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days, or the deposit shall be deemed unclaimed. Any dog or cat under six months of age at the time it is sold or given away by the shelter shall be so spayed or neutered within sixty days after reaching six months of age, or the deposit shall be deemed unclaimed.

Any deposit not claimed under this section shall be used only for the following purposes:

- (1) a public education program to prevent overpopulation of dogs or cats;
- (2) a program to spay or neuter dogs or cats;
- (3) a follow up program to assure that animals sold or given away by the shelter are spayed or neutered; or
- (4) costs incurred under this section.

A shelter may enter into a cooperative agreement with another shelter and with a veterinarian in carrying out the provisions of this section.

**SECTION 3.** This act shall take effect July first, nineteen hundred and eighty-eight.

Approved July 23, 1987.

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**Chapter 332. AN ACT EXEMPTING NURSING HOMES FROM CERTAIN REPORTING AND SUSPENSION REQUIREMENTS AND RISK MANAGEMENT PROGRAMS.**

Be it enacted, etc., as follows:

Chapter 111 of the General Laws is hereby amended by striking out section 203, as appearing in the 1986 Official Edition, and inserting in place thereof the following section:-

Section 203. (a) The by-laws of every licensed hospital and the by-laws of all medical staffs shall contain provisions for reporting conduct by a health care provider that indicates incompetency in his specialty or conduct that might be inconsistent with or harmful to good patient care or safety. Said by-laws shall direct a procedure for investigation, review and resolutions of such reports.

(b) Whenever, following review by a medical peer review committee of a licensed hospital determination is reached that a health care provider's privileges should be suspended in the best interests of patient care, such committee shall immediately forward the recommendation to the executive committee of the medical staff and the institution's board of trustees for action. A provider whose privileges are suspended shall be entitled to notice and a prompt hearing following suspension, in accordance with the institution's medical staff by-laws.

(c) No individual or institution, including no licensed hospital or licensed nursing home reporting, providing information, opinion, counsel or services to a medical peer review committee, or participation in the procedures required by this section, shall be liable in a suit for damages by reason of having furnished such information, opinion, counsel or

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services or by reason of such participation, provided that such individual or institution acted in good faith and with a reasonable belief that said actions were warranted in connection with or in furtherance of the functions of said committee or the procedures required by this section.

(d) Every licensed hospital shall, as a condition of licensure, be required to participate in risk management programs established by the board of registration in medicine pursuant to section five of chapter one hundred and twelve; provided, however, that licensed hospitals which participate in pre-existing risk management programs may be exempted by regulations of the board from the requirements of this paragraph.

(e) Every licensed nursing home shall: (i) request from every physician providing medical care in the nursing home said physician's name and license number; (ii) upon initial appointment of its medical director or physician advisor and biennially thereafter, inquire from a hospital where the physician has staff privileges and spends the greatest portion of his time, the status of said physician's staff privileges, or if the physician has no such staff privileges, make such reasonable inquiry, as the board of registration in medicine by regulation may require, into the physician's employment history and malpractice claims experience; (iii) report to said board any disciplinary action which the nursing home takes against any physician providing medical care in the nursing home; the nursing home shall report to the board any disciplinary action within thirty days of the occurrence of the reportable action; the report shall include a statement detailing the nature and circumstances of the action, its date, and the reasons for it; the nursing home shall file an annual disciplinary summary with the board; the annual disciplinary summary shall be filed no later than January thirty-first for each previous calendar year. The annual disciplinary summary shall summarize the reports submitted for the previous calendar year; the annual disciplinary summary shall be sent by certified or registered mail, and it shall be under oath; if the nursing home submitted no reports for the previous calendar year, then the annual disciplinary summary shall state that no reports were required; and (iv) simultaneously send to said board a copy of any report sent to the department of public health pursuant to the provisions of sections seventy-one and seventy-two, whenever any such report indicates incompetency of a physician or other conduct by a physician that seriously affects a nursing home patient's health and safety. The types of incidents reported under this section, shall be jointly determined by the department of public health and the board of registration in medicine and may be set forth in regulations promulgated by the board.

Approved July 23, 1987.

EMERGENCY LETTER: July 23, 1987 @ 4:42 P.M.

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**Chapter 333. AN ACT PROVIDING TENURE TO AGE SIXTY-FIVE TO RICHARD H. MELLONI, FIRST ASSISTANT ENGINEER OF THE WAREHAM FIRE DISTRICT.**