

COMMONWEALTH OF MASSACHUSETTS
DIVISION OF ADMINISTRATIVE LAW APPEALS

Middlesex, ss.

Joseph A. Miranda,
Petitioner,

v.

Docket No.: CR-24-0461

State Board of Retirement,
Respondent.

Appearances:

For Petitioner: Joseph A. Miranda

For Respondent: Matthew S. Szafranski, Esq.

Administrative Magistrate:

John G. Wheatley

SUMMARY OF DECISION

The petitioner is not entitled to Group 2 classification for his work as a campus police officer at Tewksbury Hospital because he was responsible for the safety and security of all patients, staff, and visitors to the hospital campus, not only those with mental illness or developmental disability. The petitioner did not establish that his “regular and major” job duties required the “care, custody, instruction or other supervision” of people with mental illness or developmental disability, as required for Group 2 classification under G. L. c. 32, § 3(2)(g).

DECISION

Pursuant to G. L. c. 32, § 16(4), the petitioner, Joseph Miranda, appealed the State Board of Retirement’s decision denying his application for Group 2 classification for his service as a Campus Police Officer I at Tewksbury Hospital. I held and recorded an evidentiary hearing on October 27, 2025, at the Division of Administrative Law Appeals in Malden, Massachusetts.

Joseph Miranda and his wife, Nina Miranda, testified at the hearing. I admitted twenty-one exhibits into evidence (Exhibits 1–21.) The parties filed their respective closing memoranda on January 2, 2026, whereupon the record closed.

FINDINGS OF FACT

Based on the evidence presented, I find the facts as follows:

1. Joseph Miranda is a member of the Massachusetts State Employees’ Retirement System. He was employed by the Department of Public Health (DPH) as a Campus Police Officer I at Tewksbury Hospital from October 26, 1997, until his retirement on September 1, 2024. (J. Miranda Testimony; Exhibit 18.)

2. Tewksbury Hospital is a 370-bed facility operated by DPH that provides comprehensive treatment, care, and specialized non-emergency services to individuals with medical or mental health needs. (Exhibits 4, 17, 21.)

3. The hospital offers a wide array of services, “including a physician on site at all times, around-the-clock nursing care, rehabilitation services including physical therapy, occupational therapy, and speech therapy, psychology services, social services, nutritional services, and an on-site dialysis clinic.” (Exhibit 4, p. 4, 7.)

4. Tewksbury Hospital encompasses 41 buildings situated on a 700-acre campus. The largest of those buildings—the Saunders Building—houses seven inpatient units operated by DPH, five inpatient units operated by the Department of Mental Health (DMH), and a substance use disorder program. As of June 2024, the hospital’s 370 beds were occupied by 200 patients receiving medical care and 170 patients receiving mental health care. (Exhibits 6, 17.)

5. The hospital had a similar number of patients receiving mental health care in the DMH units in the past. (See Exhibit 2 [average of 158 DMH patients in 2002; 116 DMH patients in 2009]; Exhibit 10 [176 DMH patients in March 2024].)

6. On the DPH units, Tewksbury Hospital has experienced an increase in the number of “patients with coexisting mental health diagnosis and behavioral dysregulation.” On the DMH units, there has been a rise in the number of “forensic patients,” i.e., individuals who are sent to the hospital under court order for psychiatric evaluation. (Exhibits 7, 8, 10, 21.)

7. The campus police department at Tewksbury Hospital oversees security. The department employs fifteen officers (Campus Police Officer I) and five sergeants (Campus Police Officer II). The primary function of the campus police is to ensure “the safety and security of all patients, staff, and visitors.” They respond to all emergency and alarm-related calls (e.g., intrusion, fire, etc.), medical calls, and behavioral calls, and most non-emergency-related calls from all campus occupants. (J. Miranda Testimony; Exhibits 3, 6, 18.)

8. Among the most frequent events handled by the campus police department are those involving assaults, patients needing escorts, medical emergencies, parking infractions, and “code gray” alerts concerning patient behavioral emergencies on both DMH and DPH units. In particular, “code grays” accounted for 12-17% of all campus police reports between 2020-2024. Approximately 73% of the code grays involved patients on the DMH units. (Exhibit 5.)

