



94TH GENERAL ASSEMBLY

State of Illinois

2005 and 2006

SB2692

Introduced 1/20/2006, by Sen. Donne E. Trotter

SYNOPSIS AS INTRODUCED:

210 ILCS 45/3-217 new
210 ILCS 85/6.22 new

Amends the Nursing Home Care Act. Requires every nursing home and hospital to adopt and ensure implementation of a policy to identify, assess, and develop strategies to control the risk of injury to residents, patients, and nurses associated with the lifting, transferring, repositioning, or movement of a resident or patient. Sets forth certain items that must be included in the policy, including (i) an analysis of the risk of injury to residents, patients, and nurses posed by the handling needs of the resident or patient populations served by the nursing home or hospital and the physical environment in which resident or patient handling and movement occurs and (ii) education of nurses in the identification, assessment, and control of risk of injury to residents, patients, and nurses during resident or patient handling. Effective immediately.

LRB094 16988 DRJ 52269 b

1 AN ACT concerning regulation.

2 **Be it enacted by the People of the State of Illinois,**
3 **represented in the General Assembly:**

4 Section 5. The Nursing Home Care Act is amended by adding
5 Section 3-217 as follows:

6 (210 ILCS 45/3-217 new)

7 Sec. 3-217. Handling residents; controlling risk of
8 injury. Every facility shall adopt and ensure implementation of
9 a policy to identify, assess, and develop strategies to control
10 the risk of injury to residents and nurses associated with the
11 lifting, transferring, repositioning, or movement of a
12 resident. The policy shall establish a process that, at a
13 minimum, includes all of the following:

14 (1) Analysis of the risk of injury to both residents
15 and nurses posed by the handling needs of the resident
16 populations served by the facility and the physical
17 environment in which resident handling and movement
18 occurs.

19 (2) Education of nurses in the identification,
20 assessment, and control of risk of injury to residents and
21 nurses during resident handling.

22 (3) Evaluation of alternative ways to reduce risks
23 associated with resident handling, including evaluation of
24 equipment and the environment.

25 (4) Restriction, to the extent feasible with existing
26 equipment and aids, of manual resident handling or movement
27 of all or most of a resident's weight to emergency,
28 life-threatening, or otherwise exceptional circumstances.

29 (5) Collaboration with and an annual report to the
30 facility's nurse staffing committee.

31 (6) Procedures for a nurse to refuse to perform or be
32 involved in resident handling or movement that the nurse in

1 good faith believes will expose a resident or a nurse to an
2 unacceptable risk of injury.

3 (7) Submission of an annual report to the facility's
4 governing body or the facility's quality assurance
5 committee on activities related to the identification,
6 assessment, and development of strategies to control risk
7 of injury to residents and nurses associated with the
8 lifting, transferring, repositioning, or movement of a
9 resident.

10 (8) In developing architectural plans for constructing
11 or remodeling a facility or a unit of a facility in which
12 resident handling and movement occurs, consideration of
13 the feasibility of incorporating resident-handling
14 equipment or the physical space and construction design
15 needed to incorporate that equipment at a later date.

16 Section 10. The Hospital Licensing Act is amended by adding
17 Section 6.22 as follows:

18 (210 ILCS 85/6.22 new)

19 Sec. 6.22. Handling patients; controlling risk of injury.
20 Every hospital shall adopt and ensure implementation of a
21 policy to identify, assess, and develop strategies to control
22 the risk of injury to patients and nurses associated with the
23 lifting, transferring, repositioning, or movement of a
24 patient. The policy shall establish a process that, at a
25 minimum, includes all of the following:

26 (1) Analysis of the risk of injury to both patients and
27 nurses posed by the handling needs of the patient
28 populations served by the hospital and the physical
29 environment in which patient handling and movement occurs.

30 (2) Education of nurses in the identification,
31 assessment, and control of risk of injury to patients and
32 nurses during patient handling.

33 (3) Evaluation of alternative ways to reduce risks
34 associated with patient handling, including evaluation of

1 equipment and the environment.

2 (4) Restriction, to the extent feasible with existing
3 equipment and aids, of manual patient handling or movement
4 of all or most of a patient's weight to emergency,
5 life-threatening, or otherwise exceptional circumstances.

6 (5) Collaboration with and an annual report to the
7 hospital's nurse staffing committee.

8 (6) Procedures for a nurse to refuse to perform or be
9 involved in patient handling or movement that the nurse in
10 good faith believes will expose a patient or a nurse to an
11 unacceptable risk of injury.

12 (7) Submission of an annual report to the hospital's
13 governing body or the hospital's quality assurance
14 committee on activities related to the identification,
15 assessment, and development of strategies to control risk
16 of injury to patients and nurses associated with the
17 lifting, transferring, repositioning, or movement of a
18 patient.

19 (8) In developing architectural plans for constructing
20 or remodeling a hospital or a unit of a hospital in which
21 patient handling and movement occurs, consideration of the
22 feasibility of incorporating patient-handling equipment or
23 the physical space and construction design needed to
24 incorporate that equipment at a later date.

25 Section 99. Effective date. This Act takes effect upon
26 becoming law.