



Sen. Linda Holmes

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LRB097 04946 DRJ 66311 a

1 AMENDMENT TO SENATE BILL 680

2 AMENDMENT NO. \_\_\_\_\_. Amend Senate Bill 680 by replacing  
3 everything after the enacting clause with the following:

4 "Section 5. The Nursing Home Care Act is amended by  
5 changing Section 3-206.05 as follows:

6 (210 ILCS 45/3-206.05)

7 Sec. 3-206.05. Safe resident handling policy.

8 (a) In this Section:

9 "Health care worker" means an individual providing direct  
10 resident care services who may be required to lift, transfer,  
11 reposition, or move a resident.

12 "Nurse" means an advanced practice nurse, a registered  
13 nurse, or a licensed practical nurse licensed under the Nurse  
14 Practice Act.

15 "Safe lifting equipment and accessories" means mechanical  
16 equipment designed to lift, move, reposition, and transfer

1 residents, including, but not limited to, fixed and portable  
2 ceiling lifts, sit-to-stand lifts, slide sheets and boards,  
3 slings, and repositioning and turning sheets.

4 "Safe lifting team" means at least 2 individuals who are  
5 trained and proficient in the use of both safe lifting  
6 techniques and safe lifting equipment and accessories.

7 "Adjustable equipment" means products and devices that may  
8 be adapted for use by individuals with physical and other  
9 disabilities in order to optimize accessibility. Adjustable  
10 equipment includes, but is not limited to, the following:

11 (1) Wheelchairs with adjustable footrest height and  
12 seat width and depth.

13 (2) Height-adjustable, drop-arm commode chairs and  
14 height-adjustable shower gurneys or shower benches to  
15 enable individuals with mobility disabilities to use a  
16 toilet and to shower safely and with increased comfort.

17 (3) Accessible weight scales that accommodate  
18 wheelchair users.

19 (4) Height-adjustable beds that can be lowered to  
20 accommodate individuals with mobility disabilities in  
21 getting in and out of bed and that utilize drop-down side  
22 railings for stability and positioning support.

23 (5) Universally designed or adaptable call buttons and  
24 motorized bed position and height controls that can be  
25 operated by persons with limited or no reach range, fine  
26 motor ability, or vision.

1           (6) Height-adjustable platform tables for physical  
2           therapy with drop-down side railings for stability and  
3           positioning support.

4           (7) Therapeutic rehabilitation and exercise machines  
5           with foot straps to secure the user's feet to the pedals  
6           and with cuffs or splints to augment the user's grip  
7           strength on handles.

8           (b) A facility must adopt and ensure implementation of a  
9           policy to identify, assess, and develop strategies to control  
10          risk of injury to residents and nurses and other health care  
11          workers associated with the lifting, transferring,  
12          repositioning, or movement of a resident. The policy shall  
13          establish a process that, at a minimum, includes all of the  
14          following:

15               (1) Analysis of the risk of injury to residents and  
16               nurses and other health care workers taking into account  
17               the resident handling needs of the resident populations  
18               served by the facility and the physical environment in  
19               which the resident handling and movement occurs.

20               (2) Education and training of nurses and other direct  
21               resident care providers in the identification, assessment,  
22               and control of risks of injury to residents and nurses and  
23               other health care workers during resident handling and on  
24               safe lifting policies and techniques and current lifting  
25               equipment.

26               (3) Evaluation of alternative ways to reduce risks

1 associated with resident handling, including evaluation of  
2 equipment and the environment.

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

7 (5) Procedures for a nurse to refuse to perform or be  
8 involved in resident handling or movement that the nurse in  
9 good faith believes will expose a resident or nurse or  
10 other health care worker to an unacceptable risk of injury.

11 (6) Development of strategies to control risk of injury  
12 to residents and nurses and other health care workers  
13 associated with the lifting, transferring, repositioning,  
14 or movement of a resident.

15 (7) In developing architectural plans for construction  
16 or remodeling of a facility or unit of a facility in which  
17 resident handling and movement occurs, consideration of  
18 the feasibility of incorporating resident handling  
19 equipment or the physical space and construction design  
20 needed to incorporate that equipment.

21 (8) Fostering and maintaining resident safety,  
22 dignity, self-determination, and choice, including the  
23 following policies, strategies, and procedures:

24 (A) The existence and availability of a trained  
25 safe lifting team.

26 (B) A policy of advising residents of a range of

1           transfer and lift options, including adjustable  
2           diagnostic and treatment equipment, mechanical lifts,  
3           and provision of a trained safe lifting team.

4           (C) The right of a competent resident, or the  
5           guardian of a resident adjudicated incompetent, to  
6           choose among the range of transfer and lift options  
7           consistent with the procedures set forth under  
8           subdivision (b)(5) and the policies set forth under  
9           this paragraph (8), subject to the provisions of  
10           subparagraph (E) of this paragraph (8).

11           (D) Procedures for documenting, upon admission and  
12           as status changes, a mobility assessment and plan for  
13           lifting, transferring, repositioning, or movement of a  
14           resident, including the choice of the resident or the  
15           resident's guardian among the range of transfer and  
16           lift options.

17           (E) Incorporation of such safe lifting procedures,  
18           techniques, and equipment as are consistent with  
19           applicable federal law.

20           (c) Safe lifting teams must receive specialized, in-depth  
21           training that includes, but need not be limited to, the  
22           following:

23           (1) Types and operation of equipment.

24           (2) Safe manual lifting and moving techniques.

25           (3) Ergonomic principles in the assessment of risk both  
26           to nurses and other workers and to residents.

1           (4) The selection, safe use, location, and condition of  
2           appropriate pieces of equipment individualized to each  
3           resident's medical and physical conditions and  
4           preferences.

5           (5) Procedures for advising residents of the full range  
6           of transfer and lift options and for documenting  
7           individualized lifting plans that include resident choice.

8           Specialized, in-depth training may rely on federal  
9           standards and guidelines such as the United States Department  
10          of Labor Guidelines for Nursing Homes, supplemented by federal  
11          requirements for barrier removal, independent access, and  
12          means of accommodation optimizing independent movement and  
13          transfer.

14          (Source: P.A. 96-389, eff. 1-1-10.)".