

**SENATE BILL 5228**

---

**State of Washington**

**55th Legislature**

**1997 Regular Session**

**By** Senators Deccio, Franklin, Prentice, Benton, Wojahn and Kohl

Read first time 01/20/97. Referred to Committee on Health & Long-Term Care.

1 AN ACT Relating to prevention of workplace violence in health care  
2 settings; adding a new chapter to Title 49 RCW; creating a new section;  
3 and prescribing penalties.

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

5 NEW SECTION. **Sec. 1.** The legislature finds that:

6 (1) Violence is an escalating problem in many health care settings  
7 in this state and across the nation;

8 (2) Based on an analysis of workers' compensation claims, the  
9 department of labor and industries reports that health care workers  
10 face the highest rate of workplace violence in Washington state;

11 (3) The actual incidence of workplace violence in health care  
12 settings is likely to be greater than documented because of failure to  
13 report or failure to maintain records of incidents that are reported;

14 (4) Patients, visitors, and health care personnel should be assured  
15 a reasonably safe and secure environment in health care settings; and

16 (5) Many health care settings have undertaken efforts to attempt to  
17 assure that patients and workers are safe from violence, but additional  
18 personnel training and appropriate safeguards may be needed to prevent

1 workplace violence and minimize the risk and dangers affecting people  
2 in health care settings.

3 NEW SECTION. **Sec. 2.** This chapter applies to the following health  
4 care settings:

- 5 (1) Acute care hospitals under chapter 70.41 RCW;
- 6 (2) Residential care facilities under chapter 18.20 RCW;
- 7 (3) Skilled nursing care facilities under chapter 18.51 RCW;
- 8 (4) Mental health clinics;
- 9 (5) Facilities for the developmentally disabled;
- 10 (6) Psychiatric hospitals and residential treatment facilities  
11 under chapter 71.12 RCW; and
- 12 (7) Nursing and personal care.

13 NEW SECTION. **Sec. 3.** (1) Health care settings subject to this  
14 chapter shall conduct a security and safety assessment and, using the  
15 assessment, develop and implement by July 1, 1998, an appropriate  
16 workplace violence prevention plan with measures to reasonably protect  
17 personnel, patients, and visitors from acts of violent behavior. The  
18 security and safety assessment shall examine trends of disruptive or  
19 violent behavior in the health care setting. The health care setting  
20 must track incidents of disruptive or violent behavior for the purpose  
21 of developing a workplace violence prevention plan to deter and manage  
22 further disruptive or violent acts. The workplace violence prevention  
23 plan shall include, but not be limited to, security considerations  
24 relating to the following:

- 25 (a) Physical layout of the health care setting;
- 26 (b) Staffing of the health care setting and security personnel  
27 availability;
- 28 (c) Adoption of security policies including, but not limited to,  
29 personnel training policies designed to protect personnel, patients,  
30 and visitors from disruptive or violent behavior. Persons regularly  
31 assigned to security functions in related or similar health care  
32 settings shall be trained regarding the role of security in health care  
33 setting operations, including the identification of disruptive and  
34 violent predicting factors, management of disruptive or violent  
35 disturbances, and appropriate responses to disruptive or violent acts;  
36 and

1 (d) Education and training of employees as appropriate for the  
2 particular setting.

3 (2) In developing the workplace violence prevention plan required  
4 under this section, the health care setting shall consider any  
5 guidelines or standards on violence in health care settings issued by  
6 the department of health, the department of social and health services,  
7 the department of labor and industries, the federal occupational safety  
8 and health administration, medicare, and health care setting  
9 accrediting organizations.

10 (3) The health care setting's committee responsible for developing  
11 the workplace violence prevention plan shall include where reasonable,  
12 based upon the outcome of the assessment process, persons with  
13 expertise or experience in the following:

14 (a) The role of security in health care setting operations;

15 (b) The organization of health care settings;

16 (c) Protective measures, including alarms and access control where  
17 appropriate;

18 (d) The handling of disruptive or violent patients, visitors, and  
19 employees;

20 (e) Identification of disruptive and violent predicting factors;

21 (f) Health care setting safety and emergency preparedness; and

22 (g) The rudiments of documenting and reporting incidents.