9. The campus police officers are assigned to one of four main duty stations per shift on a daily rotating basis. The shift supervisor sets the schedule. The duty stations are referred to as: (1) car 1, (2) dispatch, (3) portable 3, and (4) portable 4. If the department has

adequate staffing, additional officers are assigned to duty stations referred to as portable 5 and portable 6. (J. Miranda Testimony; Exhibit 6.)

10. The officer assigned to car 1 patrols the hospital campus grounds and responds to all incidents that occur outside of the Saunders building. (J. Miranda Testimony; Exhibit 6.)

11. The officer on dispatch is stationed at the ambulance entrance and guides arriving patients through the admissions process. The dispatch officer's responsibilities include photographing the patient, checking the patient's paperwork, ensuring the patient does not have any contraband or weapons concealed in their belongings, and arranging for the patient to be escorted to the appropriate location. The dispatch officer is also responsible for dispatching the proper response to calls for assistance, monitoring patient activity at the outdoor gazebo area, and maintaining campus police department reports and logs. (J. Miranda Testimony; Exhibit 6.)

12. The officer assigned to portable 3 is stationed in the main lobby, at the front entrance of the Saunders building, and ordinarily does not leave that station in response to calls. The officer screens all visitors, staff, and clients that enter and exit the building, ensuring no contraband or weapons are concealed in their belongings. (J. Miranda Testimony; Exhibit 6.)

13. The officer assigned to portable 4 escorts patients from dispatch to the appropriate location within the Saunders building and escorts patients from DMH units to the dispatch area for transport to court proceedings. The officer patrols the Saunders building, monitors the activities of patients in the hospital's common areas, and guards against patients going "absent without authorization" from the hospital. The officer also has primary

responsibility for responding to incidents within the Saunders building, including behavioral help calls. (J. Miranda Testimony; Exhibit 6.)

14. If a given shift is staffed by five or six officers, the additional officers are assigned to portable 5 and portable 6, which serve the same function. In either position, the officer assists the car 1, dispatch, and portable 4 officers as needed. The officer is also broadly responsible for patrolling the Saunders building and hospital grounds and for responding to emergencies both inside and outside of the building. Throughout Miranda's career, it was rare for more than four officers to work a given shift and therefore uncommon for an officer to be assigned to portable 5 or portable 6. (J. Miranda Testimony; Exhibit 6.)

15. Among the duty stations, the car 1 officer interacts more frequently with individuals who are not patients than do the officers at other stations. (J. Miranda Testimony.)

16. As between the DPH and DMH units, the dispatch, portable 3, and portable 4 officers typically encounter and interact with DMH patients more frequently than they do with DPH patients. (J. Miranda Testimony.)

17. Some emergency calls for assistance are communicated by reference to hospital codes, which include:

- (1) Code gray, which as noted above, involves an emergency based on a patient's behavior, typically an unarmed patient that has become combative or violent. The responding officer must provide security and de-escalation and may also provide one-on-one supervision of the patient when needed.
- (2) Code blue, which indicates a life-threatening medical emergency.
- (3) Code yellow, indicating a less serious medical emergency.

(4) Code black, indicating armed violence such as a bomb threat.

(5) Code red, indicating a fire emergency.

(J. Miranda Testimony.)

18. In the twelve months prior to his retirement, and in the preceding twelve years of his service, Miranda's regular schedule was from 7:00 A.M. to 3:00 P.M., Tuesday through Saturday. In practice, however, Miranda frequently worked 80-hour weeks due to overtime mandates that required him to work a second shift. (J. Miranda Testimony.)

19. Miranda received supervision and direction from the campus police chief and the shift sergeants. He did not supervise any staff. (Exhibit 3.)

20. A 2022 "Form 30" written job description for Miranda's position as Campus Police Officer I provides the following general statement of his duties:¹

"Patrols buildings, grounds, and adjacent areas of Tewksbury Hospital and enforces Hospital policy as well as the rules and regulations of Tewksbury Hospital Campus. Provides custodial supervision of mentally challenged and disruptive clients. Performs job related duties as required."

(Exhibit 3, an identical copy of which is also attached to Miranda's application for group classification at Exhibit 18.)

21. The job description delineates twenty-five specific, job-related duties. To summarize,² the job duties and responsibilities include:

- Patrolling the buildings and grounds of the hospital campus to guard against property damage, trespass, theft, and other violations of the law.

¹ The "date prepared" field on the Form 30 is blank, but the signatures by Miranda and Campus Police Chief Michael Riggs are both dated in July 2022.

