

# S.B. NO.

**Report Title:**

DLIR; Center for Nursing; Hospitals; Hospital Registered Nurse Staffing Committee; Hospital Registered Nurse Staffing Plan; Nurse-to-Patient Ratio; Civil Penalties; Appeals; Rules; Appropriations

**Description:**

Requires each hospital to establish a Hospital Registered Nurse Staffing Committee by 9/1/2026. Requires the Staffing Committee to adopt and file a Staffing Committee Charter with the Department of Labor and Industrial Relations by 1/1/2027. Requires the Department to develop a Hospital Registered Nurse Staffing Plan Form by 1/1/2027. Requires each Staffing Committee to adopt and file a Staffing Plan, including minimum registered nurse staffing standards, with the Department by 7/1/2027, and annually thereafter. Requires hospitals to implement their Staffing Plan by 7/1/2027, and post the Staffing Plan and staffing schedules in publicly accessible areas. Requires Staffing Committees to receive, review, evaluate, and respond to reports and complaints regarding deviations from the Staffing Plan. Establishes a variance process allowing hospitals to temporarily deviate from their minimum registered nurse staffing standards. Establishes an enforcement framework to be administered by the Department, including review of Staffing Plans, complaint investigations, administrative appeals, and civil penalties for violations. Prohibits retaliation against certain persons who report staffing concerns or participate in enforcement proceedings. Increases the membership of the Center for Nursing Advisory Board to include three elected officers or governing board members of a labor organization representing registered nurses in the State. Requires the Center for Nursing to develop and maintain an online dashboard of staffing standards recommended by certain professional specialty organizations. Requires the Department to adopt rules. Appropriates funds.

*The summary description of legislation appearing on this page is for informational purposes only and is not legislation or evidence of legislative intent.*



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# A BILL FOR AN ACT

RELATING TO STAFFING STANDARDS AT HEALTH CARE FACILITIES.

**BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:**

1           SECTION 1. The legislature finds that the health and  
2 safety of the State's residents depend on ensuring that  
3 registered nurses are supported in providing high-quality,  
4 patient-centered care. The legislature further finds that  
5 adequate nurse-to-patient staffing ratios are critical to  
6 achieving this goal, as they directly impact patient safety,  
7 reduce nurse burnout, and promote nurse retention in the health  
8 care workforce.

9           The legislature recognizes that improving nurse-to-patient  
10 staffing ratios leads to better patient outcomes, enhanced care  
11 quality, and a more sustainable health care system. By  
12 establishing minimum nurse-to-patient staffing ratios and  
13 requiring hospitals to implement and adhere to enforceable  
14 staffing plans, the State can protect its health care workforce,  
15 reduce staff turnover, and ensure that patients receive the  
16 safe, timely care they deserve.

17           Accordingly, the purpose of this Act is to:



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- 1           (1)   Require each hospital to establish a hospital  
2                    registered nurse staffing committee and implement a  
3                    hospital registered nurse staffing plan, with minimum  
4                    registered nurse staffing standards, adopted by the  
5                    staffing committee on an annual basis;
- 6           (2)   Require hospital registered nurse staffing committees  
7                    to receive, review, evaluate, and respond to reports  
8                    and complaints regarding deviations from an adopted  
9                    hospital registered nurse staffing plan;
- 10          (3)   Establish a variance process that allows hospitals to  
11                    temporarily deviate from their minimum registered  
12                    nurse staffing standards under limited circumstances;
- 13          (4)   Establish an enforcement framework to be administered  
14                    by the department of labor and industrial relations,  
15                    including review of staffing plans, complaint  
16                    investigations, administrative appeals, and civil  
17                    penalties for violations;
- 18          (5)   Prohibit retaliation against registered nurses,  
19                    patients, and other persons who report staffing  
20                    concerns or participate in enforcement proceedings;  
21                    and





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1 "Hospital registered nurse staffing committee" or "staffing  
2 committee" means the committee established by a hospital under  
3 section -11.

4 "Hospital registered nurse staffing committee charter" or  
5 "staffing committee charter" means the charter adopted by a  
6 hospital registered nurse staffing committee under  
7 section -13.

8 "Hospital registered nurse staffing plan" or "staffing  
9 plan" means a plan adopted by a hospital registered nurse  
10 staffing committee under section -14.

11 "Patient care unit" means any unit or area of the hospital  
12 that provides patient care.

13 "Registered nurse" means a person licensed under section  
14 457-7.

15 § -2 **Rules.** The department shall adopt rules pursuant  
16 to chapter 91 to effectuate the purposes of this chapter.

## 17 **PART II. HOSPITALS; REGISTERED NURSE STAFFING PLANS**

18 § -11 **Hospital registered nurse staffing committee;**  
19 **membership.** (a) No later than September 1, 2026, each hospital  
20 shall establish a hospital registered nurse staffing committee.



