

CERTIFICATION OF ENROLLMENT
SECOND SUBSTITUTE HOUSE BILL 1162

69th Legislature
2025 Regular Session

Passed by the House April 22, 2025
Yeas 96 Nays 0

**Speaker of the House of
Representatives**

Passed by the Senate April 16, 2025
Yeas 49 Nays 0

President of the Senate

Approved

Governor of the State of Washington

CERTIFICATE

I, Bernard Dean, Chief Clerk of the House of Representatives of the State of Washington, do hereby certify that the attached is **SECOND SUBSTITUTE HOUSE BILL 1162** as passed by the House of Representatives and the Senate on the dates hereon set forth.

Chief Clerk

FILED

**Secretary of State
State of Washington**

SECOND SUBSTITUTE HOUSE BILL 1162

AS AMENDED BY THE SENATE

Passed Legislature - 2025 Regular Session

State of Washington **69th Legislature** **2025 Regular Session**

By House Appropriations (originally sponsored by Representatives Leavitt, Schmidt, Berry, Ryu, Macri, Bronoske, Pollet, Nance, Timmons, Ormsby, and Hill)

READ FIRST TIME 02/28/25.

1 AN ACT Relating to preventing workplace violence in health care
2 settings; amending RCW 49.19.020; adding a new section to chapter
3 49.19 RCW; creating a new section; and providing an effective date.

4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

5 **Sec. 1.** RCW 49.19.020 and 2019 c 430 s 2 are each amended to
6 read as follows:

7 (1) (~~Every three years, each~~) (a) Each health care setting
8 shall develop and implement a workplace violence prevention plan (~~to~~
9 ~~prevent and protect~~) for the purposes of preventing violence and
10 protecting employees from violence (~~at~~) in the setting.

11 (b) In a health care setting with a safety committee established
12 pursuant to RCW 49.17.050 and related rules, or workplace violence
13 committee that is comprised of employee-elected and employer-selected
14 members where the number of employee-elected members equal or exceed
15 the number of employer-selected members, (~~that~~) the committee shall
16 develop, implement, and monitor progress on the workplace violence
17 prevention plan.

18 (2) The workplace violence prevention plan (~~developed under~~
19 ~~subsection (1) of this section shall~~) must outline strategies aimed
20 at addressing security considerations and factors that may contribute

1 to or prevent the risk of violence, including but not limited to the
2 following:

3 (a) The physical attributes of the health care setting, including
4 security systems, alarms, emergency response, and security personnel
5 available;

6 (b) Staffing, including staffing patterns, patient
7 classifications, and procedures to mitigate employees time spent
8 alone working in areas at high risk for workplace violence;

9 (c) Job design, equipment, and facilities;

10 (d) First aid and emergency procedures;

11 (e) The reporting of violent acts;

12 (f) Employee education and training requirements and
13 implementation strategy;

14 (g) Security risks associated with specific units, areas of the
15 facility with uncontrolled access, late night or early morning
16 shifts, and employee security in areas surrounding the facility such
17 as employee parking areas; and

18 (h) Processes and expected interventions to provide assistance to
19 an employee directly affected by a violent act.

20 ~~((2) [(3)] Each health care setting shall annually review the
21 frequency of incidents of workplace violence including identification
22 of the causes for and consequences of, violent acts at the setting
23 and any emerging issues that contribute to workplace violence. The
24 health care setting shall adjust the plan developed under subsection
25 (1) of this section as necessary based on this annual review.))~~

26 (3) ~~((4))~~ In developing ~~((the plan required by subsection (1)
27 of this section))~~ and updating the workplace violence prevention
28 plan, the health care setting shall consider ~~((any))~~:

29 (a) Any guidelines on violence in the workplace or in health care
30 settings issued by the department of health, the department of social
31 and health services, the department of labor and industries, the
32 federal occupational safety and health administration, medicare, and
33 health care setting accrediting organizations; and

34 (b) The findings and recommendations in the summaries required by
35 section 2 of this act.

36 (4) The health care setting or, if applicable, the committee
37 under subsection (1) of this section must conduct a comprehensive
38 review and update of the workplace violence prevention plan at least
39 once per calendar year.

1 NEW SECTION. **Sec. 2.** A new section is added to chapter 49.19
2 RCW to read as follows:

3 (1) Every health care setting must conduct a timely investigation
4 of every workplace violence incident.

5 (2) In each investigation required by this section, the health
6 care setting must review the incident for purposes of identifying
7 factors contributing to or causing workplace violence, including but
8 not limited to an assessment of:

9 (a) The details of the incident, such as the date, time,
10 location, and nature of the conduct and harm;

11 (b) The details of any response and related remediation to
12 prevent future incidents; and

13 (c) If applicable, a comparison of the actual staffing levels to
14 the planned staffing levels at the time of incident.

15 (3)(a) The health care setting must submit to the committee
16 identified under RCW 49.19.020(1)(b) a summary of the following:

17 (i) The data required by RCW 49.19.040 and the findings of
18 investigations required by this section during the relevant time
19 period, with any personal information deidentified in compliance with
20 the federal and state law;

21 (ii) An analysis of any systemic and common causes of the
22 workplace violence incidents; and

23 (iii) Any relevant recommendations for modifying the plan under
24 RCW 49.19.020 and other practices in order to prevent future
25 incidents of workplace violence.

26 (b)(i) The summary must be submitted at least twice per year for
27 any of the following health care settings:

28 (A) A critical access hospital under 42 U.S.C. Sec. 1395i-4;

29 (B) A hospital with fewer than 25 acute care beds in operation;

30 (C) A hospital certified by the centers for medicare and medicaid
31 services as a sole community hospital that is not owned or operated
32 by a health system that owns or operates more than one acute hospital
33 licensed under chapter 70.41 RCW; or

34 (D) A hospital located on an island operating within a public
35 hospital district in Skagit county.

36 (ii) The summary must be submitted at least quarterly for all
37 other health care settings.

38 (4) This section does not affect or supersede any other state or
39 federal law that prohibits or limits the disclosure of personally
40 identifiable information.

1 NEW SECTION. **Sec. 3.** This act takes effect January 1, 2026.

2 NEW SECTION. **Sec. 4.** If specific funding for the purposes of
3 this act, referencing this act by bill or chapter number, is not
4 provided by June 30, 2025, in the omnibus appropriations act, this
5 act is null and void.

--- END ---