

House Bill 2381 Nurse and Health Care Worker Protection Act of 2009

Safe Patient Handling Legislation

The American Association for Long Term Care Nursing (AALTCN) supports the Work Injured Nurses Group (WING USA) and the newly formed “Coalition for Healthcare Worker and Patient Safety” (CHAPS) in their efforts to protect Nurses and Health Care Workers across the continuum of health care.

Please carefully read the information regarding HR 2381 Nurse and Health Care Worker Protection Act of 2009. This is extremely important legislation for all of us to understand and communicate to our colleagues for their support. This legislation will cross over all healthcare segments and will have a major impact on our profession. Everyone should be familiar with this information and able to communicate effectively to our constituents. This is an important issue for the health and well-being of all Nurses and Healthcare Workers. We know from several studies that by implementing a complete safe patient handling program consisting of equipment, training and competency based education that injuries are reduced at a significant cost savings to the facility. Another fact is that facilities that implement the type of program represented in HR 2381 enjoy decrease turnover in staff related to reduced injury; increase in job satisfaction and attract staff much easier than other facilities. Lastly, we see a positive impact on quality patient care both physically and psychologically.

Anne Hudson, Founder of Work Injured Nurses' Group USA (WING USA) and a nurse who was injured and forced to leave patient care is a staunch advocate for protecting nurses and Healthcare Workers. Please find below information I received from Ms. Hudson regarding an new group called the “Coalition for Healthcare Worker and Patient Safety” (CHAPS) that was recently formed for passage of HR 2381 Nurse and Health Care Worker Protection Act of 2009. HR 2381 provides some eye opening statistics about caregiver and patient injuries that is used to support the urgent need to pass this legislation. There is also an important timeline in section 2 of HR 2381 that provides for a “Safe Patient Handling and Injury Prevention Standard” that must be defined with specific guidelines within the first year. A final standard must be complete within 2 years from the date the legislation is enacted. Within six months following final legislation facilities will be required to implement a program, purchase equipment and begin training. SPH Training and a complete SPH Program with yearly evaluation will be a major part of the mandatory legislation.

WING USA SPH Legislative Update July 14, 2009: Coalition for Healthcare Worker and Patient Safety (CHAPS) Formed for Passage of HR 2381 Nurse and Health Care Worker Protection Act of 2009

The new “Coalition for Healthcare Worker and Patient Safety” (CHAPS) was recently formed for passage of HR 2381 Nurse and Health Care Worker Protection Act of 2009. On May 13, 2009, U.S. Representative John Conyers, Jr. (Democrat, Michigan District 14), introduced national legislation for the third time calling for the safe handling of dependent patients and residents throughout the American health care system (see details at www.wingusa.org).

HR 2381 would mandate the safe lifting and moving of all patients and residents by use of modern patient-lift equipment, instead of using the backs of nurses, nurse assistants, and other health care workers to handle such hazardous amounts of weight.

The Nurse and Health Care Worker Protection Act of 2009 calls for “the use of engineering controls to perform lifting, transferring, and repositioning of patients and the elimination of manual lifting of patients by direct-care registered nurses and all other health care workers, through the use of mechanical devices to the greatest degree feasible except where the use of safe patient handling practices can be demonstrated to compromise patient care. The standard shall apply to all health care employers.”

Safe Patient Handling Protects Patients and Healthcare Workers

Replacing the unsafe nursing practice of manual patient and resident lifting with safe lift and transfer equipment would allow many nurses, nurse assistants, and other healthcare workers to escape from working with chronic back pain, and from the devastating injuries, lifetime disabilities, and loss of career caused by manual patient lifting. Eliminating manual lifting would also protect patients and residents against pain and injuries caused by manual lifting such as bruising, abrasions, skin tears, tube dislodgement, dislocations, and being dropped.

“CHAPS” is born!

To this end, with a vision of reducing injuries caused by manual patient lifting, the Coalition for Healthcare Worker and Patient Safety was formed in June 2009 under the leadership of Marsha Medlin, RN. A broad coalition of organizations and individuals are now collaborating in the effort for passage of HR 2381, including Work Injured Nurses’ Group USA (**WING USA**), National Network of Career Nursing Assistants (**NNCNA**), United American Nurses (**UAN, AFL-CIO**), Service Employees International Union (**SEIU**), Minnesota Nurses Association (**MNA**), plus a variety of others including occupational health and safety professionals, professional nursing associations, labor unions representing healthcare workers, workers’ compensation carriers, patient lift equipment companies, and other organizations and individuals committed to patient and healthcare worker safety.

Patient handling affects us all!

Being lifted or moved by healthcare workers will literally, physically, touch every single one of us, or someone we love, at some point in time!

