

107TH CONGRESS
2D SESSION

H. R. 4654

To amend the Public Health Service Act to provide programs to improve nurse retention, the nursing workplace, and the quality of care.

IN THE HOUSE OF REPRESENTATIVES

MAY 2, 2002

Mrs. MCCARTHY of New York (for herself and Mrs. BONO) introduced the following bill; which was referred to the Committee on Energy and Commerce

A BILL

To amend the Public Health Service Act to provide programs to improve nurse retention, the nursing workplace, and the quality of care.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Nurse Retention and
5 Quality of Care Act of 2002”.

6 **SEC. 2. FINDINGS.**

7 Congress finds the following:

8 (1) The current nurse workforce is aging, and
9 the average age of practicing registered nurses is
10 43.3 years, representing an increase of 5.9 years

1 since 1983. This means that the nursing workforce
2 is aging at twice the rate of other occupations in the
3 United States, and the enrollment in nursing pro-
4 grams has decreased in the past 5 years. Many hos-
5 pitals around the country are reporting vacancy
6 rates for nursing positions.

7 (2) Studies have shown a correlation between
8 higher nurse staffing levels and reduction in adverse
9 patient outcomes, including risk of infection, shock,
10 upper gastrointestinal bleeding, and increased length
11 of stay.

12 (3) Retention problems are contributing to the
13 nursing shortage problem. According to a 2001 sur-
14 vey, 50 percent of nurses say they have recently con-
15 sidered leaving the nursing profession for reasons
16 other than retirement.

17 (4) A majority of those individuals who are con-
18 sidering leaving nursing express a low level of overall
19 job satisfaction, and their lack of participation in de-
20 cisionmaking is a major factor contributing to dis-
21 satisfaction.

22 (5) Magnet hospitals are hospitals that have re-
23 organized care to be more participatory, collabo-
24 rative, and patient-centered and as a result are able
25 to attract more nurses.

1 (6) Even in times of nursing shortages, magnet
2 hospitals enjoy low turnover. The average length of
3 employment for registered nurses in magnet hos-
4 pitals is 8.35 years, which is twice the length of em-
5 ployment in hospitals generally, and magnet hospital
6 nurses consistently report greater job satisfaction
7 than other nurses.

8 (7) Magnet hospitals report lower mortality
9 rates, higher patient satisfaction, and greater cost-
10 efficiency, with patients experiencing shorter stays in
11 hospitals and intensive care units.

12 **SEC. 3. AMENDMENT.**

13 Title VIII of the Public Health Service Act (42
14 U.S.C. 296 et seq.) is amended by adding at the end the
15 following:

16 **“PART H—INITIATIVES TO IMPROVE NURSE RE-**
17 **TENTION, THE NURSING WORKPLACE, AND**
18 **THE QUALITY OF CARE**

19 **“SEC. 851. DEVELOPING MODELS AND BEST PRACTICES IN**
20 **NURSING CARE.**

21 “(a) PROGRAM AUTHORIZED.—From amounts ap-
22 propriated under section 853, the Secretary shall award
23 grants to eligible entities to enable the eligible entities to
24 carry out demonstrations of models and best practices in
25 nursing care for the purpose of developing innovative

1 strategies or approaches for retention of professional
2 nurses.

3 “(b) DEFINITIONS.—In this section:

4 “(1) ELIGIBLE ENTITY.—The term ‘eligible en-
5 tity’ means a health care facility, or any partnership
6 or coalition containing a health care facility and a
7 collegiate, associate degree, or diploma school of
8 nursing.

9 “(2) HEALTH CARE FACILITY.—The term
10 ‘health care facility’ means a hospital, clinic, skilled
11 nursing facility, long-term care facility, home health
12 care agency, federally qualified health center, rural
13 health clinic, public health clinic, nurse managed
14 health center, or any other entity as designated by
15 the Secretary.

16 “(c) PRIORITY.—In awarding grants under this sec-
17 tion (other than awarding grant extensions under sub-
18 section (e)(2)), the Secretary shall give priority to appli-
19 cants that have not yet been designated as a magnet hos-
20 pital by the American Nurses Credentialing Center.

21 “(d) DISTRIBUTION OF GRANTS.—Grants awarded
22 under this section shall be distributed among a variety of
23 geographic regions, and among a range of different types
24 and sizes of facilities, including facilities located in rural,
25 urban, and suburban areas.

1 “(e) DURATION OF GRANTS.—

2 “(1) THREE-YEAR GRANTS.—A grant awarded
3 under this section shall be awarded for a period of
4 not greater than 3 years.

