







Safe Staffing Law Implementation is Underway: We're **Making Progress!**

As members of WSNA, UFCW 3000, and SEIU Healthcare 1199NW united in our WA Safe + Healthy coalition, we are actively engaged in ensuring the implementation timeline for our safe staffing law continues as outlined under the new legislation.

Implementation Timeline

- January 1, 2024: New staffing committees with CNAs, ED Techs, LPNs and unlicensed assistive personnel staff added
- **☑** July 1, 2024:
 - New charters submitted to the Department of Health
 - Draft staffing plans submitted to the CEO
 - Meal/rest break expansion/tracking begins
 - Mandatory pre-scheduled on-call restrictions begins
- October 1, 2024: Hospitals adopt written policies procedures to address noncompliance with the staffing plans
- October 30, 2024: First quarterly meal/rest break report due
- January 1, 2025: Hospitals submit final 2025 staffing plans to the Department of Health

What happens if we don't have our charter completed by July 1?

Each committee should continue working on the charter and submit it to the Department of Health as soon as possible. We can also file complaints with the Department of Health, if

What happens after we submit our plan to the CEO?

- The CEO (or their designee) must provide written feedback to the hospital staffing committee on the proposed plan.
- The hospital staffing committee will then identify the elements of the plan that need to be changed.
- The committee reviews and considers any feedback prior to approving by a 50% plus 1 vote on a revised staffing plan to provide to the CEO.

Can the CEO veto our staffing plan and submit their own plan?

No. The CEO (or designee) must provide written feedback on the draft staffing plan. If the hospital doesn't adopt the staffing plan voted on by the staffing committee, then the most recent plan remains in effect (either the plan from 1/1/23 or the last plan approved by a 50% plus 1 vote).

"We are joining with Washington State Nurses Association and UFCW 3000 to blend our staffing committees because when we stand together we are stronger. We need to make sure management

doesn't dictate the terms of the committee and that our voices are powerful." - TJ Drammeh, CNA, UW Medicine - Northwest,

"I like that there are a couple of entities that can be reported to if there are violations. It's not just the Department of Health, it's Labor and Industries as well. And having more

strict consequences is making the hospitals more accountable." -Julia Barcott, RN, Toppenish



"Thanks to thousands of health care workers coming together to advocate for our patients, we have a chance in the next few years to shift away from the perpetual understaffing

that hospitals have been relying on and hold hospital management accountable for safer staffing levels—which means safer patient care." - Dana Robison, RN, **Providence Everett**



Effective July 1: New Meal and Rest Breaks Law

Employers must start tracking missed breaks for the following job classes:

- ARNP
- Anesthesia Tech
- Cardiovascular Tech
- Case Manager
- Clinic Tech
- CT Tech
- Dialysis Tech
- Dietician
- Dosimetrist
- Echo Tech
- EEG Tech
- Emergency Department Tech
- Endoscopy Tech or GI Tech
- Health Unit Coordinator
- Infant Nutrition Assistant NICU
- Interventional Radiologic Tech
- Lab Tech
- Lactation Assistant
- Licensed Practical Nurse
- Mammography Tech
- Medical Assistant
- Medical Language Specialist
- Mental Health Tech and Specialists

- Mental Health Therapist
- Mobile Mammography Assistant
- Monitor Tech
- MRI Tech
- Neurophysiology Tech
- NICU Assistant
- Nuclear Med Tech
- Nurse Tech
- Nursing Assistant
- Nursing Assistant Cert-Transporter
- Occupational Therapist
- Occupational Therapy Assistant
- Oral Surgery Assistant
- Orthopedic Technologist
- Patient Care Assistant
- Patient Care Tech
- Patient educator Diabetic, etc.
- Perinatal Assistant
- Perioperative Care Associate
- PET / CT Technologist
- Pharmacy Assistant
- Pharmacy Tech
- Pharmacy Tech Sys Coordinator

- Phlebotomist
- Physical Therapist
- Physical Therapy Assistant
- Physician Assistant
- Pulmonary Function Tech
- Radiologist Assistant
- Radiation Therapist
- Radiology Tech
- Rapid Response Team
- Registered Nurse
- Rehab Services Aide
- Respiratory Therapist
- Scrub Tech
- Sitter
- Sleep Tech
- Social Worker
- Speech Therapist
- Surgical Core Tech
- Surgical Tech
- Transporter
- Ultrasound Techs and Diagnostic Sonographers
- Vascular Sonographer

For the jobs listed above, these are the changes to our meal and rest breaks:

- Employers must track missed breaks and report quarterly to L&I (starting 2026 employers will be fined if not in compliance 80% of the time).
- Employees are owed compensatory pay for a missed or delayed rest and meal break.
- ✓ If you miss your 15 minute break you will be paid for your time worked AND another 15 minutes of straight time because you missed your break.
- ✓ If your 30 minute meal break is not between 2-5 hours of the start of your shift OR you miss it entirely OR if it was interrupted and you did not get to finish it, you are eligible for additional compensatory pay.
- What is compensatory pay? Compensatory pay is a "fine" the employer must pay you for not receiving your meal and rest break and/or if it was not received in a timely manner.
- **Do I still get paid for working through my breaks?** YES. You get paid straight time (or overtime if it put you into an overtime status) for working your break. Compensatory pay is in addition to this.
- If I am entitled to two meal breaks, can I still waive my second meal break? Yes, you can volunteer to waive your meal break BUT you are also waiving your right to compensatory pay for this second meal break.
- Can I waive my right to receiving my meal break within 2-5 hours of the start of my shift? Yes, if that is what works best for you. BUT you are waiving your right to compensatory pay for receiving a late break. You are still eligible for compensatory pay if you did not receive your meal break at all during your shift.
- What happens if my meal break is interrupted? The law allows for two reasons why your break can be interrupted:
 - 1. When there are unforeseeable emergent circumstances.
 - a. Any unforeseen declared national, state, or municipal emergency
 - b. When a healthcare facilities disaster plan is activated
 - c. Any unforeseen disaster or other catastrophic event which substantially affects or increases the need for health care services
 - 2. When there are unforeseeable clinical circumstances with a significant effect on the patient's condition
 - a. If in the employee OR the employer's opinion, the clinical circumstance may lead to a significant adverse effect on the patient condition. If you break is interrupted, you are allowed to resume your break in a timely manner. If you are unable to, you will receive straight time for your time worked and compensatory pay for the time you did not receive your break.