HOUSE OF REPRESENTATIVES COMPILATION OF PUBLIC COMMENTS

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COMMENTS FOR HB 112 by Howard | et al.

Mayra Garcia, Dr. Self-Advanced Practice Nurse Ennis, TX

If the pandemic taught us anything, is that our essential front-line medical workers need to be protected. Putting processes in place to protect staff against workplace violence is a must! Please VOTE Yes to protecting our front-line medical workers against workplace violence.

Laura Cornelson

Texas Nurses Association / Self as a Registered Nurse

Austin, TX

I support HB 112 because nurses who are caring for patients deserve to have the same protections for a safe working environment that are afforded to airline crew members.

Terry Throckmorton, Dr. (PhD, RN)

Houston Chapter of the Oncology Nursing Society (HCONS)

Missouri City, TX

We support HB 112 on workplace violence. As oncology nurses we seek to provide the most compassionate care for our patients. The threat of violence in the workplace is a significant deterrant to that care.

Michelle Marburger, Dr.

Texas Association of Vocational Nurse Educators

Fayetteville, TX

On behalf of TAVNE, we support HB 112 and propose that bill include nursing education program facilities because nursing faculty also experience forms of workplace violence from students and sometimes their family members. Research shows there is a nursing shortage and as well as a shortage in nursing faculty to education LVN's and RN's. If we want to continue to try to offset these shortages, we need proper protection and consequences for those exhibiting these abusive actions and behaviors. Thank you very much for your time and for your support.

Stephanie Woods

Texas Nurses Association

El Paso, TX

I am in support of this bill as a nurse and as a nursing Dean.

Lauren Gaudette

TNA

Nacogdoches, TX

I support HB 112 because nurses need to be protected from violence in their workplace.

Sarah Iyoha, RN

Nurses

Mansfield, TX

Work place violence to the healthcare workers is something that needs to be looked into because healthcare workers are getting overwhelmed when faced with such situations.

Jennifer Ibanez

AMN

Pearland, TX

As a Travel Nurse we are bullied by the staff most of the time because of the pay difference. They also give us the high acuity. Staff are jealous and bullied Travel RN's if they know our pay is better than their pay. Very disturbing and alarming mentally, emotionally. I've experienced management and staff who bullied RN's and got jealous because of pay rate specially if we get the crisis pay. I hope this will STOP! Thank you.

Toni McCasland, Assistant Professor of Nursing

TNA

Lubbock, TX

Preventing workplace violence in healthcare facilities is vital. Nurses in emergency rooms, bedside and surgery face threatening situations when providing patient care. I am in support of HB 112.

Julie Stefanick, Mrs.

Self

League City, TX

As an emergency room/trauma nurse I cannot tell you how many times the safety of myself and other healthcare providers had been put in jeopardy from patients and family members. I have seen and experienced nurses being punched, kicked, slapped, bitten, spit on, and attacked to the point of needing medical attention. We are discouraged from reporting and when we do the response is typically, "well did you deescalate?" "Just give them what they want and it wouldn't be a problem."

We are not supported by law enforcement when we call them to intervene and we are vilified for "not having compassion" if we speak up against violence towards us. Violence should not be a job hazard when I am trying to save someone's life.

Ryma Jarjur, BSN, RN Self Plano, TX

I worked in a behavioral health hospital and currently at Texas Health Resources in Dallas. I personally worked one night where 3 staff members were assaulted by a patient and sent all 3 to the hospital. One coworker is now permanently disabled due to the traumatic brain injury she received. Hospitals must be required to provide security staffing to help protect health care workers. Hospital should also be required to screen patient for potential violent behavior and take the necessary steps to prevent attacks.

Tina Madrid, MSN, RN, CCRN-k Self TX, TX

It is imperative that state legislatures understand the severity of workplace violence from patients to staff. A patient attached a nurse. The police would not do anything because the patient was not on a hold. Another nurse had to stop the patient. If this would have happened at McDonalds, the individual would have gotten arrested for assault. It has been said that the district attorney will not follow through with these cases so there is no point in pressing charges. So I ask, as an American who happens to be a nurse what are my rights when it comes to these patients? Why am I held at a different standard than any other American? Why is a flight attendants life more valuable than mine? If it's a felony to assault them why would that standard not be the same for nurses.

Rebecca Carrasco, MSN, RN, PMH-BC Self Hawkins, TX

As a Psychiatric Nurse of 33 years, I have not counted the times I've been physically injured by patients who either could or could not control their behavior. A have taught de-escalation training and currently co-facilitate a mock code training for deescalating an aggressive patient.

When I occasionally hear that injury from an aggressive patient is part of the job for nursing staff that work with this population, I know we are not sending the right message. We need further training and collaborative resources to reduce this risk. I support legislation that gives health care systems the guidance and support to reduce workplace violence.

Melinda Hudson, RN Self argyle, TX

The rise of workplace violence has drastically increased over the past three years. Since right before COVID hit, nurses went from "playing cards" at work, to healthcare heroes, to being attacked in public for fear of spreading COVID, back to nothing.

