

Good morning, Chair Hope and members of the House Committee on Criminal Justice. I am Michelle Pena, Chief Nursing Officer for Trinity Health Grand Rapids. Thank you for the opportunity to share my thoughts on behalf of Trinity Health Grand Rapids and Trinity Health Michigan regarding House Bills HB's 4520 & 4521, legislation providing for enhanced penalties for individuals who commit violence against health professionals and/or medical volunteers.

- Workplace violence is dangerous and underreported. According to the U.S. Bureau of Labor Statistics, health care and social service workers are 5x as likely to suffer a workplace violence injury than workers overall. In a 2019 American Nurses Association (ANA) survey, 1 in 4 nurses report being physically assaulted.
- Violence against health care workers has long existed. There is little awareness or understanding by the public of the intensity of the threat our healthcare workers encounter daily. We saw a significant increase in both the frequency and severity of violent incidences during the COVID pandemic and this continues today.
- We track the number of incidents, severity of injuries and days lost work across inpatient and outpatient environments. We have had colleagues off work for injuries such as concussions, internal bleeding of a pregnant woman, a fractured jaw, dislocated shoulders, and severe anxiety from an assault as examples. As recently as last week, one of our colleagues sustained three fractured facial bones, needing care from a plastic surgeon
- While we are conceptually supportive of this legislation and greatly appreciate the sponsor's willingness to look at this issue, we believe these enhanced penalties should apply to those patients who have adequate cognitive function with decisional making capacity and commit acts of violence against our healthcare workers and medical volunteers. While no act of violence against our staff is acceptable, we recognize that many of our patients involved in these incidents don't have the cognitive capacity to understand their actions. However according to our internal data, at least 25% of patients involved in these incidents do have adequate cognitive function and are committing these violent actions willfully.
- We have engaged in a variety of strategies and tactics to address the issue of violence against our staff over several years. This includes evidenced based de-escalation training, crisis prevention and safety strategies annually. We partnered for 3 years with the Grand Rapids Police Department (GRPD) to have a police officer presence in the emergency room during night shift, funded by the hospital*. Another strategy was creation of a Special Response Team that is comprised of a security officer, social worker and psychiatric RN that responds to escalated situations for support and further

- expertise in de-escalation. We have official, branded signs on entryways, waiting rooms, elevators and exam rooms that explain a zero- tolerance approach to violence and support from administration of colleagues to pursue legal action against those that assault them. We have added a K-9 unit to our security team with four K-9 dogs and officers. Despite these efforts violent incidents continue to increase.
- Violence against healthcare workers is contributing to the unprecedented workforce challenges we are experiencing across our health system. Healthcare staffing is at a breaking point with violence against colleagues as a contributing factor. Consistent with research in this area and what other health systems are facing, both physical and verbal aggression are impacting the wellbeing of our colleagues as evidenced by an all- time high rate of burnout.
- We are obligated to take care of patients, there is no ability to turn them away because they are violent. Most patients are not violent but the ones who are risk quality and safety for all other patients and our colleagues.
- Other possible tactics we encourage you to consider:
 1. Provide public education on current condition of violence in health care settings via PSA's to increase awareness
 2. Enhance the penalties for those who commit violence on healthcare workers with decisional making capacity in any healthcare setting
 3. Provide or supplement funding of de-escalation and safety training of healthcare workers
 4. Provide or supplement funding of security measures such as K-9's, metal detectors, police support
 5. Provide or supplement funding for special response teams in healthcare organizations to support prevention and response to violent incidents
 6. Collect data upon license renewals to assess statewide prevalence of violence on healthcare workers
 7. State branded notices about implications of violence against healthcare workers posted in identified areas
 8. Notice provided to patients upon registration (when appropriate, after screening exam to ensure no urgent medical need is present) to read and sign, much like a HIPPA acknowledgment



Trinity Health Michigan

Thank you for the opportunity to provide comments today. I would be happy to answer any questions.

**Currently on hold due to staffing deficits within the police department.*