² This summary is not verbatim, and the written job description should be consulted for a complete list of the twenty-five duties set forth therein.

- Escorting patients to various appointments within the hospital.
- Taking patients from their hospital units to corrections officers for transport to court and then resuming custody upon their return.
- Supervising patients through the pre-admission process and escorting them to their assigned unit.
- Taking custody of patients who have gone “absent without authorization” from the hospital and providing “custodial care and supervision” to them until they are returned to their hospital unit.
- Providing escort protection to hospital staff, visitors, students, and patients.
- Enforcing the hospital’s traffic and safety regulations by directing traffic, assisting people with disabled vehicles, issuing parking tickets and traffic control tickets to violators, and arranging for snow and ice removal.
- Preparing daily logs and reports on investigations conducted and noteworthy incidents that occurred while on duty.
- Preserving crime scenes and fire sites for examination by experts.
- Searching for “missing patients, persons, or goods.”
- Inspecting the hospital buildings, grounds, fire lanes, and emergency exits for compliance with safety standards.
- Assisting with “fire drills, investigations, and accident complaints.”

(Exhibit 3.)

22. Substantially similar duties are reflected on job postings for a Campus Police Officer I for Massachusetts Mental Health Center in May 2022 and for a Security Team Specialist I for Tewksbury Hospital in October 2024.³ (Exhibit 4.)

23. Miranda’s 2023 “Employee Performance Review Form” identified four primary job duties:

“Duty 1: Patrols buildings and grounds of Tewksbury Hospital Campus at regular intervals and guards against trespass, theft, and damage to property.

....

Duty 2: Enforces Campus Traffic and Safety Regulations to ensure the orderly flow of traffic and campus safety.

....

³ The job posting for the Security Team Specialist I position was made about two months after Miranda retired. The record does not reflect whether this position is the same as, or in addition to, the Campus Police Officer I position.

Duty 3: Document all information of incidents and investigations for administrative action or criminal proceedings.

....

Duty 4: Maintains logs, door reports, activity reports, missing patient reports and other departmental filling [*sic*] or reporting systems.”

(Exhibit 18 [emphasis omitted].)

24. The performance review form indicates that Miranda either met or exceeded expectations for each of his primary duties. (Exhibit 18.)

25. Miranda and the other campus police officers were required to escort patients to court appearances or to medical appointments at outside facilities when necessary. (J. Miranda Testimony; Exhibit 6.)

26. At times, Miranda’s encounters with patients became hostile or violent. He was accosted and physically attacked by patients on a regular basis. (J. Miranda Testimony; Exhibit 18 [Miranda’s narrative].)

27. In April 2024, Miranda applied to the Board for Group 2 classification for his service as a Campus Police Officer I at Tewksbury Hospital. His application requested that his service be pro-rated by group classification. (Exhibit 18.)

28. On June 28, 2024, the Board notified Miranda that it had denied his request for Group 2 classification. (Exhibit 19.)

29. Miranda timely appealed. (Exhibit 20.)

ANALYSIS

The retirement allowance afforded to members of the state employees’ retirement system is determined, in part, by the classification of the employees’ service into one of four groups. See G. L. c. 32, § 3(2)(g). By default, members whose positions do not meet the criteria

for Groups 2, 3, or 4 fall within Group 1, which includes “[o]fficials and general employees including clerical, administrative and technical workers, laborers, mechanics and all others not otherwise classified.” *Id.* In addition, “[a]ny active member as of April 2, 2012, who has served in more than 1 group may elect to receive a retirement allowance consisting of pro-rated benefits based upon the percentage of total years of service that the member rendered in each group[.]” G. L. c. 32, § 5(2)(a).

Miranda seeks Group 2 classification. To qualify for Group 2, Miranda has the burden of proving by a preponderance of the evidence, meaning that it is more likely than not, that his “regular and major duties” required him “to have the care, custody, instruction or other supervision” of people with mental illness or developmental disability⁴ and “that such duties were not a secondary or ancillary part of [his] position.” *Bailey v. State Bd. of Retirement*, No. CR-12-459, 2021 WL 12298073, at *2 (Contrib. Ret. App. Bd. Mar. 22, 2021). An employee’s “[r]egular and major job duties are those that require the employee to spend more than half their time performing.” *Greenwood v. State Bd. of Retirement*, No. CR-22-0066, 2026 WL 1373781, at *2 (Contrib. Ret. App. Bd. Apr. 17, 2026) (internal quotation marks omitted). Miranda must therefore prove that he spent more than half of his work time providing direct care, custody, instruction, or other supervision to people with mental illness or developmental disability. *Id.*; *Clement v. State Bd. of Retirement*, No. CR-15-299, 2022 WL 22863690, at *2

