

Hospitals' Heavy Lifting: Understanding OSHA's New Hospital Worker and Patient Safety Guidance

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On January 15, 2014 the U.S. Department of Labor's Occupational Safety and Health Administration (OSHA) launched a new online resource to address both worker and patient safety in hospitals.¹

According to OSHA, a hospital is one of the most dangerous places to work, as employees can face numerous serious hazards from lifting and moving patients, to exposure to chemical hazards and infectious diseases, to potential slips, trips, falls, and potential violence by patients—all in a dynamic and ever-changing environment. In 2011 private hospitals reported nearly 60,000 cases of injury or illness that resulted in days away from work, and OSHA believes many more injuries in hospitals go unreported because most hospital employees are health care professionals uniquely able to self-treat their workplace injuries.

OSHA estimates that hospitals nationwide spend approximately \$2 billion on workers' compensation losses each year. To encourage hospitals to adopt its new safety guidance, OSHA dedicated much of the web materials to demonstrate how hospitals that devoted resources to improving safe patient handling and other safety issues lowered costs associated with worker injuries. These lowered costs were generally attributed to fewer injuries, a decrease in the severity of injuries, and fewer patient falls, skin tears, and pressure ulcers.

OSHA's web resource includes a general self-assessment tool, a hospital safety and health management system self-assessment questionnaire, and a safe patient handling self-assessment to help hospital administrators determine the safety of their workplaces. The resource also includes a comparison of OSHA Safety and Health Management Systems and The Joint Commission Standards, as well as a checklist for creating a safe patient handling program.

What Does the Guidance Say?

The OSHA web resource is intended to help hospitals identify their safety needs, implement safety and health management systems, and enhance safe patient handling programs.



Because nearly half of hospital workers' injuries are ergonomics related (i.e., lifting, bending, reaching, or slipping), and sprains and strains cause more than half of the reported injuries, most of OSHA's hospital web guidance focuses on developing safe patient handling programs.

Develop a Safe Patient Handling Program

To develop a successful safe patient handling program, OSHA suggests hospital management complete a comprehensive assessment of the nature of patient and worker needs. OSHA suggests that hospitals begin by reviewing their injury and illness recordkeeping data to identify work areas or tasks where injuries occur most frequently. OSHA also suggests reviewing workers' compensation claims and internal incident, investigation, and/or corrective action reports to identify hazards and injury trends. Finally, OSHA suggests auditing workplace conditions and work processes, and conducting job hazard assessments, surveys, and worker interviews to identify problems that may result in worker injuries.

Once the hospital identifies areas and tasks that pose safety risks, the hospital should develop and implement a tailored safe patient handling program. OSHA recommends that hospitals memorialize these programs in written policies, and should demand that staff use the safest techniques to accomplish patient handling tasks. Safe handling policies should specifically identify and address the importance of using lift equipment, using the equipment correctly, and following proper handling procedures to ensure worker and patient safety. Lift policies also should require that mechanical lifting or lifting with patient assistance devices replace manual lifting, transferring, and repositioning of patients whenever possible. In circumstances when mechanical devices cannot be used, hospitals should consider policies for dedicated lift teams with special training. OSHA also encourages hospital administrators to promote such programs beyond those workers responsible for direct patient care, including other

departments vital to supporting safe patient handling (e.g., laundry, maintenance, and engineering).

To be clear, OSHA's guidance goes far beyond simply purchasing and owning lift assistance equipment. OSHA believes hospitals should evaluate the right amount of equipment appropriate for the job, make sure the equipment is readily accessible, and that workers use it. OSHA suggests having front-line staff help select the equipment because workers responsible for moving patients are better able to determine which equipment is most appropriate for each hospital unit. Likewise, the guidance also focuses on training staff in the new equipment and procedures. Hospitals should educate doctors and staff on their safe patient handling program to help reduce instances in which clinicians ask colleagues to move patients in unsafe ways. In addition, caregivers should be trained to systematically assess patient characteristics and abilities that will impact mobility. Hospitals also should educate patients and their families about the use of mechanical equipment and safe patient handling techniques.

OSHA considers the development and implementation of a safe patient handling program an ongoing commitment. Therefore, once a hospital establishes a safe patient handling program, it should continue to evaluate processes and procedures to enhance the program and assess effectiveness.

