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 Kate Brown, Governor



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Nurse Staffing Advisory Board – Quarterly Meeting Agenda

Presiding Co-Chair: Uzo Izunagbara

Date: January 25, 2023
 Time: 1:00 PM – 5:00 PM
 Location: Remote only

To receive meeting login information, please register for the meeting here:
<https://www.zoomgov.com/meeting/register/vJIsdeqvqjltGraQaQWepL7XOSdWGJoMQGY>

Note for virtual meetings: OHA will open the Zoom meeting 15 minutes prior to the meeting’s official start time. You may be required to wait in the Zoom waiting room or receive a message that the meeting has not yet started if you attempt to join the meeting before this time. If you are unable to join the meeting after this time, please contact the meeting host at the email or phone number provided below.

The time and order of agenda items are subject to change at the discretion of the Board Co-Chairs

Time	Agenda Item	Materials Provided	Presenter
1:00 PM	Item 1 – Call to Order		Uzo Izunagbara

Nurse Staffing Advisory Board
Quarterly Meeting Agenda
January 25, 2023

1:00 PM – 1:05 PM	Item 2 - Minutes	<ul style="list-style-type: none"> October 2022 Quarterly Meeting Minutes December 2022 Ad Hoc Meeting Minutes 	Kimberly Voelker
1:05 PM – 1:15 PM	Item 3 – Membership updates <ul style="list-style-type: none"> Open board positions Nurse staffing webinars 		Kimberly Voelker
1:15 PM – 1:20 PM	Item 4 – 2023 Legislative Session		Dana Selover
1:20 PM – 2:00 PM	Item 4 – Status Updates <ul style="list-style-type: none"> Nurse Staffing Waivers Nurse Staffing Surveys Nurse Staffing Complaint Investigations Nurse Staffing Revisits 	<ul style="list-style-type: none"> Waiver dashboard Survey dashboard Complaint dashboard Revisit dashboard 	Kimberly Voelker
2:00 PM – 2:55 PM	Item 5 – 2022 Year in Review Presentation	<ul style="list-style-type: none"> Year in Review Slides 	Kimberly Voelker & Anna Davis
2:55 PM – 3:00 PM	Item 6 – Committee updates <ul style="list-style-type: none"> NSAB Rules Review Committee 		Kimberly Voelker
3:00 PM – 3:05 PM	Item 7 – Update on civil monetary penalties		Kimberly Voelker & Anna Davis
3:05 PM – 3:10 PM	Item 8 – Break		

3:10 PM – 3:45 PM	Item 10 – Nurse Staffing Complaints <ul style="list-style-type: none"> Number of nurse staffing complaints received Complaint outcomes 	<ul style="list-style-type: none"> Nurse staffing complaints slides 	Kimberly Voelker & Anna Davis
3:45 PM – 4:15 PM	Item 11 – Nurse Staffing Surveyor discusses survey activities <ul style="list-style-type: none"> Questions & Answers 		
4:15 PM – 4:45 PM	Item 12 – Emerging issues in nurse staffing NSAB members raise new issues that are emerging as nurse staffing concerns across the state		Uzo Izunagbara
4:45 PM – 5:00 PM	Item 13– Public Comment Members of the public may speak for up to two minutes on the meeting’s agenda and other topics.		
5:00 PM	Meeting Adjourned		

Upcoming Meetings

- *NSAB Quarterly Meetings*
 - *April 26, 2023: 1:00 PM – 5:00 PM. Register here:*
<https://www.zoomgov.com/meeting/register/vJlSduyuqj0qHn5KFRBi9zy1dVDWz7D29IE>
 - *July 26, 2023: 1:00 PM – 5:00 PM. Register here:*
https://www.zoomgov.com/meeting/register/vJltf-qrrj8sEsljYpMWASskDA_fFKdE6dg
 - *October 25, 2023: 1:00 PM – 5:00 PM. Register here:*
<https://www.zoomgov.com/meeting/register/vJltdaysqjloG6ATA98V0LnsDz0FBEgQzPg>

- **Rules Review Committee Meetings**

- *February 10, 2023: 1:30 PM – 3:00 PM. Register here:*
https://www.zoomgov.com/meeting/register/vJlsc6hgD8vGToxP3JzsoYzdcl_CtML61o
- *March 8, 2023: 10:00 AM – 11:30 AM. Register here:*
https://www.zoomgov.com/meeting/register/vJldeutrjMqHJtLsOa_Sa8CPIJroUgEqHE
- *March 24, 2024: 2:00 PM – 3:30 PM. Register here:*
https://www.zoomgov.com/meeting/register/vJlsc-2grTorHx4_Hd1Aj98b_9ByoB6BToc
- *April 14, 2023: 1:30 PM – 3:00 PM. Register here:*
<https://www.zoomgov.com/meeting/register/vJlSfuuvqDloGNZXV7pFJfKWqaiqYvQiINk>

Everyone has a right to know about and use Oregon Health Authority (OHA) programs and services. OHA provides free help. Some examples of the free help OHA can provide are:

- Sign language and spoken language interpreters
- Written materials in other languages
- Braille
- Large print
- Audio and other formats

If you need help or have questions, please contact Kimberly Voelker at 971-803-0914, 711 TTY or kimberly.n.voelker@state.or.us at least 48 hours before the meeting.

Oregon Nurse Staffing Advisory Board (NSAB)

Wednesday, October 26, 2022

1:00 PM – 5:00 PM

Meeting Minutes

Cochairs	Debbie Robinson, RN, MSN (presiding); Uzo Izunagbara, DNP, MSN, MHA, RN
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; Chandra Ferrell, CNA
PHD staff present	Dana Selover, MD, MPH; Anna Davis, JD; Kimberly Voelker, MPH; Wendy Edwards, RN; Phyllis Lebo, RN; Cynthia Munoz; Austin Schmidt; Sonya Wasson; Leah Festa; Neelam Gupta; Marc Overbeck; Tip McIntosh
Additional Oregon State employees present	Rep. Travis Nelson; Amy Beth Stevens (Rep. Nelson Office); Jennifer Brown (CRRU)
Guests present	Diana Pisciotta (Adventist Health Tillamook); Aimee Franklin (CHC of Lane County); Donell Owens (Kaiser Sunnyside); Beth Dimler (Lower Umpqua Hospital); Agnes Albert (N. Marion School District); Mindy Brown (SYMPLR); Matt Calzia (ONA); Cristy Simila (ONA); Therese Hooft (ONA); Kelly Kilgore (Samaritan Lebanon); Sarah Lochner (Oregon Coalition); Nancy Deyhle (Sacred Heart Riverbend); Danielle Meyer (OAHHS); Lisa Middleton (OHSU); Erica Swartz (OHSU); Ruth Miles (Salem Health); Jennifer Peterson (St. Anthony); Heather Quartre (St. Charles Redmond); Tessa Robinson (Wash. Co. Public Health); Barbara Davis (Peace Harbor)

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 confirmed their presence on the meeting via roll call. All other individuals present identified themselves.</p> <p>Board co-chair greeted board members and asked that cameras be turned on.</p>	

Agenda Item 2	<i>Minutes</i>
<p>Board co-chair asked if the board had any corrections, additions, or questions about the minutes from the July 2022 Quarterly NSAB meeting.</p> <p>Board co-chair suggested that Guest Present section could be organized by organization.</p> <p>Motion to approve July minutes with suggestion to organize guests by facility: Mariah Hayes Seconded: Uzo Izunagbara Motion passed</p>	

Agenda Item 3	<i>Membership & Program Updates</i>
<p>K. Voelker noted that this board meeting is Board Cochair Debbie Robinson's last NSAB meeting. Board thanked Robinson's service since the beginning of the board and presented a farewell slide. K. Voelker also welcomed P. Lebo and A. Schmidt as new nurse staffing surveyors.</p> <p>K. Voelker stated that there was an open position on the NSAB for a nurse manager member after the October 2022 NSAB meeting. Direct care members were also encouraged to apply. The application pool is valid for two years and is used when vacancies arise.</p> <p>K. Voelker discussed the renewal process for members whose terms were expiring at the end of the year and listed members with expiring terms.</p> <p>The board did not have any additional questions about membership and program updates.</p>	

Agenda Item 4	<i>Status Updates</i>
<p><i>Nurse Staffing Surveys</i></p> <p>K. Voelker presented the survey dashboard for Cycle 2 (2021 – 2023), which reflected the total number of hospitals surveyed in 2021 and 2022, the number of hospitals with acceptable POCs, the number of survey reports in progress, and the number of hospitals on different version numbers of POCs. It included a summary slide for Cycle 2 nurse staffing surveys presented, which illustrated survey logistics such as average timeline for POC</p>	

approval and number of POCs submitted before acceptance. A detailed table of Cycle 2 nurse staffing survey was also included.

Board member asked for clarification regarding the summary (“At a Glance”) slide and the nine hospitals with accepted POCs.

K. Voelker stated that the nine hospitals with accepted POCs were surveyed in 2021 because there were no hospitals surveyed in 2022 that had an accepted POC yet.

Board member suggested the slide should display that the nine hospitals were surveyed in 2021.

A. Davis clarified that the survey data reflects all of Cycle 2 which has not yet concluded and that the number of hospitals with accepted POCs will increase as Cycle 2 progresses.

Board member requested that the full dates for Cycle 2 be included instead of the date the dashboard was drafted.

Nurse Staffing Complaint Investigations

K. Voelker presented the nurse staffing complaint dashboard (2016 – 2022) and explained that unlike the nurse staffing surveys, complaint investigations did not adhere to a cycle schedule. She presented the first slide, which reflected the total number of hospitals investigated, the number of hospitals with revisits in progress, the number of hospitals with reports in progress, and the status of POCs for 2020, 2021, and 2022. The second slide showed a summary of complaint investigations between 2016 and 2022. The final slide included a table of nurse staffing complaints investigated between 2016 and 2022.

Board co-chair asked if the dashboard specified the topic of complaints. Board member was interested in learning the rule areas most often reflected in complaints.

K. Voelker stated that the dashboard did not reflect the underlying allegations but added that anecdotally, the most common complaints pertained to meals and rest breaks and minimum numbers.

Board member asked if there was anywhere for the board to see the complaints that were not investigated.

K. Voelker answered that historically, this information is not presented on the dashboard and that the dashboard only includes complaints that have been investigated.

Board member asked if the number of complaint investigations slide included complaints that were not substantiated.

A. Davis stated that the investigations dashboard included complaints that were not substantiated, but did not include complaints where complainant did not respond to OHA follow-up questions because When the initial complaint does not include enough information

to reflect potential violations of nurse staffing rules and the complainant does not respond to requests for additional information, the complaint is closed without investigation. Complaints referred to other agencies were also not included.

K. Voelker stated that the table of the dashboard displayed whether a complaint was closed because it was unsubstantiated in an investigation

Board member asked why a POC due date was in October 2022 for a report was mailed in March 2022.

K. Voelker answered that hospital in question was on their third POC and the date reflected under "POC due" is for the third POC. The date reflected under "Report Mailed" is from before the first POC was due.

Board member stated that the way the information was presented was confusing because the POC looked like it was received late.

A. Davis stated that the OHA keeps a record of all the dates for every POC received for each hospital, but the dashboards become unwieldy when there are due dates, received dates, response dates included for each POC.

