

1 H.238

2 Introduced by Representatives Donovan of Burlington, Clark of Vergennes,  
3 Courcelle of Rutland City, Edwards of Brattleboro, Evans of  
4 Essex, Fisher of Lincoln, French of Randolph, Geier of  
5 S. Burlington, Jerman of Essex, Johnson of S. Hero, Keenan of  
6 St. Albans City, Kitzmiller of Montpelier, Lorber of Burlington,  
7 Macaig of Williston, Martin of Springfield, McFaun of Barre  
8 Town, Moran of Wardsboro, Mrowicki of Putney, Nuovo of  
9 Middlebury, Partridge of Windham, Potter of Clarendon,  
10 Sharpe of Bristol, Weston of Burlington and Zuckerman of  
11 Burlington

12 Referred to Committee on

13 Date:

14 Subject: Health care facilities; safe patient handling

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

17 An act relating to safe patient handling

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

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

2                               CHAPTER 58. SAFE PATIENT HANDLING

3       § 2501. LEGISLATIVE FINDINGS AND INTENT

4       The general assembly finds:

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

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

10              (3) Without adequate resources such as special equipment and specially  
11       trained staff, lifting patients, whether the patients are overweight or not,  
12       increases the risk of injury to the patients and health care providers when the  
13       patient is being moved, being repositioned, or receiving other care. Fifty-nine  
14       percent of Vermont adults are overweight or obese, which substantially  
15       increases risks for many chronic diseases.

16              (4) Health care workers lead the nation in work-related musculoskeletal  
17       disorders. Chronic back pain and other job-related musculoskeletal disorders  
18       contribute significantly to the decision by nurses and other health care workers  
19       to leave their professions, which exacerbates the shortage of health care  
20       workers.

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

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

8           (7) Studies show that manual patient handling and movement negatively  
9           affect patient safety, quality of care, and patient comfort, dignity, and  
10          satisfaction.

11          (8) The American Hospital Association has stated that work-related  
12          musculoskeletal disorders account for the largest proportion of workers'  
13          compensation costs in hospitals and long-term care facilities.

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

18          § 2502. DEFINITIONS

19          As used in this chapter:

20          (1) "Health care facility" shall mean a hospital licensed under chapter 43  
21          of this title or a nursing home licensed under chapter 71 of Title 33.

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

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

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

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

12           § 2503. SAFE PATIENT HANDLING PROGRAM

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

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

19           (2) an assessment of the safe patient handling assistive devices needed  
20           to carry out the facility’s safe patient handling policy;

1           (3) the purchase of safe patient handling equipment and patient handling  
2           aids necessary to carry out the safe patient handling policy;

3           (4) protocols and procedures for assessing and updating the appropriate  
4           patient handling requirements of each patient of the facility;

5           (5) a plan for assuring prompt access to and availability of mechanical  
6           patient handling equipment and patient handling aids on all units and all shifts;

7           (6) a provision requiring that all such equipment and aids be stored and  
8           maintained in compliance with their manufacturers' recommendations;

9           (7) a training program for health care workers at no cost that:

10           (A) covers the identification, assessment, and control of patient  
11           handling risks; the safe, appropriate, and effective use of patient handling  
12           equipment and aids; and proven safe patient handling techniques;

13           (B) requires trainees to demonstrate proficiency in the techniques and  
14           practices presented;

15           (C) is provided during paid work time; and

16           (D) is conducted upon commencement of the facility's safe patient  
17           handling program and at least annually thereafter, with appropriate interim  
18           training for individuals beginning work between annual training sessions;

19           (8) educational materials for patients and their families to help orient  
20           them to the facility's safe patient handling program;

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

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

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

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

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

18           (d) Nothing in this section precludes lift team members from performing  
19           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, 2010.