PROTECT PATIENT SAFETY

S.1422/H.2398 The Workforce Development and Patient Safety Act
*Sponsors: Senator Diana DiZoglio/Representative Dan Ryan*
This bill calls for a series of independent studies on the state of nursing in the Commonwealth.
We have seen the nursing profession evolve dramatically over the past century. This bill would examine current nursing practice, including the impact on quality of patient care, the makeup of the current nursing workforce, and future needs of nursing care in the state. These studies would provide independent, evidence-based analysis of issues affecting the nursing workforce, patient limits, workplace violence, injuries and burnout.

S.237/H.370 An Act Relative to Maintaining Independent Authority Over Nursing Licensure in the Commonwealth
*Sponsors: Senator Patrick O’Connor/Representative Denise Garlick*
This bill would codify in statute that the Board of Registration in Nursing must maintain local and independent control over the practice and licensing of Nursing in Massachusetts.

S.1511/H.2269 An Act Ensuring Safe Medication Administration
*Sponsors: Senator Marc Pacheco/Representative Dan Donahue*
In an effort to cut costs, the state has implemented programs that allow unlicensed, inadequately trained staff to administer a variety of medications that should only be administered by nurses. Now there is a push by some private sector healthcare providers to expand this dangerous practice. This bill would prohibit the dangerous practice of unlicensed personnel administering medication.

WORKPLACE SAFETY & VIOLENCE

S.1605/H.2465 An Act Requiring Healthcare Employers to Develop and Implement Programs to Prevent Workplace Violence
*Sponsors: Senator Joan Lovely/Representative Denise Garlick*
Nurses are assaulted on the job more than police officers and prison guards, with more than 70% of hospital emergency department nurses reporting being assaulted during their career. Violence against healthcare workers accounts for nearly as many injuries as in all other industries combined - and the problem is only getting worse. It is time for comprehensive action on workplace violence prevention.
This bill would require healthcare employers to perform an annual safety risk assessment and, based on those findings, develop and implement programs to minimize the danger of workplace violence to employees and patients.
S.1376/H.2249 An Act Providing for Safe Patient Handling and Mobility  
**Sponsors: Senator Harriette Chandler/Representative Claire Cronin**  
This bill would require healthcare facilities to adopt and implement a safe patient handling program to develop strategies to control risk of injury to patients and healthcare workers associated with the lifting, transferring, repositioning, or movement of a patient. Nurses and other healthcare workers suffer more musculoskeletal injuries than any other profession. Health systems that have implemented comprehensive safe patient handling and mobility programs have seen significant decreases in workplace injuries. Implementing these programs would reduce workplace injury, reduce time away from work, and improve patient mobility and outcomes.

S.926/H.1888 An Act Strengthening the Penalty for Assault or Assault and Battery on an Emergency Medical Technician, Ambulance Operator, Ambulance Attendant or Healthcare Provider  
**Sponsors: Senator Michael Brady/Representative Paul Tucker**  
This bill would increase the penalties for assault, making it a felony punishable by up to five years in state prison. Assaults on healthcare providers, including nurses, are on the rise. Healthcare workers experience the most non-fatal workplace violence, with attacks on these professions accounting for nearly 70% of all non-fatal workplace assaults. Thirty-three other states have laws on the books making assault on a RN a felony.

S.1310/H.2098 An Act Relative to Creating Intensive Stabilization and Treatment Units within the Department of Mental Health  
**Sponsors: Senator Marc Pacheco/Representative Patricia Haddad**  
This bill would create two Intensive Stabilization and Treatment units within the Department of Mental Health, one for males, one for females. Patients exhibiting extreme aggression, highly assaultive behavior and/or self-destructive behavior would be admitted to these specialized units, which would be physically separate, secure, structured environments with specially trained staff, in order to protect all patients and staff.

S.1521/H.2293 An Act Relative to Liability Protection for Disaster Volunteers  
**Sponsors: Senator Michael Rush/Representative Sean Garballey**  
This bill would protect nurses' liability while serving as a volunteer. Nurses often voluntarily go to the frontlines of a disaster or state of emergency. This would provide liability protection in those instances and protect registered nurses who suffer injuries in the course of voluntarily responding to a disaster.

**COVID RESPONSE & PPE**

S.1194/H.2031 An Act Relative to Occupational Presumption and COVID-19  
**Sponsors: Senator Paul Feeney/Representative Tram Nguyen**  
This bill would presume that any frontline healthcare worker who contracts COVID-19 acquired it at work. It would also prohibit employers from requiring healthcare workers to use their own sick time, vacation time or other PTO to quarantine, treat or recover from COVID-19. At least fourteen other states have taken action on occupational presumption and COVID-19.

Healthcare workers have been on the frontlines of Covid-19 without the appropriate PPE/protective equipment, without adequate testing of patients and in facilities that have been slow to implement policies and procedures to slow the spread of the virus. Many have gotten sick themselves, but several healthcare employers refuse to recognize these individuals likely contracted the virus at work, leaving them ineligible for benefits and protections.

