

**Amendment - 1st Reading-white - Requested by: Cora Neumann - (S) Public Health, Welfare and Safety**

- 2025

69th Legislature 2025

Drafter: Chanan Brown,

SB0372.001.001

SENATE BILL NO. 372

INTRODUCED BY C. NEUMANN, S. NOVAK, T. CROWE, S. FYANT, J. SOOKTIS, J. MORIGEAU, T. RUNNING WOLF, S. WEBBER, D. FERN, J. KASSMIER, L. SMITH, J. WINDY BOY, M. YAKAWICH, J. COHENOUR, D. HAWK, D. HAYMAN, E. KERR-CARPENTER, A. OLSEN, S. DEMAROIS, C. FITZPATRICK

A BILL FOR AN ACT ENTITLED: "AN ACT ESTABLISHING SAFE STAFFING STANDARDS FOR NURSES; CREATING NURSE STAFFING COMMITTEES IN HOSPITALS TO PROTECT AND ENHANCE THE SAFETY AND QUALITY OF PATIENT CARE; AND ~~PREScribing-RECOMMENDING~~ MINIMUM NURSE-TO-PATIENT ~~RATIOS GUIDELINES.~~"

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:

NEW SECTION. **Section 1. Nurse staffing plan -- hospital staffing committee -- report to department.** (1) Each hospital licensed by the department of public health and human services shall, in coordination with its staffing committee as required in subsection (2), develop a nurse staffing plan that promotes a collaborative hospital practice and enhances patient care. The safe nurse staffing plan must:

(a) ~~prescribe-recommend~~ the minimum professional nurse skill mix for each patient care unit in the hospital, including:

(i) the ~~ratio-recommended number~~ of patients to registered nurses providing direct patient care for each unit, which must ~~meet-consider~~ the minimum nurse-to-patient ratios ~~prescribed~~ in [section 2];

(ii) a description of any differences between the staffing levels ~~prescribed-approved~~ in the staffing plan and actual staffing levels for each unit, how the hospital intends to ~~meet-work toward~~ the staffing levels ~~prescribed-recommended~~ in the nurse staffing plan, and whether the hospital will adjust staffing levels in future staffing plans;

(iii) the method used by the hospital to determine and adjust direct patient care nurse staffing levels; and

(iv) a description of supporting personnel assisting in each patient care unit;

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- (b) identify the hospital's employment practices concerning the use of temporary and traveling nurses;
- (c) establish the hospital's process for internal review of the nurse staffing plan, including review by the staffing committee, and any other review;
- (d) identify how the hospital and its staffing committee receive input from direct care staff, including nurses and other members of the hospital's patient care team, in the development of the nurse staffing plan;
- (e) be updated annually by the staffing committee; and
- (f) receive majority approval of the staffing committee.
- (2) (a) Each hospital licensed by the department shall establish a staffing committee to prepare and approve by majority vote the nurse staffing plan required in subsection (1).
- (b) (i) At least 50% of the membership of a staffing committee must consist of registered nurses employed by the hospital in nonsupervisory roles and whose primary responsibility is to provide direct patient care.
- (ii) Except as provided in subsection (c), for hospitals in which nurses are represented through collective bargaining, the collective bargaining agent shall select the members prescribed in subsection (2)(b)(i).
- (c) If a hospital has an existing committee whose membership consists of at least 50% registered nurses who are employed by the hospital and whose primary responsibility is to provide direct patient care, the hospital may designate that committee as the hospital's staffing committee.
- (3) Each hospital licensed by the department shall post in each care unit a copy of the hospital's nurse staffing plan in a location that is visible, conspicuous, and accessible to staff, patients, and the public.
- (4) (a) Each hospital licensed by the department shall maintain accurate records of the **ratios** staffing guidelines of direct care registered nurses to patients in each unit for each shift, including:
- (i) the number of patients in each unit on each shift;
- (ii) the number of direct care registered nurses assigned to each patient in each unit on each shift;
- and
- (iii) the number of supporting personnel in each unit on each shift.

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(b) The records of the ~~ratios recommended guidelines~~ of direct care registered nurses to patients must be available to the hospital staff, the staff's collective bargaining agents, the patients, the general public, and the department on request.

(5) Each hospital licensed by the department shall submit to the department annually its nurse staffing plan with a written certification that the plan provides adequate and appropriate delivery of health care services.

(6) As used ~~is in~~ this section, "nurse" means a person who:

(a) holds a valid license to practice as a registered professional nurse pursuant to the requirements of Title 37, chapter 8;

(b) provides direct care to patients; and

(c) is engaged in the practice of nursing as defined in 37-8-102.

**NEW SECTION. Section 2. Minimum nurse-to-patient ~~ratios guidelines~~.** (1) A hospital licensed by the department of public health and human services ~~may not shall seek to~~ assign a nurse a reasonable number of patients utilizing minimum nurse-to-patient guidelines:

(a) in an emergency room, to more than four nontrauma or noncritical care patients or to more than one trauma or critical care patient, except in circumstances that require two or more nurses to be assigned to one patient;

(b) in an intensive care unit, to more than two patients, except when circumstances require one or more nurses to be assigned to one patient;

(c) in a labor and delivery unit:

(i) to more than one patient experiencing complications or who is actively in labor; or

(ii) to more than two patients who are not experiencing complications or who are not actively in labor;

(d) in a postpartum unit or nursery, to more than six patients, counting mother and baby each as separate patients;

(e) in an operating room, to more than one patient;

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- 1 (f) in an oncology unit, to more than five patients;
- 2 (g) in a postanesthesia care unit, to more than two patients;
- 3 (h) in an intermediate care unit, to more than four patients;
- 4 (i) in a medical-surgical unit, to more than five patients;
- 5 (j) in a cardiac telemetry unit, to more than four patients;
- 6 (k) in a psychiatric unit, to more than six patients; and
- 7 (l) in a pediatric unit, to more than four patients.
- 8 (2) As used in this section, "nurse" has the same meaning as provided in [section 1].
- 9

10 **NEW SECTION. Section 3. Codification instruction.** [Sections 1 and 2] are intended to be codified

11 as an integral part of Title 50, chapter 5, part 1, and the provisions of Title 50, chapter 5, part 1, apply to

12 [sections 1 and 2].

13 - END -