Nurse Staffing Revisits

K. Voelker presented the revisit dashboard, which reflected the total number of standalone revisits conducted, the number of revisits that reflected the hospital had returned to compliance, the number of reports in progress, and the status of POCs following revisits; a summary of information from revisits; and a detailed table reflecting the status of revisits.

The board did not have any questions about the revisits.

Action Item(s)	<ul style="list-style-type: none">OHA to present on complaint topics at the January 2023 quarterly meeting
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Agenda Item 5 *Committee updates*

Rules Review Committee

K. Voelker stated the Rules Review Committee had their first meeting and approved their charter. She stated that the committee had scheduled its next meetings and the committee packet was available on www.healthoregon.org/nursestaffing. She stated that the committee needed an additional nurse manager member because D. Robinson was resigning.

Board member, M. Hayes, volunteered to take the position.

The board did not have any additional questions or comments about the Rules Review Committee.

Civil Monetary Penalties Committee

K. Voelker presented the Civil Monetary Penalties (CMP) Committee Summary Report, which summarized the previous seven committee meetings. She also presented the Civil Monetary Penalty Decision-Making Tool and stated that the tool was included in the NSAB packet.

Board co-chair stated that the board had received comments about the tool.

K. Voelker acknowledged the comment and encouraged public feedback on documents within the packet. She stated that the documents in the board packet were publicly available.

A. Davis noted that comments received the day of the board meeting could be reviewed at a later date when the board had more time to reflect.

Board co-chair recommended feedback and comments should be considered at a later date with more time.

Board member agreed that to the board should fully review and respond to the comments at a future meeting.

Board member asked how much notice was given to those who responded the day of the meeting and how the public would have known that they could send comments.

K. Voelker clarified that OHA had not solicited comments. These comments were received in the nurse staffing mailbox the morning of the NSAB meeting and OHA forwarded them to the NSAB members prior to the meeting.

Board member asked if anyone who submitted comments were present and willing to speak to their comments.

K. Voelker stated that members of the public would be invited to speak during the public comment period at the end of the meeting.

Board member clarified that they were asking if any other board members would like to comment on the feedback now.

K. Voelker explained that many comments had come from members of the public.

Board member stated she was a member of the CMP Committee and that the Committee had not reached a consensus. She supported the board taking more time to receive feedback on the CMP process before implementing it.

Board member did not support waiting longer to implement CMPs.

Board member criticized the number of hospitals that struggle to get an approved POC, given the amount of resources OHA has provided. They were concerned that some hospitals would disregard staffing plans if CMPs were not issued.

Board member emphasized the complexity of providing care in hospitals. They stated that certain findings do not directly correlate to unsafe patient care and that noncompliance does not reflect a lack of desire to meet the law.

A. Davis clarified that the areas that the board member was concerned about not being related to direct patient care, such as documentation of qualifications and competencies, were not necessarily included in the CMP tool as a basis for assessing CMPs.

K. Voelker stated that the CMP Committee's goal was to identify clear, consistent factors that can be applied across Oregon that can be used to determine when to issue a nurse staffing CMP. The recommendation for a point system was derived from the importance of having transparent and measurable factors for determining when noncompliance is such that civil monetary penalties should be issued.

Board member stated that they agree with giving more time for both comments and the board to review feedback.

Board member agreed with other board members and questioned whether it was the right time to issue CMPs. They asked whether there were problems with the nurse staffing surveys that led to hospitals being unable to demonstrate compliance.

Board member stated that having hospitals be penalized for past noncompliance did not make sense.

Board member cited literature regarding hospital capacity strain and noted that most, if not all, hospitals are at capacity.

A. Davis reiterated that the committee was not asked to discuss when the OHA would start issuing CMPs but rather, how does the OHA would know when to issue a CMP for any individual hospital.

Board member expressed frustration surrounding the work that went into the CMP Decision-Making Tool and learning that there were still concerns about the tool. They stated that they did not want to wait to implement the process developed by the committee. They stated that hospitals were still having issues with the same tags as in the first cycle and that CMPs could alleviate those problems.

Board co-chair agreed, stating that delaying CMPs would be the equivalent of ignoring the nurse staffing law.

K. Voelker gave a quick summary of the noncompliance tags that reflected unsafe patient care on page 2 of the CMP tool.

Board member asked whether there were any problems with trying to be in compliance with the tags included in CMP tools.

Board member answered that one of the barriers their facility struggled with was getting a quorum for their meeting despite scheduling efforts. This pertained to tag E652 which is not on this list of tags included in the CMP tool.

Board member asked a follow up question as to why staff is not engaged and unable to form a quorum.

Board member answered the feedback that they received is that their staff is not interested nor do they believe that the nurse staffing committee affects their work that much.

Board co-chair admitted that running a hospital is quite complex and would like to hear directly from staff about lack of engagement.

The board discussed and agreed that patient care should be heavily emphasized with staff to increase engagement if it is genuinely the main motivation.

Board member speculated whether the low engagement is due nursing staff feeling undervalued and unsupported.

Board member stated that their hospital has nurse staffing committee meetings every other month, which is more than is required and allows the committee to still meet quarterly, even if a meeting is missed.

D. Selover thanked the board for their discussion and stated that the point system in the CMP tool was meant to identify the most egregious noncompliance. They asked if the board had suggestions for simplifying the tool.

Board member asked if there was an estimate on how many penalties would have been issued if the tool was in place for past surveys.

A. Davis responded that OHA had created a model using Cycle 1 survey results as if they were the results in a hypothetical Cycle 2 and that the model showed the number of hospitals which would receive penalties was small.

K. Voelker added that the model projected repeated noncompliance points for the Cycle 1 survey model.

Board co-chair asked if the CMP Committee had any more meetings scheduled.

K. Voelker answered that the committee had completed its charter and did not have any additional meetings scheduled.

Board co-chair recommended that OHA schedule an additional meeting for the full board for the end of 2022.

Multiple board members supported this recommendation.

D. Selover added that the additional meeting should have two volunteers from the committee, one nurse manager and one direct care member, that could help plan the meeting.

Board co-chair asked B. Merrifield to volunteer as the nurse manager. B. Merrifield, accepted. Board co-chair asked U. Izunagbara to volunteer as the direct care member. U. Izunagbara accepted.

There were no other questions or comments related to the CMP Committee.

Action Item(s)	<ul style="list-style-type: none">OHA to schedule a full board Ad Hoc meeting to continue the discussion surrounding the CMP Decision Making Tool before the end of the year.
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Agenda Item 6	<i>Annual Legislative Report Update</i>
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K. Voelker stated that the Annual Legislative Report had been shared with the Oregon Legislature as of October 2022. The report was also made available on the Nurse Staffing website (www.healthoregon.org/nursestaffing) so that board members and the public may observe the final version, if interested.

A. Davis provided the direct link to the report on the Nurse Staffing website in the meeting chat.

Board co-chair thanked members for reading and reviewing the report before submitting the final document.

Agenda Item 7	<i>HB 2993 Overview</i>
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D. Selover presented HB 2993 Implementation slides and explained that HB 2993 was a bill which changed the way Rules Advisory Committees (RAC) function and clarified that RACs would need to complete a Statement of Racial Equity Impact for any new rulemaking.

D. Selover explained that this law requires the board to bring in community members and that members of affected communities and of the NSAB would take part in future RACs. She explained that rules may be invalidated if it is determined that an agency does not make a genuine effort to obtain input from communities and information on the impact of racial equity.

Board co-chair asked D. Selover to share to the summary slides with the board.

There were no additional questions or comments about HB 2993.

Agenda Item 8	<i>Break</i>
Board co-chair called for a five-minute break.	
Agenda Item 9	<i>Scheduling 2023 Quarterly Meeting</i>
<p>K. Voelker reminded the board that NSAB Quarterly Meetings are historically scheduled on the last Wednesday of January, April, July, and October. Feedback was requested on whether this schedule was still favored by the board for 2023.</p> <p>Multiple board members approved the existing schedule. K. Voelker shared the schedule for the upcoming year and added that meetings would be from 1pm to 5pm.</p> <p>T. McIntosh stated they would schedule 2023 NSAB meetings and send out meeting invites to board members.</p> <p>K. Voelker added that Nurse Staffing Webinars had been held each Friday for the past six weeks and recordings were posted on the nurse staffing website.</p> <p>Board co-chair thanked for the update. There were no additional questions or comments about scheduling.</p>	

Agenda Item 10	<i>Nurse Workforce Group: Nurse Workforce Shortage & Burnout</i>
<p>K. Voelker introduced OHA coordinators for the OHA Health Care Workforce Committee, Marc Overbeck and Neelam Gupta.</p> <p>M. Overbeck presented slides about the Health Care Workforce (HCWF) Committee which showed when the committee was established, the committee's purpose, funding recommendations, and the current membership. They also shared slides of previous HCWF Committee reports and recommendations.</p> <p>N. Gupta explained upcoming reports, including the Nurse Workforce Study which is required as part of HB 4003. The University of California, San Francisco (UCSF) is a recognized expert in nursing workforce and helped complete the development of the Nursing Study. They described the membership of the advisory group on the Nurse Workforce study.</p> <p>N. Gupta shared the report's conclusions, emphasizing that Oregon's nursing workforce is severely stressed and that widespread nursing shortages exist. They stated that both nurses and employers were concerned about the nurse workload while education programs struggle with growth due to difficulty with recruiting faculty and finding clinical placements for students. Overall, growth in applications and new enrollments in RN programs have slowed over the past three years.</p> <p>Board co-chair asked what methods the committee used when researching nurse burnout.</p> <p>M. Overbeck answered that they used informational interviews and reviewed literature.</p>	

Board co-chair asked if the study group reviewed the impact of nurse acuity and nursing care intensity on nurse burnout and exhaustion.

M. Overbeck answered the final report did not examine the impact of acuity and nursing care intensity on nurse burnout and exhaustion as this was beyond their scope.

Board member asked if the committee investigated how many registered nurses were in Oregon, what percentage of them were where and how they moved around the state.

M. Overbeck noted that this was not his area of expertise but stated that in the first report, the committee was able to investigate the supply of nurses in the state. The data is available on the OHA Healthcare Workforce website.

The board did not have any additional questions or comments related to nurse workforce. Board co-chair thanked M. Overbeck and N. Gupta for their presentation.

Agenda Item 11 | *Nurse Staffing Surveyor discusses survey activities.*

K. Voelker introduced surveyors: Wendy Edwards, Sonya Wasson, Phyllis Lebo, and Austen Schmidt. P. Lebo and A. Schmidt were new surveyors and not yet able to answer questions.

W. Edwards explained how direct care staff are involved with the survey process, stating that direct care participation is helpful in determining where the team needs to expand the survey review and in determining compliance within nurse staffing rules. They noted that a Nurse Staffing Committee Co-Chair Pre-Interview Questionnaire is completed by the direct care co-chair, and it provides information related to nurse staffing committee operations, charter, and annual review of nurse staffing plans. They stated that they interviewed the direct care co-chair.

Usually within the first couple hours after the entrance conference, W. Edwards explained that surveyors select 2 - 5 units that to focus on. The hospital is informed which units are selected and that they will be toured the same day. The hospital is also informed that an interview with a direct care staff within each selected unit will be conducted. W. Edwards explained that in their experience, interviews last between 20 and 60 minutes.

The direct care unit representative and the nurse manager are asked to complete three questionnaires for each unit which cover meal and rest break practices, mandatory overtime, and the unit's nurse staffing plan.

