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State of Minnesota  
**HOUSE OF REPRESENTATIVES**

EIGHTY-FIFTH  
SESSION

**HOUSE FILE No. 712**

February 8, 2007

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The bill was read for the first time and referred to the Committee on Health and Human Services

1.1 A bill for an act  
1.2 relating to employee health; establishing the "Safe Patient Handling Act";  
1.3 requiring safe patient handling programs and committees to be established;  
1.4 appropriating money for safe patient handling grants; transferring money from  
1.5 the workers compensation special fund to the assigned risk safety account;  
1.6 proposing coding for new law in Minnesota Statutes, chapter 182.

1.7 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:

1.8 Section 1. **[182.6551] CITATION.**

1.9 Sections 182.6551 to 182.6553 may be cited as the "Safe Patient Handling Act."

1.10 Sec. 2. **[182.6552] DEFINITIONS.**

1.11 Subdivision 1. **Direct patient care worker.** "Direct patient care worker" means an  
1.12 individual doing the job of directly providing physical care to patients including nurses  
1.13 who provide physical care to patients as defined by section 148.171.

1.14 Subd. 2. **Emergency.** "Emergency" means failure to manually lift the patient would  
1.15 result in serious injury or death to the patient.

1.16 Subd. 3. **Health care facility.** "Health care facility" means a hospital as defined in  
1.17 section 144.50, subdivision 2, a medical facility as defined in section 144.561, subdivision  
1.18 1, paragraph (b), a nursing home as defined in section 144A.01, subdivision 5, an  
1.19 outpatient clinic, or a physician's office.

1.20 Subd. 4. **Safe patient handling.** "Safe patient handling" means a new process,  
1.21 based on scientific evidence on causes of injuries, that uses safe patient handling  
1.22 equipment rather than people to transfer, move, and reposition patients in all settings to  
1.23 reduce workplace injuries. This process also reduces the risk of injury to patients.

2.1 Subd. 5. **Safe patient handling equipment.** "Safe patient handling equipment"  
 2.2 means engineering controls, lifting and transfer aids, or mechanical assistive devices used  
 2.3 by nurses and direct patient care workers instead of manual lifting to perform the acts of  
 2.4 lifting, transferring, and repositioning health care patients and residents.

2.5 Subd. 6. **Safety officer.** "Safety officer" means an employee of a health care facility  
 2.6 whose job duties include maintaining the safety of the patients and employees.

2.7 **Sec. 3. [182.6553] SAFE PATIENT HANDLING PROGRAM.**

2.8 Subdivision 1. **Safe patient handling program required.** By January 1, 2010,  
 2.9 every licensed health care facility in the state shall implement a safe patient handling  
 2.10 program to eliminate manual lifting of patients by nurses and direct patient care workers  
 2.11 through the use of mechanical assistive devices, except during emergency situations as  
 2.12 defined in section 182.6552, subdivision 2. A safe patient handling program shall include:

2.13 (1) the establishment of a safe patient handling committee as required under  
 2.14 subdivision 2, or assignment of the functions of a safe patient handling committee to an  
 2.15 existing committee as permitted under subdivision 2;

2.16 (2) a patient handling hazard assessment conducted by the safe patient handling  
 2.17 committee or an existing committee assigned such functions that considers patient  
 2.18 handling tasks, types of nursing units, patient populations, and the physical environment  
 2.19 of patient care areas, and includes the identification of problems and solutions including a  
 2.20 system to report, track, and analyze injury trends;

2.21 (3) the purchase, use, and maintenance of an adequate supply of appropriate safe  
 2.22 patient handling equipment;

2.23 (4) initial and periodic compensated training of nurses and direct patient care  
 2.24 workers on safe patient handling and use of safe patient handling equipment;

2.25 (5) annually conducted evaluations by the committee of the safe patient handling  
 2.26 program as well as new technology, handling procedures, and equipment, and  
 2.27 documentation of the criteria used in the selection and evaluation process; and

2.28 (6) procedures to ensure that, when architectural plans for construction or remodeling  
 2.29 are made to a facility or unit where patient handling occurs, the plans incorporate safe  
 2.30 patient handling equipment or the physical space and construction design needed to  
 2.31 accommodate safe patient handling equipment at a later date.

