

Charter Requirements Checklist

As part of Washington State's new hospital staffing law RCW 70.41.420, hospital staffing committees (HSC) are required to file a charter with the Department of Health by July 1, 2024. The purpose of a charter is to guide the work of the committee. A charter is important because it offers an opportunity for HSC members to work collaboratively in establishing clear guidelines with a shared common purpose.

As your HSC is preparing a charter, reference the checklist to ensure your governing document includes all requirement elements as outlined in RCW 70.41.420. Additionally, the Washington State Hospital Association (WSHA), Washington State Nurses Association (WSNA), SEIU 1199NW and UFCW3000 have prepared a charter template for HSCs to use.

The HSC charter should include the following elements:

Authority & Scope

- Develop and oversee the annual patient care unit and shift-based hospital staffing plan for nursing staff providing direct patient care.
- Review and evaluate the effectiveness of the staffing plan semi-annually against patient needs and known evidence-based staffing information, including nurse-sensitive quality indicators collected by the hospital.
- Review, assess, and respond to staffing variations, concerns, and complaints presented to the committee.
- Develop a contingency staffing plan to address any unforeseeable emergent circumstance.

Membership

Charter should establish roles, responsibilities, and processes by which the HSC functions, including:

- Number of members serving on the HSC.
- A process for electing HSC co-chairs and their terms of service.
- Process to replace HSC members who do not regularly attend.
- Patient care staff job classes represented on the committee as non-voting members.

Meeting Structure & Documentation

- Process to ensure adequate quorum.
- Schedule for monthly meetings (more frequent as needed).
- Process by which HSC members will be given 30 days' notice of meetings.
- Process for review of staffing complaints, including investigation and resolution, noting the date received as well as initial, contingent, and final disposition of complaints and corrective action plan(s) where applicable.

- Process for HSC attendance by any employee involved in a complaint and a labor representative if requested by the employee.
- Process for the hospital to provide the HSC with information regarding patient complaints involving staffing made through the patient grievance process in accordance with 42 C.F.R. 482.13(a)(2).
- Process to resolve complaints within 90 days of receipt or longer with majority approval of the HSC.
- Process to provide complainant a letter stating the outcome of the complaint.
- Process for labor representative to attend HSC if requested by the employee involved in the complaint.
- Process for use of staffing plan compliance reports to inform the development and semiannual review of the staffing plan.

Process for HSC to Conduct Review of:

- Staff turnover rates, including new hire turnover rates during the first year of employment quarterly.
- Anonymized aggregate exit interview data on an annual basis.
- Hospital plans regarding workforce development.
- Effectiveness of the staffing plan semiannually against patient needs and known evidence based staffing information, including nurse sensitive quality indicators collected by the hospital.
- Standards for HSC approval of meeting documentation including meeting minutes, attendance, and actions taken.
- Policies for retention of meeting documentation for a minimum of three years and consistent with hospital's document retention policies.

If you have additional questions about preparing your charter, please contact:

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