S. Wasson introduced herself and discussed common trends they encountered during revisits, including citations related to minimum numbers and meal and rest breaks.

Board member asked about how the surveyors engage with nurse staffing activities they observe during survey.

W. Edwards stated that surveyors are gathering information during the survey or complaint investigation. They are not consulting or providing immediate feedback, even during the

closing conference. They refer individuals who would like more information about nurse staffing requirements to the website.

A. Davis discussed the work to create a public health nurse position that would facilitate more education and outreach projects, like the webinars.

S. Wasson and W. Edwards agreed that during survey they are not on site to educate although they will clarify certain definitions for the direct care staff so that they may answer interview questions fully.

Board co-chair asked for what information surveyors provide. They suggested standardizing the information given when asked certain questions.

W. Edwards explained that the survey is a very regimented process that requires consistency so any questions about the nurse staffing survey do not receive a flexible answer.

Board co-chair thanked surveyors for the time and welcomed the newest nurse staffing surveyors.

Agenda Item 12	<i>Emerging Issues in Nurse Staffing</i>
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Board co-chair began discussion concerning traveler nurses and how are travelers being prepared to the hospital's standards of care and expectations, as well as ensuring their competencies.

Board co-chair suggested a round table discussion and started with asking nurse managers describing emerging trends related to traveler nurses that they noticed.

Board co-chair recalled when their facility received a large influx of traveler nurses. They noted that it was very difficult to onboard travelers in a way that would set them up for success. On average, it took their hospital about seven days before travelers could take a patient assignment independently. The effort to provide that much orientation felt necessary to ensure the travelers could provide the necessary patient care. Board co-chair was curious about how other hospitals onboard their travelers.

Board member answered that at their facility, they train each traveler on average for about 34 hours and that they require traveler to have 18 months experience as a nurse in a large facility. The hospital monitors travelers through daily interactions with formal leaders. Board member gives credit to their partners who often find very competent traveler nurses for their facility.

Board member stated that their small hospital developed an accelerated orientation for traveler nurses, which would generally last two shifts. Traveler nurse competencies must be demonstrated and not assumed. They stated that the hospital's education nurse then informs the traveler nurse and the nurse manager about what skills need improvement.

Board member stated that the most concerning issue about using traveler nurses is that it is financially draining to invest so much in onboarding short-term contract staff.

Board member stated that traveler nurses at their hospital are most often assigned to ICU and ER.

Board member does not see an end in sight in regards to utilizing traveler nurses and stated that traveler nurses outnumber hospital-employed staff.

Board member stated that at times, training traveler nurses on specific widespread topics such as HIPAA takes too much time. These topics should already be common knowledge within the nursing field.

There were no additional comments on emerging topics.

Agenda Item 13	<i>Public Comment</i>
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K. Voelker announced that there were a few people signed up for public comment. Board co-chair invited members of the public to speak for up to two minutes.

Rep. Travis Nelson asked how often members of the health care team are getting de-escalation training at facilities that board members represent.

Board member answered that their facility requires de-escalation training annually.

D. Selover suggested board members email K. Voelker with their answers and the nurse staffing administrative team would send that information to Rep. Travis Nelson.

Erica Swartz (OHSU) discussed CMPs and advocated for implementation of the CMP process developed by the committee. They stated that hospitals should be held accountable and that delaying CMPs was unacceptable. With goals of accountability and compliance, E. Swartz asked that OHA use its tools to compel hospitals to treat the nurse staffing laws with the gravity that it merits.

K. Voelker asked whether there were any further public comments. There were none.

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

Agenda Item 14	<i>Meeting Adjourned</i>
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These draft minutes have not yet been approved by the NSAB

If you need this information in an alternate format,
please call our office at (971) 673-0540 or TTY 711.

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Oregon Nurse Staffing Advisory Board (NSAB) – Ad Hoc Meeting on Civil Monetary Penalties

Friday, December 2, 2022
3:00 PM – 5:00 PM

Meeting Minutes

Cochairs	Uzo Izunagbara, DNP, MSN, MHA, RN (presiding)
Members present	Barbara Merrifield, MSN, RN; Joel Hernandez, RN; Shannon Edgar, RN, MBA; Lace Velk, RN; Mariah Hayes, MN, RN, NE-BC; Becky Wise, RN
Members absent	Jenni Word, RN; Chandra Ferrell, CNA; Kelsey Betts, RN; Todd Luther, RN, CEN;
PHD staff present	Dana Selover, MD, MPH; Anna Davis, JD; Kimberly Voelker, MPH; Austen Schmidt, RN; Tip McIntosh
Additional Oregon State employees present	Rep. Travis Nelson (House of Representatives), Sam Stark (Oregon Legislative Aide)

Guests present	Anna Holloway (Mercy Health), Aubrey Albalos (OHSU), Barbara Hansen (Oregon Hospice) Becky Kopecky (Providence Health), Beth Dimler (Lower Umpqua Hospital), Brian Pinelle (Mercy Medical Center), Cristie Wiles (Sky Lakes), Christine Bartlett (OHSU), Crystal Smith (Samaritan Albany), Danielle Meyer (OAHHS), Diana Pisciotta (Adventist Tillamook), Elizabeth Paxton (Providence), Ethel Gonzales (ONA), Gareth Fitzpatrick (Cedar Hills Hospital), Ginger Walcutt (St. Charles), Jen Packer (Tuality), Jennifer Brown (Cedar Hills Hospital), Jesse Kennedy (ONA), Judy Geiger (Columbia Memorial Hospital), Julia Floyd (Lower Umpqua Hospital), Julie Ostrom (St. Charles), Kate Kitchell (Providence Medford), Kristen Beck (Legacy Health), Kristin Milligan (LeadingAge Oregon), Laryl Noble (KOBI)
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NSAB Ad Hoc Meeting on Civil Monetary Penalties Minutes
December 2, 2022

	TV), Lora Horn (Providence Portland), Melinda Stibal (Legacy Meridian Park), Monica Tucker (St. Alphonsus Ontario), Pavlina Bevan (Providence Medford), Shauna Cline (St. Alphonsus Baker City), Susan King (staff RN), Therese Hooft (ONA), Tina Thumma (Asante), Tracie Egeland (Providence)
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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. Meeting chat is reserved for NSAB members. The meeting was called to order and members confirmed their presence on the meeting via roll call. All other individuals present identified themselves.</p> <p>Board co-chair greeted board members and explained the purpose of the ad hoc meeting.</p>	

Agenda Item 2	<i>Review Meeting Agenda</i>
<p>K. Voelker described the contents of the ad hoc board packet and stated it is also available on the OHA Nurse Staffing website (www.healthoregon.org/nursestaffing). They briefly summarized each agenda item.</p>	

Agenda Item 3	<i>CMP Committee: Recap</i>
<p>K. Voelker presented the Civil Monetary Penalties (CMP) Committee Overview slides, which included the committee's background, the role of the NSAB and OHA in issuing CMPs, board responsibilities, the definition of safe patient care, the Table 1 – Civil Penalty Assessments table from rule, and the Committee's work on objective measurements of unsafe patient care as represented in nurse staffing surveys and complaint investigations, and factors that indicated a potential or actual threat to patient safety. They also summarized the CMP Decision-Making tool that was developed by the CMP Committee.</p> <p>The board did not have any questions or comments about the CMP Committee Overview slides.</p>	

Agenda Item 4	<i>NSAB Reviews Written Public Comments Received to Date</i>
<p>Board co-chair thanked members of the CMP Committee and the OHA nurse staffing team for their work.</p> <p>Board co-chair noted that the committee had not arrived at a consensus regarding the CMP decision making tool, with some members of the committee having concerns about implementing the CMP process and measurements of unsafe patient care. Others on the committee fully supported the tool and immediate implementation of the proposed CMP process.</p> <p>OHA received eight public statements from interested parties prior to the meeting. Board co-chair discussed themes from the comments, such as concerns about the nurse staffing law being vague and the need for an outcome-based framework. Another theme identified was</p>	

that the CMP decision-making tool be implemented in Cycle 3. They also stated that context was another theme identified.

The board did not have any questions or comments about the written public comments OHA received.

Agenda Item 5	<i>Public Comment</i>
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Board co-chair introduced the public comment period and invited the public to comment on the proposed CMP process. Comments were limited to two minutes.

S. King stated that hospitals had 20 years to comply with the nurse staffing law, but many had ignored it and chosen not to engage in good faith efforts to improve the law. S. King supported the committee's recommendations and stated that the tags identified by the committee reflected indicators for safe and quality patient care. She agreed with the decision to weigh citations repeated noncompliance more heavily. S King supported the decision-making tool and noted that other agencies, such as the Board of Nursing (OSBN), issue CMPs and that OHA should as well. S. King thanked the board for the opportunity to comment.

No other members of the public signed up for public comment.

Board co-chair suggested that the board review the written comments as a group.

Multiple board members supported this recommendation.

Board member requested that the Board co-chair share their screen and they discuss the submitted public comments.

Board co-chair displayed public comments submitted prior to the meeting and the date of submission. Board co-chair quickly read through the themes of the submitted public comments and provided comments on themes.

There were no comments or questions on the written public comments.

Agenda Item 6	<i>NSAB Discusses Written & Oral Public Comment, and Recommendations to OHA on CMP Process</i>
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Board co-chair stated that the goal for this meeting was for the NSAB to vote on the CMP decision-making tool and vote on any additional recommendations.

Board co-chair started a round table to hear from each NSAB member present at the Ad Hoc meeting and they asked K. Voelker to call each member to comment.

K. Voelker suggested board members limit their comments to two minutes and called upon board co-chair.

Board co-chair stated that CMPs are a deterrent, not a punishment. They expressed concern that the nurse staffing law was not being enforced and that nothing would change without OHA enforcement. They stated that this would cause patient care to deteriorate.

K. Voelker called upon board member, Barb Merrifield, to comment.

Board member stated they were a member of the CMP Committee and noted that despite efforts, the committee was not able to come to a consensus on the implementation of the CMP decision-making tool. They expressed concern about the lack of research on the measurements of unsafe patient care and that there was not research demonstrating a causal relationship. Board member suggested delaying the implementation of CMPs.

K. Voelker called upon board member, Shannon Edgar, to comment.

Board member expressed concern that the tags being identified as unsafe care could be related to a documentation error instead of unsafe care. She recommended continued outreach and education before implementing the proposed CMP process.

K. Voelker called upon board member, Mariah Hayes, to comment.

Board member, M. Hayes, commented on how the pandemic affected the available resources and increased the amount of staff needed to provide adequate care. They recommended not implementing CMPs.

K. Voelker called upon board member, Joel Hernandez, to comment.

Board member, J. Hernandez, expressed concern with the lack of enforcement and stated that some hospitals continued to struggle with compliance. They stated that there were numerous nurses leaving the profession due to poor staffing and nurse burnout and noted that issuing CMPs would force hospital to closely examine what can be done to achieve the best staffing and patient care. They supported OHA implementing the proposed CMP process.

K. Voelker called upon board member, Lace Velk, to comment.

Board member, L. Velk, appreciated the thoroughness of the decision-making tool. They stated that CMPs would be a deterrent and would be extremely helpful for direct care nurses in elevating concerns about care and resources to hospitals, as well as promoting collaboration between nurses and their employers. Board member supported implementing the proposed CMP process.