Most nurses decided to pursue a career in healthcare to help people; they wanted to make a difference. When I was 20 years old, I lost my husband in a car accident, left to raise our 6-month-old son alone. The nurse and physician who came into the room to tell me my husband had passed were cold and uncaring. They were my motivation to go to nursing school to ensure people were cared for, respected, and empathized with during quite possibly the worst moments of their lives. My son is now twenty-three years old and I truly love being a nurse and helping people, however I am almost too scared to go to work.

If nurses are not protected while at work, nurses will start leaving the field and fewer will pursue a career in nursing. What will become of our truly sick patients who need care if there is even a greater shortage of nurses because they fear for their lives??

Abi Provence, FNP-BC, FNP-C, CEN, CPEN self-Former ER nurse and now FNP Arlington, TX

I wrote this October of 2022 after my former hospital lost two staff members due to gun violence in the hospital.

As I head to bed and try to wrap my head around the event this weekend, and decipher what I'm feeling. I just can't come up with all I feel. As nurses we go into the profession to save lives not give our lives, but yet, this illustrates we do, and we have, and I'm afraid more will.

Nurses cared for man that just had stripped life from their own. Again sacrificing their own feelings and fears because of the duty to heal and do no harm.

I feel so guilty for the times we would talk about violence coming to the hospital. We would say it isn't a matter of if; it's when. Why didn't I advocate more back then for improvements in healthcare security? I should have done more.

I began my career at Methodist as a tech, and left over a decade later as a manager. I miss that place so much, and hearing the news, I just wanted to be back there. I know no amount of Starbucks or Krispy Kreme donuts will solve any of the tragedy, but I needed to do something. My family was wounded, died, scared, terrified to go back to work, grief stricken, and shocked. Food and a hug. I could give those, and so I made deliveries in a feeble attempt to help. Those hugs Saturday and Sunday with some tears left so many emotions. Anger, sorrow, grief, loss, but hope. Hope that Methodist and all it embodies will shine on. Some might take longer than others to find their zeal and light again, and that's completely understandable. The wounded and broken in spirit, I know will be held up, carried, and cared for my so many loving souls surrounding them. That's the spirit of Methodist but also the spirit of healthcare; especially nurses. When met with difficulties and challenges, we run towards the threat and adversity, all in the name of love; it's our duty.

As remaining nurses and nurse practitioners we must fight for more safety and security in hospitals. We deserve to be protected. Our patients' lives matter, but also ours do too. We should not go to work feeling scared or not have resources to protect us and allow up to do the duty we were called to do.

Jana Thompson, Dr. Self-Nurse Azle, TX

I am writing in support of HB 112. As a nurse on the front lines of healthcare, I was personally the victim of workplace violence on several occasions. I was also witness to my colleagues being physically assaulted as well. I am currently a clinical instructor at a safety net hospital and have to teach my nursing students workplace violence prevention and safety skills.

Healthcare professionals should not have to be afraid to go to work in a field they are passionate about. My students should not expect to be a statistic as a victim during their nursing career. Something more needs to be done to stop this violence and impose consequences to those who continue this behavior.

I greatly appreciate your efforts to end this cycle.

Janine York, RN Self, RN Manager McKinney, TX

In the hospital, the patients' rights are protected. I believe that patients should have freedom to have visitors of their choosing. However, as a L&D unit manager, I have seen on multiple occasions women give permission for known violent men to come to visit them during and after childbirth. I have personally spoken with 3 women in the first 2 months of 2023 who either have pending restraining orders, known violent tendencies, and known verbally abusive men onto our secured. Because it is their right, we are powerless to stop it. 2 of these 3 instances ended up with campus police responding and 1 arrest. We are left powerless to protect ourselves. If I'm placed in this situation outside of work, I have the choice to leave the threat. As a nurse, leaving is patient abandonment and would put nursing license at right. We need to be able to protect ourselves against known threats.

Richard Sambrook Texas Nurses Association Kyle, TX

As a nurse for over 20 years who started his Texas nursing career in the emergency room at the old Brackenridge I experienced violence on a daily basis. It became the norm. It was so prevalent that we had APD office permanently stationed there. Please support this legislation and protect our front line health care workers.

Adriane Mora, RN Self

Schertz, TX

Recently at the hospital I work at, we had a patient bring a loaded gun into our workplace. As part of a safety assessment it was determined the patient was currently suicidal. We called security and security confirmed the gun was loaded. The gun was confiscated; however, the patient was still able to go through with the procedure.

Safety is a top priority for the patients at every hospital; however, when it comes to nurses or any staff at the hospital, we are left feeling very unsafe at our own workplace. After this situation, I realized it is very unsafe as we are sitting ducks for anyone who is mentally unstable to bring a gun into any hospital.

We as nurses have a lot on our plates every day and safety for our own life's are not a priority at the hospitals we work at. There needs to be some kind of legislation that keeps nurses safe, so that we can provide the best care for patients without fear. My suggestion and plead for safety at the workplace in ALL Texas hospitals would be to provide security checks points before entering every hospital in Texas and have better signs for very person to be able to read that weapons are not allowed inside the hospitals. Also have announcements inside the hospitals as a reminder that weapons are not allowed inside the hospitals. Thank your for your time and please help provide a safe workplace for ALL Texas nurses. Sincerely,

Adriane Mora, BSN RN

todd bailey, RN TNA/Christus Health Lewisville, TX

I am a practicing RN. While the attempt of this bill is to address violence in the workplace, it falls short of the violence healthcare personnel experience. The onus appears to be on the facility rather than holding the perpetrators accountable. It is necessary for organizations to develop a plan, but without consequences for those perpetrating the act, how will behavior change? Thank you!

