

Lansing, Michigan 48909 Phone: 517/373-6466

NURSING HOMES: USE OF WHEELCHAIR RESTRAINTS

House Bill 6280

Sponsor: Rep. Nancy Cassis

Committee: Senior Health, Security, and

Retirement

Complete to 9-19-02

A SUMMARY OF HOUSE BILL 6280 AS INTRODUCED 9-17-02

The bill would amend the Public Health Code to require a nursing home to give each patient who uses a wheelchair (or the patient's legal guardian, patient advocate, or other legal representative) the option of using one or more wheelchair assistive devices. (A "wheelchair assistive device" would be defined to mean a physical restraint or other physical aid intended to increase a patient's safety or convenience in conjunction with the patient's use of a wheelchair.) A nursing home would have to offer the option to new patients upon admission, and to other patients upon request. The bill further states that a patient or his or her representative would have the right to request and consent to a wheelchair assistive device for the patient. Upon receipt of a request for a wheelchair assistive device, the nursing home would have to inform the patient or his or her representative of alternatives to, and the risks involved in, using the wheelchair assistive device. Further, a nursing home that provided a wheelchair assistive device would have to document that the requirements of the bill had been met, monitor the patient's use of the wheelchair assistive device, and, in consultation with the patient, his or her family and attending physician, and the individual who consented to the wheelchair assistive device, reevaluate the patient's need for the wheelchair assistive device.

A nursing home could provide a wheelchair assistive device to a patient only upon receipt of a signed consent form authorizing the use of the device and a written order from the patient's attending physician detailing medical symptoms, and specifying the circumstances under which a wheelchair assistive device is to be used. For purposes of the bill, "medical symptoms" would include a concern for the physical safety of the patient, and the physical or psychological need expressed by the patient. The bill states that a patient's fear of falling could be the basis of a medical symptom.

Further, the Department of Consumer and Industry Services would be required to develop clear and uniform guidelines to be used in determining what constitutes:

- --acceptable wheelchair assistive devices for use by nursing homes in the state;
- --proper maintenance of wheelchairs and wheelchair assistive devices; and,
- --hazards created by the improper use of wheelchair assistive devices.

The department would be required to develop the guidelines in consultation with the Long Term Care Work Group, with the addition (for the purposes of the bill) of an individual representing manufacturers of wheelchair assistive devices, two nursing home patients or family members of patients, and a person with expertise in wheelchair assistive device installation and use.

The department would have to report its recommendations to the legislature within six months after the effective date of the bill. Further, the department would be required to consult with representatives of the nursing home industry to expeditiously develop interim guidelines on wheelchair assistive device use to be followed until the guidelines are developed.

The bill provides that a nursing home that complied with the bill's requirements, and with the guidelines developed by the department, would not be subject to administrative penalties imposed by the department based solely on providing wheelchair assistive devices. However, this provision would not preclude the department from citing specific state or federal deficiencies for improperly used or maintained wheelchair assistive devices or other hazards created by improperly used or maintained wheelchair assistive devices.

The bill would also amend similar provisions of the code dealing with bed rails, to refer to nursing home "patients" rather than "residents".

MCL 333.21734 and 333.21735

Analyst: D. Martens

[■]This analysis was prepared by nonpartisan House staff for use by House members in their deliberations, and does not constitute an official statement of legislative intent.