

HOUSE BILL 1568

K3, P1, P4

0lr2669
CF SB 943

By: **Delegates Cullison, Johnson, R. Lewis, Lierman, and Pena-Melnyk**

Introduced and read first time: February 7, 2020

Assigned to: Economic Matters

A BILL ENTITLED

1 AN ACT concerning

2 **Labor and Employment – Health Care Facilities – Workplace Safety**
3 **(Safe Care Act)**

4 FOR the purpose of altering the composition of a certain workplace safety committee;
5 requiring State residential centers and State-operated hospitals to develop a
6 workplace safety plan; establishing certain requirements for a certain workplace
7 safety plan; requiring that certain training address certain risks and include certain
8 instruction on certain matters; requiring certain State residential centers and
9 State-operated hospitals to collaborate with a certain committee for certain
10 purposes; requiring that certain procedures include certain other procedures;
11 requiring State residential centers and State-operated hospitals to ensure that a
12 certain workplace safety plan is implemented in a certain manner, coordinate certain
13 activities with certain health care works, implement certain measures, encourage
14 certain workers to take certain actions, and report to the Commissioner of Labor and
15 Industry certain incidents of workplace violence; prohibiting State residential
16 centers and State-operated hospitals from taking certain actions against a health
17 care worker for participating in a workplace safety plan; requiring State residential
18 centers and State-operated hospitals to maintain and make available certain
19 information to the Commissioner on request; prohibiting certain information from
20 containing certain personal information; requiring the Commissioner to adopt
21 certain regulations; requiring certain health care facilities to submit a certain
22 annual summary to the Commissioner; requiring the Commissioner to make
23 available online certain summaries; defining certain terms; and generally relating
24 to workplace safety in health care facilities.

25 BY repealing and reenacting, with amendments,
26 Article – Labor and Employment
27 Section 5–1101 and 5–1102
28 Annotated Code of Maryland
29 (2016 Replacement Volume and 2019 Supplement)

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.



BY repealing and reenacting, without amendments,
Article – Labor and Employment
Section 5–1103
Annotated Code of Maryland
(2016 Replacement Volume and 2019 Supplement)

BY adding to
Article – Labor and Employment
Section 5–1104 through 5–1110
Annotated Code of Maryland
(2016 Replacement Volume and 2019 Supplement)

SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND,
That the Laws of Maryland read as follows:

Article – Labor and Employment

5–1101.

(a) In this subtitle the following words have the meanings indicated.

(b) (1) “Health care facility” means:

(i) a hospital; or

(ii) a State residential center.

(2) “Health care facility” includes:

(i) a subacute care unit of a hospital; and

(ii) a State–operated hospital.

(c) “Health care worker” means an individual employed by a health care facility.

(d) “Hospital” has the meaning stated in § 19–301 of the Health – General Article.

(e) “State residential center” has the meaning stated in § 7–101 of the
Health – General Article.

(f) “Workplace safety” means the prevention of any physical assault or
threatening behavior against a health care worker in a health care facility.

**(G) “WORKPLACE SAFETY PLAN” MEANS THE PLAN DEVELOPED UNDER §
5–1104 OF THIS SUBTITLE.**

(H) (1) “WORKPLACE VIOLENCE” MEANS AN ACT OF VIOLENCE OR A

1 THREAT OF VIOLENCE THAT OCCURS AT A HEALTH CARE FACILITY AND THAT IS NOT
2 A LAWFUL ACT OF SELF-DEFENSE OR DEFENSE OF ANOTHER PERSON.

3 (2) "WORKPLACE VIOLENCE" INCLUDES, REGARDLESS OF WHETHER
4 THE HEALTH CARE WORKER IS PHYSICALLY OR PSYCHOLOGICALLY INJURED:

5 (I) USING OR THREATENING TO USE PHYSICAL FORCE AGAINST
6 A HEALTH CARE WORKER; AND

7 (II) AN INCIDENT INVOLVING USING OR THREATENING TO USE A
8 FIREARM OR OTHER DANGEROUS WEAPON.

9 5-1102.

10 (a) A health care facility shall establish a workplace safety committee to establish
11 and administer a workplace safety program.