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1           (b) A majority of the members of the staffing committee  
2 shall be registered nurses who are nonsupervisory,  
3 nonmanagerial, and currently providing direct patient care.  
4 These members shall be appointed by the collective bargaining  
5 representative or representatives of the registered nurses;  
6 provided that if there is no collective bargaining  
7 representative, the members shall be selected by their peers.

8           (c) The remaining members of the staffing committee shall  
9 be appointed by the hospital administration; provided that these  
10 members shall include the hospital's chief financial officer,  
11 chief nursing officer, and patient care unit directors or  
12 managers, or their respective designees.

13           (d) The staffing committee shall be co-chaired by two  
14 members. One co-chair shall be selected from among the  
15 registered nurse members of the staffing committee and the other  
16 co-chair shall be selected from among the members appointed by  
17 the hospital administration.

18           (e) Except as otherwise provided in this part, the  
19 presence of a majority of the members of the staffing committee  
20 shall constitute a quorum for the transaction of business.  
21 Except as otherwise provided in this part, the staffing



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1 committee may act by a majority vote of the members present and  
2 voting at a meeting at which a quorum is present.

3 (f) Participation in staffing committee business by  
4 hospital staff shall occur during the staff's scheduled work  
5 time and shall be compensated at the staff's appropriate rate of  
6 pay. Staffing committee members shall be relieved of all other  
7 work duties while attending committee meetings. The hospital  
8 shall provide additional staffing relief as necessary to enable  
9 members to attend staffing committee meetings.

10 **§ -12 Hospital registered nurse staffing committee;**

11 **primary responsibilities.** The primary responsibilities of the  
12 hospital registered nurse staffing committee shall include:

- 13 (1) Annually developing and adopting a hospital registered  
14 nurse staffing plan;
- 15 (2) Conducting a semiannual review of the hospital  
16 registered nurse staffing plan; and
- 17 (3) Receiving, reviewing, evaluating, and responding to  
18 reports and complaints regarding registered nurse  
19 assignments that deviate from the hospital registered  
20 nurse staffing plan in effect.



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1           §   -13 Hospital registered nurse staffing committee  
2 charter; adoption; filing. (a) No later than January 1, 2027,  
3 each hospital registered nurse staffing committee shall adopt a  
4 hospital registered nurse staffing committee charter that  
5 governs the procedures by which the staffing committee carries  
6 out its responsibilities. The charter shall include:

- 7           (1) Roles and responsibilities of the staffing committee;  
8           (2) Schedule for monthly staffing committee meetings, with  
9           provisions allowing for additional meetings as needed;  
10          (3) Operating procedures of the staffing committee,  
11          including procedures to:

12           (A) Ensure regular attendance of members and presence  
13           of necessary quorum, including requiring that the  
14           members receive at least thirty days' advance  
15           notice of meetings;

16           (B) Receive, review, evaluate, and respond to reports  
17           and complaints, including:

18           (i) Recordkeeping procedures, including  
19           documentation of the date each report or  
20           complaint is received; the staffing  
21           committee's initial, contingent, and final



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- 1                   dispositions; and any contingency staffing  
2                   plans or corrective action plans adopted by  
3                   the staffing committee;
- 4                   (ii) Procedures to ensure complaints are resolved  
5                   no later than ninety days after receipt by  
6                   the staffing committee, with provisions  
7                   allowing for an extension of that period by  
8                   a majority vote of the staffing committee;
- 9                   (iii) Review process that affords any hospital  
10                  staff involved in a complaint, and upon the  
11                  request of the staff, their collective  
12                  bargaining representative, an opportunity to  
13                  be heard; and
- 14                  (iv) Notice requirements, including providing  
15                  complainants with written notice of the  
16                  outcome of their complaint;
- 17                  (D) Conduct quarterly reviews of:
- 18                       (i) Hospital staff turnover rates, including  
19                       turnover among newly hired hospital staff  
20                       during the first year of employment; and



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- 1                   (ii) The hospital's workforce development  
2   programs;
- 3           (4) Standards governing the staffing committee's adoption  
4                   of meeting documentation, including meeting minutes,  
5                   attendance records, and description of actions taken;  
6                   and
- 7           (5) Record retention policies requiring staffing committee  
8                   records to be maintained for a minimum period of three  
9                   years; provided that the policies shall be consistent  
10                   with the hospital's document retention policies.
- 11           (b) No later than January 1, 2027, each staffing committee  
12 shall file its charter with the department. Thereafter, each  
13 staffing committee shall file its charter with the department  
14 within thirty days after adoption of any revisions to the  
15 charter. A hospital registered nurse staffing committee charter  
16 shall not be deemed properly filed unless it contains all  
17 information required under subsection (a).

