HOUSE BILL 2646

State of Washington 66th Legislature 2020 Regular Session

By Representatives Kilduff, Ryu, Doglio, Sells, Davis, Macri, Peterson, and Pollet

Read first time 01/16/20. Referred to Committee on Labor & Workplace Standards.

- 1 AN ACT Relating to reducing work-related musculoskeletal
- 2 disorders in the health care sector; adding new sections to chapter
- 3 51.16 RCW; creating a new section; and providing an effective date.
- 4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:
- 5 <u>NEW SECTION.</u> **Sec. 1.** (1) Every year, more than fifty thousand
- 6 workers in Washington experience a work-related musculoskeletal
- 7 disorder, according to an article published in the American journal
- 8 of industrial medicine. These work-related musculoskeletal disorders
- 9 make up more than thirty percent of all worker compensation cases.
- 10 According to Washington's workers' compensation claims data, between
- 11 2006 and 2015, work-related musculoskeletal disorder claims cost over
- 12 3.8 billion dollars, adjusted to 2015 dollars, in direct costs.
- 13 Medical aid costs for these claims totaled 1.7 billion dollars.
- 14 (2) According to a 2015 report from the safety and health
- 15 assessment and research for prevention program, the most common and
- 16 most costly type of injury that workers in Washington's health care
- 17 sector face are work-related musculoskeletal disorders injuries to
- 18 the muscles, tendons, ligaments, and joints.
- 19 (3) Between 2006 and 2015, the total number of claim hours
- 20 reported from the health care sector was 1.6 billion hours. The 2015
- 21 safety and health assessment and research for prevention program

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report states that according to workers' compensation claims data from 2002 to 2010, the health care sector ranks second when compared to other industry sectors in its compensable claims rate of work-related musculoskeletal disorder injuries.

- (4) The safety and health assessment and research for prevention program report notes that common risk factors for work-related musculoskeletal disorders include repetitive motions, awkward body postures, forceful hand exertions, and heavy manual material handling, with the level of risk determined by the duration of exposure to the risk factor, the frequency of exposure, and the intensity of the exposure. According to safety and health assessment and research for prevention program research, health care workers, and specifically certified nursing assistants, have a very high level of risk for back injuries from lifting, static back postures, awkward shoulder postures, and hand or wrist injuries from awkward wrist postures.
 - (5) To help increase general awareness of physical factors contributing to work-related musculoskeletal disorders and identify aspects of a job that pose a risk factor, the safety and health assessment and research for prevention program researchers developed a physical job evaluation checklist that can help a person assess levels of risk for the back, shoulder, hand and wrists, and knee in any given job. The safety and health assessment and research for prevention program researchers also created general principles and safe practices to consider when attempting to eliminate or reduce risk factors with the goal of preventing work-related musculoskeletal disorders.
 - (6) The legislature intends to create incentives for the health care sector to reduce risk factors associated with work-related musculoskeletal disorders, thereby increasing health and safety for health care workers and reducing workers' compensation costs.
- NEW SECTION. Sec. 2. A new section is added to chapter 51.16 RCW to read as follows:
 - (1) The department shall develop best practices to reduce risk factors associated with work-related musculoskeletal disorders in the health care sector, including best practices for employers to:
- 37 (a) Involve employees and all levels of management in developing 38 and implementing their own programs for reducing work-related 39 musculoskeletal disorders;

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1 (b) Conduct ongoing evaluations of their programs, including any 2 safe patient handling program the employer has adopted;

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- (c) Use effective assessment tools, including accessing the department's consultation services, to determine when and under what circumstances appropriate equipment and techniques could be used; and
- (d) Prioritize injury prevention efforts by identifying aspects of work that pose the greatest risk of injury.
- (2) (a) Employers in the health care sector that implement a program consistent with best practices may be eligible for a premium discount as determined by the department according to criteria established by the department.
- 12 (b) The department must consult with health care providers and 13 representatives of health care facilities in establishing criteria 14 for a premium discount under this section.
- NEW SECTION. Sec. 3. A new section is added to chapter 51.16 RCW to read as follows:
 - (1) The director is authorized to provide funding of up to two percent of the premiums paid in the prior year from the risk classes for health care providers for the purposes of funding employers of health care providers who have limited resources to purchase equipment and make modifications that are needed to follow best practices for reducing work-related musculoskeletal disorders. The department may require matching funds from employers. An appropriation is not required for expenditures. Only employers who pay premiums to the state funds as defined in RCW 51.08.175 are eligible for funding under this section.
- 27 (2) The department may adopt rules as necessary to implement this section.
- NEW SECTION. Sec. 4. This act takes effect January 1, 2021.

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