12 (b) The workplace safety committee established under subsection (a) of this
13 section shall be composed of an equal number of employees who work in management and
14 employees who do not work in management **OR IN ACCORDANCE WITH AN APPLICABLE**
15 **COLLECTIVE BARGAINING AGREEMENT.**

16 5-1103.

17 (a) The workplace safety committee shall establish a workplace safety program
18 that is appropriate for the size and complexity of the health care facility.

19 (b) The workplace safety program established under subsection (a) of this section
20 shall include:

21 (1) a written policy describing how the health care facility provides for the
22 safety of health care workers;

23 (2) an annual assessment to:

24 (i) identify hazards, conditions, operations, and situations that
25 could lead to workplace injuries; and

26 (ii) be used to develop recommendations to reduce the risk of
27 workplace injuries;

28 (3) a process for reporting, responding to, and tracking incidences of
29 workplace injuries; and

30 (4) regular workplace safety training for health care workers.

1 **5-1104.**

2 (A) EACH STATE RESIDENTIAL CENTER AND EACH STATE-OPERATED
3 HOSPITAL SHALL DEVELOP A WORKPLACE SAFETY PLAN.

4 (B) A WORKPLACE SAFETY PLAN ESTABLISHED UNDER SUBSECTION (A) OF
5 THIS SECTION SHALL:

6 (1) BE:

7 (I) IN WRITING;

8 (II) IN EFFECT AT ALL TIMES;

9 (III) AVAILABLE FOR VIEWING AT ALL TIMES BY EACH HEALTH
10 CARE WORKER AT THE HEALTH CARE FACILITY;

11 (IV) SPECIFIC TO EACH UNIT, AREA, AND LOCATION MAINTAINED
12 BY THE HEALTH CARE FACILITY; AND

13 (V) DEVELOPED IN COLLABORATION WITH THE WORKPLACE
14 SAFETY COMMITTEE ESTABLISHED UNDER § 5-1102 OF THIS SUBTITLE; AND

15 (2) INCLUDE:

16 (I) A REQUIREMENT THAT HEALTH CARE WORKERS AT A
17 HEALTH CARE FACILITY RECEIVE THE TRAINING ON THE PREVENTION OF
18 WORKPLACE VIOLENCE UNDER § 5-1105 OF THIS SUBTITLE:

19 1. ON THE ADOPTION OF A NEW WORKPLACE SAFETY
20 PLAN;

21 2. ON COMMENCING EMPLOYMENT AND ANNUALLY
22 THEREAFTER;

23 3. ON COMMENCING NEW JOB DUTIES OR A NEW
24 ASSIGNMENT IN ANOTHER LOCATION OF THE HEALTH CARE FACILITY; AND

25 4. WHEN A PREVIOUSLY UNRECOGNIZED HAZARD IS
26 IDENTIFIED OR IF THERE IS A MATERIAL CHANGE IN THE FACILITY REQUIRING A
27 CHANGE TO THE PLAN;

28 (II) PROCEDURES THAT MEET THE REQUIREMENTS FOR

1 RESPONDING TO AND INVESTIGATING INCIDENTS OF WORKPLACE VIOLENCE UNDER
2 § 5-1106 OF THIS SUBTITLE;

3 (III) PROCEDURES FOR CORRECTING HAZARDS THAT INCREASE
4 THE RISK OF WORKPLACE VIOLENCE, INCLUDING USING ENGINEERING CONTROLS
5 THAT ARE FEASIBLE AND APPLICABLE TO THE HEALTH CARE FACILITY AND WORK
6 PRACTICE CONTROLS TO ELIMINATE OR MINIMIZE EXPOSURE OF HEALTH CARE
7 WORKERS TO SUCH HAZARDS;

8 (IV) PROCEDURES FOR OBTAINING ASSISTANCE FROM SECURITY
9 PERSONNEL OR PUBLIC SAFETY AGENCIES WHEN APPROPRIATE;

10 (V) PROCEDURES FOR RESPONDING TO INCIDENTS INVOLVING
11 AN ACTIVE SHOOTER AND OTHER THREATS OF MASS CASUALTIES THROUGH THE USE
12 OF PLANS FOR EVACUATION AND SHELTERING THAT ARE FEASIBLE AND
13 APPROPRIATE FOR THE HEALTH CARE FACILITY; AND

14 (VI) PROCEDURES FOR ANNUALLY ASSESSING THE
15 EFFECTIVENESS OF THE WORKPLACE SAFETY PLAN, IN COLLABORATION WITH THE
16 WORKPLACE SAFETY COMMITTEE ESTABLISHED UNDER § 5-1102 OF THIS SUBTITLE.

