

AMERICAN INDUSTRIAL HYGIENE ASSOCIATION GOVERNMENT AFFAIRS DEPARTMENT

STATE UPDATE

February 25, 2013

MASSACHUSETTS

Here is the latest legislative/regulatory report for your State. AIHA government affairs will send the reports every week, detailing any legislative and/or regulatory pertinent to the profession in your state. The reports will also include the text of many bills (if available) and update activity on bills already reported. However, reports will only be sent if there has been new activity on the legislation and/or regulations already reported, or new legislation and/or regulations are found. Reports are sent to local section officers and may be forwarded to others if you wish. Questions contact Aaron Trippler at atrippler@aiha.org.

New Legislation

MA H 1969

AUTHOR:

Garlick (D)

TITLE:

Safe Patient Handling Policy

INTRODUCED: 02/18/2013
DISPOSITION: Pending

LOCATION:

HOUSE

SUMMARY:

Provides that certain health facilities be directed to establish a safe patient handling

policy.

STATUS:

02/18/2013

INTRODUCED.

Date:

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HOUSE DOCKET, NO. 394 FILED ON: 1/10/2013

HOUSE No.1969

The Commonwealth of Massachusetts

PRESENTED BY:

Denise C. Garlick

To the Honorable Senate and House of Representatives of the Commonwealth of Massachusetts in General Court assembled:

The undersigned legislators and/or citizens respectfully petition for the passage of the accompanying bill: An

Act relating to safe patient handling in certain health facilities.

PETITION OF:

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Denise Andrews Tom
Denise C. Garlick

Edward F. Coppinger

Ellen Story Anne M.

Gobi Nick Collins

Tackey Chan Kay
Thomas M. Stanley

Ruth B. Balser

Jonathan D. Zlotnik

Gailanne M. Cariddi

Middlesex 2nd **DISTRICT/ADDRESS:** Berkshire 32nd 13th Norfolk 10th Middlesex 23rd Suffolk 3rd Middlesex 2nd Hampshire 5th Norfolk 11th Worcester 4th Middlesex 27th Suffolk 9th Middlesex 2nd Middlesex 12th Worcester 4th Middlesex 1st

Berkshire 2nd Franklin 7th

Michael D. Brady 9th Plymouth

Barnstable

Mary S. Keefe 15計のWorCestekema 8th Middlesex
James J. O'Day 5cth Mosselfano, Jr. 34th Middlesex
Jason M. Lewis 5cth Middlesex
Louis L. Kafka 5chh Mosselfano 5chh Middlesex
Louis L. Kafka 5chh Mosselfano 5c

John V. Fernandes

10th Worcester
HOUSE DOCKET, NO.

Paul McMurtry

1384 Morfdox ON:

Benjamin Swan

11th Hampaen 3

HOUSE No.1969

By Ms. Garlick of Needham, a petition (accompanied by bill, House, No. 1969) of Denise C. Garlick and others that certain health facilities be directed to establish a "safe patient handling policy", so-called. Public Health.

[SIMILAR MATTER FILED IN PREVIOUS SESSION SEE HOUSE , NO. 1484 OF 2011-2012.]

The Commonwealth of Massachusetts

In the Year Two Thousand Thirteen

An Act relating to safe patient handling in certain health facilities.

Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:

- 1 Chapter 111 of the General Laws is hereby amended by inserting after section 91C the following
- 2 section:
- 3 Section 91D. As used in this section, the following words, shall, unless the context clearly requires
- 4 otherwise, have the following meanings:
- 5 "Acute-care hospital", any hospital licensed pursuant to sections 51 and 52 and the teaching
- 6 hospital of the university of Massachusetts medical school, which contains a majority of medical-
- 7 surgical, pediatric, obstetric, and maternity beds, as defined by the department.
- 8 "Department", the department of public health.