S.253/H.496 An Act Relative to PPE Data Transparency  
**Sponsors: Senator Walter Timilty/Representative John Lawn**  
This bill would require the public reporting personal protective equipment (PPE) supplies on hand at healthcare facilities. Nearly a year into the COVID-19 pandemic, frontline healthcare workers are still in the dark about how much personal protective equipment (PPE) is on-hand at their workplace. And too many are still not provided with the proper PPE on a consistent basis. The bill requires every healthcare facility to designate an inventory manager responsible for transmitting this data to the Office of Preparedness and Emergency Management. This will help to identify gaps and shortages when it comes to PPE and the specific items each facility needs.
The lack of PPE for frontline healthcare workers has been an ongoing issue throughout the COVID-19 crisis. Healthcare workers are still working without the proper PPE. The lack of clarity about what supplies hospitals and state facilities have on hand coupled with the CDC lowering infectious disease control standards and safety precautions has compounded the problem. We need to know where we stand and how far we are from meeting the science-based standards that were in place pre-crisis.

S.754/H.1253 An Act Relative to the Closing of Hospital Essential Services

This bill would help protect essential health services from being eliminated. Communities across the Commonwealth have been adversely affected by the closing of essential health services. These closures have ranged from the elimination of maternity services, to the closure of behavioral health units to the shuttering of entire hospitals. Each of these closures creates a situation where health care is more difficult to access for patients, leading to long-term devastating effects at both the individual and community levels.

This bill would extend the official notice period to the Department of Public Health (DPH) in advance of a closure or discontinuation of health services; require any hospital proposing a closure or discontinuation of health services to provide evidence of having notified and provided the opportunity for comment from affected municipalities; and would prohibit a hospital from seeking additional license(s) or expansion for a period of three-years.

S.1429/H.1262 An Act Relative to Preserving Essential Services

This bill would prohibit the closure of beds, units or facilities during any declared state of emergency pertaining to health care.

We have seen the loss of many essential health services over the past decade- from the closure of entire hospitals to the elimination of behavioral healthcare, maternity beds and everything in-between. Since Governor Baker declared a state-of-emergency in March, we have seen the closure of an Emergency Department in Somerville, the loss of 74 inpatient psychiatric beds serving children and adults in Holyoke, the temporary closure of two Intensive Care Units (ICUs) and proposals to close maternity units, birthing centers, substance abuse rehabilitation programs and additional mental health beds. These services have never been more essential and our public health officials should be spending their time on slowing the spread of the virus and protecting the public- not juggling these closure procedures.

S.805/H.1255 The Hospital Profit Transparency and Fairness Act

This bill would increase transparency on hospitals and hospitals networks.

It requires transparency about financial holdings and other activities, assess any hospital receiving taxpayer dollars that has an annual operating margin above a specific, predetermined cap and assess any hospital receiving taxpayer dollars that provides a compensation package for its CEO that is greater than 100 times that of the hospital's lowest paid employee. These assessments would be deposited in a newly created Medicaid Reimbursement Enhancement Fund to increase Medicaid reimbursement rates to eligible hospitals.
S.1311/H.2099 An Act Relative to Creating a Pilot Program to Transfer High Acuity Behavioral Health and Dual Diagnosis Patients Away from Crowded Emergency Departments

**Sponsors:** [Senator Marc Pacheco/Representative Patricia Haddad]

This bill would create a pilot program at Taunton State Hospital to transfer medically stable, high acuity behavioral health and dual diagnosis patients away from overcrowded emergency departments until such time that an appropriate placement for treatment is found. The lack of adequate behavioral health care has reached crisis levels in the Commonwealth. Thousands of patients suffering from acute mental illness are boarding for days, weeks and even months in our hospital emergency departments each year, leaving them without proper treatment and impacting staff’s ability to provide care to other patients requiring emergency medical care. The pilot program could provide a model for how to mitigate one aspect of this crisis.

**FRONTLINE WORKER BENEFITS**

H.2706 An Act Relative to Credible Service for School Nurses

**Sponsors:** [Representative Kathy LaNatra]

This bill would permit school nurses to buy back up to three years of time spent working in the private sector as a nurse. Over the course of a career, a school nurse may work in another (private) setting in her or his capacity as a nurse. As part of the buyback, the nurse must pay into the pension system what s/he would have paid for those three years, or fraction thereof, plus interest.

S.1693 An Act Relative to Retirement Classification /H.2725 An Act Relative to Group 2 Retirement

**Sponsors:** [Senator Sal DiDomenico/Representative Joseph McGonagle]

This bill reassigns frontline healthcare workers in public health hospitals to Group 2 in the state retirement system. The job of frontline caregivers is rewarding, but it does not come without significant risk to the employee. Group 2 classification recognizes these risks.

**OTHER**

H.797 An Act Improving Fiscal Transparency

**Sponsors:** [Representative Natalie Higgins]

This bill would require that fiscal analysis of ballot questions be undertaken in consultation with the Attorney General and Secretary of State.

For more information on any of these bills, contact Maryanne Bray, Director of Legislation at 781-249-9581