, RN, MSN; Carolyn Starnes, ASN, RN; Debbie Robinson, RN, MSN; Jennifer Burrows, RN, BN, BSc, MBA; Rob Campbell, CP, ADN, RN; Virginia Smith, BSN, RN-BC (by phone); Zennia Ceniza, RN, MA, CCRN, ACNP-BC, NE-BC, Amanda Newman, CNA; Margie Gutierrez, RN
PHD staff present	Dana Selover, MD, MPH; Annabelle Henry, JD, MBA (by phone); Anna Davis, JD; Lisa Finkle; Jeston Black
Guests present	Shannon O’Fallon; Andi Easton; Danielle Meyer; Martin Taylor; Molly McGrew

<b>Agenda Item 1</b> Time Stamp: 00:00:01	<i>Call to Order – Susan King</i>
The meeting was called to order and all individuals present and on the phone identified themselves.	

<b>Agenda Item 2</b> Time stamp 00:02:24	<i>May 30, 2017 Board Minutes – Susan King</i>
Debbie Robinson asked for clarification of the phrase “temporal separation” on page 5. Anna Davis explained the reference to “temporal separation”.	

<p>Debbie Robinson asked for clarification of a reference to the number of hospitals surveyed so far.</p> <p>Anna Davis explained the reference to the surveymonkey interviews completed during the on-site surveys.</p> <p>Susan King asked for further information about the surveymonkey interviews and suggested another data point to collect.</p> <p>Susan King asked for information about how OHA is using the board's guidance in addressing nurse staffing waivers.</p> <p>Anna Davis referred to the draft nurse staffing waiver request form that the board would be discussing.</p> <p>The minutes were approved as corrected.</p>	
<b>Action Item</b>	<ul style="list-style-type: none"> <li>• OHA will make the changes regarding the reference surveymonkey interviews.</li> </ul>

<b>Agenda Item 3</b>	<i>Waiver Update – Anna Davis</i>
Time stamp 00:07:20	
<p>Anna Davis provided information regarding the number of waiver requests received and resolved as well as the subject matter of the requests.</p> <p>Carol Bradley asked about the process for notifying hospitals of waiver determinations.</p> <p>Anna Davis described the resolution process.</p> <p>Debbie Robinson expressed concern about the efficacy of notifications.</p> <p>Anna Davis responds to waiver request status updates.</p> <p>Susan King asked about CNO involvement in requests.</p> <p>Anna Davis described the current request process and the information the agency has when considering requests.</p> <p>Dana Selover provided additional information about the agency's data sources.</p> <p>Carol Bradley described the importance of including CNOs in communications.</p> <p>Dana Selover described the agency process for notifications.</p> <p>Susan King suggested changes to the current agency process.</p> <p>Debbie Robinson described the process for CNO notification within hospitals.</p> <p>Margie Gutierrez described the importance of CNO engagement in staffing committee activities and supported CNO notification.</p> <p>Trece Gurrad described the process for notifying OHA of hospital changes.</p> <p>Dana Selover described the role of the OHA's hospital licensing unit.</p>	

Susan King summarized the board recommends that CNOs receive notice of waiver determinations. Susan King asked for additional information about waivers that have been resolved.

Anna Davis described the waiver requests that have been received and the process that has been used to address the requests.

Trece Gurrad asked for further information about how requests are handled.

Anna Davis provided more information about the resolutions.

Jennifer Burrows asked how many hospitals there are in Oregon.

Dana Selover stated that there are more than 60 hospitals.

Jennifer Burrows expressed concern regarding the number of requests in relation to the number of hospitals.

Carol Bradley suggested decisions about which units need nurse staffing plans drive the need for waivers.

Rob Campbell asked about the differences between the waiver request form currently in use and the draft waiver request form under consideration.

Anna Davis described the similarities and differences between the current and draft forms.

Rob Campbell stated that the draft form will provide direction to hospitals regarding the required information.

Debbie Robinson pointed out that the identification of the individual requesting the waiver is the same as on the current form.

Carol Bradley suggested that the signature should be from the CNO.

Susan King summarized the board's agreement that the request should come from the hospital's CNO.