Safety and Health Management Systems

If OSHA's description of a safe patient handling program sounds familiar, that is probably because it closely resembles OSHA's other pet initiative—injury and illness prevention plans (IIPP). Today's OSHA identifies enacting an IIPP Rule as the Agency's top priority. Unsurprisingly, the balance of OSHA's new web resource focuses on implementing a broader IIPP across all aspects of a hospital's safety program.

OSHA's new hospital guidance discusses the need for hospital administrators to monitor the workplace for hazards and cooperate with workers to find and implement solutions. Most hospitals already must maintain patient safety and satisfaction programs. Because many of the risk factors that affect patient safety also can affect hospital workers, OSHA believes that the same tools, strategies, and business processes used in patient safety can be equally effective when applied to employee safety. The web resources suggest that The Joint Commission-accredited hospitals may be able to adapt their existing compliance monitoring tools and infrastructure to address occupational safety.

OSHA suggests that an effective safety and health management system include six core elements: (1) management leadership; (2) employee participation; (3) hazard identification and assessment; (4) hazard prevention and control; (5) education and training; and (6) program evaluation and improvement. Management leadership involves articulating policies that establish safety and health as a primary business

objective of the hospital, and allocating resources to implement the safety and health management system. According to OSHA, employee participation is necessary to successfully integrate worker and patient safety and health management systems. OSHA's hospital guidance suggests workers should be involved in the design, implementation, and evaluation of the safety system. OSHA recommends that hospitals provide workers with access to safety data (e.g., safety data sheets; chemical and equipment manufacturers' safety recommendations; aggregated injury, illness, and infection data; results of environmental exposure monitoring, etc.) so that employees can understand safety and health hazards and help identify protective measures.

Under the General Duty Clause of the Occupational Safety and Health Act, employers are required to keep employees free from "recognized" serious hazards (*see* OSH Act Section 5(a)(1)). OSHA asserts in its new guidance that for hospitals to meet this obligation, they must consider whether facilities, equipment, materials, and work processes could expose employees to recognized hazards. Potential hazards in a hospital include toxic chemical agents, contagious biological agents, physical agents, equipment, fires, wet or slippery floors, ergonomic/patient handling hazards, and patient violence. Per OSHA's new guidance, active hazard identification and assessment is necessary so that hospitals can collect information about workplace hazards, analyze them, and prioritize the control of these hazards by considering: (1) the severity of the injury or illness that could result from the hazard; (2) the likelihood of the injury or illness; and (3) the number of employees exposed to the hazard. Prevention and control is an ongoing process; as hospitals identify more-serious and complicated hazards, they may utilize interim controls until more-permanent control options are determined.

Education and training also are essential to ensure that all employees have the knowledge and skills required to perform their jobs safely. OSHA encourages hospitals to educate workers to promote workplace safety and health, and enforce safe work practices. Training can help spread knowledge about different hazards and give employees the tools they need to identify and address potential problems before they arise. It also is important to train employees to know their specific roles within the safety and health management system.

OSHA emphasizes system evaluation and improvement to determine whether the safety and health management system operates as intended and achieves the organization's goals. OSHA suggests that hospitals track various measures including the number and severity of injuries and illnesses; levels of employee exposure to workplace hazards; employee opinions about the safety and health management system's effectiveness; and the amount paid out in workers' compensation claims. Other useful indicators of effectiveness include employee participation; the number and frequency of



management walkthroughs; and the amount of time it takes to respond to employee reports of hazards.

What Impact Will this Guidance Have?

Although OSHA's new hospital guidance appears on its face to just be a resource for hospitals regarding the integration of patient and worker safety programs, it is actually a sign that hospital worker safety will become a major enforcement priority for OSHA and unions.

Increased Complaints

The OSHA guidance encourages employees to take an active role in ensuring worker safety. The new web resource also is written in a manner that is user friendly for the employee, with clear examples of actions that OSHA recommends hospitals take to improve worker safety. As such, unions and employee advocacy organizations will direct their members to the OSHA website or publicize the guidance in union newsletters and publications so employees can compare what their hospital employer does in relation to OSHA's recommendations. This focus on employee involvement and union promotion of the guidance will likely lead to an increase in worker safety-related complaints, both internally and to OSHA.

Increased OSHA Enforcement

In addition to preparing for an increased number of complaints, hospitals should prepare for additional enforcement by OSHA. The materials related to the integration of patient and worker safety programs include significant information about the hazards hospital workers face and how hospital employers can address these hazards. When investigating complaints or incidents, OSHA will use this web guidance to argue that a hospital had knowledge of the hazards its employees faced and had knowledge of measures it could have taken to control such hazards. OSHA has to prove these elements to make out any violation against hospital employers.

