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| BILL ANALYSIS |

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| C.S.H.B. 326 |
| By: Howard |
| Public Health |
| Committee Report (Substituted) |

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| **BACKGROUND AND PURPOSE** It has been reported that rates of violent incidents in the workplace affecting health care workers, particularly nurses, outpace the rates of violence in some other industries. It has been suggested that not all health care facility safety plans fully protect against workplace violence. C.S.H.B. 326 seeks to address this issue by requiring certain health care facilities to establish a workplace violence prevention committee or authorizing an existing committee to develop, implement, and enforce 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. 326 amends the Health and Safety Code to require each of the following health care facilities to establish a workplace violence prevention committee or authorize an existing facility committee to develop a workplace violence prevention plan:* 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 to provide services through the home and community-based services (HCS) or Texas home living (TxHmL) waiver program and that employs at least two registered nurses;
* a licensed hospital and a hospital maintained or operated by a state agency exempted from licensing;
* 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.

The bill requires the 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 any 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 and if data related to violence prevention remains distinctly identifiable for each facility.C.S.H.B. 326 requires a facility to adopt, implement, and enforce a written workplace violence prevention policy and a workplace violence prevention plan 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 and the plan. The plan may be satisfied by referencing other internal facility policies and documents, and a facility must adopt and implement the plan not later than September 1, 2022. The bill requires a committee, at least annually, to review and evaluate the plan and report the results of the evaluation to the facility's governing body. The bill requires each facility to make available on request an electronic or printed copy of the facility's plan to each health care provider or employee of the facility. If the committee determines the plan contains information that would pose a security threat if made public, the committee may redact the information before providing the plan.C.S.H.B. 326 requires a 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 as if the person violated an applicable licensing law. |
| **EFFECTIVE DATE** September 1, 2021. |
| **COMPARISON OF ORIGINAL AND SUBSTITUTE** |
| While C.S.H.B. 326 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 changes the entity responsible for adopting, implementing, and enforcing a facility's workplace violence prevention plan from the committee of a facility or health care system to the facility itself.The substitute includes a specification that the manner in which an appropriate licensing agency may take disciplinary action against a person who violates the bill's provisions is as if the person violated an applicable licensing law. |
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