17 5-1105.

18 (A) THE TRAINING PROVIDED UNDER A WORKPLACE SAFETY PLAN SHALL
19 ADDRESS THE RISKS OF WORKPLACE VIOLENCE THAT A HEALTH CARE WORKER MAY
20 REASONABLY ANTICIPATE ON THE HEALTH CARE WORKER'S JOB AND SHALL
21 INCLUDE INSTRUCTION CONCERNING:

22 (1) THE WORKPLACE SAFETY PLAN, INCLUDING:

23 (I) THE MANNER IN WHICH AN EMPLOYEE MAY ADDRESS
24 INCIDENTS OF WORKPLACE VIOLENCE;

25 (II) THE MANNER IN WHICH AN EMPLOYEE MAY PARTICIPATE IN
26 REVIEWING AND REVISING THE WORKPLACE SAFETY PLAN; AND

27 (III) ANY INFORMATION NECESSARY FOR A HEALTH CARE
28 WORKER TO PERFORM THE DUTIES THAT MAY BE REQUIRED OF A HEALTH CARE
29 WORKER UNDER THE WORKPLACE SAFETY PLAN;

30 (2) RECOGNIZING SITUATIONS THAT MAY RESULT IN WORKPLACE
31 VIOLENCE;

(3) WHEN AND HOW TO RESPOND TO, AND SEEK ASSISTANCE IN PREVENTING OR RESPONDING TO, WORKPLACE VIOLENCE;

(4) REPORTING INCIDENTS OF WORKPLACE VIOLENCE TO THE HEALTH CARE FACILITY AND PUBLIC SAFETY AGENCIES WHEN APPROPRIATE;

(5) RESOURCES AVAILABLE TO HEALTH CARE WORKERS IN COPING WITH INCIDENTS OF WORKPLACE VIOLENCE, INCLUDING THE DEBRIEFING PROCESS ESTABLISHED BY THE HEALTH CARE FACILITY FOR USE AFTER AN INCIDENT OF WORKPLACE VIOLENCE AND AVAILABLE PROGRAMS TO ASSIST HEALTH CARE WORKERS IN RECOVERING FROM INCIDENTS OF WORKPLACE VIOLENCE; AND

(6) FOR EACH HEALTH CARE WORKER WHO HAS CONTACT WITH PATIENTS, VERBAL INTERVENTION AND DE-ESCALATION TECHNIQUES THAT:

(I) ALLOW THE HEALTH CARE WORKER TO PRACTICE THE TECHNIQUES WITH OTHER HEALTH CARE WORKERS WITH WHOM THE HEALTH CARE WORKER WORKS; AND

(II) INCLUDE A DEBRIEFING MEETING AFTER EACH PRACTICE SESSION CONDUCTED UNDER THIS ITEM.

(B) EACH STATE RESIDENTIAL CENTER AND EACH STATE-OPERATED HOSPITAL SHALL COLLABORATE WITH THE WORKPLACE SAFETY COMMITTEE TO DEVELOP, REVIEW, AND REVISE THE TRAINING PROVIDED UNDER THE WORKPLACE SAFETY PLAN AND ANY CURRICULA OR MATERIALS USED IN TRAINING.

5-1106.