Remember, under the General Duty Clause, employers are required to keep employees free from "recognized" hazards that cause or are likely to cause death or serious physical harm. Once the industry or the individual employer recognizes a hazard, a General Duty Clause violation can be cited. Arguably, if a hospital has not implemented elements

of OSHA's guidance, OSHA could find that the hospital violated the General Duty Clause, because the guidance itself should have led hospital employers to recognize the hazards referenced in it.

Increased Joint Commission Enforcement

According to the OSHA web resource, The Joint Commission was highly involved in the development of the materials regarding integration of worker and patient safety programs. With renewed OSHA focus on hospital worker safety and health management systems, The Joint Commission may choose to emphasize those Joint Commission standards more relevant to safety and health management systems in upcoming accreditation surveys. These standards include: environment of care, emergency management, human resources, infection prevention and control, information management, leadership, and performance improvement.

As these new processes are implemented, hospitals also should prepare for increased patient safety complaints. Hospitals also may want to ensure that they clearly explain to patients and their caregivers any changes to policies or processes that impact patient interactions.

Increased Interest in Worker Safety Legislation

Some groups do not believe that the OSHA web resource goes far enough, and want OSHA to require safety and health management programs and to set a safe patient handling standard to address ergonomic stressors and musculoskeletal injuries. The new OSHA resource may lead certain advocacy groups to push for increased efforts to pass state and federal legislation regarding these issues. For example, the Nurse and Health Care Worker Protection Act of 2013 (H.R. 2480) would require the U.S. Secretary of Labor to promulgate a standard on safe patient handling, mobility, and injury prevention to prevent musculoskeletal disorders for direct-care registered nurses and all other health care workers. This bill also would require the use of alternative controls and measures, including trained, designated lift teams, where the use of mechanical technology and devices are not feasible, in order to minimize the risk of injury to nurses and health care workers. The bill also would require the Secretary of Labor to conduct unscheduled inspections to ensure compliance. Similarly, a bill has been introduced in the New York legislature to create a Safe Patient Handling Act that would establish a statewide safe patient handling policy for health care facilities.

What Should Employers Do Now?

As an immediate step, the authors recommend that hospital employers take time to digest OSHA's new web resource regarding hospital worker safety. Hospitals may consider implementing a safe patient handling program and integrating patient and worker safety programs. OSHA suggests

that hospital management seek to engage the hospital workers' union representatives when launching or expanding a safe patient handling program. Because many hospital workers may be independent contractors, hospitals also should consider coordinating with their contractors so that all employees are protected under the safety and health management systems and safe patient handling programs.

As more hospital workers learn of OSHA's new guidance, hospitals should prepare to handle increased complaints related to worker safety. Hospitals must set up a process to quickly investigate and address complaints, regardless of whether employees or OSHA raise the issues. Hospitals also must set up a process to quickly investigate reported employee injuries and illnesses. This process should include appropriate privacy safeguards so that employees feel comfortable reporting injuries and illnesses. Hospitals should remind workers that recording an injury or illness in accordance with OSHA regulations does not violate the Health Insurance Portability and Accountability Act.

Hospitals should make sure that employees understand their reporting policy and should encourage employees to raise safety issues with management. At the same time, hospitals must remember that they cannot retaliate against employees who raise safety issues directly with OSHA.

Finally, the OSHA hospital guidance identifies many potential hazards including: overexertion or bodily reaction, i.e., lifting, bending, and reaching; slips, trips, and falls; contact with objects or equipment' violence; and exposure to harmful substances including drugs and infectious diseases. Although OSHA's new web resource focuses on hospital workers, the hazards identified in this guidance are not unique only to hospitals, but instead apply to many other health care providers. For example, in nursing and residential care facilities a large proportion of patients need assistance with mobility. Similarly, other health care occupations with elevated injury rates include emergency medical technicians and paramedics, occupational therapy assistants and aides, registered nurses, and licensed practical and vocational nurses. Therefore, other health care providers also should review the new OSHA resource and consider how this guidance will impact their practices. Other health care providers with workers that frequently move patients should consider developing safe patient handling programs, and also should prepare themselves for increased complaints and enforcement actions as OSHA looks to enforce non-mandatory ergonomic and other issues through the General Duty Clause.

1 See www.osha.gov/dsg/hospitals/index.html.

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