K. Voelker called upon board member, Becky Wise, to comment.

Board member, B. Wise, stated that as a direct care nurse, they fully supported the implementation of CMPs because it would provide more support for nurses.

K. Voelker noted that a board member asked via chat if there was an equal members of direct care nurses and managers from NSAB in the meeting. They answered that there were four direct care nurses and three nurse managers present. They explained that although there was a rule requiring an equal number of direct care and nurse manager members of the hospital Nurse Staffing Committee to vote on any motion, the Nurse Staffing Advisory Board did not have this same requirement and equal numbers was for the board was not included in the statute, rules, or board bylaws.

Board member stated that unequal voting on the board reflected inconsistency in the law because the law stressed the importance of equal voting for hospital nurse staffing committees but not for the board.

Board co-chair concluded the round robin and asked for specific recommendations from the board on implementation of CMPs.

Board member recommended not assessing CMPs at this time and to not approve the decision-making tool at this time. They expressed concern about inconsistency in nurse staffing surveys.

A. Davis asked for examples of inconsistency in the surveys.

Board member provided an example regarding where the law requires hospitals to respond within 30 days, and the OHA may respond within 45 days.

A. Davis clarified that OHA is also required to review and respond to a Plan of Correction (POC) within 30 days. After the POC is accepted, the hospital has 45 days to implement changes from the accepted POC.

Board member stated that CMPs appeared one-sided because hospitals would be penalized if they submitted a late POC, but the penalty is not revoked nor is the OHA penalized for submitting late POC determinations.

Board member shared that during Cycle 1, when their hospital had drafted a second POC, they discovered different tags were unacceptable and they expressed concern with this.

Board member added their experience with documentation requirements, which is why they were concerned with the CMP tool.

K. Voelker acknowledged the concerns regarding the POC process. They asked for specific examples from the board of inconsistencies in what was being cited during the surveys and complaint investigations.

Board member stated that they did not have concerns with the citations but instead with the documentation requirements.

Board member explained that while surveyors were onsite, they were very engaging, but that their report reflected broad noncompliance and seemed inconsistent with the surveyor's calm behavior.

Board member suggested that the CMP decision-making tool be put into place due to some facilities disregarding the law and that OHA must begin holding hospitals accountable.

Board member echoed the need for CMPs and stated that having CMPs as a deterrent may help balance the input of direct care nurses and nurse managers.

D. Selover asked the board what additional outreach and education OHA could do for POCs.

Board member did not have an answer related to POC outreach and education, and stated that it would be helpful if OHA did not look at as large of a timeframe during surveys and investigations.

Board member answered that more clear and constructive feedback would be valuable but did not have any specific examples of this situation.

Board expressed support for CMPs, stating that it prioritized patient care and patient safety.

Board co-chair requested that the board vote on each of the recommendations made by the board.

Motion to recommend that OHA adopt the CMP decision-making tool as written: Lace Velk
Motion seconded: Joel Hernandez
Motion passed (Four ayes and three nays)

K. Voelker read the recommendation to delay implementation of the proposed CMP process until the end of Cycle 3 (2024 - 2026).

Motion to recommend that OHA delay the implementation of the proposed CMP process until Cycle 3 (2024 – 2026): Shannon Edgar
Motion seconded: Mariah Hayes
Motion not passed (Three ayes and four nays)

Motion to recommend that OHA not issue CMPs: Barb Merrifield
Motion seconded: Shannon Edgar
Motion not passed (Three ayes and four nays)

D. Selover informed the board members that OHA was consulting with DOJ on the CMP process.

Agenda Item 7	<i>Summarize meeting, discuss next steps</i>
K. Voelker thanked board for their time to meet and stated that OHA would consider the recommendations made by the board. They stated that OHA would keep the board and members of the public up to date on any decisions OHA made related to CMPs.	

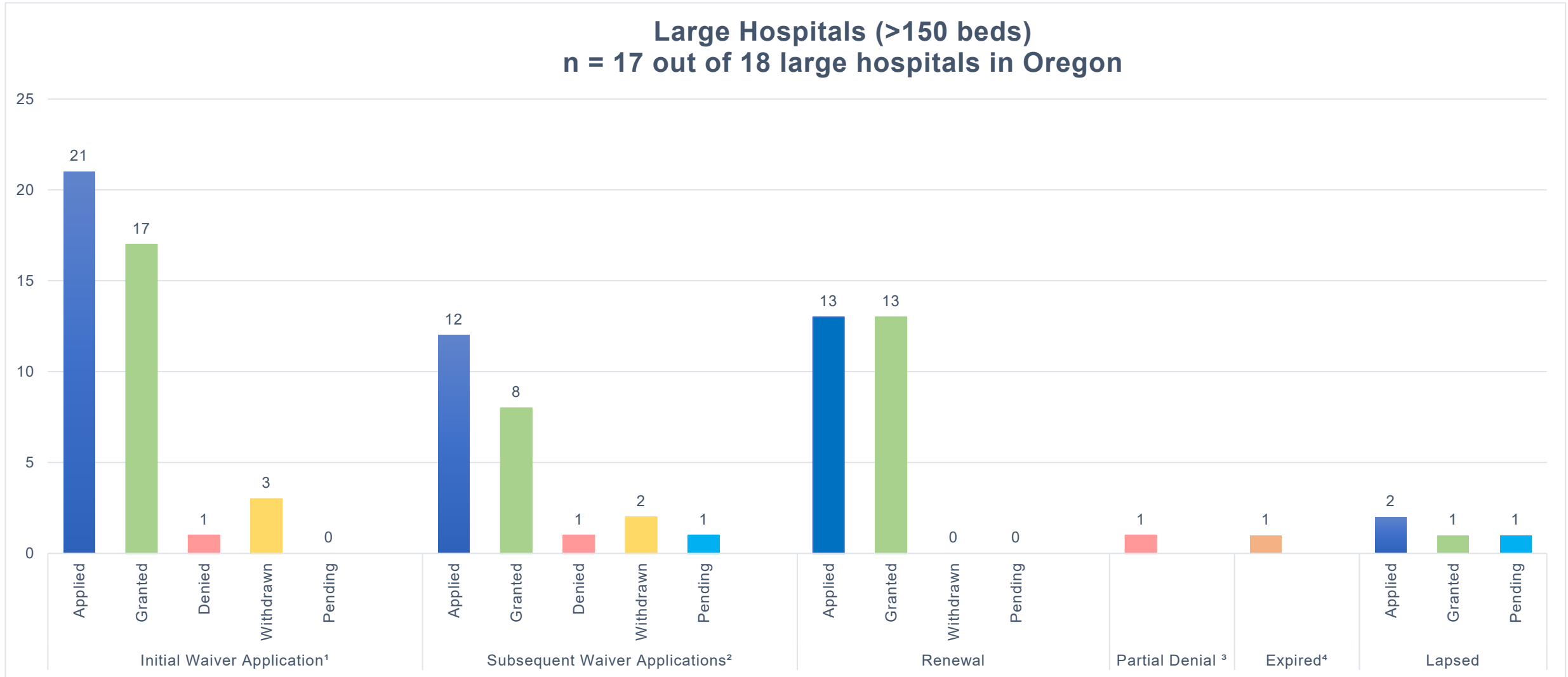
Agenda Item 8	<i>Meeting Adjourned</i>
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These draft minutes have not yet been approved by the NSAB

If you need this information in an alternate format,
please call our office at (971) 673-0540 or TTY 711.

Nurse Staffing Waiver Dashboard 01/12/2023

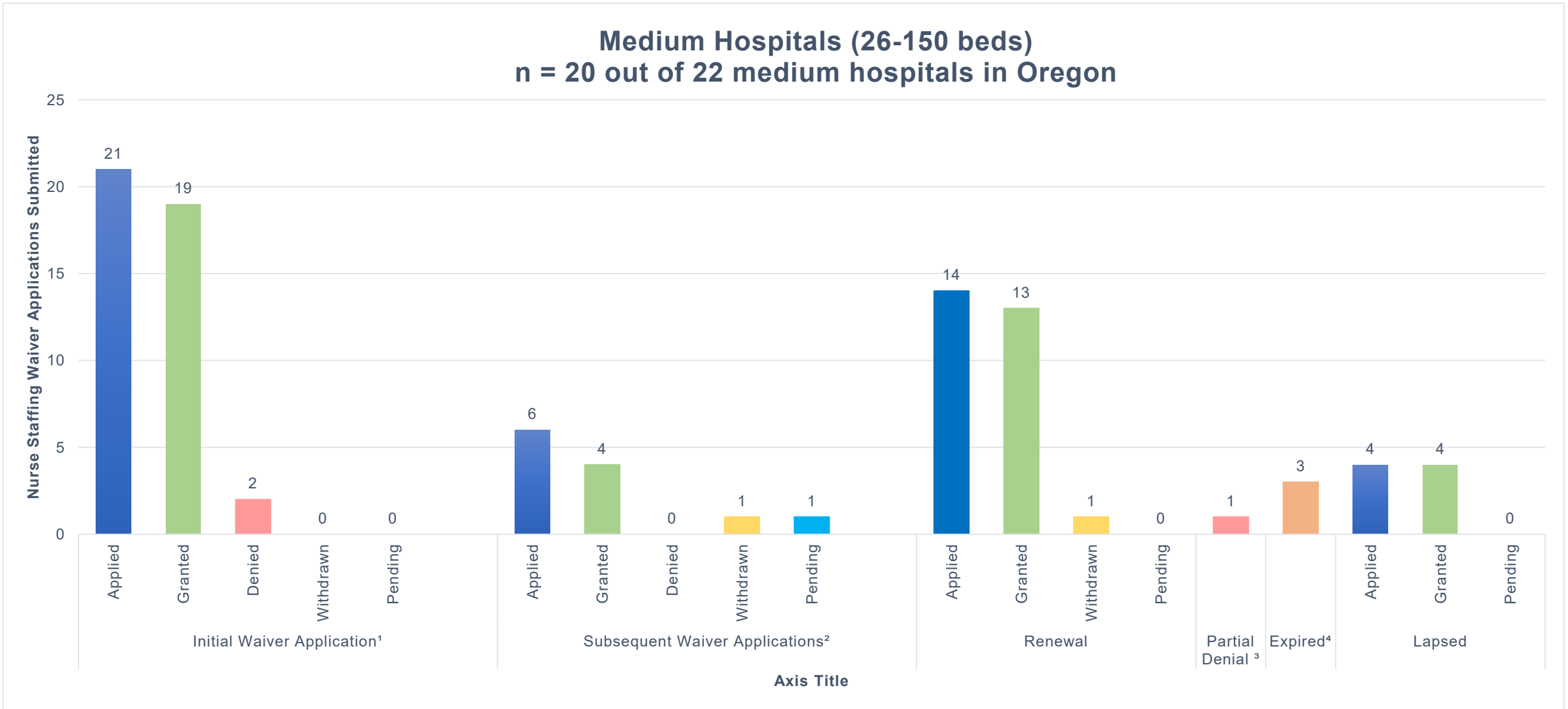
Large Hospitals (>150 beds) n = 17 out of 18 large hospitals in Oregon



1 Refers to the initial nurse staffing waiver application submitted to OHA and eligible to receive a new waiver expiration date; a hospital may have a second waiver considered "Initial" if the first waiver application was denied. A hospital may request multiple units to be covered under an initial request² Refers to those applications submitted after an initial waiver has been approved. If a subsequent waiver is approved, it is given the same expiration date as the initial waiver. Subsequent waiver applications may request multiple units be covered³ Partial denial refers to those applications that request multiple units, with at least one unit in the waiver application being approved for waiver and at least one unit being denied. ⁴ Refers to waivers that exceeded the waiver's expiration date without the hospital submitting a renewal request. OHA sent a reminder to all facilities about nurse staffing waivers in August 2020 via the nurse staffing listserv.

