BILL ANALYSIS

C.S.H.B. 1146 By: Howard Public Health Committee Report (Substituted)

BACKGROUND AND PURPOSE

There are concerns about the number of nurses who have experienced workplace violence at some point in their careers, including verbal, physical, or sexual assault. It has been suggested that not all health care facility safety plans fully address workplace violence and that some health care workplaces fail to provide violence prevention training. C.S.H.B. 1146 seeks to address these concerns by requiring certain facilities to establish a workplace violence prevention committee or authorizing an existing committee to develop and implement a workplace violence prevention plan.

CRIMINAL JUSTICE IMPACT

It is the committee's opinion that this bill does not expressly create a criminal offense, increase the punishment for an existing criminal offense or category of offenses, or change the eligibility of a person for community supervision, parole, or mandatory supervision.

RULEMAKING AUTHORITY

It is the committee's opinion that this bill does not expressly grant any additional rulemaking authority to a state officer, department, agency, or institution.

ANALYSIS

C.S.H.B. 1146 amends the Health and Safety Code to require each applicable health care facility to establish a workplace violence prevention committee or authorize an existing committee to develop and implement a workplace violence prevention plan. The bill requires such a committee to include at least one registered nurse who provides direct care to patients of the facility and one facility employee who provides security services for the facility if the facility employs security personnel and if practicable. The bill authorizes a health care system that owns or operates more than one facility to establish a single committee for all of the system's facilities if the committee develops a violence prevention plan for implementation at each facility in the system and if data related to violence prevention remains distinctly identifiable for each facility in the system.

C.S.H.B. 1146 requires an applicable facility to adopt, implement, and enforce a written workplace violence prevention policy to protect health care providers and employees from violent behavior and threats of violent behavior occurring at the facility and sets out requirements for the policy. The bill requires the committee of an applicable facility or health care system, as applicable, to adopt, implement, and enforce a written workplace violence prevention plan to protect health care providers and employees from violent behavior and threats of violent behavior occurring at the facility or at each facility of the health care system and sets out requirements for a facility's plan, which may be satisfied by referencing other internal facility policies and documents. A facility must adopt and implement the plan not later than September 1, 2020. The bill requires a committee, at least annually, to review and evaluate the workplace violence prevention plan and report the results of the evaluation to the governing body of the

facility or health care system as applicable. The bill requires each facility to make available on request an electronic or printed copy of the facility's workplace violence prevention plan to each health care provider or employee of the facility unless the committee determines the plan contains information that would pose a security threat if made public and authorizes the committee to redact such information before providing the plan.

C.S.H.B. 1146 requires an applicable facility, following an incident of workplace violence, to offer at a minimum immediate post-incident services for each health care provider or employee of the facility who is directly involved in the incident and prohibits a facility from discouraging a health care provider or employee from exercising the provider's or employee's right to contact or file a report with law enforcement regarding such an incident. The bill prohibits a person from disciplining, discriminating against, or retaliating against another person who in good faith reports an incident of workplace violence or advises a health care provider or employee of the provider's or employee's right to report such an incident. The bill authorizes an appropriate licensing agency to take disciplinary action against a person who violates the bill's provisions.

C.S.H.B. 1146 applies to a facility that is:

- a home and community support services agency licensed or licensed and certified to provide home health services that employs at least two registered nurses;
- a health care provider that is certified by the Health and Human Services Commission (HHSC) to provide services through the home and community-based services or Texas home living Medicaid waiver programs and that employs at least two registered nurses;
- a licensed hospital, including a hospital maintained or operated by the state;
- a licensed nursing facility that employs at least two registered nurses;
- a licensed ambulatory surgical center;
- a freestanding emergency medical care facility; and
- a licensed mental hospital.

EFFECTIVE DATE

September 1, 2019.

COMPARISON OF ORIGINAL AND SUBSTITUTE

While C.S.H.B. 1146 may differ from the original in minor or nonsubstantive ways, the following summarizes the substantial differences between the introduced and committee substitute versions of the bill.

The substitute revises the types of facilities to which the bill's provisions apply.

The substitute does not include a specification that an existing committee a facility may authorize to develop and implement the plan is an existing safety committee. The substitute conditions the requirement for a facility's workplace violence prevention committee to include one facility employee who provides security for the facility on the facility employing security personnel.

The substitute revises the requirements for a workplace violence prevention plan and includes a provision providing for the satisfaction of those requirements by referencing other internal facility policies and documents.

The substitute changes the required action of a facility following an incident of workplace violence from offering immediate post-incident services, including acute treatment and access to psychological evaluation and support for affected providers or employees to offering at a

minimum post-incident services, including any necessary acute medical treatment for such providers or employees.

The substitute does not include provisions requiring a facility to file an annual workplace violence report with HHSC.