Jean Franks, BSN RN CNOR CRNFA North Harris Montgomery County AORN Chapter \$4410 Spring, TX

We support HB 112 because as Registered Nurses we practice to provide a special service to our patients. Workplace violence is occurring and should carry the same penalties exactly as our Police Officers making it a felony. We serve the public and if we are attacked while performing care to patients either by the patient, family members, or any others who may want to do us harm, it must be dealt with stringently.

Ria Fonseca Self, Registered Nurse SAN ANTONIO, TX

I am an RN in the ER with 20 years of experience. Every day our healthcare workers are threatened by patients and patients' family members. Physical and verbal abuse is unacceptable in the workplace. All healthcare workers should be protected and not afraid to show up to work. My experience with verbal and physical violence in the ER is ongoing. I have witnessed a co-worker being physically assaulted by a mental health patient by choking. He was too afraid to report the patient to the police because of fear of retaliation. This is unacceptable. We all need to make it home safely.

Sandra Thomas Self/RN Grandview, TX

Being in the nursing field for over 30 years I have seen alot of verbal abuse and sometimes physical, recently I hear a few doctors and nurses talk about each in terrible ways alot of passive aggressive behavior that leaves other nurses especially the newer to the field feeling dishearted and insecure, they began to question their every move and decision

I understand that the violence we're talking may be alittle more than this. IF left unchecked can result in hostle work environment. I Think this bill is just a beginning for us start giving each the professional respect to one another.

Denise Neill, Dr.

Texas Organization of Baccalaureate Nursing Education

Commerce, TX

As President of TOBGNE, I support HB 112 because nurses need to be assured their employer will put all reasonable measures in place to protect them. With the current and projected nursing shortage, we cannot afford to have good nurses harmed and leaving the profession due to insufficient protections while in the workplace. Thank you for supporting nurses by supporting this bill.

Brandy LaPaglia self/Registered Nurse/St. Joseph Health Bryan, TX

I have worked in healthcare for almost 20 years with much of that time spent in the Emergency Department. I cannot count the number of times I have been assaulted while on duty. I have been bitten, scratched, kicked, slapped, and verbally assaulted with words so ugly I had to look them up because I have never heard them before. I have witnessed numerous attacks on co-workers including a severe bite that left permanent scars, a punch that knocked a nurse completely unconscious, and the stories could go on and on. Unfortunately, for many years the culture of healthcare and nursing is that this is a part of the job. When I tell people I have been an ER nurse they love to ask me, "What is the craziest thing you have seen" but in that question they fail to realize that many nurses have been traumatized by the events they have lived through.

A quick search in Google scholar will quickly illuminate the prevalence of post traumatic stress in the nursing profession. In fact, in 2019 a new middle range nursing theory was developed by Karen Foli surrounding the trauma specific to the nursing profession. Violence should not be accepted as a normal fact of working in healthcare. In fact, we must enact support mechanisms that help give our healthcare heroes a voice.

I am thankful to work for an organization that prioritizes my safety. My organization began working on this problem many years ago when we began keeping a "violence log" to demonstrate the need for 24/7 security in our emergency department. My organization advocated for our safety through additional expenditures in construction projects to build in safe rooms and bullet proof sheetrock, windows and doors. Additionally, my organization is proactive in the development of a workplace violence committee that encourages evidence based de-escalation training and coordination between security personnel and frontline teams. Violent events are reviewed, talked about, and action is taken.

Since the development of our workplace violence committee the team has been able to obtain additional grant funding to help install additional security cameras. We also have been able to work with local law enforcement agencies to better coordinate efforts when violent events occur. Panic buttons are available for our rural facilities who may not have security resources, and those buttons are tested to ensure that local law enforcement is responsive and helpful.

In the wake of the COVID-19 pandemic, we saw those in healthcare rise up to the challenge of serving those in need. As we move into the future please demonstrate your commitment to honoring those who continue to serve by helping them serve in a safe place. Help them know they can go to work without fear of physical violence against them simply because they have answered the call to heal. Please enact regulations that establish baseline requirements for facilities to engage in meaningful dialogue and to take a proactive approach toward the prevention of violence.

Summer Jones Self/RN Winnsboro, TX

I am a RN that was assaulted by a patient resulting in a right tibial plateau fracture and subsequently a right total knee replacement. This has been a life altering change for me and I am no longer able to do the type of nursing I once enjoyed and my lifestyle has been adversely affected as well as my own personal emotional health. I always heard of nurses being injured due to workplace violence, but never thought it would happen to me.

Patricia Yoder-Wise, Dr. self Registered Nurse Lubbock, TX

I am a Registered Nurse in Texas who works primarily with authors, researchers, and nurse leaders. Through each of these avenues, I am aware of the increasing types, severity, and frequency of violence that occurs in healthcare facilities. This violence is not only directed at or absorbed by the nursing staff although they are the most common recipients. Places where people come for care, often to be healed from some act of violence, cannot be a place that further permits acts of violence to occur.

