

SENATE BILL REPORT

SB 5228

As Reported By Senate Committee On:
Health & Long-Term Care, March 4, 1997

Title: An act relating to prevention of workplace violence in health care settings.

Brief Description: Providing for the prevention of workplace violence in health care settings.

Sponsors: Senators Deccio, Franklin, Prentice, Benton, Wojahn and Kohl.

Brief History:

Committee Activity: Health & Long-Term Care: 1/28/97, 3/4/97 [DPS].

SENATE COMMITTEE ON HEALTH & LONG-TERM CARE

Majority Report: That Substitute Senate Bill No. 5228 be substituted therefor, and the substitute bill do pass.

Signed by Senators Deccio, Chair; Wood, Vice Chair; Benton, Fairley, Franklin, Strannigan and Wojahn.

Staff: Jonathan Seib (786-7427)

Background: Studies show that violence in the workplace is a significant cause of injury and death. For some groups, violence on the job is reportedly the leading cause of workplace mortality. There is concern that health care facilities in particular are experiencing increasing amounts of workplace violence.

Summary of Substitute Bill: By July 1, 1998, all health care settings are required to develop and implement a plan to reasonably prevent and protect employees from violence at the setting. The plan is to be based on a security and safety assessment conducted at the setting, and at a minimum must address the following: the physical attributes of the setting, its staffing, personnel policies, first aid and emergency procedures, incident reporting procedures, and employee education and training. In developing such plans, consideration must be given to any relevant guidelines or standards issued by government agencies or private accrediting organizations.

By July 1, 1999, and on a regular basis thereafter, each health care setting is to provide violence prevention training to all its employees, as appropriate to the particular setting and to the duties and responsibilities of the particular employee being trained.

Beginning no later than July 1, 1998, each health care setting is to keep a record of any violent act against an employee, a patient, or a visitor occurring at the setting. The list of information to be included in the report is provided in the bill. Records are to be kept for at least five years, and are to be available to the Department of Labor and Industries upon request.

A health care setting which fails to comply with the requirements of the bill is subject to citation from the Department of Labor and Industries under the state Industrial Safety and Health Act. The Department of Health and the Department of Social and Health Services are to cooperate with Labor and Industries in enforcement.

"Health care setting" is defined to include: hospitals, home health, hospice, and home care agencies, mental health evaluation and treatment facilities, and community mental health programs.

"Employee" is defined to include an individual who is regularly employed in a health care setting whether by way of manual labor or otherwise, but does not include an individual who is employed sporadically or temporarily.

The Department of Labor and Industries is to be considerate of the unique circumstances in which home health, hospice, and home care agencies operate when enforcing the bill as to these settings.

In complying with the act, hospitals are explicitly authorized to adopt a policy and implement procedures to prohibit any person from carrying a weapon on hospital premises. Whether or not a hospital adopts a weapons prohibition policy is to have no bearing on the standard of liability in any civil action against the hospital.

Substitute Bill Compared to Original Bill: In the substitute bill, the list of health care settings to which the violence prevention requirements apply is narrowed and clarified. The requirements in the substitute apply primarily with regard to employees, with patients and visitors included only as to the reporting requirement. The definition of "employee" is also narrowed. The requirement that settings report information regarding workplace violence is modified, removing the requirements that the information be reported to the Department of Labor and Industries and that the department compile a report for the Legislature. In the substitute, the establishment of a violence prevention plan is not a standard of licensure or certification for the specified health care setting. A section authorizing hospitals to adopt a weapons prohibition policy is added in the substitute.

Appropriation: None.

Fiscal Note: Available on original bill; requested on substitute bill February 26, 1997.

Effective Date: Ninety days after adjournment of session in which bill is passed.

Testimony For: Statistics and experience show that health care workers are at a very high risk for violence in the workplace. This bill asks health care settings to be proactive in violence prevention and protection. It will give employees in health care settings the tools and support they need to deal with workplace violence. The bill will save money in the form of reduced workers' compensation costs and increased employee productivity in health care settings.

Testimony Against: The bill imposes unnecessary and burdensome requirements on settings that are already overwhelmed with regulations. Many settings have worked with the

guidelines of the Department of Labor and Industries to implement violence prevention plans voluntarily.

Testified: Frank Leuck, Department of Labor and Industries; PRO: Ellie Menzies, 1199 NW/SEIU; Nick Federici, Washington State Nurses Association; Sharon Ness, 141 UFCW; Gail McGaffic; Margaret Casey, Washington State Chore & Home Care; Rob Menaul, Washington State Hospital Association; CON: Scott Sigmon, Washington Health Care Association.