18           **§ -14 Hospital registered nurse staffing plan; minimum**  
19 **registered nurse staffing standard; adoption; filing; penalty.**

- 20           (a) No later than July 1, 2027, and annually thereafter, the  
21 hospital registered nurse staffing committee shall develop a



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1 hospital-wide patient care unit- and shift-based hospital  
2 registered nurse staffing plan. The staffing plan shall serve  
3 as the primary means of ensuring that the hospital is staffed  
4 sufficiently to meet the health care needs of patients and  
5 protect the health and safety of patients and hospital staff.

6 (b) The hospital registered nurse staffing plan shall:

7 (1) Be based on patient needs;

8 (2) Be in a form prescribed by the department, with all  
9 applicable fields completed; provided that the  
10 staffing plan may also include a description of the  
11 hospital, including its size and facility type, and  
12 the additional resources available to support unit-  
13 level patient care;

14 (3) Incorporate minimum registered nurse staffing  
15 standards recommended by professional specialty  
16 organizations, as posted on the online dashboard  
17 developed and maintained by the center for nursing  
18 pursuant to section 304A-1406(5), including minimum  
19 nurse-to-patient ratios for each hospital unit that  
20 are equal to or exceed the minimum ratios recommended  
21 by the professional specialty organizations; provided



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1 that the staffing standards incorporated into the  
2 staffing plan shall be those recommended by  
3 professional specialty organizations selected by a  
4 majority vote of the staffing committee; provided  
5 further that the minimum registered nurse staffing  
6 standards shall include, at minimum, those recommended  
7 by the professional specialty organizations  
8 specifically listed in section 304A-1406(5);

9 (4) Consider the following factors:

10 (A) Patient census, including the total number of  
11 patients assigned to the unit on each shift, and  
12 patient activity, including patient admissions,  
13 discharges, and transfers;

14 (B) Patient acuity, patient type, and the nature and  
15 complexity of care required on each shift;

16 (C) The experience of, and number and relative  
17 percentages of, nursing and ancillary health  
18 personnel;

19 (D) Level of experience and specialty certification  
20 or training of nursing personnel providing care;

21 (E) Applicable national standards, if any;



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- 1 (F) Patient access to timely and appropriate care;
- 2 (G) Need for specialized or intensive equipment;
- 3 (H) Architecture and physical layout of the patient
- 4 care unit, including but not limited to the
- 5 placement of patient rooms, treatment areas,
- 6 nursing stations, medication preparation areas,
- 7 and equipment;
- 8 (I) Availability of non-registered nurse personnel
- 9 who support nursing services on the unit;
- 10 (J) Ability to comply with the terms of an applicable
- 11 collective bargaining agreement and relevant
- 12 state and federal laws and rules, including those
- 13 regarding meals and rest breaks, overtime, and
- 14 on-call shifts; and
- 15 (K) Hospital finances and resources; and
- 16 (5) Not reduce, supersede, or otherwise diminish any
- 17 standards or requirements imposed by state or federal
- 18 law or rules, or by any applicable collective
- 19 bargaining agreement.
- 20 (c) No later than July 1, 2027, and annually thereafter,
- 21 the staffing committee shall adopt a staffing plan developed



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1 pursuant to subsection (a), by a majority vote of the members  
2 present and voting at a meeting at which a quorum is present;  
3 provided that a vote to adopt the staffing plan shall be valid  
4 only if the number of registered nurse members present and  
5 voting exceeds the number of members appointed by the hospital  
6 administration who are present and voting.

7 (d) Notwithstanding any law to the contrary, if a staffing  
8 plan is not adopted pursuant to subsection (c), the staffing  
9 plan most recently adopted shall remain in effect; provided that  
10 the hospital shall be subject to the following daily fines until  
11 a new staffing plan is adopted:

12 (1) \$100 per day for:

13 (A) Hospitals certified as critical access hospitals;

14 (B) Hospitals with fewer than twenty-five licensed  
15 acute care beds in operation; and

16 (C) Hospitals certified by the Centers for Medicare  
17 and Medicaid Services as sole community hospitals  
18 that have fewer than one hundred licensed acute  
19 care beds, have a level III adult trauma center  
20 designation from the department of health, and  
21 are owned and operated by the State; and



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1           (2) \$5,000 per day for all other hospitals.

2           (e) The staffing committee shall conduct a semiannual  
3 review of the staffing plan and revise the plan as necessary.  
4 The review shall assess the hospital's ability to meet the  
5 minimum registered nurse staffing standards in the staffing plan  
6 and address patient care needs, and consider other relevant  
7 information, including information provided by the chief  
8 executive officer pursuant to subsection (f).

9           (f) Before the adoption of a new staffing plan or  
10 semiannual review thereof, the chief executive officer of the  
11 hospital shall submit a report to the staffing committee. The  
12 report shall include:

13           (1) Status of the hospital's implementation of the  
14 staffing plan;

15           (2) Evidence-based staffing information, including  
16 nursing-sensitive quality indicators collected by the  
17 hospital, patient surveys, and the hospital's  
18 recruitment and retention efforts; and

19           (3) Any proposed revisions to the staffing plan.