Some of the reasons healthcare providers have given for leaving their employers or their professions can be traced to the lack of respect they experience in the workplace. Tolerating abusive language seems small, and it is often a forerunner of more aggressive behaviors. Some organizations are exemplary in their willingness to tolerate no behaviors suggestive of violence. Others, unfortunately, suggest that the providers haven't tried hard enough to de-escalate a situation or to placate a person. New expectations for civil behavior in healthcare facilities apparently need to be enacted because some people, including those in control of some organizations, cannot hold themselves accountable.

I urge you to protect a valued resource in Texas--the limited supply of healthcare providers.by setting legislative expectations with penalties for what constitutes safe behavior in healthcare settings.

Cherylann Vaillancourt Memorial Hermann Health System Richmond, TX

I am a Registered Nurse in Houston TX. I have been an RN for 38 years. Over the last few years the amount and type of violence experienced by nurses in acute care hospitals is ALARMING!

Patients and even families are becoming more and more aggressive and demanding. If they get frustrated enough, they resort to physical demonstrations of their frustrations. Nurses are AFRAID. One survey within our system demonstrated that 94% of nurses experience work place violence DAILY!

Nurses sacrifice a lot to care for their communities but they should NOT have to sacrifice their personal safety.

Please pass HB 112. Respectfully, Cherylann Vaillancourt, DNP, MHA, RN, NEA-BC

Jennifer Taylor, RN self Spring, TX

First let me tell you why I became a nurse. My grandmother had cancer and I was her primary person for many things. I transported and assisted her with Dr's appointments, and chemotherapy. I gained such a great appreciation for the care and kindness her nurses showed and was inspired to contribute with a career in helping others and contribute to my society. As a nurse I have had many fulfilling experiences helping others. However, over the years we have watched workplace violence from multiple sources including patients, their family members, and visitors to the hospital. It varies in type and severity, from verbal abuse to physical abuse ranging from slapping, hitting, kicking, biting, and spitting. I have watched my co-workers experience the same. Regardless of the incident and any efforts to de-escalate these situations the long term impact on the healthcare team is something that cannot be ignored. There is a shortage of nurses and a great deal of focus on the degree of workplace violence in healthcare. The ability to entice young people, or anyone looking for a change in career, to join healthcare is threatened because of it. Many of the nurses I work alongside did not sign up for the abuse they are experiencing on a regular basis. A colleague had her spine fractured by a psych patient in psychosis. It could have ended her career, but she returned after 4 months of healing and rehab. She returned because she cares for others and wants to make a difference. Please support bill HB 112 to assist in reducing workplace violence in healthcare facilities. For all the care providers, and the future of healthcare.

Laura Kincheloe, Dr Nurses/Self Georgetown, TX

We all have our stories, every single one of us. I don't know that I have ever met a nurse who hasn't been at the very least verbally or sexually assaulted. However, I feel like the urgency in this bill must first and foremost physically protect nurses. The first time I was physically hurt I was 21 years old and a nurse student in my last few weeks. I was helping an elderly lady to the bath room who had a hip surgery. As I was helping her up she looked at my and called me a bitch and then aggressively grasped my arms between her fingers; a pinch that left a bruise for weeks. I was too afraid because students were told to not rock the boat. I remember another time I was 6 months pregnant with my twins and I ran into a room because a patient had defecated on herself and was trying to throw it and smear it on anyone who tried to have her lay in bed so we could assist her to clean up. We finally got her sitting down. There were 4 nurses to hold each extremity. I was trying to clean the poop that was dripping down her legs. She grabbed my ponytail and pulled so hard I felt down and feared for my life that she would stomp on my pregnant belly. Thankfully my team which included 6 of the 8 nurses on the floor came to restrain her. One patient maybe 125 pounds caused so much fear. These are my own personal stories. The story of my friend who could never step back into the ER after a patient brought a gun in and started shooting, my brand new nurse graduate who had so much potential and left nursing only 6 months into her profession after she was assaulted and traumatized, the hugs I gave to nurses who "couldn't go back into THAT room one more time in their shift." The countless reassignments and the growing list of "fired patients" overwhelmed me to the point of burnout. While this testimony doesn't present numbers or policy or even solutions, I pray it lights a fire for our state leaders to do something about the Workplace Violence pandemic that is spreading throughout our nation. If we don't protect nurses, we won't be able to recruit or retain them.

~Laura M Kincheloe, Ed.D,MSN,RN,NE-BC

Amber Arredondo, Registered Nurse Houston Methodist Clearlake-RN Santa Fe, TX

I have been assaulted while doing my job. I dont come to work to be assaulted. If I were working at walmart and was assaulted, that person would be charged, but suddenly if Im assaulted at a hospital, it becomes my fault and "part of my job". People are leaving in droves because of this issue. Back your healthcare providers before there aren't anymore left to back.

Seliena Corrington, DNP, RN, NEA-BC, CEN, CPEN, TCRN Self - Nurse Houston, TX

I support House Bill 112 because nurses shouldn't have to work in fear!

Brooke Beatty, MSN, RN Self, Nursing Educator Waco, TX

Dear Representative of the House Committee,

My name is Brooke Beatty and I am writing this letter to request your support in House Bill 112. This is an important bill that will certainly benefit all nurses.

As a nurse educator, I am writing to voice my concern about workplace violence (WPV) in the health care setting and the impact it has on nursing students. Workplace violence experienced by nurses includes any verbal threats or physical attacks by patients, family members, co-workers, and other individuals. The number of incidences has dramatically increased over the past decade and is considered a global public health issue causing major issues (Al-Qadi, 2021). For example, nurses are leaving the profession due to stressful working conditions, such as WPV, which is a contributing factor in the imminent challenge of a nursing shortage (Perkins, 2021).

Nursing students are one of the most vulnerable groups suffering from WPV. Research indicates that nursing students have a 42.98% chance of experiencing WPV compared to a seasoned nurse (Lingyan et. al, 2022). Student nurses between the age of 18 and 24 are seven times more likely to experience verbal violence compared to those who are 25 and older. These students report feelings of fear, anxiety, shock, embarrassment, & powerlessness, which drives to desire to leave the profession (Hunter et al., 2022).

Our country is facing an impending nursing shortage in spite of WPV. An increased shortage will directly impact the economy. We desperately need students to complete nursing programs, enter the workplace, and help battle the shortage crisis. Nursing students are the future staffers of health care organizations, community health, and members of the profession. We need this bill to pass and protect all nurses including the overlooked nursing student population.

I am asking for your vote in the upcoming legislative session to support HB 112. I have included reference's from research found on the topic. Please let me know if you have any questions.

Sincerely, Brooke Beatty, MSN, RN

References

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Crystal McEachin, RN Self Midland, TX

It's imperative for health care organizations to have in place trainings and protocols to safe guard health care workers from violence, we know that anxiety and fear can cause an escalation of behavior often leading to violence. There are programs like help with learning important de-escalation strategies. I am in support of This bill

Melissa Lockhart, Dr. SELF

Comfort, TX

I have been a Registered Nurse in Texas since 1971 and continue to practice to this day in Texas as a Nurse Practitioner serving a Geriatric Population and also Teaching at Galen College of Nursing in San Antonio Texas. On 2/28/2023 I accompanied 60 Future RN's from Galen College for Nurse Day At The Capitol and their greatest concern is HB 112. These students are concerned about their safety in their future workplaces. In 1973/74 working in a Harris County Trauma Facility, a patient stabbed my right hand with a needle that had just been used to draw her blood. She was a Heroin Addict with multiple substance abuse diagnosis, highly contagious, highly agitated, and was being resuscitated. I developed a very severe case of Hepatitis caused by Blood Transmission, requiring a year of treatment and multiple liver biopsies. I still bear that Right Hand Scar 50 + years later as a reminder of the trauma nurses face and the physical violence. While it is considered an Occupational Health Complaint and paid by Workers Compensation, it certainly did not pay for the subsequent counseling, 20+ years of counseling to ensure long term complications were identified early. Another graduate of TWU several years behind my graduating class me also a ER/Flight Nurse at Hermann Hospital in Houston, and developed Hepatitis from a Needle stick and succumbed to the Hepatitis. I witnessed an RN being stabbed by a psychiatric patient in an outpatient setting who attempted to slit her throat. These are only 3 examples in my long career in Texas. All staff in hospital and health care facilities need better protection, staffing, and safeguards. All types of health care professionals are leaving settings in Texas due to violence. You want to serve your patients, but leaving your house on any day to take care of Texans and not knowing if you will return is a daunting anxiety for all Health Care Personnel. We need to continue to staff facilities and care for Texans, but we need this bill passed! Texas Nurses need you to step up now! Melissa C Lockhart, PhD, APRN, GNP, FNP

Sarah Allison-Kolb Self Austin, TX

I work at the state hospital. Violence is a daily affair. Nurses and PNAs are at risk all the time. IN 7 years, I have been punched 2 X; black eye; I have been tackled and pummeled. It is a locked unit. there are not enough male staff to keep female nurses safe. I know theoretically gender should not matter. Many of aggessive patients our patients are very large men. It should not be OK for nurses to be assaulted in the name of patient rights.

Anne Hulzing, RN Self Austin, TX

Workplace violence has been an issue during my entire nursing career of 24 years. It has escalated over time and gained new heights during the COVID-19 pandemic. Working the majority of my career in a Critical Care unit, I have been personally verbally and physically assaulted by my patients and their family/ visitors on countless occasions. My patient that headbutt me in the face, after splitting in my face, was likely one of the most jarring experiences in my career. Long after the bruising on face subsided, the memory of that day, approximately 15 years ago, still lingers and likely will never fade. The most haunting experience of my career is when of my patient's husband tormented our entire staff daily for the entirety his wife's lengthy hospital stay. He was verbally abusive, touch staff without permission and would use his physical stature to tower over us, with intent to physically intimidate, while screaming at us. Hospital leaders were ill prepared on how to handle such an unexpected situation. After a meeting with the Chief Nurse, that approximately 60 staff members attended, 24/7 security was placed outside the patient room in attempts to curb these assaultive behaviors. It proved to be little deterrent and security intervened on a multitude of occasions. So many of my colleagues have PTSD from this horrible experience. Looking back on this situation, it should have NEVER been permitted to happen. Hospital leaders should be equipped to handle such situations and every hospital should have a ZERO tolerance for workplace violence. All healthcare workers deserve a safe and healing environment to provide care to their patients. Please support HB 112.

Hannah Dillard Self - Registered Nurse San Antonio, TX

I am a nurse in the emergency department, and last year I was choked by a patient while I was trying to provide medical care. I used to walk into every patients room without any fear, now I feel anxious and worried. I feel like working in the emergency department I am sometimes putting my life at risk, just waiting for the next bad thing to happen. We need more security measures in place. We need a zero tolerance policy for violence. It should not be acceptable for patients to physically assault us. Assaulting emergency personnel may be a felony in Texas, but will the patient actually ever face the consequences?

Daniel Trichel, RN Self, RN Houston, TX

I am a Texan, and I am a nurse. Texas is a proud home to world-class hospitals, which are staffed by a world-class workforce comprised of thousands of nurses, physicians, and other essential unlicensed personnel. This workforce must be treated as a precious commodity and afforded protection from violence. We are the heart of Texas, and for this reason I support HB 112.

Alanda White, Dr.
Theta Eta Chapter Inc of Chi Eta Phi Sorority Inc
Cibolo, TX

Nurses need more protection from patients, family members and administration.

Katie Wilson, RN Self, Registered Nurse Tomball, TX

As an emergency nurse, I support HB 112. I have been an emergency nurse since 2005 and have practiced in 4 different emergency departments across the state. In each one of these facilities, I have been verbally threatened and physically assaulted multiple times. In many instances, I have experienced violence multiple times in a single shift. Violence towards healthcare professionals has been an open secret for decades and healthcare facilities should be held accountable for providing a safe work environment for all healthcare professionals.

Lisa Campbell, DNP, RN Self Alamo Heights, TX

I have been a nurse for 40 years and experiences workplace violence. Honestly it is traumatizing and makes you not want to go back to work. When patients get combative it reactivates the fear of being hurt again. Nurses need to need to be protected or they will leave the workforce. We cannot afford to have nurses not feel safe. Thank you for supporting HB112 for all nurses and those we want to serve.

Luis Rangel self

Dallas, TX

I was assaulted by a patient in a psychiatric hospital. My organization had little to no resources for workplace violence. My life has changed since I was hit hard on the head. My cognitive function is impaired, my speech is impaired, my mobility is impaired. I've been out of work for almost a week with no PTO.Our organization's HR did an amazing job at sending me to the ER and following up on me; however, no policy/ protocol etc. was in place in the organization. I suffered a concussion because of the assault and have been out of work. I must meet 8 days of calling in because the doctor i was sent to for workers compensation released me instead of giving me some time off to rest. It's very frustrating, overwhelming and disheartening of the situation i am going through. I've been an RN for 9 years and this is the first time an incident like this happens to me. On another note, for a DNP course I'm currently enrolled- which i've asked for accommodations, I conducted literature review and a survey. Literature and survey indicates that ER departments and Psychiatric Hospitals are the most common places to suffer from workplace violence. Results from the survey I conducted on nursing staff, see workplace violence as normal and do not report such incidences. Nurses have told me that they don't report because they know management will not listen or pay attention to them. Nurses also verbalized that they have to work to make ends meet, so being out of work for them is not an option. I hope this enlightens you on my experience and measures are taken into effect to ensure a safe working environment for nurses.

Alanda White, Dr.
Theta Eta Chapter Inc of Chi Eta Phi Sorority Inc
Cibolo, TX

We as nurses need to be protected as professionals

Stephanie Tsao, RN Memorial Hermann Katy Hospital Katy, TX

What is Texas doing in increasing prevention of workplace violence in healthcare facilities?

Laura Ligon Self Trenton, TX

As a former ER nurse and current House Supervisor in a Level 1 Trauma Hospital, more needs to be done to prevent workplace violence against healthcare staff. Many times people think they can come into the hospital and verbally and physically abuse staff or threaten them if they don't get what they want. I personally have been hit, kicked, bitten, spit on, and verbally abused numerous times. If someone went into a store or restaurant and acted the way they did in our ER or hospital units, they would be kicked out and arrested, but nurses are expected to tolerate it, and turn the other cheek.

Karla Ross, Dr. Texas Organization of Associate Degree Nursing College Station, TX

I support HB 112 because workplace violence for healthcare workers is increasingly becoming a reason that nurses are leaving the profession. The state needs to help ensure that all facilities have systematic and effective practices in place to prevent workplace violence and provide support if it occurs.

Erin Allen, Registered Nurse Richmond, TX

I have been a registered nurse for 13 years and over the years workplace violence has been a constant. I have been both verbally and physically assaulted by patients and their family members. I have been spit on, kicked, pinched and hit during my tenure. I have also been called terrible names and verbally assaulted. I have had grown men stand up to me and threaten to punch me and use intimidation tactics. I have had patients and their family member threaten me and my loved ones. Over the last three years the number of these incidents have only escalated. Registered nurses and healthcare team members need to feel safe in their work environments and I can tell you right now this is not the case.