Nurse Staffing Waiver Dashboard 01/12/2023

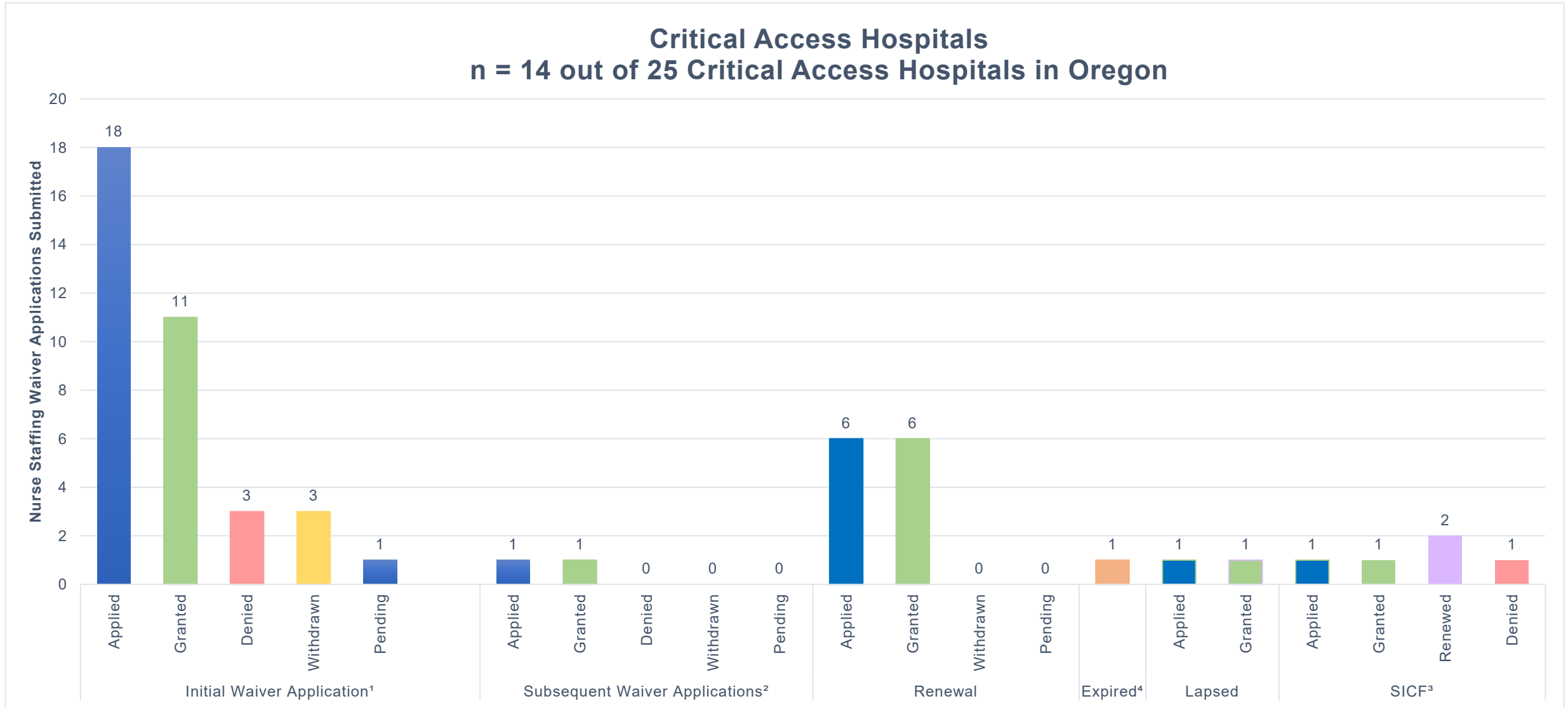
Medium Hospitals (26-150 beds) n = 20 out of 22 medium hospitals in Oregon



¹ Refers to the initial nurse staffing waiver application submitted to OHA and eligible to receive a new waiver expiration date; a hospital may have a second waiver considered "Initial" if the first waiver application was denied. A hospital may request multiple units to be covered under an initial request ² Refers to those applications submitted after an initial waiver has been approved. If a subsequent waiver is approved, it is given the same expiration date as the initial waiver. Subsequent waiver applications may request multiple units be covered ³ Partial denial refers to those applications that request multiple units, with at least one unit in the waiver application being approved for waiver and at least one unit being denied. ⁴ Refers to waivers that exceeded the waiver's expiration date without the hospital submitting

Nurse Staffing Waiver Dashboard 01/12/2023

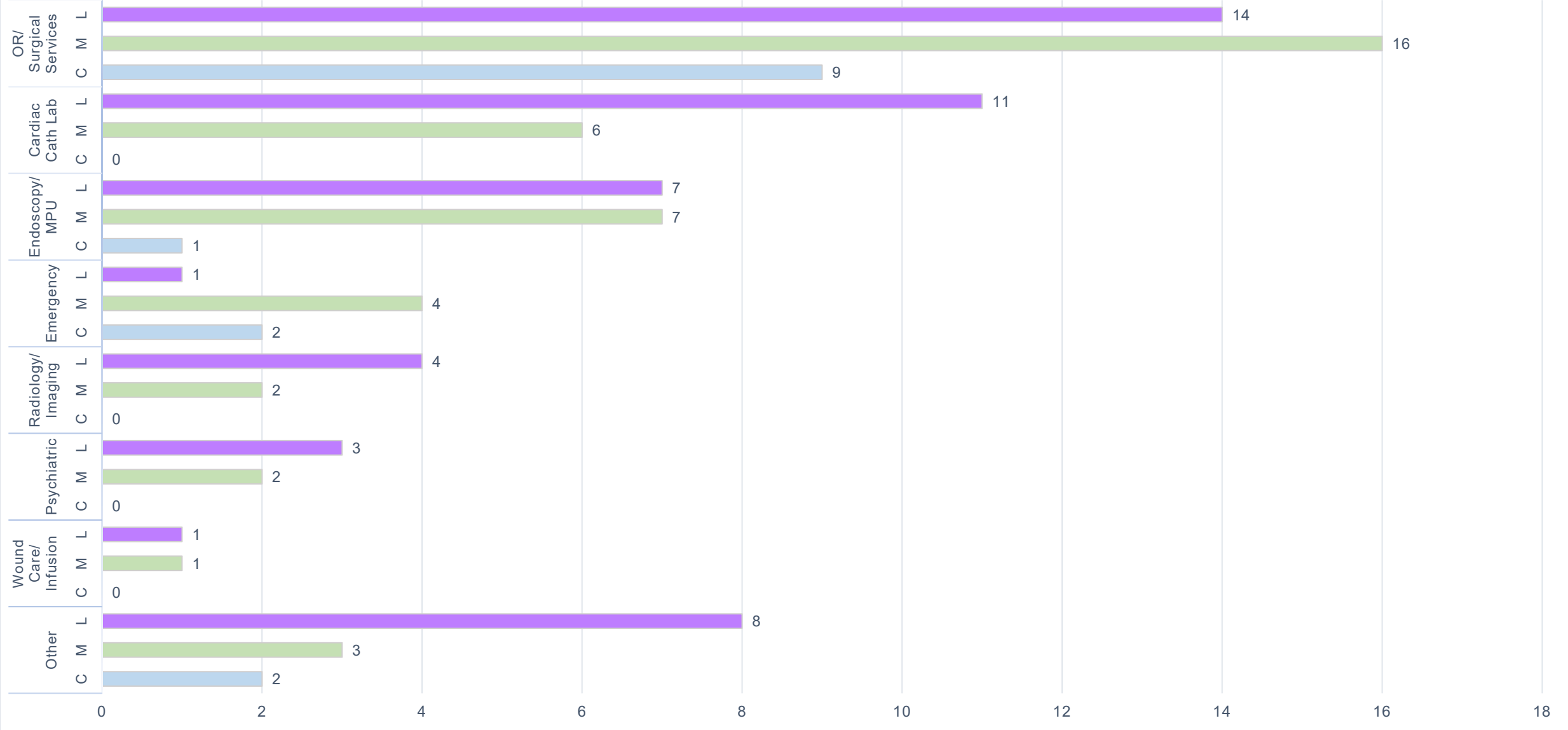
Critical Access Hospitals n = 14 out of 25 Critical Access Hospitals in Oregon



1 Refers to the initial nurse staffing waiver application submitted to OHA and eligible to receive a new waiver expiration date; a hospital may have a second waiver considered "Initial" if the first waiver application was denied. A hospital may request multiple units to be covered under an initial request ² Refers to those applications submitted after an initial waiver has been approved. If a subsequent waiver is approved, it is given the same expiration date as the initial waiver. Subsequent waiver applications may request multiple units be covered ³ Special Inpatient Care Facilities ⁴ Refers to waivers that exceeded the waiver's expiration date without the hospital submitting a renewal request. OHA sent a reminder to all facilities about nurse staffing waivers in August 2020 via the nurse staffing listserv.

Nurse Staffing Waiver Dashboard 01/12/2023

Patient Care Areas Covered by Granted Nurse Staffing Waivers, by Hospital Size



Hospitals with waivers expiring in 2023

12

- Hospitals with waivers that expire in September

9

- Hospitals with waivers that expire in October

Nurse Staffing Surveys: At a Glance

14 Hospitals

- Hospitals with an accepted POC for a full nurse staffing survey

236 Days

- Average number of days from survey entrance to POC approval (just under eight months)