20           (g) No later than July 1, 2027, each hospital shall  
21 properly file its staffing plan with the department and



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1 thereafter, each hospital shall file its staffing plan annually  
2 and within thirty days after adoption of any revisions to the  
3 staffing plan. A staffing plan shall not be deemed properly  
4 filed unless all applicable fields of the form prescribed by the  
5 department are completed.

6 (h) No later than January 1, 2027, the department shall  
7 develop, in consultation with stakeholders, including hospitals  
8 and labor organizations, a form for hospital registered nurse  
9 staffing plans; provided that the form shall, at minimum,  
10 provide for the factors described in subsection (b) and be  
11 structured to allow patients and the public to clearly  
12 understand and compare staffing patterns and actual staffing  
13 levels across facilities.

14 (i) For the purposes of this section, "acuity" means the  
15 level of patient need for nursing care, as determined by a  
16 nursing assessment.

17 **§ -15 Department review.** (a) The department shall  
18 review each hospital registered nurse staffing committee charter  
19 filed by a staffing committee to determine whether the charter:

20 (1) Is properly filed in a timely manner; and



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1 (2) Includes all information required under  
2 section -13.

3 (b) The department shall review each hospital registered  
4 nurse staffing plan filed by a hospital to determine whether the  
5 staffing plan:

6 (1) Is properly filed in a timely manner;

7 (2) Is in the form prescribed by the department; and

8 (3) Incorporates the minimum registered nurse staffing  
9 standards recommended by professional specialty  
10 organizations, as required in section -14(b)(3).

11 (c) The department shall post on its website:

12 (1) Each hospital registered nurse staffing committee  
13 charter filed with the department;

14 (2) Each hospital registered nurse staffing plan filed  
15 with the department; and

16 (3) A list of hospitals and staffing committees that  
17 failed to file a charter or staffing plan in  
18 compliance with this part.

19 **§ -16 Hospital registered nurse staffing plan;**

20 **implementation; complaints to staffing committee. (a)**

21 Beginning July 1, 2027, each hospital shall implement its



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1 hospital registered nurse staffing plan adopted pursuant to  
2 section -14 and assign hospital staff to each patient care  
3 unit in accordance with the staffing plan.

4 (b) Shift-to-shift adjustments in staffing levels shall be  
5 made only as permitted by the staffing plan and by appropriate  
6 hospital personnel responsible for overseeing patient care  
7 operations. Any individual assigned to a patient care unit who  
8 objects to a shift-to-shift adjustment may submit a complaint to  
9 the staffing committee.

10 (c) Any registered nurse, collective bargaining  
11 representative, patient, or other person may report to, or file  
12 a complaint with, the staffing committee regarding any deviation  
13 from the staffing plan relating to the assignment of registered  
14 nurses in a patient care unit.

15 (d) The staffing committee shall develop procedures to  
16 receive, review, evaluate, and respond to reports and complaints  
17 submitted pursuant to subsections (b) and (c), including  
18 procedures to dismiss a complaint that is not substantiated by  
19 sufficient information and to determine whether a deviation  
20 confirmed by the staffing committee has been resolved by the  
21 hospital. All complaints submitted to the staffing committee



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1 shall be reviewed, regardless of the form or manner in which the  
2 complaint is submitted.

3       **§ -17 Hospital registered nurse staffing plan; posting.**

4 Each hospital shall post, in a publicly accessible area of each  
5 patient care unit, its hospital registered nurse staffing plan  
6 and the staffing schedule for the applicable shift currently in  
7 effect, including the relevant clinical staffing for that shift.  
8 Each hospital shall make the staffing plan and current staffing  
9 levels available to patients and visitors upon request.

10       **§ -18 Variance.** (a) The department may grant a  
11 hospital a variance, not to exceed thirty days, from the minimum  
12 registered nurse staffing standards set forth in a hospital  
13 registered nurse staffing plan adopted pursuant to  
14 section -14, upon a finding of good cause. For the purposes  
15 of this subsection, "good cause" means circumstances in which a  
16 hospital establishes that compliance with the minimum registered  
17 nurse staffing standards is not feasible and granting a variance  
18 will not result in a significant adverse effect on the health,  
19 safety, and welfare of the patients and hospital staff.