Jennifer Burrows suggested that the form more specifically identify that BLS or ACLS is required.

Carol Bradley asked whether the request form would be problematic for a waiver request that did not involve minimum staffing.

Susan King noted that minimum staffing requirements are the most frequent requests.

Dana Selover asked how the form should address hospitals that request waivers for multiple units.

Carolyn Starnes suggested a way of identifying the units covered by a request.

Susan King summarized the changes that should be made to the form. She suggested that waivers for requirements other than minimum staffing could be addressed in the narrative section.

<p>Rob Campbell asked whether the form could be completed by a designee of the CNO.</p> <p>Carolyn Starnes pointed out concerns if designees submit waiver requests.</p>	
<b>Action Item</b>	<ul style="list-style-type: none"> <li>• OHA will make the changes specified on the nurse staffing waiver request form.</li> </ul>

<b>Agenda Item 4</b>	<i>NSAB Annual Legislative Report – Susan King</i>
Time stamp 00:31:00	
<p>Susan King expressed appreciation for the staff work and the committee comments on the draft. She asked whether there were further changes to the current draft.</p> <p>Carol Bradley asked that the value of the appropriation to OHA be noted in the report.</p> <p>Anna Davis described possible problems with the inclusion of the allocation.</p> <p>Debbie Robinson suggested a way of describing the limitations of the allocation.</p> <p>Carol Bradley suggested that the problems of the allocation would be important information to include.</p> <p>Annabelle Henry stated that the allocation may not accurately reflect costs, and more information will likely be available after a full year of surveys.</p> <p>Carol Bradley discussed the inclusions of appropriations rather than costs.</p> <p>Susan King described the known limitations of the appropriation, and suggested that in a later report might include information about the total cost of implementation.</p> <p>Annabelle Henry stated that it would be accurate to state that the program is under-resourced.</p> <p>Susan King agreed and suggested that the sentence should indicate what Ways and Means granted to the agency.</p> <p>Carolyn Starnes asked about a reference to on-going surveys in the draft report.</p> <p>Anna Davis stated that the agency is on track to complete the surveys.</p> <p>Susan King asked whether the board recommended submitting the report with the redline changes as the annual report to the legislature.</p> <p>Carol Bradley suggested wording changes where the word “significant” appears twice in one sentence.</p> <p>Several board members offered alternative wording for the bullets on page 22.</p> <p>Zennia Ceniza made a motion to approve the report with the changes shown in the redline version and additional changes discussed during the meeting.</p> <p>Trece Gurrad second the motion.</p>	

The report was adopted as corrected.	
<b>Action Item</b>	<ul style="list-style-type: none"> <li>OHA will make the changes specified in the draft and during the discussion.</li> </ul>

<b>Agenda Item 5</b>	<i>Survey Update – Anna Davis</i>
Time stamp 00:43:25	

Anna Davis provided an update to the dashboard sent out in mid-August. She described the current status of surveys and pointed out features of the dashboard. One survey is complete and no further action is needed at a hospital that is a satellite of the California hospital.

Susan King asked about the services provided at the satellite.

Anna Davis clarified that the satellite is an outpatient clinic.

Dana Selover described the licensing and survey practice for an out-of-state hospital with a satellite in Oregon.

Susan King asked about the licensing of a satellite that provides limited services in Oregon.

Shannon O’Fallon explained that the licensure is under the satellite rules.

Anna Davis described the process for surveys after the report is issued. She provided two timelines. Timeline 1 showing timeframes for a full survey from entrance through revisit report. Timeline 2 shows how the calendar lengthens with just two small changes.

Zennia Ceniza asked when the reports will be posted on the website.

Annabelle Henry described the timeline for posting reports and the benefits of including Plans of Correction with the posted reports.

Jennifer Burrows asked about revisit timeframes.

Anna Davis described the legal timeframes for revisits.

Carol Bradley suggested that the board be informed of hospitals that repeatedly submit insufficient POCs, as that may indicate a problem with the rules.

Dana Selover stated that in the initial surveys hospitals may take some time to learn the process. This learning process occurs in many regulated facility types.

Carol Bradley discussed a concern about the lack of appeal process for cited deficiencies while the rules are still new. She suggested there should be an opportunity for continuing dialogue.