3 POCs

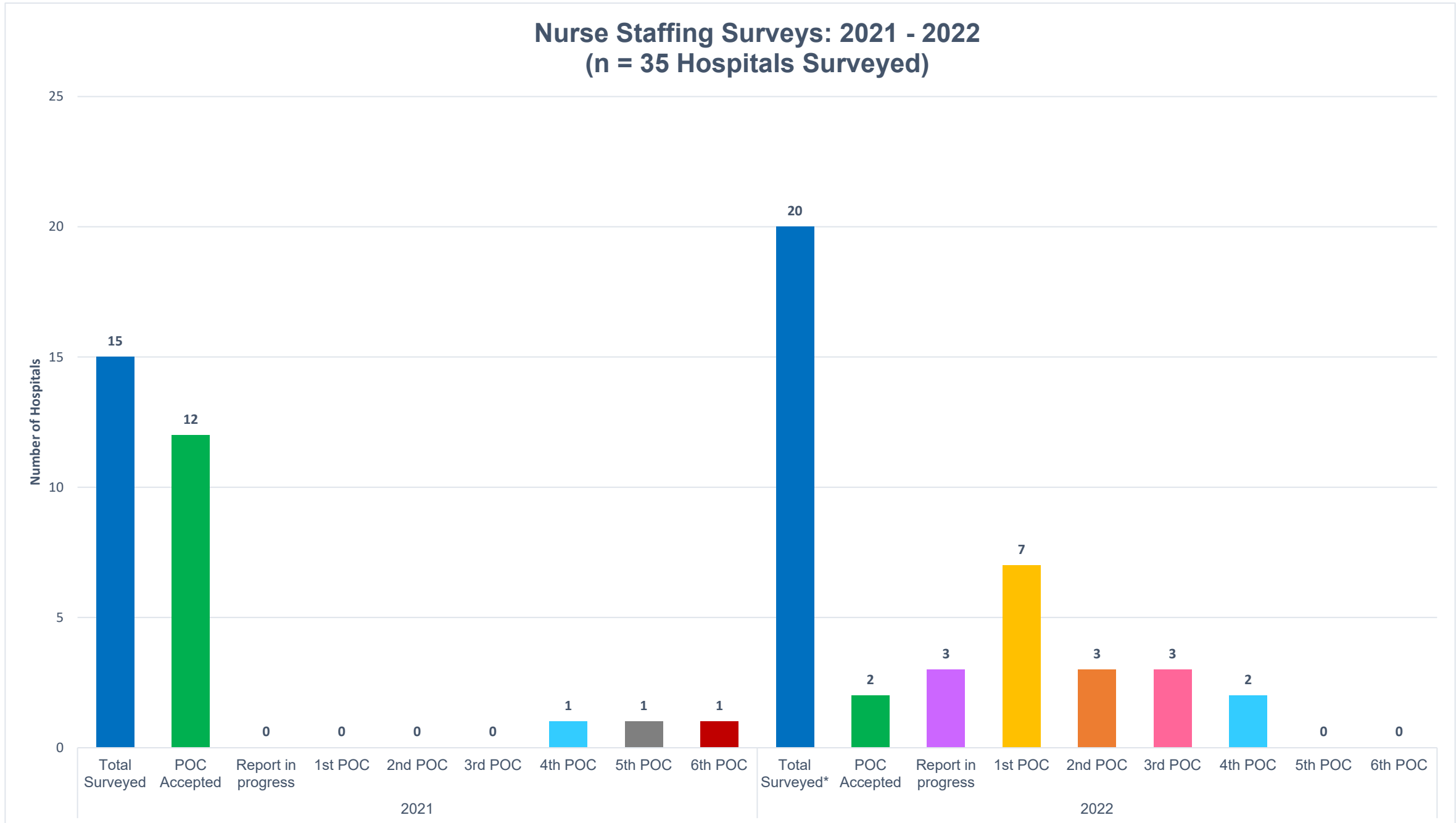
- Of the 14 hospitals with accepted POCs, the average number of POC submissions was 3.

4 Surveys

- OHA has conducted four full nurse staffing surveys since the October 2022 NSAB meeting.

Nurse Staffing Survey Data: CYCLE 2 (2021 - 2023)

Nurse Staffing Surveys: 2021 - 2022 (n = 35 Hospitals Surveyed)



Nurse Staffing Survey Data: CYCLE 2 (2021 - 2023)

#	Hospital	City	Status	Entrance Date	Report due (30 business days after exit)	Report Mailed	POC Due (30 business days after report received)	POC received by OHA	OHA POC Review Due (30 business days after POC received)	POC Approved	Survey to POC Approved
1	Shriners	Portland	Revisit: Passed	3/22/21	5/13/21	5/13/21				6/28/21	71
2	Sacred Heart Riverbend	Springfield	Revisit: Passed	10/5/21	12/1/21	12/1/21				5/11/22	157
3	Samaritan Albany	Albany	Revisit: Passed	6/16/21	8/10/21	8/10/21				6/21/22	265
4	Legacy Emanuel	Portland	Revisit: POC in progress	4/12/21	6/4/21	6/4/21				12/16/21	179
5	Santiam Memorial	Stayton	Revisit: POC in progress	6/29/21	8/23/21	8/23/21				6/2/22	243
6	Curry General Hospital	Gold Beach	Pending Revisit	6/30/21	8/24/21	8/24/21				5/5/22	221
7	Sacred Heart University District	Eugene	Revisit: POC in progress	12/7/21	2/2/22	3/21/22				7/13/22	
8	Asante Ashland	Ashland	Pending Revisit	12/14/21	2/9/22	4/12/22				8/17/22	177
9	Samaritan Lebanon	Lebanon	Pending Revisit	5/18/21	7/13/21	6/24/21				8/31/22	336
10	Legacy Mt Hood	Gresham	Pending Revisit	10/18/21	12/9/21	12/9/21				11/18/22	285
11	Legacy Silverton Hospital	Silverton	Pending Revisit	1/18/22	3/11/22	4/5/22				11/23/22	222
12	OHSU	Portland	Pending Revisit	3/30/21	5/21/21	5/21/21				12/6/22	441
13	St Charles Bend	Bend	Pending Revisit	4/19/22	6/13/22	6/17/22				12/6/22	166
14	Providence Willamette Falls	Oregon City	Pending Revisit	11/2/21	1/14/22	1/13/22				1/6/23	309
15	Adventist Health Tillamook	Tillamook	Sixth	8/10/21	10/13/21	10/13/21	12/15/22	12/2/22	1/18/23		
16	Samaritan North Lincoln	Lincoln City	Fifth	7/20/21	9/13/21	9/15/21	1/9/23	1/9/23	2/22/23		
17	Coquille Valley	Coquille	Fourth	11/16/21	1/13/22	1/31/22	1/20/23	12/14/22	1/30/23		
18	Peace Harbor	Florence	Fourth	1/18/22	3/11/22	4/15/22	1/31/23				
19	Providence St Vincent	Portland	Fourth	3/21/22	5/12/22	5/12/22	2/24/23				
20	Columbia Memorial Hosp	Astoria	Third	3/9/22	6/14/22	6/29/22	1/20/23				
21	St Charles Prineville	Prineville	Third	3/28/22	5/19/22	5/20/22	12/20/22	12/20/22	2/3/23		
22	Harney District Hospital	Burns	Third	5/3/22	6/27/22	7/15/22	1/4/23	1/4/23	2/16/23		

Nurse Staffing Survey Data: CYCLE 2 (2021 - 2023)

#	Hospital	City	Status	Entrance Date	Report due (30 business days after exit)	Report Mailed	POC Due (30 business days after report received)	POC received by OHA	OHA POC Review Due (30 business days after POC received)	POC Approved	Survey to POC Approved
23	Samaritan Pacific Community Hosp	Newport	Second	5/31/22	7/25/22	7/29/22	12/5/22	12/1/22	1/17/23		
24	Grande Ronde Hospital	LaGrande	Second	5/31/22	7/25/22	8/18/22	1/25/23				
25	Providence Hood River	Hood River	Second	8/30/22	10/24/22	10/27/22	2/21/23				
26	Lake District Hospital	Lakeview	First	6/7/22	8/1/22	9/16/22	10/28/22	10/20/22	12/6/22		
27	Mercy Medical Center	Roseburg	First	8/9/22	10/3/22	10/12/22	12/7/22	12/6/22	1/20/23		
28	Providence Milwaukie Hospital	Milwaukie	First	8/16/22	10/10/22	10/18/22	12/16/22	12/16/22	2/1/23		
29	PeaceHealth Cottage Grove	Cottage Grove	First	8/29/22	10/21/22	10/21/22	12/7/22	12/7/22	1/23/23		
30	Willamette Valley Medical Center	McMinnville	First	9/13/22	11/4/22	11/16/22	1/17/23				
31	Salem Health West Valley	Dallas	First	9/20/22	11/14/22	11/18/22	1/5/23	12/23/22	2/28/23		
32	St. Charles Madras	Madras	First	10/18/22	12/14/22	12/18/22	2/7/23				
33	McKenzie-Willamette Medical Center	Springfield	Report in progress	11/8/22	1/6/23						
34	Adventist Health Portland	Portland	Report in progress	11/29/22	2/24/23						
35	Legacy Good Samaritan	Portland	Report in progress	12/5/22	1/31/23						

Nurse Staffing Survey Data CYCLE 1 (2017 - 2019)

#	Hospital	City	Status	Entrance Date	Report due (30 business days after exit)	Report Mailed	POC Due (30 business days after report received)	POC received by OHA	OHA POC Review Due (30 business days after POC received)	POC Approved	Survey to POC Approved
1	Cedar Hills	Portland	Sixth	12/4/19	1/30/20	2/10/20	6/29/22	5/20/22	7/1/22		

Nurse Staffing Investigations: At a Glance

46 Investigations

- OHA has conducted 46 complaint investigations since 2016, representing 110 complaints

75% of Investigations have 1 Complaint

- 75% of investigations include only one complaint. (Note: A single complaint may have multiple allegations.)

Investigations w/
Multiple Complaints

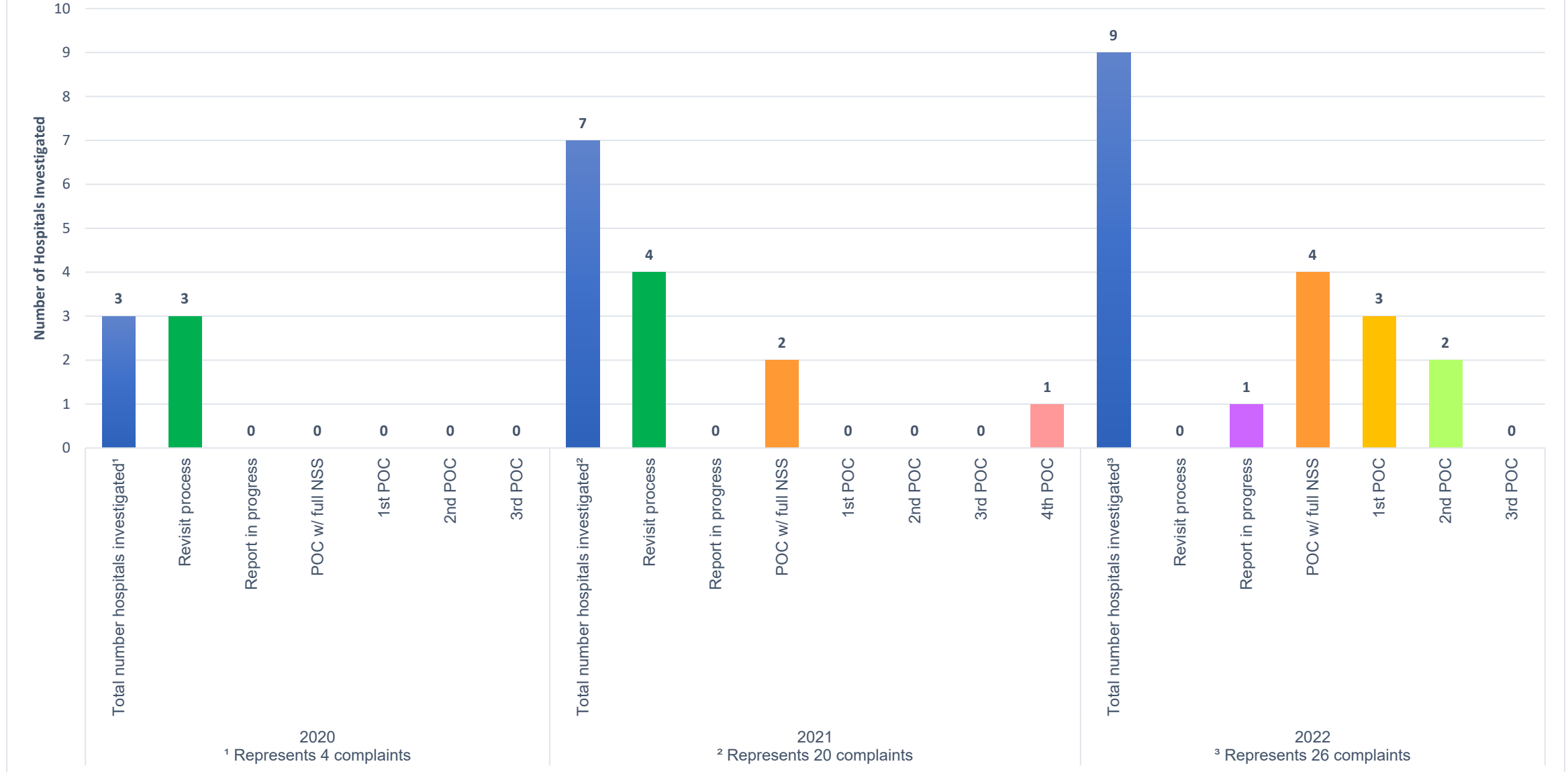
- For the investigations with multiple complaints, the number of total complaints varies. About half of these investigations include 2 -3 complaints; the other half include an average of 13 complaints.