20       (b) A hospital seeking a variance shall submit a written  
21 application to the department. The application shall include:



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- 1           (1) A statement justifying the variance and establishing  
2           good cause, including an explanation of the hospital's  
3           inability to comply with the minimum registered nurse  
4           staffing standards in its staffing plan;
- 5           (2) Proposed alternative minimum registered nurse staffing  
6           standards to apply during the variance period;
- 7           (3) Identification of the group or groups of hospital  
8           staff for whom the variance is sought;
- 9           (4) Evidence that the claimed infeasibility, together with  
10          the underlying supporting data, was discussed by the  
11          hospital registered nurse staffing committee on at  
12          least two occasions, including a statement from the  
13          staffing committee describing areas of consensus and  
14          areas of disagreement, if any; and
- 15          (5) Evidence that no later than ten working days before  
16          submitting the variance application, the hospital  
17          provided hospital staff that will be affected by the  
18          variance and if applicable, their collective  
19          bargaining representatives with:
- 20          (A) A copy of the variance application;



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1           (B) Information regarding their right to be heard by  
2           the department during the variance application  
3           review process;

4           (C) Information regarding the process for submitting  
5           a written request for reconsideration pursuant to  
6           subsection (g); and

7           (D) Department's address, phone number, or other  
8           contact information.

9           (c) When warranted by the circumstances of the  
10          application, the department shall afford the hospital, affected  
11          hospital staff, and if applicable, their collective bargaining  
12          representatives, an opportunity to submit oral or written  
13          testimony during the variance application review process.

14          (d) No later than fifteen days after receipt of a complete  
15          variance application, the department shall issue a written  
16          decision and order granting or denying the variance; provided  
17          that the department may extend this fifteen-day period by  
18          providing advance written notice to the hospital and if  
19          applicable, the collective bargaining representatives of  
20          affected hospital staff. The notice shall state the  
21          justification for and duration of the extension, which shall not



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1 exceed an additional fifteen days. The hospital shall provide  
2 notice of any extension to affected hospital staff.

3 (e) Upon a finding of good cause, the department shall  
4 grant the variance. The decision and order granting the  
5 variance shall include:

6 (1) Alternative minimum registered nurse staffing  
7 standards approved;

8 (2) Basis for the department's finding of good cause;

9 (3) Group or groups of hospital staff affected by the  
10 variance; and

11 (4) Period for which the variance is valid; provided that  
12 the variance period shall not exceed thirty days from  
13 the date of issuance.

14 A decision and order denying the variance shall state the  
15 basis for the denial.

16 (f) Upon issuance of a decision and order, the department  
17 shall provide written notice to the hospital and if applicable,  
18 the collective bargaining representatives of affected hospital  
19 staff. The hospital shall provide the notice to affected  
20 hospital staff.



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1           (g) Any hospital, affected hospital staff, or if  
2 applicable, the collective bargaining representative of affected  
3 hospital staff aggrieved by a decision and order of the  
4 department may file a written request for reconsideration with  
5 the director no later than five days after receipt of the  
6 written notice issued pursuant to subsection (f). The request  
7 shall state the grounds upon which the reconsideration is being  
8 sought. Upon receipt of a timely request for reconsideration  
9 and a finding that reasonable grounds for reconsideration exist,  
10 the director may grant reconsideration and, as appropriate,  
11 afford interested parties an opportunity to be heard; provided  
12 that the department's decision and order shall remain in effect  
13 pending completion of the reconsideration process, which shall  
14 be completed no later than ten days after the director's receipt  
15 of the request.

16           (h) The director may revoke or terminate a variance order  
17 at any time; provided that:

18           (1) The reconsideration process under subsection (g), if  
19 invoked, is completed; and

20           (2) Written notice is provided to the hospital and if  
21 applicable, the collective bargaining representative



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1 of affected hospital staff at least five days before  
2 the effective date of the revocation or termination.

3 The hospital shall provide the notice to affected  
4 hospital staff.

5 (i) If the department finds that immediate action is  
6 necessary pending further review, the department may issue a  
7 temporary variance, which shall remain in effect until the  
8 department determines whether good cause exists to grant a  
9 variance. A hospital shall not be required to satisfy the  
10 requirements in subsection (b) (4) to obtain a temporary  
11 variance. If a temporary variance is granted, the department  
12 shall issue a final decision and order granting or denying the  
13 variance within the fifteen-day period specified in subsection  
14 (d), and no extension of that period shall be permitted. The  
15 duration of the temporary variance shall be counted toward the  
16 thirty-day maximum variance period specified in subsection  
17 (e) (4).

18 (j) Any hospital granted a variance pursuant to this  
19 section shall:

20 (1) No later than five days after receipt of the  
21 department's written notice approving the variance,



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1 provide written notice to affected hospital staff of  
2 the variance period and the minimum registered nurse  
3 staffing standards applicable during that period;

4 (2) Make the information described in paragraph (1)  
5 readily accessible to all hospital staff for the  
6 duration of the variance period; and

7 (3) Comply with the applicable minimum registered nurse  
8 staffing standards and all other terms and conditions  
9 of the variance during the variance period.

10 (k) The director may establish additional variance  
11 eligibility criteria by rule.