⁴ General Laws c. 32, § 3(2)(g) uses the antiquated term “mentally defective,” which has been interpreted to refer to individuals with developmental disabilities. See, e.g., *Koch v. State Bd. of Retirement*, No. CR-09-449, 2014 WL 13121797, at *1 (Contrib. Ret. App. Bd. Oct. 9, 2014) (noting that “mentally defective” refers to “developmentally disabled individuals”); *Wark v. State Bd. of Retirement*, No. CR-12-108, 2023 WL 11898389, at *3 (Contrib. Ret. App. Bd. Oct. 11, 2013).

(Contrib. Ret. App. Bd. Mar. 22, 2022); *Mendonsa v. State Bd. of Retirement*, No. CR-12-595, 2021 WL 12298074, at *2 (Contrib. Ret. App. Bd. Feb. 8, 2021).

To determine an employee's duties, the responsibilities listed in written job descriptions and employee performance review forms are considered but are not dispositive. *Desautel v. State Bd. of Retirement*, No. CR-18-0080, 2023 WL 11806157, at *2 (Contrib. Ret. App. Bd. Aug. 2, 2023); *Forbes v. State Bd. of Retirement*, No. CR 13-146, 2020 WL 14009545, at *5 (Contrib. Ret. App. Bd. Jan. 8, 2020). Testimony or other evidence of the actual job duties performed by the employee may also be taken into account. *Desautel, supra*, at *2-3.

Miranda's written position description, performance review form, and testimony reflect that he had a variety of work duties, some of which qualify for Group 2 classification, and some of which do not. His Group 2 qualifying duties included providing care and supervision to patients with mental illnesses by guiding them through the pre-admission process; escorting them to their assigned bed upon admission and to their appointments within the hospital; monitoring their activities in common areas; transporting them to court proceedings and to off-campus medical facilities; assisting them during medical emergencies; restraining or calming patients who became combative or violent; providing direct "one-to-one" supervision of patients exhibiting violent behaviors; and providing "custodial care and supervision" to patients who went "absent without authorization" from the hospital.

These duties, however, extended to all hospital patients, staff, students, and visitors, not only to those with mental illnesses or developmental disabilities. Less than half (about 46%) of the inpatients at Tewksbury Hospital were admitted with a primary mental health diagnosis for treatment on a DMH unit. Although some of the medical patients in Tewksbury

Hospital's DPH units may also have mental illnesses, the evidence is insufficient to determine, without speculation, how many of those patients had a mental illness as a primary diagnosis.⁵ See, e.g., *Lorrey v. State Bd. of Retirement*, No. CR-09-553, 2014 WL 13121799, at *1 (Contrib. Ret. App. Bd. Dec. 19, 2014) (affirming denial of Group 2 classification for nursing instructor at Tewksbury Hospital where evidence failed to demonstrate what proportion of her patients had a primary diagnosis of mental illness). Miranda did not establish, therefore, that the majority of the patient population he served had a mental illness or developmental disability, or that they otherwise fell within the required statutory population. See *Spellman v. State Bd. of Retirement*, No. CR-22-0401, at p. 4 (Contrib. Ret. App. Bd. Sept. 21, 2026) (petitioner must show that majority of individuals for whom he performed qualifying duties fell within a Group 2 population); *Antonelli v. State Bd. of Retirement*, No. CR-20-0341, 2024 WL 756094, at *4 (Div. Admin. Law App. Feb. 16, 2024) ("In cases involving a mixed patient population, some of whom fall within a Group 2 category and others who do not, prior decisions have generally required proof that the majority of the patients receiving the employee's care are within an eligible category.").