5 “(2) GRANT EXTENSIONS.—A grant awarded
6 under this section may be extended if the grantee
7 demonstrates that—

8 “(A) as determined by the Secretary based
9 on the factors described in paragraph (3), the
10 grantee has significantly improved the quality
11 of its workplace for nurses and has enhanced
12 patient care; or

13 “(B) after the original award of the grant,
14 the grantee was designated as a magnet hos-
15 pital by the American Nurses Credentialing
16 Center.

17 “(3) PREFERENCE.—In awarding grant exten-
18 sions under this subsection, the Secretary shall give
19 preference to entities that have—

20 “(A) significantly increased retention rates
21 for professional nurses;

22 “(B) significantly reduced rates of work-
23 place injuries for professional nurses; and

24 “(C) significantly reduced rates of nursing-
25 sensitive adverse patient outcomes.

1 “(4) MAXIMUM DURATION OF GRANTS.—The
2 total maximum duration of a grant under this sec-
3 tion shall not be greater than 6 years.

4 “(f) USE OF FUNDS.—An eligible entity that receives
5 a grant under subsection (a) shall use funds received
6 under the grant to carry out demonstrations of models and
7 best practices in nursing care for the purpose of—

8 “(1) promoting retention and satisfaction of
9 professional nurses;

10 “(2) promoting collaboration and communica-
11 tion among health care professionals;

12 “(3) promoting nurse involvement in organiza-
13 tional and clinical decisionmaking processes;

14 “(4) organizing care to enhance the satisfaction
15 of professional nurses, improve the nursing work-
16 place environment, and promote the quality of nurs-
17 ing care;

18 “(5) promoting opportunities for professional
19 nurses to pursue education, career advancement, and
20 organizational recognition;

21 “(6) promoting high quality of patient care—

22 “(A) by enhancing institutional measure-
23 ment of quality outcomes, including identifica-
24 tion and measurement of nursing-sensitive pa-
25 tient outcomes;

1 “(B) by basing the development of policies,
2 procedures, guidelines, and organizational sys-
3 tems on research findings and patient outcomes
4 measurement, including nursing-sensitive pa-
5 tient outcomes measurement; and

6 “(C) by involving professional nurses in de-
7 veloping and implementing ways to measure
8 and improve the quality of care;

9 “(7) promoting a balanced work-life environ-
10 ment; and

11 “(8) offering such other activities as may be de-
12 termined by the Secretary to enhance the workplace
13 environment for professional nurses.

14 “(g) APPLICATION.—

15 “(1) IN GENERAL.—An eligible entity desiring a
16 grant under subsection (a) shall submit an applica-
17 tion to the Secretary at such time, in such manner,
18 and containing such information as the Secretary
19 may reasonably require.

20 “(2) CONTENTS.—An application submitted
21 under paragraph (1) shall—

22 “(A) include a description of the project
23 proposed to be carried out with grant funds;

1 “(B) demonstrate the eligible entity’s com-
2 mitment to the project through a statement
3 describing—

4 “(i) the involvement of high-level execu-
5 tive management, trustees, nurse leader-
6 ship, and medical staff in designing, imple-
7 menting, and overseeing the project;

8 “(ii) the designation of key personnel
9 and management structures to design, im-
10 plement, and oversee the project;

11 “(iii) any actions that the eligible en-
12 tity has already taken that contribute to
13 developing innovative models and ap-
14 proaches for retention of professional
15 nurses; and

16 “(iv) the eligible entity’s funding or
17 any evidence of other contributions and
18 commitment for the project, along with in-
19 formation on overall project budget and
20 funding resources; and

21 “(C) include information regarding the re-
22 tention rate and occurrence of workplace inju-
23 ries to nurses at the entity applying for such
24 grant and any other information as the Sec-
25 retary may reasonably require.

1 **“SEC. 852. SURVEY AND EVALUATION.**

2 “The Secretary, in consultation with the Agency for
3 Healthcare Research and Quality and the Health Re-
4 sources and Services Administration shall—

5 “(1) conduct an annual survey of the projects
6 carried out under section 851 and provide to Con-
7 gress the results of such survey beginning not later
8 than 2 years after the date of enactment of the
9 Nurse Retention and Quality of Care Act of 2002;
10 and

11 “(2) develop and provide to Congress, not later
12 than December 30, 2007, a final report that—

13 “(A) evaluates the projects funded by
14 grants under section 851; and

15 “(B) includes findings about best practices
16 and the impact on patients and staff of employ-
17 ing participatory, collaborative, and patient-cen-
18 tered models of nursing care.

19 **“SEC. 853. AUTHORIZATION OF APPROPRIATIONS.**

20 “(a) GRANTS.—There is authorized to be appro-
21 priated to carry out section 851, \$20,000,000 for the pe-
22 riod of fiscal years 2002 through 2007.

23 “(b) SURVEY AND EVALUATION.—There is author-
24 ized to be appropriated to carry out section 852,

1 \$2,500,000 for the period of fiscal years 2002 through
2 2007.”.