12 § -19 **Complaints; investigations; contingency staffing**  
13 **plan; corrective action plan; exceptions.** (a) Any person may  
14 file a complaint with the department alleging a violation of  
15 this part; provided that no complaint shall be filed after the  
16 expiration of sixty days after the date:

17 (1) Upon which the alleged violation occurred; or

18 (2) Of the last occurrence in a pattern of ongoing  
19 violations.

20 (b) Upon receipt of a timely complaint, the department  
21 shall investigate the allegations in the complaint and, no later



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1 than ninety days after the filing of the complaint, issue either  
2 a citation and notice of assessment or notice of case closure;  
3 provided that, for good cause, the department may extend this  
4 ninety-day period by providing advance written notice to the  
5 hospital and the complainant, specifying the justification for  
6 and duration of the extension.

7 (c) If the department finds, based on its investigation,  
8 that a violation has occurred, the department shall issue a  
9 citation and notice of assessment; provided that a hospital  
10 shall not be found in violation of section -14 or -16(a)  
11 if:

12 (1) The department finds that the deviation from the  
13 requirements of this chapter resulted from  
14 unforeseeable emergent circumstances; and

15 (2) In case of a deviation from the staffing standards set  
16 forth in the hospital registered nurse staffing plan,  
17 the hospital demonstrates through documentation that  
18 the hospital, after consultation with its hospital  
19 registered nurse staffing committee, made reasonable  
20 efforts to obtain and retain sufficient staffing to



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1 meet the required staffing assignments but was unable  
2 to do so.

3 (d) If the violation found by the department pertains to  
4 the hospital's compliance with its staffing plan:

5 (1) No later than thirty days after the department's  
6 issuance of a citation and notice of assessment, the  
7 hospital shall:

8 (A) Implement a contingency staffing plan. Upon the  
9 issuance of the citation and notice of  
10 assessment, the hospital shall report to the  
11 hospital registered nurse staffing committee its  
12 assessment of staffing needs and proposed plan to  
13 address those needs. Upon receipt of the report,  
14 the staffing committee shall develop a  
15 contingency staffing plan to address the  
16 identified staffing needs. The hospital shall  
17 implement and remain in compliance with the  
18 contingency staffing plan until the department  
19 approves a corrective action plan submitted  
20 pursuant to subparagraph (B); and



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- 1 (B) Submit a corrective action plan to the department  
2 for approval. The corrective action plan shall:
- 3 (i) Be developed in consultation with the  
4 staffing committee; and
- 5 (ii) Describe the corrective actions the hospital  
6 will implement to remedy the violation and  
7 prevent recurrence;
- 8 (2) The department shall review the corrective action plan  
9 submitted by the hospital and issue a written notice  
10 approving, approving with modifications, or rejecting  
11 the plan. The department shall not approve a  
12 corrective action plan that fails to remedy the  
13 violations found;
- 14 (3) The hospital shall implement an approved corrective  
15 action plan and demonstrate compliance for a period of  
16 ninety consecutive days, unless otherwise directed by  
17 the department; and
- 18 (4) Any hospital that fails to timely submit a corrective  
19 action plan, fails to obtain the department's approval  
20 of a corrective action plan, or fails to remain in  
21 compliance with an approved corrective action plan



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1 shall be subject to the following daily fines for each  
2 violation found by the department, until the  
3 department determines that the hospital has complied  
4 with an approved corrective action plan for a period  
5 of ninety consecutive days:

6 (A) \$100 per day for:

7 (i) Hospitals certified as critical access  
8 hospitals;

9 (ii) Hospitals with fewer than twenty-five  
10 licensed acute care beds in operation; and

11 (iii) Hospitals certified by the Centers for  
12 Medicare and Medicaid Services as sole  
13 community hospitals that have fewer than one  
14 hundred licensed acute care beds, have a  
15 level III adult trauma center designation  
16 from the department of health, and are owned  
17 and operated by the State; and

18 (B) \$5,000 per day for all other hospitals;

19 provided that the department may reduce the total  
20 amount of accrued fines upon a determination that the



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1 hospital has remained in compliance with an approved  
2 corrective action plan for ninety consecutive days.

3 (e) The department shall issue a notice of case closure  
4 if:

5 (1) The department finds, based on its investigation, that  
6 the alleged violation did not occur or cannot be  
7 substantiated by evidence;

8 (2) A violation that has been found by the department has  
9 been remedied and any assessed fines have been paid;  
10 or

11 (3) The complaint has otherwise been resolved.

12 The notice of case closure shall include the basis of the  
13 department's determination.

14 (f) Any citation, notice, or other document issued by the  
15 department pursuant to this section shall be sent to the last  
16 known addresses of the complainant and hospital by certified or  
17 registered mail, return receipt requested, and deliverable to  
18 the addressee only.

