



## HEALTHCARE

## EMPLOYER GUIDE



# SAFE PATIENT HANDLING COMPLIANCE CHECKLIST

To have an effective Safe Patient Handling Program, it is important that your policy include all the elements of New York State’s Safe Patient Handling Act. The checklist below lists the requirements that must be met. If properly implemented, the law dictates that healthcare employers in specific classifications may be eligible for a discount from their workers’ compensation carrier.

(Documentation will be required by NYSIF)

SPH COMPLIANCE REQUIREMENTS	YES	NO	N/A
Is there a facility-based Safe Patient Handling Committee?			
Does the committee include members with expertise or experience that is relevant to safe patient handling, risk assessment, nursing, purchasing or occupational safety and health?			
If there is employee representation (union), is there at least one member appointed on behalf of nurses and at least one member appointed on behalf of direct care workers?			
Is one half of the committee’s membership comprised of front-line, non-managerial employees that provide direct care?			
Is there at least one non-managerial nurse and at least one managerial direct care provider on the committee?			
Are there two co-chairs, one managerial, the other a front line non-managerial nurse or direct care worker?			
Do you have a representative from the New York State Insurance Fund on the committee?			
If there is a resident council, and if feasible, is there a resident council member included in the committee?			

<b>SPH COMPLIANCE REQUIREMENTS</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>
Has a written Safe Patient Handling program been established and is it specific to the type of facility and its services, patient populations and care plans, types of caregivers and physical environment for all shifts and units of the health care facility?			
Are patient handling hazard assessments conducted?			
Does the patient handling hazard assessment consider such variables as patient handling tasks, types of nursing units, patient populations and the physical environment of patient care areas?			
Is there a process/procedure in place to identify the appropriate use of the safe patient handling policy based on the patients physical and medical condition and the availability of safe patient handling equipment?			
Does the safe patient handling policy include a means to address circumstances under which it would be contraindicated, based on a particular patient's physical, medical, weight bearing, cognitive and/or rehabilitative status, to use lifting or transfer aids or assistive devices?			
Is there initial and ongoing yearly training and education provided on safe patient handling for current employees and new hires with patient handling responsibilities?			
Have procedures been established and implemented for the retraining for those found deficient?			
Has a process been set up and utilized for patient handling incident investigation as well as post investigation review?			
Has an annual performance evaluation of the safe patient handling program been set up and utilized to determine if the safe patient handling program has been effective?			
Are the results of the evaluation reported to the committee?			
Has there been an annual evaluation to determine if the program has resulted in a reduction in the risk to patients?			
Has there been an annual evaluation of the number of employee patient handling claims and lost work days attributable to the patient handling program?			
Does the evaluation include recommendations to increase the program's effectiveness?			
If there was a remodeling of the health care facility or a unit of the health care facility in which patient handling and movement occurs, was consideration given to the feasibility of incorporating patient handling equipment or the physical space and construction design needed to incorporate that equipment at a later date?			
Is there a process for employees to refuse to perform or be involved in patient handling or movement if that employee reasonably believes, in good faith, that it will expose a patient or health care facility employee to an unacceptable risk of injury?			
Does this process require that the nurse or direct care worker make a good faith effort to ensure patient safety as well as bring the matter to the attention of the facility in a timely manner?			
Is there a process in place to ensure that an employee who reasonably and in good faith follows the "refuse to perform" policy developed by the health care facility shall not be the subject of disciplinary action by the health care facility for the refusal to perform or be involved in the patient handling or movement?			