

**HOUSE . . . . . No. 2506**

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The Commonwealth of Massachusetts

PRESENTED BY:

*Michael J. Moran*

*To the Honorable Senate and House of Representatives of the Commonwealth of Massachusetts in General Court assembled:*

The undersigned legislators and/or citizens respectfully petition for the adoption of the accompanying bill:

An Act requiring health care facilities to develop and implement programs to prevent workplace violence.

PETITION OF:

NAME:	DISTRICT/ADDRESS:	DATE ADDED:
<i>Michael J. Moran</i>	<i>18th Suffolk</i>	<i>2/5/2021</i>
<i>Hannah Kane</i>	<i>11th Worcester</i>	<i>3/15/2021</i>
<i>Marc R. Pacheco</i>	<i>First Plymouth and Bristol</i>	<i>5/18/2021</i>

**HOUSE . . . . . No. 2506**

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By Mr. Moran of Boston, a petition (accompanied by bill, House, No. 2506) of Michael J. Moran and Hannah Kane for legislation to require health care facilities to develop and implement programs to prevent workplace violence. Public Safety and Homeland Security.

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The Commonwealth of Massachusetts

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**In the One Hundred and Ninety-Second General Court  
(2021-2022)**  
\_\_\_\_\_

An Act requiring health care facilities to develop and implement programs to prevent workplace violence.

*Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:*

1 SECTION 1. Chapter 111 of the General Laws, as appearing in the 2018 Official Edition,  
2 is hereby amended by inserting after section 237, the following new section:-

3 Section 238. (a) As used in this section, the following words shall have the following  
4 meanings:-

5 “Employee”, an individual employed or contracted by a health care facility as defined in  
6 this section.

7 “Health care facility”, a hospital as defined in section 51 of chapter 111.

8 “Workplace violence”, any attempted or actual harmful or unpermitted touching of  
9 another person that results in injury and occurs on a work site.

10 (b) Notwithstanding any general or special law to the contrary, the department shall  
11 develop statewide standards for evaluating and addressing known security risks at health care  
12 facilities. Such standards shall be based on existing state laws and regulations as well as national  
13 accreditation and professional association standards for health care facilities for the purpose of  
14 ensuring consistency in the development of and annual review of internal operations preventing  
15 known risks. These standards shall include, but not be limited to: working in public settings;  
16 guarding or maintaining property or possessions; working in high-crime areas; working late night  
17 or early morning hours; working alone or in small numbers; uncontrolled public access to the  
18 workplace; working in public areas where people are in crisis; working in areas where patients or  
19 residents may exhibit violent behavior; and working in areas with known security problems. In  
20 developing such standards, the department shall convene and consult with an advisory committee  
21 comprised of health care facilities, including but not limited to, leadership, staff nurses and  
22 facility directors. Following development of the statewide standards, each healthcare facility  
23 shall be required to provide a summary of its operational policy that complies with the standards  
24 and includes a description of: (i) the development of security risk identification; (ii) engagement  
25 with employees on potential risks; (iii) evaluation of incidents that have occurred; and (iv)  
26 periodic reassessments of programs and policies. Such summaries shall be submitted to the  
27 department within six months after the advisory committee promulgates its standards, and shall  
28 be updated when a health care facility makes a substantive change to its operational policy for  
29 security risk assessment.

30 (c) The health care facility shall develop and implement a program to minimize the  
31 danger of workplace violence to employees based on the statewide standards developed pursuant  
32 to subsection (b), which shall include appropriate employee training and a system for the

33 ongoing reporting and monitoring of incidents and situations involving violence or the risk of  
34 violence. Employee training shall include, in addition to all employer training program policies,  
35 methods of reporting to appropriate public safety officials, bodies or agencies and processes  
36 necessary for the filing of criminal charges. Each health care facility shall develop a written  
37 violence prevention plan setting forth the facility's workplace violence prevention plan. The  
38 health care facility shall make the plan available on site to each employee and allow any of its  
39 employees to review the plan on site upon request. The health care facility shall provide the plan  
40 to a labor organization that represents employees at the health care employer.

41 (d) Each health care facility shall designate a senior manager responsible for the  
42 development and support of an in-house crisis response team for employee-victims of workplace  
43 violence. Said team shall implement an assaulted staff action program that includes, but is not  
44 limited to, group crisis interventions, individual crisis counseling, staff victims' support groups,  
45 employee victims' family crisis intervention, peer-help or professional referrals.

46 (e) The commissioner of public health shall adopt rules and regulations necessary to  
47 implement the purposes of this act. The rules and regulations shall include such guidelines as the  
48 commissioner deems appropriate regarding workplace violence prevention programs required  
49 pursuant to this act, and related reporting and monitoring systems and employee training.

50 (f) Each health care facility shall report every six months all incidents of assault and  
51 assault and battery under this section and section 13I of chapter 265 to the department of public  
52 health and the office of the district attorney. The department shall make an annual public report  
53 using aggregated statewide data of reported incidents of assault and assault and battery under this  
54 section and section 13I of chapter 265.

55 SECTION 2. Section 13I of chapter 265 of the General Laws, as so appearing, is hereby  
56 amended by replacing the entire section with the following language:-

57 Whoever commits an assault or an assault and battery on an employee, as defined in  
58 section 238 of chapter 111, while the employee is in the course of employment at the time of  
59 such assault or assault and battery, shall be punished by imprisonment in state prison for not  
60 more than five years or imprisonment in a jail or house of correction for not less than 90 days nor  
61 more than 2 and one-half years or by a fine of not less than \$500 nor more than \$5,000, or any  
62 combination of said fines and imprisonment.