19 (g) Nothing in this section shall be construed to limit  
20 the department's authority to initiate an investigation or take



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1 enforcement actions on its own motion or pursuant to any other  
2 law.

3 (h) For the purpose of this section:

4 "Reasonable efforts" means that the hospital has exhausted  
5 and documented the following efforts and nevertheless remains  
6 unable to obtain required staffing coverage:

7 (1) Soliciting qualified hospital staff who are currently  
8 working to volunteer for additional work hours;

9 (2) Contacting qualified hospital staff who have indicated  
10 availability to work additional hours;

11 (3) Seeking coverage through per diem staff; and

12 (4) Seeking personnel from a contracted temporary staffing  
13 agency to the extent permitted by law and any  
14 applicable collective bargaining agreement; provided  
15 that the hospital customarily utilizes a contracted  
16 temporary staffing agency.

17 "Unforeseeable emergent circumstances" means:

18 (1) Any unforeseen national, state, or county emergency;  
19 or

20 (2) Activation of a hospital's disaster plan.



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1           §    **-20 Appeals.** (a) Any person aggrieved by a citation  
2 and notice of assessment issued by the department pursuant to  
3 this part may appeal the citation and notice of assessment by  
4 filing a notice of appeal with the director within thirty days  
5 after the person's receipt of the citation and notice of  
6 assessment issued and sent by the department pursuant to  
7 section       -19.

8           (b) The timely filing of a notice of appeal pursuant to  
9 this section shall stay the effectiveness of the citation and  
10 notice of assessment until issuance of an initial order by the  
11 hearing officer; provided that if the initial order is appealed,  
12 the stay shall remain in effect until issuance of a decision and  
13 order by the director.

14           (c) Upon receipt of a timely notice of appeal, the  
15 director shall assign the matter to a hearings officer to  
16 conduct a hearing and issue an initial order. The hearing shall  
17 be conducted de novo and in accordance with chapter 91.

18           (d) Any party aggrieved by an initial order may file a  
19 petition for administrative review with the director within  
20 thirty days after service of the initial order.



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1           (e) The director shall conduct administrative review in  
2 accordance with chapter 91, and upon completion of the review,  
3 issue a written findings of fact, conclusions of law, decision,  
4 and order, which shall be subject to judicial review in  
5 accordance with chapter 91.

6           (f) Any citation, notice of assessment, or order that is  
7 not appealed within the time periods specified in this section  
8 or chapter 91 shall be final and binding, and shall not be  
9 subject to further administrative or judicial review.

10          (g) A hospital that fails, without good cause, to permit  
11 adequate inspection of records requested by the department  
12 within a reasonable time during an investigation conducted  
13 pursuant to this part shall be precluded from using those  
14 records in any appeal under this section.

15          §    **-21 Retaliation prohibited.** No hospital shall  
16 discharge, expel, threaten, intimidate, take adverse employment  
17 action, or otherwise discriminate or retaliate against:

18           (1) A registered nurse for performing any duties or  
19               responsibilities in connection with the hospital  
20               registered nurse staffing committee;



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1           (2) A registered nurse, patient, or any other person for  
2           opposing, reporting, or submitting a complaint to the  
3           staffing committee, hospital administration, or a  
4           public body regarding that person's concerns about a  
5           hospital's compliance with this chapter, including  
6           registered nurse assignments;

7           (3) A registered nurse, patient, or any other person for  
8           testifying, assisting, or participating in any  
9           proceeding relating to a hospital's compliance with  
10          this chapter, including investigations, hearings, and  
11          inquiries held by a public body, and court actions; or

12          (4) A registered nurse for refusing to work overtime that  
13          is not required by law or an applicable collective  
14          bargaining agreement.

15          §    **-22 Violation; penalty.** (a) Except as otherwise  
16 provided in this part, any hospital that fails to file a  
17 hospital registered nurse staffing plan with the department  
18 pursuant to section       -14 or any hospital registered nurse  
19 staffing committee that fails to file its staffing committee  
20 charter pursuant to section       -13 shall be fined \$25,000.



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1 (b) Any hospital that otherwise violates this chapter  
2 shall be fined:

3 (1) Not more than \$1,000 for each of the first three  
4 violations;

5 (2) \$2,500 for the fourth violation; and

6 (3) \$5,000 for the fifth and each subsequent violation.

7 (c) At any time, the department may waive or reduce a  
8 civil penalty assessed under this section if the director  
9 determines that the hospital has taken corrective action to  
10 resolve the violation.

11 (d) Any action taken to impose or collect the penalty  
12 provided for in this chapter shall be considered a civil action.

13 (e) The department shall:

14 (1) Maintain for public inspection records of all civil  
15 penalties imposed on hospitals and all other  
16 administrative actions taken by the department against  
17 hospitals pursuant to this chapter; and

18 (2) Post on its website all violations of this chapter  
19 found by the department.