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- "Health care facility", any acute care hospital as defined in section (a), any licensed private, public or state-owned and operated general acute care rehabilitation hospital or unit, any licensed private,
- 1 public or state-owned and operated general acute care psychiatric hospital or unit, any nursing
- 3 home as defined in section 71 and any long term care facility as defined in section 71.
- 14 "Health care worker", any health facility personnel or lift team member who lifts, 15 transfers or repositions patients or equipment.
- 16 "Hospital", any institution, however named, whether conducted for charity or for profit, 17 which is advertised, announced, established or maintained for the purpose of caring for persons 18 admitted thereto for diagnosis, medical, surgical or restorative treatment which is rendered 19 within said institution.
- 20 "Lift team", health care facility employees specially trained to handle patient lifts, 21 transfers and

repositioning using lifting equipment when appropriate and precluded from 22 performing other duties.

- 23 "Lifting and transferring process", a system whereby patients and situations are identified 24 based on the potential risk of injury to the patient and/or health care worker from lifting, 25 transferring or moving that patient.
- 26 "Long term care facility", any institution, however named, whether conducted for charity 27 or profit, which is advertised, announced or maintained for the express or implied purpose of 28 caring for four or more persons admitted thereto for nursing or convalescent care, as defined in 29 section 71.
- 30 "Needs assessment", an evaluation of lift and transfer needs, resources and capabilities 31 with recommendations on procedures to be followed and resources available to lift and transfer 32 patients safely.
- 33 " NIOSH RWL ", 35 pound or current maximum recommended weight lift limit, a 34 standard calculated by NIOSH, as explained at http://www.cdc.gov/niosh/94-110.html
- 35 "Nursing home", any institution, however name d, whether conducted for charity or 36 profit, which is advertised, announced or maintained for the express or implied purpose of caring 37 for four or more persons admitted thereto for nursing or convalescent care, as defined in section 38 71.
- 39 "Patient", an individual who receives health services at a hospital, health care facility, or 40 long term care facility.
- 41 "Patient care ergonomic evaluation", evaluation performed in all direct patient care 42 areas including but not limited to acute care, critical care, rehabilitation, radiology, operating 43 room, urgent care, therapy departments, long term care, outpatient service, etc. following 44 guidance from the OSHA Nursing Home Guidelines, VA Patient Care Ergonomic Guidelines, or 45 other accepted guidance document to identify ergonomic control measures for decreasing risk of 46 injury from patient handling and moving activities.
- 47 "Qualified personnel", person(s) accountable and responsible for the ongoing education 48 and knowledge of patient needs assessment, engineering equipment and patient ergonomics.
- 49 "Resident", an individual who resides in a long term care facility.
- 50 "Safe patient handling policy", a written statement describing the replacement of manual 51 lifting and transferring of patients and equipment with powered transfer dev ices, lifting devices, 52 and/or lift teams, consistent with a needs assessment and mandating the replacement of manual 53 lifting and transferring of patients with techniques using current patient handling 54 equipment/technology to lift patients unless specifically contraindicated for a patient's condition 55 or medical status. Such technology/equipment include s , but is not limited to mechanical lifting 56 devices (floor-based & ceiling-mounted), lateral transfer aids, friction reducing devices, fast 57 electric bed s, motorized beds, etc , consistent with clinical unit/area patient care ergonomic 58 evaluation recommendations. Such policy also mandates the use of individual patient handling 59 assessments for each patient/resident requiring assistance.
- 60 By February 1, 2014 each health care facility shall establish a safe patient handling 61 committee ("committee") through the creation of a new committee or by assigning the functions 62 of a safe patient handling

committee to an existing committee. The purpose of the Committee is 63 to design and recommend the process for implementing a safe patient handling program and to 64 oversee the implementation of the program. At least half the members of the safe patient 65 handling committee shall be frontline non-managerial employees who provide direct care to 66 patients and shall include but not be limited to nurses, laundry, maintenance and infection control 67 employees.

68 By December 1, 2014, the governing body of a hospital or the quality assurance 69 committee of a nursing home shall adopt and ensure implementation of a Safe Patient Handling 70 Program to identify, assess, and develop strategies to control risk of injury to patients and health 71 care workers associated with the lifting, transferring, repositioning, or movement of a patient or 72 equipment, such that manual lifting or transfer of patients is minimized in all cases and 73 eliminated when feasible and manual patient handling or movement of all or most of a patient's 74 weight is restricted to emergency, life-threatening, or otherwise exception circumstances. As 75 part of this program each facility must:

- 76 (1) Conduct a comprehensive analysis of the risk of injury to both patients and health 77 care workers posed by the patient handling needs of the patient populations served by the 78 hospital or nursing home and the physical environment in which patient and equipment handling 79 and movement occurs, through:
- 80 (a) Evaluation of alternative ways to reduce risks associated with patient and
- 81 equipment handling, including evaluation of equipment and patient care and 82 patient support environments;
- 83 (b) Conduct of individual patient care ergonomic evaluations in all patient care
- 84 areas, following guidance from the OSHA Nursing Home Guidelines,
- 85 VA Patient Care Ergonomic Guidelines, or other accepted guidance
- 86 document, to identify ergonomic control measures for decreasing risk of
- 87 injury from patient handling and moving activities;
- 88 (c) Development and implementation of safe patient handling policies based on
- 89 the needs of all shifts and units of the facility.
- 90 (2) Identify and list the type and quantity of patient handling equipment and other 91 equipment required on each clinical unit/area and ensure that the purchase and acquisition of all 92 such equipment is incorporated into the Safe Patient Handling Program. Patient handling 93 measures and patient handling equipment/technology shall include but not be limited to 94 mechanical lifting devices (floor-based & ceiling-mounted), lateral transfer aids, friction 95 reducing devices, fast electric beds, and motorized beds.
- 96 (3) Provide patient handling equipment and/or technology as stipulated in section (2) 97 which is appropriate for each clinical area and patient/resident population , to reduce the risk of 98 injury to direct patient care providers and patients/residents.
- 99 (4) Provide specialized training in safe patient handling by qualified personnel to all 100 health facility

personnel and lift team members who lift, transfer or reposition patients, including 101 but not limited to demonstration of proficiency in safe techniques for lifting or transferring 102 patients and the appropriate use of lifting or transferring devices and equipment. Health care 103 facilities must train staff on policies, equipment and devices at least annually.

104 (5) Develop procedures for health care workers to refuse to perform or be involved in 105 patient and equipment handling or movement that the worker believes in good faith will expose a 106 patient or a nurse to an unacceptable risk of injury without subjecting such worker to disciplinary 107 action.

108 (6) Provide for lift team members, where lift teams are employed, to utilize lifting 109 devices and equipment throughout the health care facility to lift patients unless specifically 110 contraindicated for a patient's condition or medical status.

111 (7) Prepare an annual performance evaluation report and submit to the governing body 112 or the quality assurance committee on activities related to the identification, assessment, and 113 development of strategies to control risk of injury to patients and health care workers associated 114 with the lifting, transferring, repositioning, or movement of a patient with statistics on the 115 numbers and types of injury to the facilities health care workers and patients;

116 (8) Track, publish and disseminate upon request annual injury data including: the 117 financial cost of all safe patient and equipment handling injuries suffered by employees and 118 patients; the nature and cause of injury; date, shift, and unit statistics; cost to the institution and 119 to employees and patients; and outcomes; to the extent permitted by privacy regulations.

120 (9) Identify the type and quantity of patient handling equipment and other equipment 121 required and ensure that the purchase of other acquisition of all such equipment is incorporated 122 into the Safe Patient Handling Program.

123 By January 30, 2014, health care facilities shall complete the acquisition of safe patient 124 handling equipment determined to be required by their safe patient handling committee. Such 125 equipment will include, though not be limited to: (a) at least one readily available lift per unit on 126 each unit where patients will weigh 35 pounds or the current maximum recommended weight lift 127 limit for patients (NIOSH RWL), unless the facility's safe patient handling committee 128 determines that more lifts are required on the unit; (b) one lift for every ten beds; and/ or (c) 129 equipment for use by lift teams.

130 The development of architectural plans for constructing or remodeling a health care 131 facility or a unit of a health care facility must incorporate patient handling equipment and the 132 construction design needed to accommodate such equipment.

MA H 1733

AUTHOR:

Jones (R)

TITLE:

Safe Workplace for Employees

INTRODUCED: 02/18/2013 DISPOSITION: Pending LOCATION: HOUSE

SUMMARY: Provides a safe workplace for employees of the Commonwealth; relates to political

sub divisions.

STATUS:

02/18/2013 INTRODUCED.