While I was not personally involved in the shooting situation in Dallas, there is absolutely no reason a criminal with ankle bracelet monitoring should have been given permission to visit his laboring significant other. That criminal's record included assault of a female and he was allowed to visit a mother baby unit. This is one of our most vulnerable populations in a hospital and he was allowed to walk right in. This NEVER should have happened.

Vivien Bond Self - Hospital Administrator Fulshear, TX

I'm writing in support of HB112. Too often, healthcare workers face verbal and physical threats and abuse while trying to care for the most compromised in our community. This behavior is becoming more prevalent in our industry and across the state. While many organizations have processes to help protect healthcare workers, there is a lack of legislation holding individuals accountable for their behavior. This is the first step to helping protect our invaluable frontline healthcare workers.

Kevin Stewart Texas Emergency Nurses Association Austin, TX

The Texas Emergency Nurses Association is a professional nursing association representing frontline nurses who practice in a variety of different emergency facilities in the state. We are writing today to express strong support for HB 112, which would reduce instances of workplace violence in the facilities we practice in.

In the US, healthcare workers are four times more likely to be a victim of violence in the workplace than any other industry. Over seventy percent of emergency department nurses have been assaulted at work. Ease of public access, overcrowding, long wait times, weapons, alterations in mental status, psychiatric or medical diagnoses, and other factors make emergency departments especially vulnerable, high-stress areas. Patients and visitors can, and regularly do, become violent. It is our job to ensure that they receive the care that they need, regardless of the dangers that may pose to ourselves, other patients or visitors, and the department.

HB 112 would require facilities to develop policies to address and prevent workplace violence. Of course, these policies will not be able to prevent all instances of violence, but facilities should be required to take steps to mitigate harm as possible. While some facilities already do things that are included in this bill, others are either unaware of or not enforcing best practices to prevent workplace violence. Reasonable steps towards remediation after an incident, such as reassigning the provider and ensuring they have access to post-incident care, are critical. Furthermore, anti-retaliation is critical to supporting an environment where nurses feel safe to report violence towards them.

Since the pandemic, incidences of workplace violence have only increased. Nurses are needed now more than ever, yet many succumb to burnout as a direct result of workplace violence. If we are going to curb the nursing shortage, we not only need to invest in expanding the pipeline of new nurses, but we must also ensure that the existing nursing workforce has a safe work environment. HB 112 would be a significant step in this direction. We ask you to vote in favor of this critical piece of legislation.

Brianna Puddicombe Self/RN

Austin, TX

I believe this bill would be extremely beneficial and helpful for nurses. Just last week I was injured at work by a patient and am now dealing with multiple injuries including a broken wrist and pulled muscles in my back. As well as concerns as to whether the patient is going to have a similar episode

Ruth Noell, RN, BSN

self

Flower Mound, TX

I have been a Registered Nurse for 11 years, working in a critical care hospital unit, and unfortunately, violence in all its forms, is something nurses have come to expect as fairly common in our workplace.

We are verbally assaulted, hit, kicked, grabbed, and worse. Many times the patients are confused, either due to drugs, disease or mental illness, but this isn't always the case. We are yelled at because the food is cold, the room is too warm, the doctor is late. We are lashed out at by family members, some of whom have genuine concern, others who just choose to make nurses the easy scape goats for their anger.

And we have to face the real possibility of guns being brought onto our campuses.

Many of my co-workers are in counselling, some now require medications to get through the stress of the job.

We should not have to go to work in fear. We should not have to go home in tears.

Andrea Pee, Executive Director Texas School Nurses Organization Austin, TX

Texas School Nurses Organization supports HB 112 to address workplace violence for healthcare workers. This bill would protect nurses from violence and from retaliation for speaking up. As a profession known for providing safe care to patients, it is important for our nurses to also feel safe in their workplace.

Andrea Pee, Interim Executive Director/CEO Texas Association of Nurse Anesthetists Austin, TX

Texas Association of Nurse Anesthetists supports HB 112. Texas faces an acute shortage of nurses, and nurse retention requires nurse protection. Therefore, we must enact policies that encourage nurses to report safety concerns and protect them from workplace violence. This bill would create a structure for reporting and responding to workplace violence incidents.

Natalie Perry-Thompson, Rn TNA

Midlothian, TX

There continues to be escalating workplace violence from patients and family members agains healthcare professionals. Recently 2 RN shot and killed and Methodist Dallas and a gun pulled on staff and patients in triage at Arlington Memorial hospital. I've seen staff members nearly run over in parking lots due to families targeting staff. We are expected to continue to provide care without being affected. Nurses need safety and security, physically and mentally, to provide effective patient care. We must be proactive in education and preventative measures. Factors that impact care are frequency and exposure to workplace violence, emotional exhaustion, increased medical errors and negative attitude towards the patient they provide care to. Providing a safe and secure work environment is a key factor in providing safe patient care for healthcare providers, patients, and their families.

Serena Bumpus Texas Nurses Association Liberty Hill, TX

Thank you, Chair Klick, and members of the committee for allowing me to provide written testimony, my name is Serena Bumpus, I am a registered nurse representing the Texas Nurses Association (TNA) and I am in support of HB 112.