Dana Selover described the history of the hospital survey process.

Annabelle Henry described the rare situations in which a finding is changed after the report is written. She is available to discuss specific situations, and described the way surveys track issues identified during a survey. She pointed out the increase in

survey frequency which creates opportunities for learning on both sides. The agency is interested in hearing from the board about how to foster this learning process.

Carolyn Starnes asked about the timing of sharing reports with the hospital staffing committee.

Annabelle Henry described the process of providing the report to the hospital and the cochairs.

Jennifer Burrows discussed the timing of post-survey meetings in relation to regular hospital staffing committee meetings.

Anna Davis described options for addressing reports within the staffing committee.

Carolyn Starnes asked about agency measurement of nurse staffing committee involvement in formulating POCs.

Annabelle Henry described the process for reviewing POCs and the evaluation process during revisits.

Susan King asked about the responsibility for submitting POCs.

Annabelle Henry clarified the responsibility for submitting POCs, and the potential for review of committee function during a revisit.

Carolyn Starnes expressed the expectation that committees would be involved in formulating POCs.

Annabelle Henry stated that this concern highlights the difference between our hopes and expectations as an agency and the requirements of the law. The OHA is tasked with measuring compliance with the law. The staffing laws contemplate a better integration between the hospital nurse staffing committees and hospital administrations. If the agency identifies a pattern of disconnection between committees and the hospital in developing POCs, then the agency would want to talk with the board and discuss how to increase the involvement of the committees in this process. At this point we do not have enough information to make that determination. Annabelle Henry suggested that the board look at a third timeline to see where we are in the larger year of surveys.

Anna Davis distributed Timeline 3 that shows the calendar when 22 on-site surveys are completed in a year. Timeline 3 shows the numerous overlapping events and significant ongoing work on 2017 surveys in 2018, when the agency will begin conducting another 22 surveys.

Susan King suggested that the group move into a discussion of trends observed in the surveys completed thus far.

Anna Davis described Dashboard 2, which provides information about nurse staffing complaints received since January 2017.

Susan King asked whether there are specific gaps in the compliance that are being seen at multiple locations.

Annabelle Henry stated that in general surveyors are seeing areas of the rules that have issues of non-compliance, but it is early to speak with specificity. General areas of concern are nurse staffing committee functions, nurse staffing plan requirements, and overtime.

**Agenda Item 6**

Time stamp 01:25:30

*Feedback on Nurse Staffing Surveys – Susan King*

Carol Bradley described information she received from hospitals regarding nurse staffing surveys. The hospitals experienced surveys as collaborative, but there are several areas of concern. Among the concerns are: the amount of time and resources the surveys take; the importance of keeping CNOs informed about survey notices and reports; the importance of clear standards in the FAQ, tool kit, and during surveys; the topics and tools that are the focus of the surveys; and the lack of opportunity to appeal the audit findings.

Susan King asked for a specific example of expectations that are not reflected in the rules.

Carol Bradley expressed frustration regarding specific aspects of the nurse staffing laws and documentation requirements. She discussed the overlap of requirements for nurse staffing plans and the Scope of Service required by The Joint Commission. She discussed the difference between external benchmarks and guidelines from nationally-recognized professional organizations.

Susan King suggested that this is an opportunity for education, and clarified the difference between external benchmarks and professional guidelines.

Rob Campbell asked about guidelines in terms of acuity and intensity.

Carol Bradley described limitations of acuity tools and discussed intensity. She described the difference between target staffing and setting specific staffing minimums.

Jennifer Burrows provided an example of the use of target staffing in an ICU.

Carol Bradley stated that there are several concerns about mandatory overtime and overtime documentation. There is also confusion about divert policies and documentation of diverts. She stated that feedback from those who have had surveys was consistent.

Susan King asked for other feedback.

Debbie Robinson described her participation in surveys and a complaint investigation. She expressed concern about the time surveys take and the lack of feedback while surveyors are on-site and during the exit conference.

Carolyn Starnes expressed concern that survey reports are not shared with the staffing committees.

Susan King asked about the status of a survey report.

Carolyn Starnes described what she knew of the survey report for her hospital.