THE PROCEDURES FOR RESPONDING TO AND INVESTIGATING INCIDENTS OF WORKPLACE VIOLENCE INCLUDED IN THE WORKPLACE SAFETY PLAN OF A STATE RESIDENTIAL CENTER OR STATE-OPERATED HOSPITAL SHALL INCLUDE PROCEDURES TO:

(1) MAINTAIN AND USE ALARMS OR OTHER COMMUNICATION SYSTEMS TO ALLOW HEALTH CARE WORKERS TO SEEK IMMEDIATE ASSISTANCE DURING AN INCIDENT OF WORKPLACE VIOLENCE;

(2) RESPOND TO EACH INCIDENT OF WORKPLACE VIOLENCE;

(3) PROVIDE TIMELY MEDICAL CARE OR FIRST AID TO HEALTH CARE WORKERS OR OTHER EMPLOYEES OF THE HEALTH CARE FACILITY WHO HAVE BEEN INJURED IN AN INCIDENT OF WORKPLACE VIOLENCE;

1 (4) IDENTIFY EACH HEALTH CARE WORKER INVOLVED IN AN
2 INCIDENT OF WORKPLACE VIOLENCE;

3 (5) OFFER COUNSELING TO EACH HEALTH CARE WORKER AFFECTED
4 BY AN INCIDENT OF WORKPLACE VIOLENCE;

5 (6) OFFER THE OPPORTUNITY FOR EACH HEALTH CARE WORKER,
6 INCLUDING SUPERVISORS AND SECURITY PERSONNEL, INVOLVED IN AN INCIDENT
7 OF WORKPLACE VIOLENCE TO BE DEBRIEFED AS SOON AS POSSIBLE AFTER THE
8 INCIDENT AT A TIME AND PLACE THAT IS CONVENIENT FOR THE HEALTH CARE
9 WORKER, SUPERVISOR, AND SECURITY PERSONNEL;

10 (7) REVIEW ANY PATIENT-SPECIFIC RISK FACTORS AND ANY
11 MEASURES SPECIFIED TO REDUCE THOSE FACTORS;

12 (8) REVIEW THE IMPLEMENTATION AND EFFECTIVENESS OF
13 CORRECTIVE MEASURES TAKEN UNDER THE WORKPLACE SAFETY PLAN;

14 (9) SOLICIT THE FEEDBACK OF HEALTH CARE WORKERS INVOLVED IN
15 AN INCIDENT OF WORKPLACE VIOLENCE CONCERNING THE PRECIPITATING
16 FACTORS OF THE INCIDENT AND ANY MEASURES THAT MAY HAVE ASSISTED IN
17 PREVENTING THE INCIDENT; AND

18 (10) PROVIDE A REPORT WITHIN 14 DAYS AFTER AN INCIDENT TO THE
19 WORKPLACE SAFETY COMMITTEE ESTABLISHED UNDER § 5-1102 OF THIS SUBTITLE.
20 5-1107.

21 (A) EACH STATE RESIDENTIAL CENTER AND EACH STATE-OPERATED
22 HOSPITAL SHALL:

23 (1) ENSURE THAT THE WORKPLACE SAFETY PLAN IS IMPLEMENTED
24 AT ALL TIMES AND IN ALL UNITS, AREAS, AND LOCATIONS OF THE HEALTH CARE
25 FACILITY;

26 (2) COORDINATE RISK ASSESSMENT AND DEVELOPMENT AND
27 IMPLEMENTATION OF THE WORKPLACE SAFETY PLAN WITH HEALTH CARE WORKERS
28 IN THE HEALTH CARE FACILITY;

29 (3) IMPLEMENT ENGINEERING CONTROLS, WORK PRACTICE
30 CONTROLS, AND OTHER APPROPRIATE MEASURES AS NECESSARY TO PREVENT AND
31 MITIGATE THE RISK OF WORKPLACE VIOLENCE IN ALL UNITS, AREAS, AND

1 LOCATIONS OF THE FACILITY;

2 (4) ENCOURAGE HEALTH CARE WORKERS TO REPORT INCIDENTS OF
3 WORKPLACE VIOLENCE AND, WHERE APPROPRIATE, SEEK THE ASSISTANCE OF A
4 PUBLIC SAFETY AGENCY IN ACCORDANCE WITH THE WORKPLACE SAFETY PLAN
5 DEVELOPED TO RESPOND TO WORKPLACE VIOLENCE; AND

6 (5) REPORT TO THE COMMISSIONER ANY INCIDENT OF WORKPLACE
7 VIOLENCE THAT:

8 (I) INVOLVED THE USE OF PHYSICAL FORCE AGAINST A HEALTH
9 CARE WORKER BY A PATIENT OR AN INDIVIDUAL ACCOMPANYING THE PATIENT;

10 (II) INVOLVED THE USE OF A FIREARM OR OTHER DANGEROUS
11 WEAPON; OR

12 (III) PRESENTED A REALISTIC POSSIBILITY OF DEATH OR
13 SERIOUS PHYSICAL HARM TO A HEALTH CARE WORKER.