Violence against health care workers has reached epidemic proportions. It has been a pervasive issue in the healthcare industry for many years. The rate of incident has increased dramatically over the last ten years. Some studies suggest a 110% spike in the number of violent injuries against healthcare workers in the last decade.

In 2022, a study by Press Ganey showed that more than two nursing personnel were assaulted every hour in quarter two of 2022. That equates to roughly 57 assaults per day, 1739 assaults per month and 5217 assaults per quarter. What is even more startling about these numbers is that they are likely even higher, as assaults generally go underreported by healthcare professionals – and nurses in particular. Despite these statistics, many health care organizations do not address workplace violence in their safety plans and fail to provide violence prevention training to their staff.

Because nurses interact the most with patients and their family members, they often take the brunt of the violence. Since stepping into the role as CEO of TNA, I've traveled across the state to meet with nurses. Workplace violence comes up consistently as one of the top two priorities in my discussions. Stories of nurses being held at knife point, being kicked, and punched repeatedly, threats from family members of returning to their facility and "shooting the place up", multiple stories of verbal abuse, and sadly, even stories of sexual harassment and assault. Sadly, many have also reported nothing is done to review their cases and prevent this incident from reoccurring.

House Bill 112 would require health care organizations to develop safer facilities, with direct input from frontline nurses, by requiring them to develop a workplace violence prevention policy and plan to protect all employees from workplace violence, establish a mechanism for reporting workplace violence incidents, and put retaliation protections in place for those who report these incidents to law enforcement. This bill requires that health care organizations set safety as a priority by requiring clear processes for establishing and implementing a plan to address, examine and respond to workplace violence.

HB 112 protects every healthcare worker in healthcare facilities. It's time we address a top issue causing nurses to leave the bedside and the profession. This is not only a safety issue it is also a retention issue. Workplace Violence has been a legislative priority for TNA for over a decade. While we have made progress, more work needs to be done to prevent violence against nurses and the healthcare team.

As far as I know this is an agreed to bill. I urge you to support HB 112 and I am available for any questions. Thank you.

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Sharon Fischer, RN self, RN Kyle, TX

As an RN who has worked in the home care and hospital setting, I have had multiple experiences with workplace violence. I have been bitten and scratched multiple times. I have had a patient try to stab my in the neck with a pencil and another try to hit me in the face with a metal belt buckle by swinging the belt at me. A family member of a home care patient told me he was going to shoot me in the head and described his plan in detail if I didn't document my visit (fraudulently) in a way that would allow the patient to receive 24 hour home caregiving. I have been subject to more verbal and sexual harassment than I can count and as a nursing supervisor I know that my experiences are not unique. There is no other profession that expects employees to ignore or tolerate assault and abuse as 'part of the job'. Confusion or inebriation are not acceptable excuses for violence against law enforcement and they should not be acceptable excuses for violence against healthcare workers. Healthcare workers deserve a safe working environment. I hope this legislation will pass.

Christina Hoppe Children's Hospital Association of Texas Austin, TX

Support

Amy Anderson self, Registered Nurse Keller, TX

With the recent uptick in workplace violence for nurses across Texas and the limited protections available, I am writing in support of HB 112. This bill would establish workplace violence prevention programs that are necessary to explore ways to improve safety for health care workers. By supporting workplace violence bills such as HB 112, the legislature recognizes the importance of health care workers to the overall well-being and care delivery for patients, families, and communities in Texas. With many leaving the health care professions and the shortages of health care workers in Texas, establishing workplace violence prevention programs and including nurses in the solutions to this pressing issue is essential to re-establishing trust with workers. As a registered nurse, I strongly support this bill as a first step to increasing awareness of the workplace violence issue and innovating solutions to this growing problem.

Andrea Earl AARP Texas Austin, TX

AARP supports HB 112 and encourages adaptation of this important legislation. The Texas legislature has an important responsibility to keep nursing home residents safe and ensure facilities have a workplace violence prevention policy. Establishing this policy in facilities is paramount for caregivers facing the decision to place loved ones in a nursing home.

Kathleen Williams, Director, Nursing Services Concordia University School of Nursing - DFW campus Plano, TX

I have been a professional nurse for over 40 years and am currently teaching in a baccalaureate pre-licensure program. Although workplace violence is not new to the hospital environment, violent events have certainly escalated in the past decade. For me personally, I have been grabbed, pinched, pushed, spat at and had things thrown at me (an IV pump!). I have been escorted to my car as I have had death threats from opposing gang members, after caring for the other gang members. As a CNO, I have witness staff members being assaulted by a mentally ill patient in the emergency department. When I told the staff that I would give them the day off to go press charges and go to court, they stated "It won't do any good - the judge will dismiss the case, stating that the person was "mentally ill". A member of my current staff was assaulted at a healthcare facility. When he told the facility that he wanted to press charges, he was told "not to do that"

Do I have the answer to all of this -NO. However the current law and systems does not provide enough support for the healthcare professional when they are harmed.

HB 112 would: require facilities to establish a workplace violence prevention plan, require training for staff, create antiretaliation protection for those that report violent acts and task facilities with enforcing the law.

Although this bill will not solve the problems, it would begin to address workplace violence against healthcare professionals in the state of Texas.