Zennia Ceniza asked whether this was an internal process problem.

Susan King asked about the process for sending reports.

Anna Davis described the report notification process.

Dana Selover pointed out the statutory distribution requirements.

Susan King asked for additional information from Carolyn Starnes about the survey report from her hospital.

Carolyn Starnes described the process at her hospital and asked whether other hospitals have had a similar experience.

Debbie Robinson described the status of the report at her hospital.

Carol Bradley described the process for formulating a POC at one of her hospitals.

Debbie Robinson asked about the use of surveymonkey responses as related to a surveyor's on-site observations.

Carol Bradley stated that this raises questions about staff member awareness of nurse staffing processes.

Susan King asked about verification of surveymonkey responses. She provided an example of an emerging issue and asked about direct care interaction with surveyors.

Debbie Robinson described the surveyor time with direct care staff in the surveyors she observed.

Anna Davis described the purpose of the surveymonkey tool.

Trece Gurrad provided an example she had heard from another hospital of the direct care staff interaction with surveyors.

Susan King described the limitations of the surveymonkey tool.

Margie Gutierrez asked about consistency among surveyors.

Carol Bradley stated that each hospital has its own experience and described consistent information that she has heard.

Jennifer Burrows suggested that the time spent during surveys and the level of detail reflects the burden of the documentation required by the statutes, and does not necessarily measure patient safety.

Carol Bradley described the personnel review portion of surveys.

Rob Campbell suggested that time is needed to determine how successful the surveys are.

Carol Bradley agreed with Rob Campbell, and expressed concern that surveys duplicate accreditation processes. She described the focus of the nurse staffing laws.

Robert Campbell restated that the mission of the nurse staffing laws and the focus on patient safety.

Amanda Newman expressed concern about how surveys measure adherence to written staffing plans.

Zennia Ceniza stated that there is concern about documenting the right things.

Shannon O'Fallon pointed out that the purpose of the audits in statute is to document compliance with the nurse staffing laws.

Amanda Newman described the measurement acuity and intensity in nurse staffing plans.

Shannon O'Fallon asked whether anyone had suggestions for measuring compliance other than reviewing documentation of compliance with the statutory criteria.

Susan King suggested that the reality may be different than the documentation. She provided an example related to acuity measurements.

Zennia Ceniza described her hospital's work on acuity measurement.

Susan King asked how surveyors would address contradictory information about what is occurring at the hospital.

Dana Selover described the process for evaluating contradictory information. She described the general process of surveying structures as contrasted with outcome analysis. She asked for suggestions on how to better measure whether system success.

Shannon O'Fallon pointed out that the hospital nurse staffing committee's annual review looks at outcomes, which differs from the examination the statute assigns to the OHA.

Trece Gurrad described the experience she has heard from other hospitals.

Dana Selover described how surveyors look at annual reviews in light of statutory changes and deadlines.

Susan King pointed out that the continuing annual review requirements.

Annabelle Henry confirmed that it can be disconcerting to receive survey results. The scrutiny on nurse staffing is more intense given the increased frequency of surveys, the new laws, the increase in complaints, and the formalization of the nurse staffing survey tools. She described the how the survey examination will likely evolve over time.

Susan King suggested that the board create a subcommittee regarding how surveys measure plan sufficiency and another subcommittee could consider overtime. She described work by the ONA to provide guidance on incremental overtime.

Jennifer Burrows agreed that subcommittees could assist the agency and get nurses and hospitals involved. She suggested a source for different auditing methods.

Carol Bradley agreed that other auditing methods might be valuable. She is concerned that survey results show that the emphasis is on the wrong things.

Susan King suggested that the board could provide advice to the OHA from facilities and nurses.

Carol Bradley volunteered to send an email to CNOs statewide to solicit ideas for useful survey techniques.

Susan King asked for volunteers to form a subcommittee on overtime.

Rob Campbell and Carol Bradley volunteered.

Susan King suggested that responses describing methods of measuring safe patient care could be brought back to the board for consideration.

Zennia Ceniza asked about OHA's ability to implement recommendations.

Dana Selover stated that the OHA listens to the board and take input that allow it to comply with the statutory requirements.

