



## Legislation Details (With Text)

**File #:** Int 0208-2014 **Version:** \* **Name:** Creation of a safe patient handling advisory board.  
**Type:** Introduction **Status:** Filed (End of Session)  
**In control:** Committee on Health  
**On agenda:** 3/26/2014  
**Enactment date:** **Enactment #:**  
**Title:** A Local Law to amend the administrative code of the city of New York in relation to the creation of a safe patient handling advisory board.  
**Sponsors:** Rory I. Lancman, Inez D. Barron, Rosie Mendez  
**Indexes:**  
**Attachments:**

Date	Ver.	Action By	Action	Result
3/26/2014	*	City Council	Introduced by Council	
3/26/2014	*	City Council	Referred to Comm by Council	
12/31/2017	*	City Council	Filed (End of Session)	

Int. No. 208

By Council Members Lancman, Barron and Mendez

A Local Law to amend the administrative code of the city of New York in relation to the creation of a safe patient handling advisory board.

Be it enacted by the Council as follows:

Section 1. Legislative findings and intent. The Council finds that it is in the public interest to develop Safe Patient Handling policy recommendations for health care facilities operating in New York City. There are many benefits that can be derived from the development and implementation of Safe Patient Handling policies. Patients benefit through improved quality of care and quality of life by reducing the risk of falls, being dropped, friction burns, skin tears and bruises. Caregivers benefit from the reduced risk of career ending and debilitating injuries. If best practices in Safe Patient Handling are identified and if such practices were implemented, there would be improved health and safety across the City.

§2. Safe Patient Handling Advisory Board. a. For purposes of this subdivision, the following terms shall have the following meanings:

1. “Health care facility” shall mean any individual, partnership, association, corporation, limited liability company or any person or group of persons acting directly or indirectly on behalf of or in the interest of the employer, who provides health care services in a facility licensed or operated pursuant to articles twenty-eight, twenty-eight-a and thirty-six of the New York state public health law, the New York state mental hygiene law, the New York state education law and the New York state correction law, including any facility operated by New York state, a political subdivision or a public benefit corporation as defined by section sixty-six of the New York state general construction law, or any successor provision thereto.

2. “Nurse” shall have the same meaning as set forth in article one hundred thirty-nine of the New York state education law.

3. “Direct care worker” shall mean any employee of a health care facility that is responsible for patient handling or patient assessment as a regular or incident part of their employment, including any licensed or unlicensed health care worker.

4. “Safe patient handling” shall mean the use of engineering controls and lifting and transfer aids or assistive devices, by direct care workers, which may be used as a substitute for manual lifting to perform the acts of lifting, transferring or repositioning health care patients and residents. 5. “Safe patient handling policy recommendations” shall include a written statement explaining the purpose and health benefits of a safe patient handling policy, and a set of recommendations for procedures, methods and equipment that the department recommends that health care facilities operating in New York city adopt for the purpose of decreasing patient and employee injuries when handling patients.

b. Safe patient handling advisory board. There shall be an advisory board to study injuries to and problems facing patients and health care facility employees due to the unsafe handling of patients and recommended safe patient handling procedures.

c. Such advisory board shall consist of nine members as follows:

1. The commissioner, or his or her designee;

2. Four members to be appointed by the mayor, provided that one such member shall be a representative from an employee organization representing nurses, one such member shall be a representative from an employee organization representing direct care workers other than nurses, and two such members shall have expertise in fields of discipline related to health care or occupational safety.

3. Four members to be appointed by the speaker of the council, provided that one such member shall be a representative from an employee organization representing nurses, one such member shall be a representative from an employee organization representing direct care workers other than nurses, and two such members shall have expertise in fields of discipline related to health care or occupational safety.

d. The members shall be appointed within sixty days of the enactment of this local law.

e. At its first meeting, the advisory board shall select a chairperson from among its members by majority vote of the advisory board.

f. Each member shall serve for a term of twelve months, to commence after the final member of the advisory board is appointed. Any vacancies in the membership of the advisory board shall be filled in the same manner as the original appointment. A person filling such vacancy shall serve for the unexpired portion of the term of the succeeded member.

g. The department may provide staff to assist the advisory board.

h. No member of the advisory board shall be removed from office except for cause and upon notice and hearing by the appropriate appointing official.

i. Members of the advisory board shall serve without compensation and shall meet no less than once a month.

j. No later than twelve months from the date all nine members of advisory board are appointed, the advisory board shall submit to the mayor and the council a report that shall include the findings and recommendations of the advisory board. The department shall make such safe patient handling policy recommendations available to the public through the department's website. Such report shall include

recommendations for standards to be adopted by health care facilities with regard to:

1. the equipment, devices or technology to be used by a nurse or direct care worker who is engaged in patient handling;

2. the ratio of such equipment or technology based upon the type of facility, the number of beds in a facility, the number of patient-handling tasks, types of care units, patient populations, and patient care areas; and

3. the minimum number of devices to ensure that current assessed hazards are eliminated or mitigated;

k. The advisory board shall dissolve upon submission of the report required by subdivision j of this section.

§3. This local law shall take effect immediately after its enactment into law.

DSH  
LS 559/2014  
3/6/2014