

SENATE BILL REPORT

SSB 5312

As Passed Senate, March 12, 1999

Title: An act relating to prevention of workplace violence in health care settings.

Brief Description: Providing for the prevention of workplace violence in health care settings.

Sponsors: Senate Committee on Health & Long-Term Care (originally sponsored by Senators Costa, Deccio, Winsley, Wojahn, Thibaudeau and Kohl-Welles).

Brief History:

Committee Activity: Health & Long-Term Care: 1/27/99, 2/17/99 [DPS-WM].

Ways & Means: 3/4/99, 3/8/99 [DPS (HEA), DNPS].

Passed Senate, 3/12/99, 46-0.

SENATE COMMITTEE ON HEALTH & LONG-TERM CARE

Majority Report: That Substitute Senate Bill No. 5312 be substituted therefor, and the substitute bill do pass and be referred to Committee on Ways & Means.

Signed by Senators Thibaudeau, Chair; Wojahn, Vice Chair; Costa, Deccio, Franklin, Johnson, Winsley.

Staff: Jonathan Seib (786-7427)

SENATE COMMITTEE ON WAYS & MEANS

Majority Report: That Substitute Senate Bill No. 5312 as recommended by Committee on Health & Long-Term Care be substituted therefor, and the substitute bill do pass.

Signed by Senators Loveland, Chair; Bauer, Vice Chair; Brown, Vice Chair; Fairley, Fraser, Kline, Kohl-Welles, Rasmussen, Roach, B. Sheldon, Snyder, Spanel, Thibaudeau, Winsley, Wojahn and Zarelli.

Minority Report: Do not pass substitute.

Signed by Senator Honeyford.

Staff: Tim Yowell (786-7435)

Background: Studies show that violence in the workplace is a significant cause of injury and death. For some groups, violence on the job is reportedly the leading cause of workplace mortality. Concern exists that health care facilities in particular are experiencing increasing amounts of workplace violence.

Summary of Bill: By July 1, 2000, and based on a formal security and safety assessment, all health care settings must develop and implement a plan to prevent and protect employees from violence at the setting. In developing such plans, consideration must be given to any

relevant guidelines or standards issued by government agencies or private accrediting organizations.

By July 1, 2001, and on a regular basis thereafter, each health care setting is to provide violence prevention training to all its employees, as appropriate to the particular setting and to the duties and responsibilities of the particular employee being trained.

Beginning no later than July 1, 2000, each health care setting must keep a record of any violent act against an employee, a patient, or a visitor occurring at the setting. Records must be kept for at least five years, and are to be available to the Department of Labor and Industries upon request.

A health care setting failing to comply with the requirements of the bill is subject to citation from the Department of Labor and Industries under the state Industrial Safety and Health Act. The Department of Health and the Department of Social and Health Services must cooperate with the Department of Labor and Industries in enforcement.

"Health care setting" is defined to include: hospitals, home health, hospice, and home care agencies, mental health evaluation and treatment facilities, and community mental health programs.

"Employee" is defined to include an individual who is regularly employed in a health care setting, but does not include an individual who is employed sporadically or temporarily.

The Department of Labor and Industries is to allow flexibility in recognition of the unique circumstances in which home health, hospice, and home care agencies operate when enforcing the bill as to these settings.

Appropriation: None.

Fiscal Note: Available.

Effective Date: Ninety days after adjournment of session in which bill is passed.

Testimony For (Health & Long-Term Care): Violence in health care settings is escalating. According to the Department of Labor and Industries, health care settings rank near the top in terms of incidence of workplace violence. This bill asks those settings to be proactive in addressing this issue. The bill will prompt appropriate training so that violence prevention and appropriate responses become second nature to health care workers. This bill will not stop all of the violence, but it will give workers better tools to deal with it and reduce its financial and emotional impact. Patients and visitors to these settings will also be better protected.

Testimony Against (Health & Long-Term Care): The sections in the bill allowing hospitals to prohibit weapons on hospital premises are unconstitutional and will serve little purpose. Criminals who wish to commit violent acts will not comply with the prohibition. Weapon free zones give predators a safe haven where they know their victims will be unarmed. The bill removes both the right of self-defense and the obligation on the part of hospitals to provide adequate protection.

Testified (Health & Long-Term Care): PRO: Ann Simons, UFCW; Marilyn Savage, UFCW, United Staff Nurses Union; Ellie Menzies, SEIU/1199NW; Gail McGaffick, Home Care Association of Washington; CON: Joe Waldron; Merton Cooper; Allan Woodbridge, Washington State Rifle & Pistol Association; CONCERNS: Andy Davidson, Washington Hospital Association.

Testimony For (Ways & Means): Many hospitals already have workplace violence prevention plans. This bill just establishes some common standards as to what those plans should cover rather than leaving it up to the judgment of individual hospitals and safety inspectors. Health care settings are very stressful places, where violence erupts much too often. The fiscal note is based on a very small sample of hospitals, and doesn't recognize that costs should decrease since training will not need to be so extensive in future years. The training doesn't need to be as complicated as some employers are suggesting.

Testimony Against (Ways & Means): None.

Testified (Ways & Means): PRO: Senator Jeralita Costa, prime sponsor; Sharon Ness, Ann Simons, United Food and Commercial Workers Union; Ellie Menzies, SEIU/1199NW.

House Amendment(s): The amended bill applies to all employees of the health care setting, rather than just permanent employees. However, the training requirements apply to only affected employees. The training required by the amended bill is to occur within 90 days of an employee's hiring, unless he or she is a temporary employee, in which case the training is to take into account unique circumstances. Employers are given flexibility in the form of training required. Under the amended bill, the Department of Labor and Industries, the Department of Health, and the Department of Social and Health Services are required to assist employers develop and implement plans. The requirement that the Department of Social and Health Services cooperate with the Department of Labor and Industries in enforcement is removed. The amended bill is made applicable to state mental hospitals if funding is provided in the budget for this purpose.