Date: 13

HOUSE DOCKET, NO. 2383 FILED ON: 1/17/2013

HOUSE No.1733

The Commonwealth of Massachusetts

PRESENTED BY:

Bradley H. Jones, Jr.

To the Honorable Senate and House of Representatives of the Commonwealth of Massachusetts in General Court assembled:

The undersigned legislators and/or citizens respectfully petition for the passage of the accompanying bill:

An Act to provide a safe workplace for employees of the Commonwealth and its political subdivisions.

PETITION OF:

20th Middlesex NAME: 9th Worcester Bradley H. Jones, Jr. 4th Essex 14th George N. Peterson, Jr. Bristol 1st Bradford Hill Elizabeth A. Plymouth 4th Poirier Viriato Manuel Hampden 7th deMacedo Donald F. Worcester 1st Humason, Jr. Paul K. Frost Middlesex 3rd Sheila C. Harrington Hampden 1st Nicholas A. Boldyga Worcester 9th Kimberly N. Ferguson Norfolk 11th Daniel B. Winslow Matthew Worcester A. Beaton

DISTRICT/ADDRESS:

FILED ON: 1/17/2013

HOUSE DOCKET, NO. 2383

HOUSE No.1733

By Mr. Jones of North Reading, a petition (accompanied by bill, House, No. 1733) of Bradley H. Jones, Jr. and others to provide a safe workplace for employees of the Commonwealth and its political sub-divisions. Labor and Workforce Development.

[SIMILAR MATTER FILED IN PREVIOUS SESSION SEE HOUSE, NO. 2297 OF 2011-2012.]

The Commonwealth of Massachusetts

In the Year Two Thousand Thirteen

An Act to provide a safe workplace for employees of the Commonwealth and its political subdivisions.

Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:

- 1 An Act to provide a safe workplace for employees of the Commonwealth and its political
- 2 subdivisions.
- 3 SECTION 1. Chapter 149 of the General Laws, as appearing in the 2010 Official Edition, is hereby
- 4 amended by inserting, after section 40, the following section:
- 5 SECTION 40A. (a) Notwithstanding any general or special law to the contrary, the division of
- occupational safety shall apply federal occupational and health standards applicable to private
- 7 sector employees to employees of the commonwealth and its political subdivisions. Such standards
- 8 shall include all statutory and regulatory requirements enforced by the Occupational Safety and
- 9 Health Administration with respect to private sector employees, including, without limiting the
- 1 generality of the foregoing, the general duty clause.

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Nothing herein shall affect any state standard that exceeds the standards applied by the

1 Occupational Health and Safety Administration.

13 (b) The division shall have authority to conduct investigations. The commissioner shall 14 have authority to

issue subpoenas and subpoenas duces tecum to compel the attendance of 15 witnesses and the production of documents.

- 16 (c) The commissioner of the division may promulgate regulations and may issue 17 corrective orders when a violation of this section or regulations promulgated hereunder is found. 18 Proceedings concerning the issuance of regulations or corrective orders to public officials shall 19 be adjudicatory proceedings pursuant to chapter 30A and shall be subject to judicial review 20 accordingly.
- 21 (d) With respect to the exercise of its responsibilities under this section, the division shall 22 be within the department of labor but not subject to its direction and control.
- 23 (e) The effective date of this section with respect to cities and towns shall be subject to 24 the provisions of section 27C of chapter 29 of the General Laws.

MA H 2460

AUTHOR:

Walsh M (D)

TITLE:

Safety and Health for Public Employees

INTRODUCED: 02/18/2013 DISPOSITION:Pending

LOCATION:

HOUSE

SUMMARY:

Relates to evaluating injury and illness data; establishing safety and health measures

to protect employees of the Commonwealth.

STATUS:

02/18/2013

INTRODUCED.

Date:

13

HOUSE DOCKET, NO. 579 FILED ON: 1/13/2013

HOUSE No.2460

The Commonwealth of Massachusetts

PRESENTED BY:

Martin J. Walsh

To the Honorable Senate and House of Representatives of the Commonwealth of Massachusetts in General Court assembled:

The undersigned legislators and/or citizens respectfully petition for the passage of the accompanying bill: An

Act extending protections to employees of the Commonwealth.

PETITION OF: