

1 A bill to be entitled
 2 An act relating to patient handling and moving practices;
 3 creating s. 381.029, F.S.; providing definitions;
 4 requiring hospitals and nursing homes to adopt and
 5 implement a safe patient handling and moving policy and
 6 providing requirements thereof; providing for the
 7 incorporation of patient handling and moving equipment
 8 into certain architectural plans for construction or
 9 remodeling of a hospital or nursing home or units thereof;
 10 providing certain protection for employees of hospitals
 11 and nursing homes who report certain violations or
 12 suspected violations; providing rulemaking authority to
 13 the agency; amending s. 395.701, F.S.; permitting
 14 hospitals to claim credit to cover cost of specified
 15 equipment against an annual assessment under certain
 16 circumstances; requiring submission of certain information
 17 to receive a credit; providing a limitation on credit
 18 earned; providing an effective date.

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 20 Be It Enacted by the Legislature of the State of Florida:

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 22 Section 1. Section 381.029, Florida Statutes, is created
 23 to read:

24 381.029 Safe patient handling and moving practices.--

25 (1) As used in this section:

26 (a) "Agency" means the Agency for Health Care

27 Administration.

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28 (b) "Good faith" means that an employee believes that the
29 information he or she reported or disclosed is true and that a
30 violation has occurred or may occur.

31 (c) "Hospital" means a facility licensed under chapter
32 395.

33 (d) "Minimal-lift philosophy" means to the greatest extent
34 possible minimizing lifting tasks, encouraging a patient to
35 assist with any lifting or moving activities without
36 exacerbating his or her condition or putting himself or herself
37 at risk, and avoiding any handling that involves manually
38 lifting or moving the whole or a large part of a patient's
39 weight.

40 (e) "Nurse" means a registered nurse, a licensed practical
41 nurse, or an advanced registered nurse practitioner as those
42 terms are defined in s. 464.003.

43 (f) "Nursing home" means a facility licensed under part II
44 of chapter 400.

45 (2) (a) The governing body of a hospital or nursing home
46 shall adopt and ensure implementation of a policy and program to
47 identify, develop, and assess strategies to control the risk of
48 injury to patients and nurses associated with lifting,
49 transferring, repositioning, or moving a patient.

50 (b) The policy shall be consistent with a minimal-lift
51 philosophy and establish a process that, at a minimum, includes:

52 1. Analysis of the risk of injury to patients, nurses, and
53 health care workers posed by the handling and moving needs of
54 the patient populations served by the hospital or nursing home

55 and the physical environment in which patient handling and
56 moving occurs.

57 2. Education of a back injury resource nurse to serve as
58 an expert resource and educational source for all nurses in the
59 identification, assessment, and control of risks of injury to
60 patients and nurses during patient handling and moving.

61 3. Evaluation of alternative ways to reduce risks
62 associated with patient handling and moving, including
63 evaluation of equipment and the environment.

64 4. Establishment of a program that will eliminate manual
65 lifting, repositioning, and moving of patients based on current
66 research and practice.

67 5. Acquisition of, training with, and deployment of
68 sufficient equipment and aids so that manual lifting,
69 repositioning, or moving all or most of a patient's weight is
70 restricted to emergency, life-threatening, or otherwise
71 exceptional circumstances.

72 6. Collaboration between the staffing committee and the
73 nurse and the submission of an annual report to the committee.

74 7. Procedures that a nurse may employ to refuse to perform
75 or be involved in patient handling or moving that the nurse
76 believes in good faith will expose the patient or the nurse to
77 an unacceptable risk of injury.

78 8. Submission of an annual report to the governing body of
79 the hospital or nursing home and the agency on activities
80 related to the identification, assessment, and development of
81 strategies to control risk of injury to patients, nurses, and

82 other health care workers associated with lifting, transferring,
83 repositioning, or moving a patient.

84 9. Development of a process to identify the appropriate
85 use of the safe patient handling policy based on the patient's
86 physical and medical condition and the availability of lifting
87 equipment or lift teams.

88 10. Conducting an annual performance evaluation of the
89 program to determine its effectiveness and reporting the results
90 of the evaluation to the safe patient handling committee. The
91 evaluation shall determine the extent to which implementation of
92 the program has resulted in a reduction in musculoskeletal
93 disorder claims and days of lost work attributable to
94 musculoskeletal disorders caused by patient handling and include
95 recommendations to increase the program's effectiveness.

96 11. Publication of the policy and plan for implementation
97 of the program and of the results of an annual evaluation that
98 uses data analysis to measure the success of the program.

99 (3) The feasibility of incorporating patient handling and
100 moving equipment or the physical space and construction design
101 needed to incorporate that equipment at a later date shall be
102 considered in the development of architectural plans for
103 constructing or remodeling a hospital or nursing home or a unit
104 of a hospital or nursing home in which patient handling and
105 moving occurs.

106 (4) A hospital or nursing home may not penalize,
107 discriminate against, or retaliate in any manner against an
108 employee with respect to compensation for, or terms, conditions,

109 or privileges of, employment if such an employee in good faith,
 110 individually or in conjunction with another person or persons:

111 (a) Reports a violation or suspected violation of this
 112 section to a regulatory agency, private accrediting body, or
 113 management personnel of the hospital or nursing home;

114 (b) Initiates, cooperates in, or otherwise participates in
 115 an investigation or proceeding brought by a regulatory agency or
 116 private accrediting body concerning matters covered by this
 117 section;

118 (c) Informs or discusses with any other employee, with any
 119 representative of an employee, or with the public violations or
 120 suspected violations of this section; or

121 (d) Otherwise avails himself or herself of the rights set
 122 forth in this section.

123 (5) The agency shall develop rules for administering this
 124 section that require compliance with policy development and
 125 reporting by January 1, 2008, and full implementation of safe
 126 handling and moving policies by July 1, 2012.

127 Section 2. Subsection (7) is added to section 395.701,
 128 Florida Statutes, to read:

129 395.701 Annual assessments on net operating revenues for
 130 inpatient and outpatient services to fund public medical
 131 assistance; administrative fines for failure to pay assessments
 132 when due; exemption.--

133 (7) (a) Beginning January 1, 2008, and continuing through
 134 December 31, 2012, when computing the annual assessment for
 135 inpatient revenue, as required under paragraph (2) (a), any
 136 hospital may claim credit for the amount spent during each

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137 fiscal year for the purchase of mechanical lifting devices and
138 other equipment that is primarily used to minimize patient
139 handling by health care providers, consistent with a safe
140 patient handling program developed and implemented by the
141 hospital in compliance with s. 381.029(2). The credit is equal
142 to 100 percent of the cost of the mechanical lifting devices or
143 other equipment. A credit earned during one fiscal year may be
144 carried over to be credited against the assessment required
145 under paragraph (2)(a) incurred in a subsequent fiscal year.
146 Refunds may not be granted for credits under this subsection.

147 (b) An application is not required to receive the credit.
148 However, a hospital receiving a credit under this subsection must
149 maintain and submit records, as required by the agency, necessary
150 to verify eligibility for the credit.

151 (c) The total maximum credit that may be earned under
152 this subsection for each hospital is limited to \$1,000 for each
153 acute care available inpatient bed.

154 Section 3. This act shall take effect July 1, 2007.