1 Hospital

- OHA has investigated one complaints at four hospitals since the October NSAB meeting.

Nurse Staffing Complaint Dashboard - 1/12/2023

Hospitals with Complaint Investigations: 2020 - 2022 (n = 18 Hospitals)



Nurse Staffing Complaint Investigations - 1/12/2023

#	Hospital	City	Complaint received	Status	Investigation Entrance Date	Report Mailed	POC Due (30 business days after report received)	POC Received by OHA	OHA POC Review Due (30 business days after POC received)	POC approved
1	Sacred Heart Riverbend	Eugene	07/18/2016	Revisit w/ Cycle 2 Survey	10/04/2016	05/15/17				03/05/18
2	Sacred Heart Riverbend	Eugene	08/30/2016	Revisit w/ Cycle 2 Survey	10/04/2016					
3	Columbia Memorial	Astoria	09/08/2016	Revisit w/ Cycle 2 Survey	10/27/2016	06/15/17				06/21/18
4	Providence Medford	Medford	08/12/2016	Pending Revisit	11/08/2016	01/04/18				06/13/19
5	Vibra Specialty Hospital	Portland	02/16/2017	Pending Revisit	03/16/2017	05/08/17				03/05/18
6	Samaritan Albany	Albany	02/15/2017	Revisit w/ Cycle 2 Survey	04/19/2017	Investigation Combined w/ Cycle 1 Survey				
7	St. Charles Bend	Bend	05/12/2017	Revisit w/ Cycle 2 Survey	06/19/2017	Investigation Combined w/ Cycle 1 Survey				
8	Providence Willamette Falls	Oregon City	06/28/2017	Revisit w/ Cycle 2 Survey	08/28/2017	Investigation Combined w/ Cycle 1 Survey				
9	OHSU	Portland	08/31/2017	Revisit w/ Cycle 2 Survey	09/25/2017	Investigation Combined w/ Cycle 1 Survey				
10	OHSU	Portland	04/03/2017	Revisit w/ Cycle 2 Survey	09/25/2017					
11	OHSU	Portland	02/27/2017	Revisit w/ Cycle 2 Survey	09/25/2017					
12	McKenzie Willamette MC	Springfield	09/26/2017	Pending Revisit	01/08/2018	Investigation Combined w/ Cycle 1 Survey				
13	Samaritan Pacific Community Hospital	Newport	09/06/2017	Pending Revisit	01/23/2018	Investigation Combined w/ Cycle 1 Survey				
14	Providence Milwaukie	Milwaukie	06/28/2017	Pending Revisit	02/20/2018	Investigation Combined w/ Cycle 1 Survey				
15	Providence St. Vincent	Portland	01/16/2018	Closed - POC combined w/ NSS POC	02/23/2018	7/8/20	N/A	N/A	N/A	N/A
16	Bay Area Hospital	Coos Bay	11/08/2017	Pending Revisit	04/17/2018	Investigation Combined w/ Cycle 1 Survey				
17	Vibra Specialty Hospital	Portland	12/12/2017	Pending Revisit	07/10/2018	08/03/18				04/22/20
18	Providence Portland Medical	Portland	11/17/2017	Pending Revisit	07/11/2018	08/03/18				05/30/19
19	Providence Newberg Medical	Newberg	10/30/2017	Pending Revisit	07/25/2018	08/03/18				07/18/19
20	Good Samaritan RMC	Corvallis	12/14/2017	Pending Revisit	07/31/2018	08/24/18				08/28/20
21	Providence Medford	Medford	01/04/2018	Pending Revisit	08/08/2018	8/23/18				8/30/19
22	Kaiser Foundation - Westside	Hillsboro	06/21/2018	Pending Revisit	11/06/2018					
23	Kaiser Foundation - Westside	Hillsboro	06/11/2018	Pending Revisit	11/06/2018					
24	Kaiser Foundation - Westside	Hillsboro	07/10/2018	Pending Revisit	11/06/2018					
25	Kaiser Foundation - Westside	Hillsboro	07/31/2018	Pending Revisit	11/06/2018					
26	Kaiser Foundation - Westside	Hillsboro	07/25/2018	Pending Revisit	11/06/2018					

Nurse Staffing Complaint Investigations - 1/12/2023

#	Hospital	City	Complaint received	Status	Investigation Entrance Date	Report Mailed	POC Due (30 business days after report received)	POC Received by OHA	OHA POC Review Due (30 business days after POC received)	POC approved
27	Kaiser Foundation - Westside	Hillsboro	07/26/2018	Pending Revisit	11/06/2018					
28	Kaiser Foundation - Westside	Hillsboro	08/08/2018	Pending Revisit	11/06/2018	Investigation Combined w/ Cycle 1 Survey				
29	Kaiser Foundation - Westside	Hillsboro	10/18/2018	Pending Revisit	11/06/2018					
30	Kaiser Foundation - Westside	Hillsboro	10/09/2018	Pending Revisit	11/06/2018					
31	Kaiser Foundation - Westside	Hillsboro	10/22/2018	Pending Revisit	11/06/2018					
32	Kaiser Foundation - Westside	Hillsboro	11/08/2018	Pending Revisit	11/06/2018					
33	Kaiser Foundation - Westside	Hillsboro	11/08/2018	Pending Revisit	11/06/2018					
34	Kaiser Foundation - Westside	Hillsboro	11/08/2018	Pending Revisit	11/06/2018					
35	Kaiser Foundation - Westside	Hillsboro	11/15/2018	Pending Revisit	11/06/2018					
36	Kaiser Sunnyside MC	Clackamas	06/14/2017	Pending Revisit	02/04/2019	Investigation Combined w/ Cycle 1 Survey				
37	Kaiser Sunnyside MC	Clackamas	07/24/2018	Pending Revisit	02/04/2019					
38	Kaiser Sunnyside MC	Clackamas	07/27/2018	Pending Revisit	02/04/2019					
39	Kaiser Sunnyside MC	Clackamas	07/27/2018	Pending Revisit	02/04/2019					
40	Kaiser Sunnyside MC	Clackamas	07/31/2018	Pending Revisit	02/04/2019					
41	Kaiser Sunnyside MC	Clackamas	10/02/2018	Pending Revisit	02/04/2019					
42	Kaiser Sunnyside MC	Clackamas	10/12/2018	Pending Revisit	02/04/2019					
43	Kaiser Sunnyside MC	Clackamas	11/08/2018	Pending Revisit	02/04/2019					
44	Legacy Meridian Park MC	Tualatin	02/13/2019	Pending Revisit	03/25/2019	Investigation Combined w/ Cycle 1 Survey				
45	Tuality Community Hospital	Hillsboro	06/15/2017	Pending Revisit	04/08/2019	Investigation Combined w/ Cycle 1 Survey				
46	Tuality Community Hospital	Hillsboro	07/31/2017	Pending Revisit	04/08/2019					
47	Tuality Community Hospital	Hillsboro	08/02/2017	Pending Revisit	04/08/2019					
48	Tuality Community Hospital	Hillsboro	08/21/2017	Pending Revisit	04/08/2019					
49	Tuality Community Hospital	Hillsboro	11/06/2017	Pending Revisit	04/08/2019					
50	Tuality Community Hospital	Hillsboro	06/15/2017	Pending Revisit	04/08/2019					
51	Tuality Community Hospital	Hillsboro	07/31/2017	Pending Revisit	04/08/2019					
52	Tuality Community Hospital	Hillsboro	08/02/2017	Pending Revisit	04/08/2019					
53	Tuality Community Hospital	Hillsboro	08/21/2017	Pending Revisit	04/08/2019	Investigation Combined w/ Cycle 1 Survey				
54	Tuality Community Hospital	Hillsboro	11/06/2017	Pending Revisit	04/08/2019					

Nurse Staffing Complaint Investigations - 1/12/2023

#	Hospital	City	Complaint received	Status	Investigation Entrance Date	Report Mailed	POC Due (30 business days after report received)	POC Received by OHA	OHA POC Review Due (30 business days after POC received)	POC approved
55	Samaritan Pacific Community Hospital	Newport	08/10/2018	Revisit w/ Cycle 2 Survey	06/06/2019	9/20/19				5/5/20
56	Providence Medford MC	Medford	03/08/2019	Pending Revisit	07/17/2019	Investigation Combined w/ Cycle 1 Survey				
57	Asante Rogue RMC	Medford	09/24/2018	Pending Revisit	07/22/2019	Investigation Combined w/ Cycle 1 Survey				
58	Sacred Heart Riverbend	Springfield	11/28/2018	Revisit w/ Cycle 2 Survey	08/27/2019	9/20/19				12/3/19
59	Sacred Heart Riverbend	Springfield	06/27/2019	Closed - Unsubstantiated	08/27/2019	9/20/19	N/A	N/A	N/A	N/A
60	McKenzie Willamette MC	Springfield	04/29/2018	Revisit w/ Cycle 2 Survey	08/28/2019	9/20/19				1/29/20
61	Good Samaritan RMC	Corvallis	10/15/2019	Revisit Complete: Passed	08/12/2020	9/15/20				12/1/20
62	Sacred Heart Riverbend	Springfield	10/29/2019	Revisit w/ Cycle 2 Survey	10/01/2020	11/13/20				8/5/21
63	Sacred Heart Riverbend	Springfield	02/24/2020	Revisit w/ Cycle 2 Survey	10/01/2020					
64	Kaiser Westside	Hillsboro	10/29/2019	Pending Revisit	12/14/2020	2/5/21				10/21/21
65	OHSU	Portland	12/16/2019	Pending Revisit	03/30/2021	Investigation Combined w/ Cycle 2 Survey				
66	OHSU	Portland	02/25/2021	Pending Revisit	03/30/2021	Investigation Combined w/ Cycle 2 Survey				
67	St. Charles Bend	Bend	01/06/2020	Revisit w/ Cycle 2 Survey	04/08/2021	6/4/21				8/5/21
68	Legacy Emanuel MC	Portland	01/06/2021	Revisit: POC in progress	05/24/2021	7/8/21	N/A	N/A	N/A	N/A
69	PeaceHealth Cottage Grove	Cottage Grove	09/16/2020	Revisit w/ Cycle 2 Survey	08/04/2021	8/20/21				11/18/21
70	Mercy Medical Center	Roseburg	12/31/2020	Pending Revisit	10/29/2021	11/24/21				2/10/22
71	Providence Willamette Falls	Oregon City	07/01/2021	POC combined w/ NSS	11/02/2021	Investigation Combined w/ Cycle 2 Survey				
72	Kaiser Westside	Hillsboro	04/02/2021	Fourth	11/24/2021				11/23/22	
73	Kaiser Westside	Hillsboro	05/11/2021	Fourth	11/24/2021					
74	Kaiser Westside	Hillsboro	05/11/2021	Fourth	11/24/2021					
75	Kaiser Westside	Hillsboro	05/11/2021	Fourth	11/24/2021					
76	Kaiser Westside	Hillsboro	05/11/2021	Fourth	11/24/2021					
77	Kaiser Westside	Hillsboro	05/11/2021	Fourth	11/24/2021					
78	Kaiser Westside	Hillsboro	07/01/2021	Fourth	11/24/2021	3/10/22	2/21/23			
79	Kaiser Westside	Hillsboro	07/09/2021	Fourth	11/24/2021					
80	Kaiser Westside	Hillsboro	07/09/2021	Fourth	11/24/2021					