The toll of manual lifting of patients and residents is tremendous on healthcare workers who remain among top occupations for disabling musculoskeletal disorders (MSDs). In 2007, registered nurses suffered 8,580 [reported and accepted] MSDs, seventh highest in the country. Nursing aides, orderlies, and attendants suffered the second highest number at 24,340 MSDs, and *the highest rate of MSDs in the country* at 252 per 10,000 workers, over seven times the national MSD average for all occupations. EMTs and paramedics had the second highest rate with 179 MSDs per 10,000 workers. Categories of healthcare workers combined consistently outrank every other industry for musculoskeletal disorders, primarily from manually lifting and moving people (http://www.aflcio.org/issues/safety/memorial/upload/_20.pdf, <http://www.bls.gov/iif/home.htm> Chart A, and <http://www.bls.gov/news.release/pdf/osh2.pdf>).

Co-sponsors Needed for Passage of HR 2381

HR 2381 was introduced by Representative Conyers on May 13, 2009, with one co-sponsor, Representative Lynn Woolsey (Democrat, California District 6). On July 7, 2009, Representative Carolyn McCarthy (Democrat, New York District 4) came on board as the second co-sponsor.

Many more co-sponsors are needed to move the safe patient handling bill forward! You can help! Visit, call, and write U.S. Representatives in Congress from your state, asking them to co-sponsor HR 2381 Nurse and Health Care Worker Protection Act of 2009.

Locate U.S. Representatives

For links to contact info for U.S. Representatives from your state, go to http://www.house.gov/house/MemberWWW_by_State.shtml.

Or, go to <http://www.house.gov/>, and enter your zip code in the "Find Your Representative by Zip" box at the top left of the screen. It will take you to a link with contact info of the Representative for your district.

More info about CHAPS

For more info about CHAPS, or to be added to the CHAPS email list, contact the principal organizer of CHAPS, Marsha Medlin, RN, at mmedlin498@aol.com.

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Coalition for Healthcare Worker and Patient Safety (CHAPS) Supports HR 2381--The Nurse and Health Care Worker Protection Act of 2009

At a time when the US faces a national **nursing shortage** and patients and residents are getting **heavier and more dependent**, national **safe patient handling legislation is urgently needed to protect both health care workers and patients** caused by **dangerous manual patient and resident lifting practices** still utilized in many health care facilities throughout the country.

“CHAPS” is a broad coalition of organizations and individuals collaborating in an effort to support passage of HR 2381, the Nurse and Health Care Worker Protection Act of 2009. **HR 2381** would require **OSHA** to develop and implement a **standard** that would **eliminate manual lifting of patients and residents by direct-care registered nurses and all other health care workers** through the use of **assistive patient handling equipment** to the greatest degree feasible except where the use of safe patient handling practices can be demonstrated to compromise patient care. The standard would apply to **all health care employers**.

Each year **thousands of nurses, nursing aides and health care workers** sustain musculoskeletal disorders (MSDs) from manual lifting of patients and residents. **These injuries leave 50% or more working in chronic pain or at least 12% leaving the profession**, many with permanent disabling injuries.

Health care facilities that incorporate assistive patient handling equipment and safe patient handling programs have demonstrated **significant decrease in MSD injuries** to nurse and health care workers and health care worker **turnover, increased cost savings** in workers compensation rates and **improved patient comfort and safety**.

CHAPS members include injured nurses and other injured healthcare workers, occupational health and safety professionals, professional nursing associations, labor unions representing healthcare workers, workers compensation carriers, and other organizations and individuals committed to patient and worker safety.

The Issue

Work Related Musculoskeletal Disorders (MSDs) such as back strains and damage to spinal discs in nurses and other health care workers persist as the **leading and most costly** occupational health problem in the U.S.

In 2007, direct-care registered **nurses** ranked **seventh** among all occupations for the number of cases of MSDs resulting in **days away from work** in the US. **Nursing aides, orderlies, and attendants** had a MSD rate **more than seven times** the national MSD average for all occupations. The rate of MSDs in health care workers **exceeds** that of workers in construction, mining, and manufacturing.

These injuries are reported not only by nurses and nursing aides but **physical therapists, home health aides, emergency medical workers, and x-ray technicians**. MSDs due to manual patient handling occur in **all** health care environments from **hospitals, nursing homes, outpatient clinics, home health settings to emergency medical services**.

The primary cause of these injuries is the result of **repeated manual lifting, transferring, and repositioning of patients and residents**. The **cumulative weight** a nurse or health care worker may have to lift (patient lifts or transfers) within an **8-hour shift** is equivalent to **1.8 tons** (*that is the equivalent of a Subaru Forrester with a 600lb passenger load*)! In fact, research by the National Institute of Occupational Safety and Health (NIOSH) demonstrates that **the safe lift limit** for cumulative manual handling of patients or residents is **only 35lbs**. Research also shows that repeated manual patient or resident lifting can cause cumulative microfractures of the lower spine that lead to **disc damage and permanent disabling injury**.

