



STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF THE COMMISSIONER
BUREAU OF HUMAN RESOURCE MANAGEMENT

Nicholas A. Toumpas
Commissioner

Mark C. Bussiere
Director

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October 15, 2014

Her Excellency, Governor Margaret Wood Hassan
and the Honorable Council
State House
Concord, New Hampshire 03301

REQUESTED ACTION

Pursuant to the provisions of RSA 21-I: 43-a, Compensation for State Employees Injured in Line of Duty, finalize the determination made by the Commissioner of the Department of Health and Human Service that on September 17, 2014, Christopher Lucier, a Registered Nurse III at the New Hampshire Hospital sustained an injury in the line of duty and due to a hostile or overt act, or an act caused by another during the performance of duties which are considered dangerous in nature, effective date of Governor and Council approval.

EXPLANATION

New Hampshire RSA 21-I: 43-a, Compensation for State Employees Injured in Line of Duty states:

Any injury received by any state employee who is injured in the line of duty by a hostile act, or by an act caused by another during the performance of duties which are considered dangerous in nature, that requires the employee to be hospitalized or renders the employee temporarily unable to perform the duties of his or her position shall not be charged against annual leave or sick leave for the time lost due to the injury. During such time, the employee shall remain on the active payroll. In this event, no employee shall be terminated from state service until he or she has applied for disability retirement and a final decision on the application is made by the board of trustees of the New Hampshire retirement system and appeals of such decision, if any, are finalized; provided, that the employee shall make such application within 18 months of the injury contemplated by this section. **The executive head of the employee's agency shall make the determination as to whether an injury is in the line of duty and due to a hostile or overt act, or an act caused by another during the performance of duties which are considered dangerous in nature, and, after approval by the governor and council, the determination shall be final.** (emphasis added) During the time in which the injured employee remains on active payroll at full base salary pursuant to this section, his or her

state compensation shall not be offset by state workers' compensation payments and he or she shall not receive state workers' compensation payments to supplement his or her full base salary. Nothing in this section shall prohibit medical payments or final settlements.

Christopher Lucier is a Registered Nurse III who was injured in the line of duty and rendered temporarily unable to perform the duties of his position. On September 17, 2014 a patient at the New Hampshire Hospital assaulted Mr. Lucier causing him injuries while being put into restraints. As a result of the injuries, Mr. Lucier required medical attention and was rendered unable to perform his duties beginning that day. He returned to work on September 29, 2014. In accord with NH RSA 21-I: 43-a Mr. Lucier's lost time has not been charged against his annual leave or sick leave and he remained on the active payroll.

Following a thorough review of the September 17, 2014, incident and facts related to Christopher Lucier's injury, the Commissioner of the Department of Health and Human Services determined on October 15, 2014, that Mr. Lucier's injuries were in the line of duty and due to a hostile or overt act, or an act caused by another during the performance of duties, which are considered dangerous in nature. Pursuant to RSA 21-I: 43-a, approval of this Request shall make Commissioner's determination final.

Respectfully submitted,


Nicholas A. Toumpas
Commissioner

DB

**DHHS EMPLOYEE
NOTICE OF ACCIDENTAL INJURY OR OCCUPATIONAL ILLNESS**
CONFIDENTIAL: NO PATIENT NAMES SEND IMMEDIATELY TO HUMAN RESOURCES

EMPLOYEE IDENTIFICATION

Name: Chris Luccer Incident Date: 9/17/17 Time: 11:30 AM PM
(Please print)
Department: Nursing Unit: C Job Title: RN

EXACT LOCATION OF INCIDENT

Building: AP3 Unit: C Other: _____

OCCURRENCE DESCRIPTION

- | | |
|--|---|
| <input type="checkbox"/> Slip/Trip/Fall | <input type="checkbox"/> Lifting Patient-Med Rec# _____ |
| <input type="checkbox"/> Struck by/Against Object | <input checked="" type="checkbox"/> Patient Assault-Med Rec# _____ |
| <input type="checkbox"/> Lifting Materials/Patient | <input checked="" type="checkbox"/> During Restraint -Med Rec# <u>83723</u> |
| <input type="checkbox"/> Contamination/Exposure | <input type="checkbox"/> Needlestick/Sharp - Med Rec# _____ |
| <input type="checkbox"/> Burn | <input type="checkbox"/> Bites - Med Rec# _____ |
| <input type="checkbox"/> Other (Specify _____) | <input type="checkbox"/> Contamination/Body Fluids - Med Rec# _____ |

HOW DID ACCIDENT OR ILLNESS OCCUR?

Description of incident: (Be specific, including any injuries you received and on what part of your body)
while attempting to restrain patient during an assault landed on left shoulder causing pain

Total number of hours worked at time of injury: 9.75

STAFF WITNESSES (if any): _____

TREATMENT

Treatment received on site, please explain: _____
Initial Treatment: No Medical Treatment Emergency Care Other Human Resources Called / /

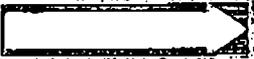
PLEASE REVIEW OTHER SIDE AND HAVE YOUR SUPERVISOR REVIEW THIS INCIDENT REPORT
PLEASE CONTACT THE HUMAN RESOURCES DEPARTMENT AT 271-5838 OR 271-5843.

EMPLOYEE'S SIGNATURE: _____ DATE: _____

SUPERVISOR'S STEPS TAKEN AFTER REVIEWING THIS INCIDENT REPORT:

- Reviewed and discussed incident with employee before returning to work? Explain: _____
- Referred employee to call HR department.
- Reviewed work area/procedures and took appropriate steps to correct hazard.Explain: _____
- Reported incident to Assaulted Staff Action Program (ASAP). Yes No

REPORT OF ACTION TAKEN Horse shoe band

DATE: 9/17  OVER 
IMMEDIATE SUPERVISOR'S NAME: Anita Downs
(PLEASE PRINT)