



DALE KOOYENGA
STATE SENATOR · 5TH DISTRICT

State Capitol · P.O. Box 7882 · Madison, WI 53707-7882 · (608) 266-2512

September 17, 2019

TO: Senate Committee on Judiciary and Public Safety
FR: Senator Dale Kooyenga
RE: support for Senate Bill 163 – workplace violence/bodily harm to a nurse

Thank you for holding a hearing on Senate Bill 163. My co-author, Representative Gae Magnafici, and I have introduced this bill to shine a light on the unfortunate reality of increased workplace violence against nurses.

SB 163 is a straightforward bill that makes it a Class H felony to commit battery against a licensed registered nurse (RN), a licensed practical nurse (LPN), or an individual working under the supervision of an RN or LPN.

Workplace violence should not be a part of the job for a nurse. However, the reality we have all seen depicted in the news shows otherwise and unfortunately, earlier this year, a nurse was beaten to death at an area healthcare facility. Workplace violence against nurses can be found in just about every type of practice setting – hospitals, clinics, home care, psychiatric, long term care and correctional health settings.

Wisconsin has more than 161,400 nurses (RNs, LPNs and CNAs) in our nursing workforce and according to the American Nurses Association, one in four nurses has been abused in the workplace. SB 163 is a public statement to the men and women nurses who work every day to save lives – we must strive to help protect their lives.

We believe this proposal will increase the public's awareness of workplace violence against nurses, while providing greater consequences to deter violence in the workplace. While there is no single remedy to deal with this issue – this bill is a piece in the larger puzzle that will move toward an overall solution.

It has been brought to our attention that additional health care professionals have asked to be covered by this proposed change and we are open to such an amendment.

There is a saying ... "Save one life, you're a hero. Save 100 lives, you're a nurse." I am proud to be the author of this legislation along with Representative Gae Magnafici, a nurse.

Thank you for hearing SB 163. I respectfully ask for your support.



September 17, 2019

Senator Van H. Wanggaard, Chair
Senate Committee on Judiciary and Public Safety
313 South, State Capitol
P. O. BOX 7882, Madison, WI 53707-7882

RE: Wisconsin Nurses Association Support of SB 163/AB 175

Dear Chairperson Wanggaard and members of the Senate Committee on Judiciary and Public Safety. My name is Gina Dennik-Champion. I am a Registered Nurse and Executive Director of the Wisconsin Nurses Association (WNA). WNA is the professional nurses association with membership that is open to any Wisconsin RN. I am here today to register WNA's support of SB 163 and the companion bill AB 175. This legislation will apply a current standard penalty for battery to a nurses regardless of the setting where they work.

Thank you Chairperson Wanggaard for holding a public hearing on this very important issue as it relates to supporting nurse safety while delivering care to their patients. I would also like to recognize two very special legislators, Senator Kooyenga and Representative Magnafici for sponsoring this legislation. Thank you both very much

The U.S. Department of Labor defines workplace violence as an action (verbal, written, or physical aggression) which is intended to control or cause, or is capable of causing, death or serious bodily injury to oneself or others, or damage to property. Workplace violence includes abusive behavior toward authority, intimidating or harassing behavior, and threats. There is a current Wisconsin Statute 940.20 (7) which was created in 1995. The statute created a criminal penalty for causing battery to emergency personnel that include nurses. The penalty for causing battery to a nurse in the emergency room is a Class H Felony. If found guilty, the perpetrator can be incarcerated up to six years and/or charged a \$10,000 fine. Class H Felony's are also applied to cases of battery against, correctional officers, fire fighters, commission wardens, probation related workers, jurors, public offices, court and law enforcement personnel, and employees of the Wisconsin Departments of Revenue, Safety and Professional Service, and Workforce Development.

Instances of workplace violence against nurses have gone beyond the emergency room. Incidents are regularly taking place on other units of hospitals, same day surgery, ambulatory care, primary care, long term care, home care, hospice, and employer based clinics.

According to a report published by the American Nurses Association one in four nurses are assaulted while on the job. This data is similar to WNA's research. It is important to note that one common theme in all of these reports is that the majority of nurses did not report the incident. Reasons for not reporting include the belief that assaults are part of the job and/or the belief that their report will not be investigated and acted upon. This is why workplace violence against nurses is also referred to as the "Silent Epidemic".

WNA views this legislation can serve as a means of empowering nurses to report incidents because of the penalty and, it can also be used to help defuse a situation by sharing the criminal penalty that can result from inappropriate behavior.

On behalf of WNA I want to thank you for allowing me to present the issue of workplace violence. This legislation is not the only solution to addressing this issue. Other strategies are needed to be implemented and WNA and others are working on this. What I can say is nurses want to deliver safe care but it can be difficult to do if they do not feel safe.