In addition, Miranda had many other duties as campus police officer that did not involve the care, custody, instruction, or other supervision of any patients. For example, he was responsible for enforcing traffic and parking regulations, maintaining daily security logs and reports, preserving crime scenes, guarding against theft and property damage, searching for

⁵ A "primary diagnosis" is one that "truly drives" patient care or "govern[s] the care a patient receives," as distinguished from "mental illness diagnoses which are merely incidental or derivative of physical illnesses." *Popp v. State Bd. of Retirement*, No. CR-17-848, 2023 WL 11806173, at *4 (Contrib. Ret. App. Bd. Nov. 16, 2023).

missing property, and inspecting the hospital buildings and grounds for compliance with safety standards. I accept Miranda's testimony that he interacted with patients with mental illnesses more frequently than he did with others at the hospital. However, he had a substantial number of other, non-patient-involved duties and, when taking account of those duties, he did not establish that his interactions with patients with mental illnesses consumed the majority of his work time. Rather, his primary duties were to protect the safety and security of the hospital facilities and all patients, staff, and visitors on the premises. The care, custody, and supervision he provided to patients with mental illnesses, while not insignificant, were ancillary to his broader primary responsibilities. See *Carlson v. State Bd. of Retirement*, No. CR-23-0303, 2025 WL 2365547, at *5 (Div. Admin. Law App. Aug. 8, 2025) (campus police officer denied Group 2 classification because she did not prove that majority of patients she served had mental illnesses or that majority of her time was spent providing care, custody, or instruction to such patients); *Lima v. State Bd. of Retirement*, No. CR-09-1069, at p. 7 (Div. Admin. Law App. Dec. 21, 2012) (Campus Police Officer I at Taunton State Hospital denied Group 2 classification because care and custody of patients were ancillary to primary duties of providing security to the facility and preventing criminal activity); *Laukaitis v. State Bd. of Retirement*, No. CR-01-682 (Div. Admin. Law App. Apr. 12, 2002) (Campus Police Officer I at Chelsea Soldiers' Home denied Group 2 classification because contact with patients with mental illnesses was ancillary to duties to patrol and protect the premises from trespass, theft, and damage to property).

The *Tomaszewski* case cited by Miranda is distinguishable from his case. In *Tomaszewski*, a campus police officer was awarded Group 2 classification for his work at a

facility run by DMH, the Worcester Recovery Center and Hospital.⁶ *Tomaszewski v. State Bd. of Retirement*, No. CR-16-431, 2024 WL 2880060, at *1 (Contrib. Ret. App. Bd. Apr. 5, 2024). The patients were admitted to the hospital specifically for mental health treatment, some committed to the facility by court order and others admitted voluntarily. *Id.* The officer was granted Group 2 classification because he demonstrated that the majority of his work time was focused on protecting the patients' safety and preventing them from harming others, and that the hospital treated a predominantly mentally ill patient population.⁷ *Id.* at *1, *4.

Miranda, in contrast, worked at a hospital operated by DPH, which admitted a roughly equal volume of both medical patients and mental health patients. Not all of his time with patients involved those with mental illnesses, therefore, even assuming the majority of his time involved the care, custody, instruction, or supervision of patients at Tewksbury Hospital generally. Accordingly, Miranda has not met his burden of proving entitlement to Group 2 classification.

⁶ Formerly Worcester State Hospital.

⁷ Other cases that have granted Group 2 classification to campus police officers have involved similar circumstances. See *Messina v. State Bd. of Retirement*, No. CR-05-352, 2005 WL 5287567, at *1-2 (Div. Admin. Law App. Sept. 19, 2005) (Group 2 granted to campus police officer for DMH at Worcester State Hospital who spent majority of time monitoring and escorting patients with mental illnesses); *Melling v. State Retirement Bd.*, No. CR-95-231, at p. 3 (Div. Admin. Law App. Apr. 12, 1996) (Group 2 granted to campus police officer at acute psychiatric facility, Massachusetts Mental Health Center, whose regular and major duties were to escort patients with mental illnesses throughout the facility, accompany them to physician examinations, and restrain them when needed).

CONCLUSION

Miranda did not prove that the majority of his work time was spent providing care, custody, instruction, or other supervision to people with mental illness or developmental disability. He did not establish, therefore, that his regular and major job duties required the care, custody, instruction, or other supervision of such patients. Accordingly, the Board's decision denying Miranda's application for Group 2 classification is *affirmed*.

Dated: October 2, 2026

/s/ John G. Wheatley

John G. Wheatley
Administrative Magistrate
DIVISION OF ADMINISTRATIVE LAW APPEALS
14 Summer St., 4th Floor
Malden, MA 02148
Tel: (781) 397-4700
www.mass.gov/dala