

AMENDED IN SENATE AUGUST 23, 2004

AMENDED IN SENATE AUGUST 17, 2004

AMENDED IN ASSEMBLY MAY 20, 2004

AMENDED IN ASSEMBLY APRIL 15, 2004

CALIFORNIA LEGISLATURE—2003–04 REGULAR SESSION

ASSEMBLY BILL

No. 2532

**Introduced by Assembly Member Hancock
(Principal coauthor: Assembly Member Koretz)**

February 20, 2004

An act to add Section 6403.5 to the Labor Code, relating to health facilities.

LEGISLATIVE COUNSEL'S DIGEST

AB 2532, as amended, Hancock. Hospitals: ~~zero lift policy study lift teams.~~

Existing law regulates the operation of health facilities, including hospitals.

Existing law, the California Occupational Safety and Health Act of 1973, establishes certain safety and other responsibilities of employers and employees, including, but not limited to, the requirement that no employer shall fail or neglect to provide safety devices or safeguards reasonably necessary to render the employment safe.

~~This bill would require the State Department of Health Services to conduct a study on existing California and out-of-state zero lift policies exercised in general acute care hospitals. This bill would provide that the study focus on the impact of zero lift policies on workers'~~

~~compensation claims and contracts. This bill would require the department to report the results of the study to the Legislature by January 1, 2006. safe. Willful or repeated violations are a crime.~~

This bill would require each general acute care hospital, except rural general acute hospitals, to establish a health care worker back injury prevention plan. This bill would require each hospital to conduct a needs assessment that utilizes a lifting and transferring process identifying patients needing lift teams, lifting devices, and lifting equipment.

This bill would require hospitals to implement a “zero lift policy” for all shifts, to utilize lift teams, lifting devices, and lifting equipment, and to train health care workers on the appropriate use of lifting devices and equipment. This bill would require lift team members to receive specialized training and to demonstrate proficiency in safe techniques for lifting or transferring patients and while using lifting or transferring devices and equipment.

This bill would provide that a health care worker who refuses to lift a patient would not be disciplined, unless the worker had been trained on appropriate patient and equipment lifting procedures and has appropriate, functional lifting devices and equipment available to perform the requested lift. By changing the definition of a crime, this bill would impose a state-mandated local program.

This bill would become operative on July 1, 2005.

The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement.

This bill would provide that no reimbursement is required by this act for a specified reason.

Vote: majority. Appropriation: no. Fiscal committee: yes. State-mandated local program: ~~no~~ yes.

The people of the State of California do enact as follows:

- 1 ~~SECTION 1. (a) The State Department of Health Services~~
- 2 ~~shall conduct a study on existing zero lift policies exercised in~~
- 3 ~~general acute care hospitals in California and in other states. The~~
- 4 ~~study shall focus on, but not be limited to, the impact of zero lift~~
- 5 ~~policies on workers’ compensation claims and contracts.~~



1 ~~(b) The department shall submit to the Legislature a report on~~
2 ~~the results of the study by January 1, 2006.~~

3 *SECTION 1. Section 6403.5 is added to the Labor Code, to*
4 *read:*

5 *6403.5. (a) As part of their injury and illness prevention*
6 *programs required by this chapter, all general acute care hospitals*
7 *as defined in subdivision (a) of Section 1250 of the Health and*
8 *Safety Code shall adopt a health care worker back injury*
9 *prevention plan. As part of their plan, each hospital shall conduct*
10 *a needs assessment in relation to patient lifts. As part of the needs*
11 *assessment, each hospital subject to this section shall develop a*
12 *lifting and transferring process that identifies the patients that*
13 *require the appropriate use of lift teams and lifting devices and*
14 *equipment. For purposes of this section, a “lifting and transferring*
15 *process” shall mean a system whereby patients are identified*
16 *based on the potential risk of injury to the health care worker in*
17 *the event the worker would need to lift or transfer that patient.*

18 *(b) Hospitals shall implement a “zero lift policy” for all shifts*
19 *for patients identified pursuant to subdivision (a) as requiring lift*
20 *teams and the use of lifting devices and equipment. Each general*
21 *acute care hospital subject to this section shall, as appropriate and*
22 *consistent with the needs assessment developed pursuant to*
23 *subdivision (a), utilize lift teams and lifting devices and*
24 *equipment. For purposes of this section, “zero lift policy” means*
25 *replacing manual lifting and transferring of patients with powered*
26 *patient transfer devices, lifting devices, or lift teams as defined in*
27 *subdivision (d), consistent with the needs assessment developed*
28 *pursuant to subdivision (a). Each general acute care hospital*
29 *subject to this section shall provide training to health care workers*
30 *on the appropriate use of the lifting devices and equipment.*
31 *Training for these health care workers shall include body*
32 *mechanics and the use of lifting devices to safely handle patients.*

33 *(c) Lift team members shall be given specialized training and*
34 *shall demonstrate proficiency in safe techniques for lifting or*
35 *transferring patients and the appropriate use of lifting or*
36 *transferring devices and equipment. Lift teams shall utilize lifting*
37 *devices and equipment when assisting health care workers*
38 *throughout the hospital to lift patients unless specifically contra*
39 *indicated for the patient’s condition or medical status.*



1 (d) For purposes of this section, “lift team” means hospital
2 employees specially trained to handle patient lifts and transfers.

3 (e) A health care worker who refuses to lift a patient due to
4 concerns about worker and patient safety and the lack of trained
5 lift team personnel or equipment may not, based upon the refusal,
6 be the subject of disciplinary action by the hospital or any of its
7 managers or employees.

8 (f) Notwithstanding subdivision (e), the hospital, its managers
9 or employees may discipline a health care worker who refuses to
10 lift a patient if the health care worker has been trained on
11 appropriate patient and equipment lifting procedures, and has
12 appropriate, functional lifting devices and equipment available to
13 perform the requested lift.

14 (g) This section shall not apply to hospitals licensed by the
15 State Department of Health Services as rural general acute care
16 hospitals as defined in subdivision (a) of Section 1250 of the
17 Health and Safety Code.

18 (h) It is not the intent of this section to prescribe a particular
19 process for acute care facilities subject to this section.

20 SEC. 2. This act shall become operative on July 1, 2005.

21 SEC. 3. No reimbursement is required by this act pursuant to
22 Section 6 of Article XIII B of the California Constitution because
23 the only costs that may be incurred by a local agency or school
24 district will be incurred because this act creates a new crime or
25 infraction, eliminates a crime or infraction, or changes the penalty
26 for a crime or infraction, within the meaning of Section 17556 of
27 the Government Code, or changes the definition of a crime within
28 the meaning of Section 6 of Article XIII B of the California
29 Constitution.