2.32 Subd. 2. **Safe patient handling committee.** (a) By January 1, 2008, every licensed  
 2.33 health care facility in the state shall establish a safe patient handling committee either by  
 2.34 creating a new committee or assigning the functions of a safe patient handling committee  
 2.35 to an existing committee.

3.1 (b) Membership of a safe patient handling committee or an existing committee must  
 3.2 meet the following requirements:

3.3 (1) at least half the members shall be nonmanagerial nurses and direct patient care  
 3.4 workers;

3.5 (2) in a health care facility where nurses and direct patient care workers are  
 3.6 represented by a collective bargaining agreement, the union shall select the committee  
 3.7 members proportionate to its representation of those members; and

3.8 (3) the remaining members shall have experience, expertise, or responsibility  
 3.9 relevant to the operation of a safe patient handling program, including the facility's  
 3.10 safety officer.

3.11 (c) A health care organization with more than one covered health care facility shall  
 3.12 have a committee at each facility and include a safety officer on each committee.

3.13 (d) Employees who serve on the safe patient handling committee will be  
 3.14 compensated for all hours.

3.15 **Sec. 4. APPROPRIATION FOR SAFE PATIENT HANDLING GRANTS.**

3.16 \$2,000,000 is appropriated each year through fiscal year 2010 to the commissioner  
 3.17 of labor and industry to expand health and safety programs under Minnesota Rules,  
 3.18 chapter 5203, for grants to health care facilities, regardless of the number of employees  
 3.19 or size of the facility, for the acquisition of safe patient handling equipment for use by  
 3.20 nurses and direct patient care workers in performing the acts of lifting, transferring, or  
 3.21 repositioning of patients and health care facility residents. Grants may also be used for the  
 3.22 training of staff on safe patient handling and the use of safe patient handling equipment.  
 3.23 Grants must be matched on a dollar-for-dollar basis by grantees. Grant awards cannot  
 3.24 exceed 50 percent of the total project cost up to a maximum grant award of \$40,000.

3.25 **Sec. 5. WORKERS' COMPENSATION SPECIAL FUND TRANSFER.**

3.26 \$..... each year is transferred from the special compensation fund under Minnesota  
 3.27 Statutes, section 176.129, to the assigned risk safety account under Minnesota Statutes,  
 3.28 section 79.253, to add projects at health care facilities to acquire safe patient handling  
 3.29 equipment for use by nurses and direct patient care workers in performing the acts of  
 3.30 lifting, transferring, or repositioning. This transfer may also be used for education on safe  
 3.31 patient handling and use of safe patient handling equipment.

3.32 **Sec. 6. RULES.**

4.1 Pursuant to Minnesota Statutes, section 14.388, subdivision 1, clause (3), the  
 4.2 commissioner of labor and industry is directed to make the following changes in  
 4.3 Minnesota Rules, chapter 5203:

4.4 (1) add projects at health care facilities, regardless of the number of employees  
 4.5 or size of the facility, to acquire safe patient handling equipment for use by nurses and  
 4.6 direct patient care workers in performing the acts of lifting, transferring, or repositioning  
 4.7 of patients and health care facility residents to the list of proposal preferences under  
 4.8 Minnesota Rules, part 5203.0060, subpart 4; and

4.9 (2) increase the maximum safety grant award to 50 percent of project costs up to a  
 4.10 maximum grant award of \$40,000.

4.11 **Sec. 7. ENFORCEMENT.**

4.12 This statute shall be enforced by the OSHA Compliance Division of the Department  
 4.13 of Labor and Industry including protection of all rights of the affected parties.

4.14 **Sec. 8. STUDY.**

4.15 The commissioner of labor and industry shall conduct a study on ways to reduce  
 4.16 workers' compensation premium rates and reserve requirements for health care and  
 4.17 long-term care facilities in an effort to create financial incentives for the purchase of safe  
 4.18 patient handling equipment as directed in the Safe Patient Handling Act.