Of the Senate - Filed February 28, 2007; March 7, 2007, read first time and referred to Committee on Health and Human Services; March 26, 2007, reported adversely, with favorable Committee Substitute by the following vote: Yeas 8, Nays 0; March 26, 2007, sent to printer.) 1-2 1-3 1-4 1-5 1-6 By: Nelson 1-7 COMMITTEE SUBSTITUTE FOR S.B. No. 993 1-8 A BILL TO BE ENTITLED 1-9 AN ACT 1-10 relating to nursing peer review and the regulation of the practice 1-11 of nursing. BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS: 1-12 SECTION 1. Section 301.002, Occupations Code, is amended by adding Subdivisions (1-a) and (1-b) to read as follows:

(1-a) "Chief nursing officer" means the registered 1-13 1-14 1-15 nurse who is administratively responsible for the nursing services 1-16 at a facility. 1-17 (1-b) "Patient safety committee" has the meaning assigned by Section 303.001.

SECTION 2. Subsection (b), Section 301.303, Occupations "Patient safety committee" has the meaning 1-18 1-19 1-20 1-21 Code, is amended to read as follows: 1-22 (b) The board may not require participation in more than a total of 20 hours of continuing education in a two-year licensing 1-23 period [and may not require that more than 10 hours of the continuing education consist of classroom instruction in approved programs. The remaining hours of continuing education may consist 1-24 1-25 1-26 of any combination of: 1-27 [(1) classroom instruction; [(2) institutional-based instruction; or 1-28 1-29 1-30 [(3) individualized study]. SECTION 3. The heading to Subchapter I, Chapter 301, 1-31 1-32 Occupations Code, is amended to read as follows: 1-33 SUBCHAPTER I. REPORTING VIOLATIONS AND PATIENT CARE CONCERNS [DUTY 1-34 TO REPORT VIOLATION 1-35 SECTION 4. Section 301.401, Occupations Code, is amended to 1-36 read as follows: 1-37 Sec. 301.401. DEFINITIONS [GROUNDS FOR REPORTING NURSE]. 1-38 In this subchapter: nurse that: "Conduct subject to reporting" means conduct by a 1-39 1-40 1-41 (A) violates this chapter or a board rule and contributed to the death or serious injury of a patient; 1-42 1-43 (B) causes a person to suspect that the nurse's practice is impaired by chemical dependency or 1-44 drug or alcohol 1-45 abuse; 1-46 constitutes abuse, exploitation, fraud, or a violation of professional boundaries; or 1-47 (D) indicates that the nurse lacks knowledge, skill, judgment, or conscientiousness to such an extent that the nurse's continued practice of nursing could reasonably be expected 1-48 1-49 1-50 1-51 to pose a risk of harm to a patient or another person, regardless of 1-52 whether the conduct consists of a single incident or a pattern of 1-53 behavior. (2) "Minor incident" means conduct by a nurse that does not indicate that the nurse's continued practice poses a risk 1-54 1-55 1-56 of harm to a patient or another person. (3) "Nursing educational program" means an educational program approved by the board that may lead to an initial license as a registered nurse or vocational nurse. 1-57 1-58 1-59 (4) "Nursing student" means an individual 1-60 enrolled in a nursing educational program [(a) Except as provided by Subsection (b), the following are grounds for reporting a nurse 1-61 1-62

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under Section 301.402, 301.403, 301.405, or 301.407:

C.S.S.B. No. 993

likely exposure by the nurse of a patient or other an unnecessary risk of harm;

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2-68 2-69 unprofessional conduct by the nurse;

 $[\frac{3}{}]$ failure by the nurse to adequately patient;

[(4) failure by the nurse to conform to the minimum acceptable nursing practice; or

[(5) impairment or likely impairment of the nurse's actice by chemical dependency].

[(b) Subsection (a) does not apply to a minor incident, as defined by Section 301.419, if the incident is not required to be reported under a rule adopted under Section 301.419.

SECTION 5. Subsections (b) and (e), Section 301.402, Occupations Code, are amended to read as follows:

- (b) A nurse shall report to the board in the manner prescribed under Subsection (d) if the nurse has reasonable cause to suspect that:
- (1) another nurse has engaged in conduct subject to reporting [is subject to a ground for reporting under Section 301.401]; or
- the ability of a nursing student to perform the (2) services of the nursing profession would be, or would reasonably be expected to be, impaired by chemical dependency.
- (e) Instead of reporting to the board under Subsection (b),

a [A] nurse may make a report required under:

(1) Subsection (b)(1) to a nursing peer review committee under Chapter 303; or

(2) Subsection (b)(2) to the nursing educational program in which the student is enrolled [instead of reporting to the board].

SECTION 6. Section 301.403, Occupations Code, is amended to read as follows:

- Sec. 301.403. DUTY OF PEER REVIEW COMMITTEE TO REPORT. (a) Except as provided by Subsection (b), a [A] nursing peer review committee operating under Chapter 303 that determines that a nurse has engaged in conduct subject to reporting [has a ground for reporting a nurse under Section 301.401] shall file with the board a written, signed report that includes:
 - (1) the identity of the nurse;
- (2)a description of any corrective action taken against the nurse;
- (3) a recommendation [statement] whether the [nursing peer review committee recommends that the] board should take formal disciplinary action against the nurse and the basis for the recommendation;
- (4)a description of the conduct subject to [ground for reporting;
- (5) the extent to which any deficiency in care provided by the reported nurse was the result of a factor beyond the nurse's control [rather than a deficiency in the nurse's judgment, knowledge, training, or skill]; and
 - (6) any additional information the board requires.
- A report under Subsection (a) is not required if: (1) the nursing peer review committee determines that the reported conduct was a minor incident that is not required to be reported under board rule; or
- (2) the nurse has been reported to the board for the conduct under Section 301.405.

SECTION 7. Section 301.404, Occupations Code, is amended to read as follows:

Sec. 301.404. DUTY OF NURSING EDUCATIONAL PROGRAM TO REPORT. [(a) In this section, "nursing educational program" and

"nursing student" have the meanings assigned by Section 301.402(a).

[(b)] A nursing educational program that has reasonable cause to suspect that the ability of a nursing student to perform the services of the nursing profession would be, or would reasonably be expected to be, impaired by chemical dependency shall file with the board a written, signed report that includes the identity of the student and any additional information the board requires.

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3-67 3-68 3-69 SECTION 8. Subsections (b), (c), and (e), Section 301.405, Occupations Code, are amended to read as follows:

- (b) A person that terminates, suspends for more than seven days, or takes other substantive disciplinary action, as defined by the board, against a nurse, or a substantially equivalent action against a nurse who is a staffing agency nurse, because the nurse engaged in conduct subject to reporting [a ground under Section 301.401 exists to report the nurse] shall report in writing to the board:
 - (1) the identity of the nurse;
- (2) the <u>conduct subject to reporting that resulted in</u> [ground that preceded] the termination, suspension, or other substantive disciplinary action or substantially equivalent action; and
 - (3) any additional information the board requires.
- (b) is required under Section 303.0015 to establish a nursing peer review committee, the person shall submit a copy of the report to the nursing peer review committee. The nursing peer review committee shall review the conduct to determine if any deficiency in care by the reported nurse was the result of a factor beyond the nurse's control. A nursing peer review committee that determines that there is reason to believe that the nurse's deficiency in care was the result of a factor beyond the nurse's control shall report the conduct to the patient safety committee at the facility where the reported conduct occurred, or if the facility does not have a patient safety committee, to the chief nursing officer [Except as provided by Subsection (g), each person subject to this section that regularly employs, hires, or otherwise contracts for the services of 10 or more nurses shall develop a written plan for identifying and reporting a nurse under Section 301.401(a). The plan must provide for the review of the nurse and the incident by a nursing peer review committee established and operated under Chapter 303. Review by the committee is only advisory, but is required, even if the nurse is voluntarily or involuntarily terminated].
- (e) The requirement under Subsection (c) that a nursing peer review committee review the nurse and the incident does not subject a person's administrative decision to discipline a nurse to the peer review process [or prevent a person from taking disciplinary action before review by the peer review committee is conducted].

SECTION 9. Subsection (b), Section 301.407, Occupations Code, is amended to read as follows:

(b) Unless expressly prohibited by state or federal law, a state agency that has reason to believe that a nurse has engaged in conduct subject to reporting [a ground for reporting a nurse exists under Section 301.401] shall report the nurse in writing to the board or to a nursing peer review committee under Chapter 303 [the identity of that nurse].

SECTION 10. Section 301.457, Occupations Code, is amended by adding Subsection (g) to read as follows:

(g) If the board determines after investigating a complaint under Subsection (e) that there is reason to believe that a nurse's deficiency in care was the result of a factor beyond the nurse's control, the board shall report that determination to the patient safety committee at the facility where the nurse's deficiency in care occurred, or if the facility does not have a patient safety committee, to the chief nursing officer.