Annabelle Henry stated that it would be important for the board to look at survey processes and the substantive feedback that we are getting. She suggested additional discussion on specific topics and audit practices. She also suggested a review after a critical mass of surveys have been completed.

Susan King stated that over the next year the board will discuss some of these focused topics, overtime being one, another being what advice to give OHA.

Trece Gurrad asked whether measuring patient outcomes is a separate subcommittee.

Susan King stated that it could be a separate subcommittee.

Carolyn Starnes and Trece Gurrad volunteered to staff this subcommittee.

**Agenda Item 7**

Time stamp  
02:43:08

*Emerging Nurse Staffing Issues – Susan King*

Susan King requested that the board identify emerging issues and then put these items on the agenda.

Margie Gutierrez described an emerging issue related to replacement staff. She asked whether this issue was unique to Critical Access Hospitals.

Jennifer Burrows described the same issue at large hospitals and suggested that this is the beginning of another nursing shortage.

Margie Gutierrez noted a large number of vacant positions.

Trece Gurrad described the difficulty of attracting CNAs at her hospital.

Carol Bradley described how the vacancies related to Oregon licensure of nurses from other states.

Susan King described the OSBN process and efforts to address out-of-state licensure issues.

Amanda Newman described corporate practices that delay the posting and hiring of vacant positions.

Zennia Ceniza described the problem of new nurses leaving smaller hospitals for larger hospitals after only a year.

Carolyn Starnes described this same problem at her hospital.

Carol Bradley described fatigue research and suggested how this should impact nurse staffing regulation.

Rob Campbell indicated that this will be a long cultural change.

Carol Bradley provided examples related to fatigue and individual choice.

Susan King described provisions in the first staffing law regarding secondary employment.

Trece Gurrad suggested that diversion should remain a focus. She provided an example of a near-divert at her hospital and the adjustments necessary to avoid going on divert.

Jennifer Burrows described diversion practices during flu season.

Amanda Newman described a discussion of the practice of boarding patients in the ED.

Carol Bradley pointed out limitations of multiple hospitals on divert.

Susan King described a system of rotating divers for EDs. The emerging issues are summarized as

- replacement staff
  - the difficulty of getting qualified staff
  - the high employment rate
  - the retirement rate
  - the inadequate CNA pool
  - corporate hiring delays
  - desire by nursing staff members to move to urban areas
- call requirements for nurses
- fatigue data and the shared responsibilities between nurses and employers to address this problem
- divert issues

Time Stamp: 02:56:35

*Eclipse Feedback – Susan King*

Susan King asked for information about the impact of the eclipse on hospitals.

Amanda Newman described the experience at her hospital.

Carol Bradley stated that the planning that was done was fantastic and provided a model for collaboration across the state.

Trece Gurrad described the connections built between hospitals in preparation for the eclipse.

Carolyn Starnes stated that the efforts by the state, including the OHA presentation at the Oregon Nurse Staffing Collaborative meeting, were very helpful.

Dana Selover stated that the eclipse collaboration likely helped prevent EDs from being overwhelmed.

Susan King described the information she heard about individuals who were sent from eclipse festivals to the ED.

Zennia Ceniza described the experience at her hospital.

Margie Gutierrez described a similar experience at her hospital.

Susan King asked about the use of a helicopter in Prineville.

Debbie Robinson described preparations for helicopters at her hospital and the extent to which resources were used.

Zennia Ceniza described additional preparations at her hospital.

Susan King asked how OHA would document what worked.

Dana Selover described the AOC review process.

<b>Agenda Item 6</b>	<i>Public Comment</i>
Time Stamp: 01:55:03	
<p>Martin Taylor spoke as the new executive director of the ONA. He described his work history and work on the prior nurse staffing laws. He is encouraged by the progress in nurse staffing and the collaboration of the board. He stressed the need for consistency in the regulatory system. He emphasized that nurse staffing is focused on staffing by patient care need, and the budgets must meet the patient care needs. He recognized that this is an evolving system and thanked everyone for their hard work.</p> <p>Susan King repeated the tasks of the two subcommittees and stated that the subcommittees will report to the board at the meeting on November 29, 2017.</p>	

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