



Maryland
Hospital Association

Senate Bill 729- Security Guards - Use of Force Reporting - Health Care-Related Physical Interventions

Position: *Support with Amendments*

February 27, 2024

Senate Judicial Proceedings Committee

MHA Position

On behalf of the Maryland Hospital Association's (MHA) member hospitals and health systems, we appreciate the opportunity to comment in support of Senate Bill 729 with amendments.

Maryland hospitals strive to create an environment that promotes healing and a positive patient experience while protecting the health and well-being of the workforce. The security guards employed by hospitals are critical to preserve this safe environment.

Senate Bill 760 as passed last year, although well-intentioned and necessary for security guards working in unregulated spaces, presents many challenges for Maryland hospitals. We appreciate the bill sponsors' willingness to introduce SB 729 to address the field's concerns. We are working on amendments to address the following:

- The broad definition of use of force, which would include almost all every day physical actions taken by security guards to preserve the safety of patients, staff, and visitors
- Patient privacy concerns with reporting all the required information to Maryland State Police
- Concern for the chilling effect overreporting could have on retaining and recruiting hospital security guards
- Duplicative reporting requirements already established under state law
- Duplicative background check requirements as a condition of employment

Security guards receive initial and annual training on de-escalation techniques, safe patient handling, and techniques for interacting with individuals in a behavioral health crisis. Hospital security guards must adhere to requirements established by state and federal entities when interacting with patients and visitors. The Centers for Medicare & Medicaid Services (CMS) distinguishes between a health care intervention and a law enforcement interaction.¹ A health care intervention, although involving physical restraint, is only performed by a trained security guard at the direction of a clinician. CMS guidance states the use of weapons, including pepper spray, mace, etc. is in the application of restraint or seclusion is not a safe, appropriate health care intervention.

¹ [Medicare \(cms.gov\)](https://www.cms.gov)

Hospitals already monitor and report adverse outcomes as required under the [Maryland Hospital Patient Safety Program](#). These reports are compiled in a public report that is released annually. There is also an extensive process for patients to file grievances, which must be responded to within a specified period.

We thank the bill sponsor for introducing SB 729 and look forward to continued conversation.

For these reasons, we ask for a *favorable* report on SB 729 with amendments.

For more information, please contact:
Jane Krienke, Senior Legislative Analyst, Government Affairs
Jkrienke@mhaonline.org