SECTION 11. Section 303.001, Occupations Code, is amended by adding Subdivision (4-a) to read as follows:

(4-a) "Patient safety committee" means a committee established by an association, school, agency, health care facility, or other organization to address issues relating to patient safety, including:

(A) the entity's medical staff composed of individuals licensed under Subtitle B: or

individuals licensed under Subtitle B; or

(B) a medical committee under Subchapter D,
Chapter 161, Health and Safety Code.

C.S.S.B. No. 993

SECTION 12. Chapter 303, Occupations Code, is amended by adding Section 303.0015 to read as follows:

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301.405;

OF NURSING 303.0015. REQUIRED ESTABLISHMENT REVIEW COMMITTEE. (a) A person shall establish a nursing peer review committee to conduct nursing peer review under this chapter and Chapter 301:

(1) for vocational nurses, if the person regularly employs, hires, or contracts for the services of 10 or more nurses; and

(2) for professional nurses, if the person regularly employs, hires, or contracts for the services of 10 or more nurses, at least five of whom are registered nurses.

A person required to establish a nursing peer review committee under this section may contract with another entity to conduct the peer review for the person.

SECTION 13. Subsection (b), Section 303.005, Occupations

Code, is amended to read as follows:

(b) If a person who is required to establish a nursing peer review committee under Section 303.0015 [regularly employs, hires, or otherwise contracts for the services of at least 10 nurses] requests a nurse [one of those nurses] to engage in conduct that the nurse believes violates a nurse's duty to a patient, the nurse may request, on a form developed or approved by the board, a determination by a nursing peer review committee under this chapter

of whether the conduct violates a nurse's duty to a patient.
SECTION 14. Chapter 303, Occupations Code, is amended by adding Section 303.0075 to read as follows:

Sec. 303.0075. SHARING OF INFORMATION. (a) A nursing peer review committee and a patient safety committee established by the same entity may share information.
(b) A record or determination of a patient safety committee,

communication made to a patient safety committee, is not subject to subpoena or discovery and is not admissible in any civil or administrative proceeding, regardless of whether the information has been provided to a nursing peer review committee. The privileges under this subsection may be waived only through a written waiver signed by the chair, vice chair, or secretary of the patient safety committee. This subsection does not affect the

application of Section 303.007 to a nursing peer review committee.

(c) A committee that receives information from another committee shall forward any request to disclose the information to the committee that provided the information.

SECTION 15. Section 303.011, Occupations Code, is amended to read as follows:

Sec. 303.011. EVALUATION BY COMMITTEE. <u>(a)</u> In evaluating a nurse's conduct, the nursing peer review committee shall review the evidence to determine the extent to which a deficiency in care by the nurse was the result of deficiencies in the nurse's judgment, knowledge, training, or skill rather than other factors beyond the nurse's control. A determination that a deficiency in care is attributable to a nurse must be based on the extent to which the nurse's conduct was the result of a deficiency in the nurse's judgment, knowledge, training, or skill.

(b) The nursing peer review committee shall report a deficiency in care that the committee determines was the result of a factor beyond the nurse's control to a patient safety committee for evaluation. The patient safety committee shall evaluate the influence of the factors on the conduct of the nurse being evaluated and on the practice of other nurses within the entity that established the committee. The committee shall report its findings to the nursing peer review committee.

SECTION 16. The following provisions of the Occupations Code are repealed:

- (1)Subsection (d), Section 301.303;
- (2)
- (3)
- Subsection (e), Section 301.352; Subsection (a), Section 301.402; Subsections (d), (f), (g), and (h), Section (4)
 - (5) Subsection (a), Section 301.419; and

C.S.S.B. No. 993

(6) Subsection (h), Section 303.005. SECTION 17. (a) Except as provided by Subsection (b) of this section, the changes in law made by this Act apply only to conduct that occurs on or after the effective date of this Act. Conduct that occurs before the effective date of this Act is governed by the law in effect when the conduct occurs, and the former law is continued in effect for that purpose.

(b) The change in law made by this Act by the amendment of Subsection (b), Section 301.303, Occupations Code, applies only to an application for renewal of a license issued under Chapter 301, Occupations Code, that is submitted on or after the effective date of this Act. An application for renewal submitted before the effective date of this Act is governed by the law in effect when the application is submitted, and the former law is continued in effect for that purpose.

SECTION 18. This Act takes effect immediately if it receives a vote of two-thirds of all the members elected to each house, as provided by Section 39, Article III, Texas Constitution. If this Act does not receive the vote necessary for immediate effect, this Act takes effect September 1, 2007.

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