Injuries associated with manual patient or resident handling:

- 1. Cause nurses and health care workers:**
 - To work in pain on a daily basis
 - Chronic pain and suffering
 - Permanent disability
 - Shortened careers
 - Loss of livelihood
- 2. Have negative impact on patient/resident safety related to the risk of:**
 - Falls during transfers
 - Skin tears and bruising or skin damage
 - Increased pain and discomfort
 - Loss of dignity and privacy
- 3. Are extremely costly for health care organizations:**
 - Healthcare worker **back injuries alone** are estimated to cost **\$20 billion annually** in direct and indirect costs.
 - Nursing personnel have **the highest** workers' compensation claim rates of any occupation or industry

See over

Research on the impact of MSDs among nurses alone shows the following:

- An estimated **12 percent** leave the profession each year due back pain
- **31% reported** having personally experienced a back or musculoskeletal injury while working as a nurse
- **38 percent** suffer work related back pain severe enough to require leave from work
- **52 percent** complain of chronic back pain
- **20% transferred** to a different unit, position, or employment because of lower back pain
- **1 in 3 nurses younger than 30** are reported to be planning to **leave his or her job** within the next year due to physical demands of the job.

Even **student nurses and other health care students** suffer MSDs due to lifting patients or residents that **impact** their careers.

It is estimated as many as **50 percent** MSD injuries in nurses and health care workers **may go unreported**.

35 years of research shows that there **is no safe way to perform manual patient handling**. Injury risk to nurses and health care workers is increased by the dramatic escalation of **obesity in the patient and resident population** and number of older people who require assistance with the activities of daily living.

Protecting nurses and health care workers from disabling injury is crucial during a critical nurse shortage.

Injuries to Nurses, Health Care Workers and Patients are Preventable

It is well documented that multifaceted, participatory Safe Patient Handling (SPH) programs reduce injuries from lifting and moving patients and residents. Effective programs include active involvement of direct care nurses, and other health care workers, visible administrative support, assessment of patient handling needs, appropriate lifting and moving equipment, and “no manual lifting” policies

Safe Patient Handling Programs and Equipment are Cost Effective.

Extensive evidence shows that Safe Patient Handling programs decrease:

- Patient-handling related workers' compensation injury rates (30-95%)
- Lost workday injury rates (66-100%),
- Restricted workdays (up to 38%),
- Workers compensation costs (30-75%)
- Insurance premiums (50%)
- The number of workers suffering from repeat injuries

Increase in caregiver job satisfaction and significant **reductions in health care staff turnover** are also reported.

Initial investment for purchase of equipment and training costs can be **recovered less than 2-3 years**.

Safe Patient Handling Programs Benefit the Patient or Resident

Positive outcomes include:

- **Decrease in combativeness** with use of lifting equipment
- **Reduced shearing** injury in patients, which lead to skin damage and exacerbate pressure ulcers
- **Reduction in falls**
- **Increase in physical functioning** and activity level
- **Patient dignity** is protected by using assistive equipment and devices
- Patients report feeling more **comfortable and secure** when be moved or repositioned by SPH equipment

The Bottom Line.....

Health care worker exposure to occupational injury is simply not an acceptable risk associated with patient care.

Patient safety cannot be adequately addressed if employee safety is not being adequately addressed'

Federal Legislation, and Grant money to assist health care facilities demonstrating financial need to purchase safe patient handling equipment, will enable the U.S. healthcare industry to **improve worker and patient safety**, contribute to **retention and recruitment** of the health care workforce, and **decrease costs** to insurance companies and health care organizations.

Coalition for Healthcare Worker & Patient Safety. Contact Marsha Medlin, RN, at MMedlin498@aol.com

Call your Congressman to tell them to co-sponsor HR 2381.

Here's How: Call the Capitol Hill Switchboard at (202) 224-3121 and ask to be connected to your Congressman or Representative.

Visit www.house.gov to find your Congressman's contact information. Simply enter in your zipcode and the name of your Congressman will come up.

Below are sample scripts, and remember to tell them you are a health care worker and a concerned constituent.

CALL YOUR REPRESENTATIVE

A sample message for your call:

"Hello. My name is _____, I live in (city/state) and work as a _____. I (we) believe that all healthcare workers deserve to work in a safe environment.. I urge support of:

- H.R. 2381, **Nurse and Health Care Worker Protection Act of 2009**, - ask them to sign on to the recently reintroduced Safe Lifting legislation by John Conyers Jr (MI) which sets occupational safety and health standard to reduce injuries to patients, direct-care registered nurses, and all other health care workers by establishing a safe patient handling and injury prevention standard.
- There is currently a shortage of 100,000 RN's and that shortage is expected to be 340,000 by the year 2020. We need to keep every healthcare worker that we have safe.