20 § -23 **Critical access hospitals.** Nothing in this part  
21 shall be construed to impose unreasonable burdens on critical



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1 access hospitals, as designated pursuant to title 42 United  
2 States Code section 1395i-4. Critical access hospitals may  
3 develop flexible approaches to comply with the requirements of  
4 this part, including but not limited to having their hospital  
5 registered nurse staffing committees meet or conduct business by  
6 video conference, telephone, or electronic communication."

7 SECTION 3. Section 304A-1404, Hawaii Revised Statutes, is  
8 amended by amending subsection (b) to read as follows:

9 "(b) The dean of the school of nursing and dental hygiene,  
10 or the dean's designee, shall direct the activities of the  
11 center for nursing. There shall be an advisory board composed  
12 of [~~nine~~] twelve voting members, a majority of whom shall be  
13 nurses or representatives of nursing organizations, appointed by  
14 the governor pursuant to section 26-34 to staggered terms,  
15 including:

16 (1) Five members who are nurses with an active Hawaii  
17 nursing license, including but not limited to:

18 (A) A nursing executive;

19 (B) An advanced practice registered nurse;

20 (C) A nurse affiliated with a nurse collective  
21 bargaining organization; and



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- 1 (D) A doctorally-prepared nurse educator or a
- 2 doctorally-prepared nurse researcher; ~~and~~
- 3 (2) Four members who have a background or experience in
- 4 health care delivery, finance, workforce,
- 5 representation of hospitals and acute care hospitals
- 6 of the State, and community agencies or consumer
- 7 groups~~[-]~~; and
- 8 (3) Three members who are elected officers or governing
- 9 board members of a labor organization representing
- 10 registered nurses in the State.

11 The center may invite other members of the public with specific  
 12 backgrounds to participate as ex officio, nonvoting members."

13 SECTION 4. Section 304A-1406, Hawaii Revised Statutes, is  
 14 amended to read as follows:

15 "[~~§~~304A-1406~~§~~] **Center for nursing; functions.** The  
 16 center for nursing shall:

- 17 (1) Collect and analyze data and prepare and disseminate
- 18 written reports and recommendations regarding the
- 19 current and future status and trends of the nursing
- 20 workforce;



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- 1           (2)   Conduct research on best practices and quality  
2           outcomes;
- 3           (3)   Develop a plan for implementing strategies to recruit  
4           and retain nurses; [~~and~~]
- 5           (4)   Research, analyze, and report data related to the  
6           retention of the nursing workforce[~~-~~]; and
- 7           (5)   Develop and maintain a current, publicly accessible,  
8           online dashboard that tracks and displays staffing  
9           standards recommended by the following professional  
10          specialty organizations:
- 11          (A)   American Association of Critical-Care Nurses;
- 12          (B)   Emergency Nurses Association;
- 13          (C)   Association of Women's Health, Obstetric and  
14          Neonatal Nurses;
- 15          (D)   American Society of PeriAnesthesia Nurses;
- 16          (E)   Association of periOperative Registered Nurses;
- 17          (F)   Oncology Nursing Society;
- 18          (G)   Academy of Medical-Surgical Nurses;
- 19          (H)   American Psychiatric Nurses Association;
- 20          (I)   Society of Pediatric Nurses; and
- 21          (J)   American Nephrology Nurses Association;



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1           provided that the center for nursing may, in  
2           consultation with its advisory board, track and post  
3           on the online dashboard staffing standards for a  
4           nursing specialty or sub-specialty established or  
5           recommended by regulation or statute in other states,  
6           by recognized authorities in other countries, and by  
7           other professional associations."

8           SECTION 5. There is appropriated out of the general  
9 revenues of the State of Hawaii the sum of \$                    or so  
10 much thereof as may be necessary for fiscal year 2026-2027 to  
11 implement and enforce section 2 of this Act.

12           The sum appropriated shall be expended by the department of  
13 labor and industrial relations for the purposes of this Act.

14           SECTION 6. There is appropriated out of the general  
15 revenues of the State of Hawaii the sum of \$                    or so  
16 much thereof as may be necessary for fiscal year 2026-2027 for  
17 the center for nursing to develop and maintain an online  
18 dashboard pursuant to section 4 of this Act.

19           The sum appropriated shall be expended by the university of  
20 Hawaii for the purposes of this Act.



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1           SECTION 7. This Act does not affect rights and duties that  
2 matured, penalties that were incurred, and proceedings that were  
3 begun before its effective date.

4           SECTION 8. Statutory material to be repealed is bracketed  
5 and stricken. New statutory material is underscored.

6           SECTION 9. This Act shall take effect upon its approval;  
7 provided that sections 5 and 6 shall take effect on July 1,  
8 2026.

9

INTRODUCED BY: \_\_\_\_\_



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