23 NEW SECTION. **Sec. 4.** (1) By July 1, 1999, and thereafter on a  
24 continuing basis as provided for in the workplace violence prevention  
25 plan developed under section 3 of this act, with the exception of  
26 individuals not considered employees under RCW 49.17.020, for whom  
27 training shall be discretionary, any personnel working in the health  
28 care setting, whether or not directly employed by the health care  
29 setting, shall receive violence prevention education and training  
30 related to the following topics that are reasonable under the  
31 circumstances, or relevant to their workplace, based upon the outcome  
32 of the assessment process:

33 (a) General safety procedures;

34 (b) Personal safety procedures;

35 (c) The violence escalation cycle;

36 (d) Disruptive indicators and violence-predicting factors;

37 (e) Obtaining patient history from a patient with violent behavior;

38 (f) Characteristics of disruptive and violent patients and victims;

1 (g) Verbal and physical techniques to deescalate and minimize  
2 violent behavior;

3 (h) Strategies to avoid physical harm;

4 (i) Restraining techniques;

5 (j) Appropriate use of medications as chemical restraints;

6 (k) The rudiments of documenting and reporting incidents;

7 (l) An opportunity for affected employees to debrief;

8 (m) Any resources available to employees for coping with incidents  
9 of violence; and

10 (n) The health care setting's workplace violence prevention plan.

11 (2) Establishment of a workplace violence prevention plan under  
12 this chapter is a standard of licensure or certification for the  
13 specified health care setting.

14 (3) Incidents of violence occurring in health care settings shall  
15 be monitored by the health care setting, and the number and type of  
16 such incidents shall be reported to the department of health.

17 (4) The health care settings shall report data established by rule  
18 for their workplace violence prevention plans to the department of  
19 health by July 1, 1998, and by each July 1st thereafter. The  
20 department shall determine data reporting requirements designed to  
21 enable analysis of the type, extent, and frequency of reportable  
22 incidents in order to evaluate the trends in workplace violence in  
23 health care settings and the effectiveness of violence prevention  
24 plans. The department shall compile the information from the reports  
25 and transmit the information in a report to the appropriate committees  
26 of the legislature by January 1, 2000.

27 (5) The department of health and the department of labor and  
28 industries shall cooperate in the reporting, data collection, and  
29 enforcement required under this chapter, including enforcement action  
30 for failure to establish a plan, by interagency agreement.

31 (6) Failure of a specified health care setting to establish a  
32 workplace violence prevention plan makes the health care setting  
33 subject to notice or citation under chapter 49.17 RCW.

34 NEW SECTION. **Sec. 5.** Employers needing assistance in the  
35 workplace violence assessment or the development and establishment of  
36 their plan may contact the federal secretary of labor or the state  
37 department of labor and industries for assistance. The departments of

1 labor and industries, social and health services, and health shall  
2 coordinate their assistance to employers.

3 NEW SECTION. **Sec. 6.** The legislature recognizes that not all  
4 professional health care occurs in formal settings, such as hospitals.  
5 Many health care services are provided by home health agencies licensed  
6 under chapter 70.127 RCW. The legislature finds that it is  
7 inappropriate and impractical to require home health agencies to  
8 address workplace violence prevention in the same manner as other,  
9 facility-based, health care settings.

10 The legislature intends to require home health agencies to assess  
11 their own particular specialized violence-prevention needs, which may  
12 vary among agencies, and to develop workplace violence prevention plans  
13 customized for those needs, that contain only those elements set forth  
14 in sections 3 and 4 of this act as may be relevant to the professional  
15 work of the particular home health agency.

16 To the extent that they are relevant, the requirements of this  
17 chapter regarding assessing the workplace, developing and reporting a  
18 workplace violence prevention plan, and reporting to the department of  
19 health apply to home health agencies.

20 NEW SECTION. **Sec. 7.** Sections 2 through 6 of this act constitute  
21 a new chapter in Title 49 RCW.

--- END ---