Nurse Staffing Complaint Investigations - 1/12/2023

#	Hospital	City	Complaint received	Status	Investigation Entrance Date	Report Mailed	POC Due (30 business days after report received)	POC Received by OHA	OHA POC Review Due (30 business days after POC received)	POC approved
81	Kaiser Westside	Hillsboro	07/09/2021	Fourth	11/24/2021					
82	Kaiser Westside	Hillsboro	07/27/2021	Fourth	11/24/2021					
83	Kaiser Westside	Hillsboro	09/02/2021	Fourth	11/24/2021					
84	Kaiser Westside	Hillsboro	12/29/2021	Fourth	11/24/2021					
85	Columbia Memorial	Astoria	01/07/2022	POC combined w/ NSS	03/09/2022	Investigation combined w/ Cycle 2 Survey				
86	Providence St. Vincent	Portland	11/12/2021	POC combined w/ NSS	03/21/2022	Investigation Combined w/ Cycle 2 Survey				
87	St. Charles Bend	Bend	07/01/2021	Pending Revisit	04/19/2022	Investigation Combined w/ Cycle 2 Survey				
88	Kaiser Sunnyside	Clackamas	03/10/2021	Second	04/21/2022	08/02/2022	12/13/2022	12/08/2022	01/24/2023	
89	Kaiser Sunnyside	Clackamas	03/26/2021	Second	04/21/2022					
90	Kaiser Sunnyside	Clackamas	04/01/2021	Second	04/21/2022					
91	Kaiser Sunnyside	Clackamas	04/07/2021	Second	04/21/2022					
92	Kaiser Sunnyside	Clackamas	04/07/2021	Second	04/21/2022					
93	Kaiser Sunnyside	Clackamas	05/03/2021	Second	04/21/2022					
94	Kaiser Sunnyside	Clackamas	05/11/2021	Second	04/21/2022					
95	Kaiser Sunnyside	Clackamas	05/13/2021	Second	04/21/2022					
96	Kaiser Sunnyside	Clackamas	05/13/2021	Second	04/21/2022					
97	Kaiser Sunnyside	Clackamas	05/19/2021	Second	04/21/2022					
98	Kaiser Sunnyside	Clackamas	05/27/2021	Second	04/21/2022					
99	Kaiser Sunnyside	Clackamas	06/07/2021	Second	04/21/2022					
100	Kaiser Sunnyside	Clackamas	06/07/2021	Second	04/21/2022					
101	Kaiser Sunnyside	Clackamas	06/07/2021	Second	04/21/2022					
102	Kaiser Sunnyside	Clackamas	06/09/2021	Second	04/21/2022					
103	Kaiser Sunnyside	Clackamas	08/10/2021	Second	04/21/2022					
104	Good Samaritan RMC	Corvallis	03/22/2021	Second	08/25/2022					
105	Good Samaritan RMC	Corvallis	07/29/2021	Second	08/25/2022	10/20/2022	02/24/2023			
106	Good Samaritan RMC	Corvallis	09/02/2021	Second	08/25/2022					
107	Willamette Valley	McMinnville	01/27/2022	POC combined w/ NSS	09/13/2022	Investigation Combined w/ Cycle 2 Survey				
108	Tuality Community Hospital	Hillsboro	07/29/2021	First	09/19/2022	11/17/2022	01/04/2023	12/23/2022	02/08/2023	
109	McKenzie Willamette MC	Springfield	07/19/2022	Report in progress	10/05/2022					
110	Sacred Heart Riverbend	Springfield	10/17/2022	First	11/30/2022	01/13/2023	01/03/2023	02/15/2023		

Nurse Staffing Revisits At a Glance

35 Combined Revisits

- OHA has conducted 35 combined revisits since 2021. Combined revisits are revisits for Cycle 1 surveys and/or complaints combined with a Cycle 2 nurse staffing survey.

Average 8 Repeated Noncompliance Citations

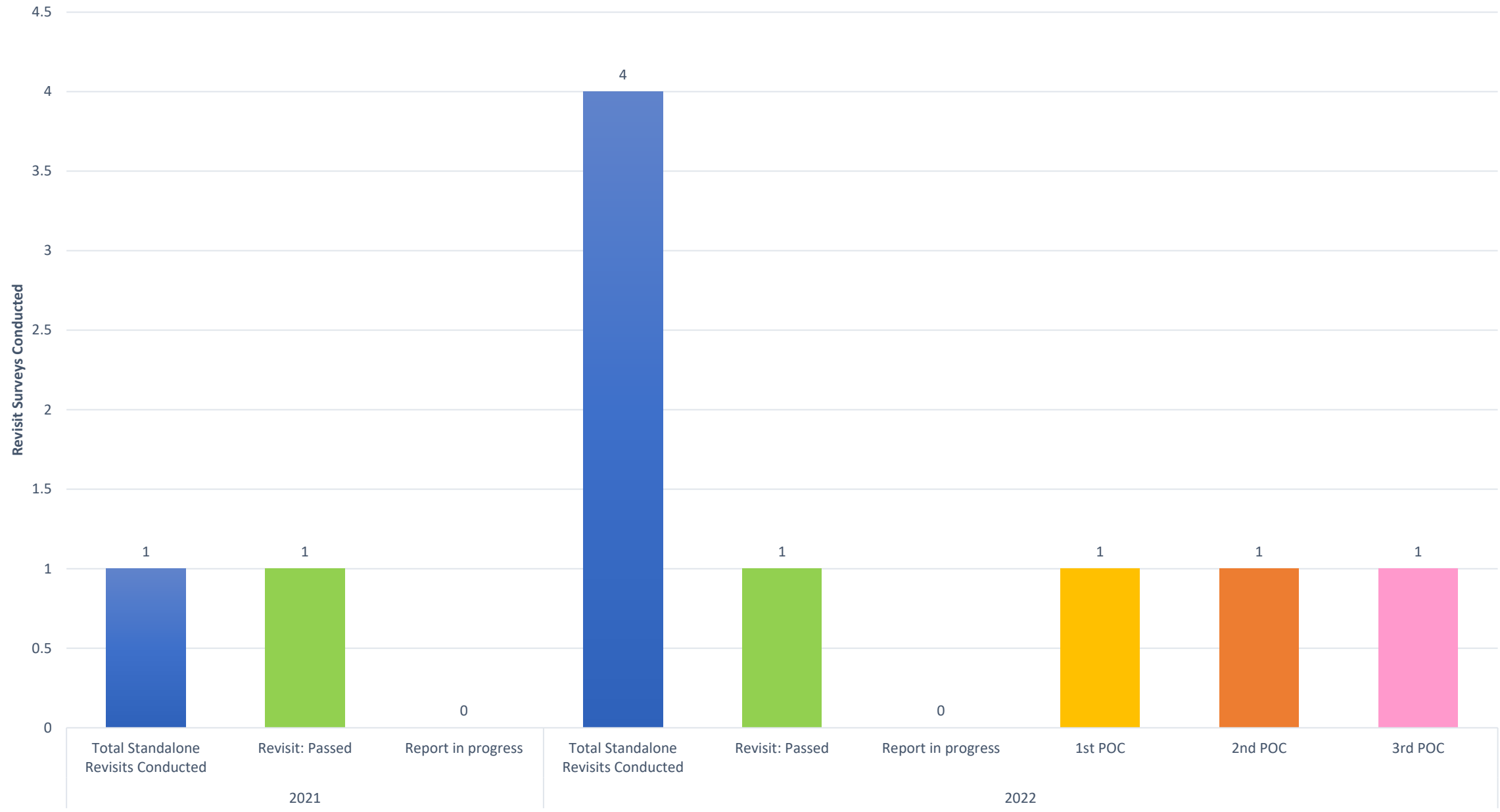
- 30 of 31 hospitals surveyed in Cycle 2 have had repeat noncompliance citations. Hospitals average 8 citations that were cited in a previous survey or complaint investigation.

Half of Standalone Revisits: No Deficiencies

- Early data is showing that almost half (n = 2) of standalone revisits showed the hospital had returned to compliance with the nurse staffing rules.

Nurse Staffing Revisit Surveys - 1/12/2023

Standalone Revisits of Cycle 2 Nurse Staffing Surveys



Standalone Nurse Staffing Survey Revisits: Cycle 2 (2021 - 2023)

#	Hospital	City	Revisit of:	Status	Revisit Due (45 - 60 business days from POC acceptance)	Revisit Entrance Date	Report Due (30 business days after exit)	Report Mailed	Revisit POC Due (30 business days after report mailed)	Date Revisit POC received by OHA	OHA Revisit POC Review Due (30 business days after POC received)	POC Approved
1	Shriners	Portland	2021 NSS	Revisit: Passed	9/20/21	10/27/21	12/9/21	11/2/21	N/A	N/A	N/A	N/A
2	Sacred Heart Riverbend	Springfield	2021 NSS	Revisit: Passed	8/5/22	8/30/22	10/26/22	9/13/22	N/A	N/A	N/A	N/A
3	Samaritan Albany	Albany	2021 NSS	Revisit: Passed	9/15/22	9/6/22	11/1/22	11/1/22	N/A	N/A	N/A	N/A
4	Legacy Emanuel	Portland	2021 NSS & C/o	Third	3/16/22	4/19/22	6/16/22	6/28/22	2/3/23			
5	Santiam Memorial Hospital	Stayton	2021 NSS	Second	8/26/22	8/31/22	10/27/22	9/23/22	1/10/23			
6	Sacred Heart University District	Eugene	2021 NSS	First	10/6/22	9/27/22	11/9/22	11/30/22	1/13/23	1/6/23	2/21/23	
7	Curry General Hospital	Gold Beach	2021 NSS	Pending Revisit	8/1/22							
8	Asante Ashland	Ashland	2021 NSS	Pending Revisit	11/10/22							
9	Samaritan Lebanon	Lebanon	2021 NSS	Pending Revisit	11/29/22							
10	Legacy Silverton	Silverton	2022 NSS	Pending Revisit	2/16/23							
11	Legacy Mt. Hood	Gresham	2021 NSS	Pending Revisit	2/17/23							
12	St. Charles Bend	Bend	2022 NSS & C/o	Pending Revisit	3/6/23							
13	OHSU	Portland	2021 NSS & C/o	Pending Revisit	3/6/23							
14	Providence Willamette Falls	Oregon City	2021 NSS	Pending Revisit	4/4/23							