14 (B) A STATE RESIDENTIAL CENTER OR STATE-OPERATED HOSPITAL MAY
15 NOT PENALIZE A HEALTH CARE WORKER FOR PARTICIPATING IN A WORKPLACE
16 SAFETY PLAN.

17 5-1108.

18 (A) (1) SUBJECT TO SUBSECTION (B) OF THIS SECTION, EACH STATE
19 RESIDENTIAL CENTER AND EACH STATE-OPERATED HOSPITAL SHALL MAINTAIN
20 AND MAKE AVAILABLE TO THE COMMISSIONER ON REQUEST INFORMATION
21 RELATED TO INCIDENTS OF WORKPLACE VIOLENCE AND ACTIONS TAKEN IN
22 COMPLIANCE WITH THIS SUBSECTION.

23 (2) THE INFORMATION REQUIRED UNDER PARAGRAPH (1) OF THIS
24 SUBSECTION SHALL INCLUDE:

25 (I) RECORDS OF THE IDENTIFICATION, EVALUATION, AND
26 CORRECTION OF HAZARDS THAT INCREASE THE RISK OF WORKPLACE VIOLENCE;

27 (II) A RECORD OF INCIDENTS OF WORKPLACE VIOLENCE;

28 (III) A RECORD OF EACH TRAINING SESSION PROVIDED;

29 (IV) A RECORD OF EACH REPORT TO THE COMMISSIONER; AND

(V) ANY ADDITIONAL INFORMATION REQUIRED BY THE COMMISSIONER.

(B) THE INFORMATION REQUIRED UNDER THIS SECTION MAY NOT INCLUDE ANY PERSONALLY IDENTIFIABLE INFORMATION OF A PATIENT, AN EMPLOYEE, OR A HEALTH CARE WORKER IN THE HEALTH CARE FACILITY.

5-1109.

THE COMMISSIONER SHALL ADOPT REGULATIONS THAT APPLY TO EACH STATE RESIDENTIAL CENTER AND EACH STATE-OPERATED HOSPITAL THAT:

(1) ESTABLISH MINIMUM REQUIREMENTS FOR THE PROCEDURES FOR ASSESSING AND RESPONDING TO SITUATIONS THAT CREATE THE POTENTIAL FOR WORKPLACE VIOLENCE;

(2) ESTABLISH MINIMUM REQUIREMENTS FOR THE ENGINEERING CONTROLS, WORK PRACTICE CONTROLS, AND OTHER APPROPRIATE MEASURES TO PREVENT AND MITIGATE THE RISK OF WORKPLACE VIOLENCE; AND

(3) ESTABLISH THE REQUIRED CONTENTS OF A RECORD OF AN INCIDENT OF WORKPLACE VIOLENCE.

5-1110.

(A) A HEALTH CARE FACILITY SHALL SUBMIT TO THE COMMISSIONER THE MOST CURRENT ANNUAL SUMMARY OF WORKPLACE INJURIES AND ILLNESSES COMPILED IN ACCORDANCE WITH 29 C.F.R. § 1904.32.

(B) THE COMMISSIONER SHALL MAKE AVAILABLE ON THE DEPARTMENT'S WEBSITE A COPY OF THE MOST RECENT:

(1) ANNUAL SUMMARY SUBMITTED BY EACH HEALTH CARE FACILITY IN THE STATE; AND

(2) THE SENTINEL EVENT DATA SUMMARY PUBLISHED BY THE JOINT COMMISSION OR ITS SUCCESSOR ORGANIZATION OR A SIMILAR REPORT SELECTED BY THE COMMISSIONER.

SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect October 1, 2020.