63 Any employee, as defined in section 238 of chapter 111, who is the victim of assault or  
64 assault and battery in the line of duty shall be given the option of providing either the  
65 individual's home address, the address of the health care facility where the assault or assault and  
66 battery occurred, the address of a labor organization who is representing the employee, if so  
67 requested by the employee or by requesting a judge to impound the individual's home address. In  
68 instances where the address of the health care facility or labor organization is used, said facility  
69 or labor organization shall ensure that the individual receives any documents pertaining to the  
70 assault or assault and battery by the next business day of receipt by said facility or labor  
71 organization. The health care facility or labor organization shall demonstrate that it has provided  
72 any and all documentation by obtaining an acknowledgement of receipt from the individual.

73 SECTION 3. Chapter 265 of the General Laws as so appearing, is hereby amended after  
74 Section 13I by inserting at the end the following sections:-

75 Section 13I 1/2. (a) For purposes of this section, the following words shall have the  
76 following meanings, unless the context clearly indicates otherwise:

77           “Employee”, an individual employed or contracted by a health care facility as defined in  
78 this section.

79           “Health care facility”, a hospital as defined under section 51 of chapter 111.

80           (b) A health care facility shall permit an employee to take unpaid leave from work if: (i)  
81 the employee is a victim of assault or assault and battery which occurred in the line of duty; and  
82 (ii) the employee is using the leave from work to: seek or obtain victim services or legal  
83 assistance; obtain a protective order from a court; appear in court or before a grand jury; or meet  
84 with a district attorney.

85           (c) An employee seeking leave from work under this section shall provide appropriate  
86 advance notice of the leave to the health care facility as required by the facility's leave policy.

87           (d) A health care facility may require an employee to provide documentation evidencing  
88 that the employee has been a victim of assault or assault and battery sustained in the line of duty  
89 and that the leave taken is consistent with the conditions of clauses (i) and (ii).

90           (e) If an unscheduled absence occurs, the health care facility shall not take any negative  
91 action against the employee if the employee, within 30 days from the unauthorized absence or  
92 within 30 days from the last unauthorized absence in the instance of consecutive days of  
93 unauthorized absences, provides documentation that the unscheduled absence meets the criteria  
94 of clauses (i) and (ii).

95           (f) An employee shall provide such documentation to the health care facility within a  
96 reasonable period after the health care facility requests documentation relative to the employee's  
97 absence.

98 (g) All information related to the employee's leave under this section shall be kept  
99 confidential by the health care facility and shall not be disclosed, except to the extent that  
100 disclosure is: (i) requested or consented to, in writing, by the employee; (ii) ordered to be  
101 released by a court of competent jurisdiction; (iii) otherwise required by applicable federal or  
102 state law; (iv) required in the course of an investigation authorized by law enforcement,  
103 including, but not limited to, an investigation by the attorney general; or (v) necessary to protect  
104 the safety of the employee or others employed at the facility.

105 (h) An employee seeking leave under this section shall not have to exhaust all annual  
106 leave, vacation leave, personal leave or sick leave available to the employee, prior to requesting  
107 or taking leave under this section.

108 (i) No health care facility shall coerce, interfere with, restrain or deny the exercise of, or  
109 any attempt to exercise, any rights provided under this section or to make leave requested or  
110 taken hereunder contingent upon whether or not the victim maintains contact with the alleged  
111 abuser.

112 (j) No health care facility shall discharge or in any other manner discriminate against an  
113 employee for exercising the employee's rights under this section. The taking of leave under this  
114 section shall not result in the loss of any employment benefit accrued prior to the date on which  
115 the leave taken under this section commenced. Upon the employee's return from such leave, the  
116 employee shall be entitled to restoration to the employee's original job or to an equivalent  
117 position.

118 (k) The attorney general shall enforce this section and may seek injunctive relief or other  
119 equitable relief to enforce this section.

120 (l) Health care facilities shall notify each employee of the rights and responsibilities  
121 provided by this section including those related to notification requirements and confidentiality.

122 (m) This section shall not be construed to exempt a health care facility from complying  
123 with chapter 258B, section 14B of chapter 268 or any other general or special law or to limit the  
124 rights of any employee under said chapter 258B, said section 14B of chapter 268 or any other  
125 general or special law.

126 SECTION 4. Notwithstanding any general or special law or rule or regulation to the  
127 contrary the executive office of health and human services shall coordinate with the executive  
128 office of public safety and security to develop regulations that would allow healthcare providers,  
129 as defined in section 1 of chapter 111, to be able to access reports on individuals maintained by  
130 agencies within each executive office as well as other public safety and law enforcement officials  
131 through a secure electronic medical record, health information exchange, or other similar  
132 software or information systems connected to healthcare providers for the purposes of: (i)  
133 improving ease of access and utilization of such data for treatment and diagnosis; (ii) supporting  
134 integration of such data within the electronic health records of a healthcare provider for purposes  
135 of treatment of diagnosis; or (iii) allowing healthcare providers and their vendors to maintain  
136 such data for the purposes of compiling and visualizing such data within the electronic health  
137 records of a healthcare provider that supports treatment or diagnosis. Such regulations shall  
138 further allow the sharing of such information between healthcare providers consistent with  
139 federal and state privacy requirements through a secure electronic medical record, health  
140 information exchange or other similar software or information systems.

141 SECTION 5. This act shall take effect 6 months upon its passage.