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S.141

Introduced by Senator Lyons of Chittenden District

Referred to Committee on

Date:

Subject: Health care facilities; safe patient handling

Statement of purpose: This bill would require hospitals and nursing home facilities to establish a safe patient handling program.

AN ACT RELATING TO SAFE PATIENT HANDLING

It is hereby enacted by the General Assembly of the State of Vermont:

Sec. 1. 18 V.S.A. Part 3, chapter 58 is added to read:

CHAPTER 58. SAFE PATIENT HANDLING

§ 2501. LEGISLATIVE FINDINGS AND INTENT

The general assembly finds:

(1) Patients are at greater risk of injury, including skin tears, falls, and musculoskeletal injuries, when being lifted, transferred, or repositioned manually.

(2) Safe patient handling can reduce skin tears suffered by patients by threefold and can significantly reduce other injuries to patients as well.

(3) Health care workers lead the nation in work-related musculoskeletal disorders. Chronic back pain and other job-related musculoskeletal disorders

1 contribute significantly to the decision by nurses and other health care workers
2 to leave their professions, which exacerbates the shortage of health care
3 workers.

4 (4) Research indicates that nurses lift an estimated 1.8 tons per shift.
5 83 percent of nurses work in spite of back pain, and 60 percent of nurses fear a
6 disabling back injury. Twelve percent to 39 percent of nurses not yet disabled
7 are considering leaving nursing due to back pain and injuries.

8 (5) Safe patient handling reduces injuries and costs. In nine case studies
9 evaluating the impact of lifting equipment, injuries decreased 60 percent to 95
10 percent; lifting and handling was reduced by 98 percent.

11 (6) Studies show that manual patient handling and movement negatively
12 affect patient safety, quality of care and patient comfort, dignity and
13 satisfaction.

14 (7) The American Hospital Association has stated that work-related
15 musculoskeletal disorders account for the largest proportion of workers'
16 compensation costs in hospitals and long-term care facilities;

17 (8) Studies demonstrate that assistive patient handling technology
18 reduces workers' compensation and medical treatment costs for
19 musculoskeletal disorders among health care workers, and that employers can
20 recoup their initial investment in equipment and training within three years.

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1 § 2502. DEFINITIONS

2 As used in this chapter:

3 (1) “Health care facility” means a hospital or a nursing home facility.

4 (2) “Lift team” means health care facility employees specially trained to
5 perform patient lifts, transfers, and repositioning in accordance with safe
6 patient handling policy.

7 (3) “Musculoskeletal disorders” means conditions that involve the
8 nerves, tendons, muscles, and supporting structures of the body.

9 (4) “Safe patient handling” means the use of engineering controls,
10 transfer aids, or assistive devices whenever feasible and appropriate instead of
11 manual lifting to perform the acts of lifting, transferring, or repositioning
12 health care patients and residents.

13 (5) “Safe patient handling policy” means protocols established to
14 implement safe patient handling.

15 § 2503. SAFE PATIENT HANDLING PROGRAM

16 (a) A safe patient handling program shall include:

17 (1) a safe patient handling policy on all units and for all shifts that,
18 consistent with patient safety and well-being, restricts unassisted patient
19 handling of all or most of a patient’s weight to situations where a patient is in
20 need of immediate attention or where the use of assisted patient handling
21 would jeopardize the safety of the patient;

- 1 (2) an assessment of the safe patient handling assistive devices needed
2 to carry out the facility's safe patient handling policy;
- 3 (3) the purchase of safe patient handling equipment and patient handling
4 aids necessary to carry out the safe patient handling policy;
- 5 (4) protocols and procedures for assessing and updating the appropriate
6 patient handling requirements of each patient of the facility;
- 7 (5) a plan for assuring prompt access to and availability of mechanical
8 patient handling equipment and patient handling aids on all units and all shifts;
- 9 (6) a provision requiring that all such equipment and aids be stored and
10 maintained in compliance with their manufacturers' recommendations;
- 11 (7) a training program for health care workers at no cost that:
- 12 (A) covers the identification, assessment, and control of patient
13 handling risks; the safe, appropriate, and effective use of patient handling
14 equipment and aids; and proven safe patient handling techniques;
- 15 (B) requires trainees to demonstrate proficiency in the techniques and
16 practices presented;
- 17 (C) is provided during paid work time; and
- 18 (D) is conducted upon commencement of the facility's safe patient
19 handling program and at least annually thereafter, with appropriate interim
20 training for individuals beginning work between annual training sessions;

1 (8) educational materials for patients and their families to help orient
2 them to the facility's safe patient handling program.

3 (9) an annual report to the safe patient handling committee of the facility
4 and to the department of banking, insurance, and health care administration,
5 which shall be made available to the public upon request, on activities related
6 to the identification, assessment, development, and evaluation of strategies to
7 control risk of injury to patients, nurses, and other health care workers
8 associated with the lifting, transferring, repositioning, or movement of a
9 patient;

10 (10) posting of the safe patient handling policy in a location easily
11 visible to staff, patients, and visitors; and

12 (11) a designated representative of management at the facility who shall
13 be responsible for overseeing all aspects of the safe patient handling program.

14 (b) A facility shall conduct an annual evaluation of the program, and make
15 revisions to the program based on data analysis and feedback from the
16 facility's health care workers.

17 (c) A facility shall purchase the equipment and aids determined necessary
18 to carry out its safe patient handling policy and conduct the initial training as
19 required in this section within 24 months of the effective date of this act.

20 (d) Nothing in this section precludes lift team members from performing
21 other duties as assigned during their shifts.

1 § 2504. RETALIATION

2 A covered health care facility shall not retaliate against any health care
3 worker, because that worker refuses to perform a patient handling task due to a
4 reasonable concern about worker or patient safety, or the lack of appropriate
5 and available patient handling equipment or aids.

6 § 2505. PATIENT HANDLING COMMITTEE

7 (a) Each licensed health care facility shall establish a safe patient handling
8 committee which shall be responsible for all aspects of the development,
9 implementation, and periodic evaluation and revision of the facility's safe
10 patient handling program, including the evaluation and selection of patient
11 handling equipment and aids and other appropriate engineering controls. The
12 committee shall be chaired by a professional nurse or other appropriate
13 licensed health care professional. A health care facility may utilize any
14 appropriately configured committee to perform the responsibilities of this
15 section. At least 50 percent of the members of the committee shall be health
16 care workers who provide direct patient care to patients at the facility or are
17 otherwise involved in patient handling at the facility. In a facility where health
18 care workers are represented by a collective bargaining agent, the collective
19 bargaining agent shall select the health care worker committee members. The
20 remaining members of the committee shall have experience, expertise, or
21 responsibility relevant to the operation of a safe patient handling program.

1 (b) An employee may, in accordance with established facility protocols,
2 report to the committee, as soon as possible, after being required to perform a
3 patient handling activity that he or she believes in good faith exposed the
4 patient or employee, or both, to an unacceptable risk of injury. Such employee
5 reporting shall not be cause for discipline or be subject to other adverse
6 consequences by his or her employer. These reportable incidents shall be
7 included in the facility's annual performance evaluation.

8 § 2506. DETERMINATION OF NEED FOR NEW HEALTH CARE

9 EQUIPMENT AND NEW INSTITUTIONAL HEALTH SERVICES

10 A health care facility which develops or offers new health care equipment
11 or new institutional health services in Vermont shall consider the proposed
12 availability and use of safe patient handling equipment in the new or renovated
13 space to be constructed.

14 Sec. 2. EFFECTIVE DATE

15 This act shall take effect January 1, 2008.