SENATE, No. 1758

STATE OF NEW JERSEY
212th LEGISLATURE

INTRODUCED MARCH 21, 2006

Sponsored by:
Senator JOSEPH F. VITALE
District 19 (Middlesex)
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SYNOPSIS
“Safe Patient Handling Act”; requires health care facilities to establish safe patient handling programs.

CURRENT VERSION OF TEXT
As introduced.
AN ACT concerning health care worker and patient safety and
supplementing Title 26 of the Revised Statutes.

BE IT ENACTED by the Senate and General Assembly of the State
of New Jersey:

1. This Act shall be known and may be cited as the “Safe Patient
Handling Act.”

2. The Legislature finds and declares that:
   a. In New Jersey, nurses, nurse aides, orderlies and attendants,
      combined, have the highest number of nonfatal occupational
      injuries and illnesses involving days away from work of other
      occupations;
   b. Chronic back pain and other job-related musculoskeletal
      disorders contribute significantly to the decision by nurses and
      other health care workers to leave their professions, which
      exacerbates the shortage of health care providers in this State;
   c. Studies show that manual patient handling and movement
      negatively affect patient safety, quality of care and patient comfort,
      dignity and satisfaction;
   d. The American Hospital Association has stated that work-
      related musculoskeletal disorders account for the largest proportion
      of workers’ compensation costs in hospitals and long-term care
      facilities;
   e. Studies demonstrate that assistive patient handling technology
      reduces workers’ compensation and medical treatment costs for
      musculoskeletal disorders among health care workers, and that
      employers can recoup their initial investment in equipment and
      training within three years;
   f. Therefore, it is appropriate public policy to require the use of
      assistive patient handling technology as set forth in this act.

3. As used in this act:
   “Assisted patient handling” means patient handling using:
   mechanical patient handling equipment including, but not limited
   to, electric beds, portable base and ceiling track-mounted full body
   sling lifts, stand assist lifts, and mechanized lateral transfer aids;
   and patient handling aids including, but not limited to, gait belts
   with handles, sliding boards and surface friction-reducing devices.
   “Covered health care facility” means a health care facility
   licensed by the Department of Health and Senior Services pursuant
   to P.L.1971, c.136 (C.26:2H-1 et seq), a State developmental center
   and a State or county psychiatric hospital.
   “Health care worker” means an individual who is employed by a
   covered health care facility whose job duties entail patient handling.
   “Patient” means a patient or resident at a covered health care
   facility.
“Patient handling” means the lifting, transferring, repositioning, transporting or moving of a patient in a covered health care facility. “Safe patient handling policy” means a written policy to minimize unassisted patient handling in all cases, and eliminate such handling, when feasible, by maximizing the use of assisted patient handling. “Unassisted patient handling” means patient handling using a health care worker’s body strength without the use of mechanical patient handling equipment or patient handling aids.

4. Within 18 months of the effective date of this act, each covered health care facility shall establish a safe patient handling program to reduce the risk of injury to both patients and health care workers at the facility.
   a. The facility shall:
      (1) maintain a detailed written description of the program and its components;
      (2) provide a copy of the written description to the Department of Health and Senior Services or Department of Human Services, as applicable, and make the description available to health care workers at the facility and to any collective bargaining agent representing health care workers at the facility;
      (3) post the safe patient handling policy in a location easily visible to staff, patients, and visitors; and
      (4) designate a representative of management at the facility who shall be responsible for overseeing all aspects of the safe patient handling program.
   b. A safe patient handling program shall include:
      (1) a safe patient handling policy on all units and for all shifts that, consistent with patient safety and well-being, restricts unassisted patient handling of all or most of a patient’s weight to situations where a patient is in need of immediate attention or where the use of assisted patient handling would jeopardize the safety of the patient;
      (2) an assessment of the safe patient handling assistive devices needed to carry out the facility’s safe patient handling policy;
      (3) the purchase of safe patient handling equipment and patient handling aids necessary to carry out the safe patient handling policy;
      (4) protocols and procedures for assessing and updating the appropriate patient handling requirements of each patient of the facility;
      (5) a plan for assuring prompt access to and availability of mechanical patient handling equipment and patient handling aids on all units and all shifts;
      (6) a provision requiring that all such equipment and aids be stored and maintained in compliance with their manufacturers’ recommendations;
(7) a training program for health care workers that:
(a) covers the identification, assessment, and control of patient
handling risks; the safe, appropriate, and effective use of patient
handling equipment and aids, and proven safe patient handling
techniques;
(b) requires trainees to demonstrate proficiency in the techniques
and practices presented;
(c) is provided during paid work time; and
(d) is conducted upon commencement of the facility’s safe
patient handling program and at least annually thereafter, with
appropriate interim training for individuals beginning work between
annual training sessions; and
(8) educational materials for patients and their families to help
orient them to the facility’s safe patient handling program.

c. A facility shall conduct an annual evaluation of the program,
and make revisions to the program based on data analysis and
feedback from the facility’s health care workers.
d. A facility shall purchase the equipment and aids determined
necessary to carry out its safe patient handling policy and conduct
the initial training as required in this section within 24 months of
the effective date of this act.

5. a. Within 12 months of the effective date of this act, each
covered health care facility shall establish a safe patient handling
committee, which shall be responsible for all aspects of the
development, implementation and periodic evaluation and revision
of the facility’s safe patient handling program, including the
evaluation and selection of patient handling equipment and aids and
other appropriate engineering controls.
b. At least 50% of the members of the committee shall be health
care workers who provide direct patient care to patients at the
facility or are otherwise involved in patient handling at the facility.
In a facility where health care workers are represented by a
collective bargaining agent, the collective bargaining agent shall
select the health care worker committee members.
The remaining members of the committee shall have experience,
expertise, or responsibility relevant to the operation of a safe patient
handling program.
c. A health care system with more than one covered health care
facility shall have a committee at each facility.
d. The committee shall meet at least monthly.

6. A covered health care facility shall not retaliate against any
health care worker because that worker refuses to perform a patient
handling task due to a reasonable concern about worker or patient
safety, or the lack of appropriate and available patient handling
equipment or aids.
7. The Commissioner of Health and Senior Services shall provide training to covered health care facilities, at no cost, on how to develop and implement a safe patient handling program.

8. A covered health care facility licensed pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.) that is in violation of the provisions of this act shall be subject to such penalties as the Department of Health and Senior Services may determine pursuant to sections 13 and 14 of P.L.1971, c.136 (C.26:2H-13 and 26:2H-14).

9. The Commissioner of Health and Senior Services shall adopt rules and regulations pursuant to the “Administrative Procedure Act,” P.L.1968, c.410 (C.52:14B-1 et seq.), within nine months of the date of enactment of this act, to carry out the purposes of this act.

10. This act shall take effect immediately.

STATEMENT

This bill, the “Safe Patient Handling Act,” requires licensed health care facilities, and State developmental centers and State and county psychiatric hospitals to establish a safe patient handling program to reduce the risk of injury to both patients and health care workers at the facility.

The bill requires a facility to establish the program within 18 months of the bill’s enactment and to maintain a detailed written description of the program and its components and provide a copy of the written description to the Department of Health and Senior Services or Department of Human Services, as applicable, and make the description available to health care workers at the facility and to any collective bargaining agent representing health care workers at the facility. Further, a facility would be required to post its safe patient handling policy in a location easily visible to staff, patients, and visitors; and to designate a representative of management at the facility who shall be responsible for overseeing all aspects of the safe patient handling program.

A safe patient handling program shall include:

- a safe patient handling policy on all units and for all shifts that, consistent with patient safety and well-being, restricts unassisted patient handling of all or most of a patient’s weight to situations where a patient is in need of immediate attention or where the use of assisted patient handling would jeopardize the safety of the patient;
- an assessment of the safe patient handling assistive devices needed to carry out the facility’s safe patient handling policy.

The bill defines “assisted patient handling” to mean patient
handling using: mechanical patient handling equipment including, but not limited to, electric beds, portable base and ceiling track-mounted full body sling lifts, stand assist lifts, and mechanized lateral transfer aids; and patient handling aids including, but not limited to, gait belts with handles, sliding boards and surface friction-reducing devices;

• the purchase of safe patient handling equipment and patient handling aids necessary to carry out the safe patient handling policy;

• protocols and procedures for assessing and updating the appropriate patient handling requirements of each patient of the facility;

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

• a provision requiring that all such equipment and aids be stored and maintained in compliance with their manufacturers recommendations;

• a training program for health care workers, as specified in the bill; and

• educational materials for patients and their families to help orient them to the facility’s safe patient handling program.

The bill directs a facility to conduct an annual evaluation of the program, and make revisions to the program based on data analysis and feedback from the facility’s health care workers. Also, a facility would be required to purchase the equipment and aids determined necessary to carry out its safe patient handling policy and conduct the initial training within 24 months of the date of enactment of the bill.

The bill would also require a facility, within 12 months, to establish a safe patient handling committee. The committee would be responsible for all aspects of the development, implementation and periodic evaluation and revision of the facility’s safe patient handling program, including the evaluation and selection of patient handling equipment and aids and other appropriate engineering controls. At least one-half of the members of the committee shall be health care workers who provide direct patient care to patients at the facility or are otherwise involved in patient handling at the facility. The remaining members of the committee shall have experience, expertise, or responsibility relevant to the operation of a safe patient handling program.

The bill provides that a health care facility shall not retaliate against any health care worker because that worker refuses to perform a patient handling task due to a reasonable concern about worker or patient safety, or the lack of appropriate and available patient handling equipment or aids.

Also, the bill provides that the Commissioner of Health and Senior Services shall provide training to health care facilities, at no
Finally, the bill provides that a health care facility licensed pursuant to N.J.S.A.26:2H-1 et seq. that is in violation of the provisions of this bill shall be subject to such penalties as the Department of Health and Senior Services may determine pursuant to N.J.S.A.26:2H-13 and 26:2H-14.