I respectfully request on behalf of WNA that this bill be voted out of the committee as soon as possible so we can support Wisconsin's 105,000 nurses and the 60,000 certified nurse assistants we supervise.

I will gladly answer any questions you may have.

Froedtert

To: Committee on Judiciary & Public Safety
From: Maureen McNally, Chief of Staff to the CEO
Date: September 17, 2019
Re: Senate Bill 163 - Causing Bodily Harm to a Nurse

On behalf of Froedtert Health, I am writing to thank you for holding a hearing on Senate Bill 163, related to causing bodily harm to a nurse.

Workplace violence is a serious problem nationwide and healthcare workers are at an increased risk. According to the Bureau of Labor Statistics (BLS), incidents of serious workplace violence, those requiring days off for the injured worker to recuperate, were four times more common in healthcare than in private industry on average. Again, according to BLS, in 2013 the broad "healthcare and social assistance" sector had 7.8 cases of serious workplace violence per 10,000 full-time employees while other large sectors such as construction, manufacturing, and retail all had fewer than two cases per 10,000 full-time employees. The majority, 80 percent, of serious violent incidents reported in healthcare settings were caused by patients with the balance caused by visitors and other individuals present in the environment.

There are a number of factors that contribute to the higher risk in a healthcare environment. Healthcare facilities are generally widely accessible to the general public and providers are committed to caring for all, both through their professional and ethical responsibilities to "do no harm" and through various laws and regulations including the Emergency Medical Treatment and Active Labor Act (EMTALA). Patients often feel sick and are often frightened and facing uncertainty. Some are in significant pain. Others are under the influence of medications or illicit drugs, have a history of violence, or have a medical condition that impacts their decision-making and behavior. Family members and visitors can feel extreme stress, concern and anger when a loved one is facing a serious health issue. All of these factors can contribute to inappropriate acts of violence.

Froedtert Health is committed to a culture of safety and we are vigilant about the emotional and physical safety of every person who works at, is cared for by, or visits our campuses, clinics and hospitals. We support this commitment with significant investments in safety and security personnel, features and training. These investments are both long-standing and continually improving and range from partnerships with local law enforcement agencies to robust security staff to physical barriers such as metal detectors and bullet resistant glass in higher risk areas. Our people are our most important asset and we provide safety and security training to all staff, including de-escalation training and personal security classes. We are committed to using proven methods to reduce the risk and welcome legislation that will help reset the standard for appropriate behavior in a health care environment.

We support this legislative effort to improve safety and discourage violence through a penalty enhancer. While nurses make up a large portion of our workforce and are at the heart of our work, we respectfully ask that you broaden the language to provide the same protection to all members of the health care team, by aligning the covered professionals for the new law to the existing statutory language in 940.20(7) which provides similar protection for any health care worker in a hospital emergency department.

Froedtert Health respectfully requests your support for both SB 163 and for Senator Jacque's amendment to extend this protection to all members of the health care team.

Date: September 17, 2019

Re: SB 163/ AB 175 – Bodily Harm to a Nurse (Informational)

To: Chairman Wanggaard and Vice Chair Jacque and Members of the Committee on
Judiciary and Public Safety

From: Barbara Beckert, Disability Rights Wisconsin, Director Milwaukee Officer

Disability Rights Wisconsin (DRW) is the designated Protection and Advocacy system for Wisconsinites with disabilities. DRW is charged with protecting and enforcing the legal rights of individuals with disabilities, investigating systemic abuse and neglect, and ensuring access to supports and services.

Thank you for the opportunity to share this testimony to inform your consideration of AB 175/ SB – 163 Bodily Harm to a Nurse, which make it a Class H felony to commit battery against a licensed registered nurse (RN), a licensed practical nurse (LPN), or an individual working under the supervision of an RN or LPN. We respect the concerns of the bill's authors regarding addressing workplace violence against nurses. However, after reviewing the potential impact of the bill on people with disabilities, we are concerned that the bill may have unintended consequences and would not have changed the tragic incident that this proposal is responding to.

AB 175/ SB 163 has been described as addressing “bodily harm to a nurse” but the actual scope is far broader. The penalty enhancer included in this bill would also be applicable to situations involving “an individual working under the supervision of an RN or LPN.” This is very expansive and would include personal care workers, Certified Nursing Assistants, and other paraprofessionals who work in a wide range of community settings including private homes and apartments, group homes and schools, as well as traditional healthcare settings.

We are also concerned that AB 175/ SB 163 could potentially criminalize actions by some people with disabilities that are a manifestation of their disability. This concern is particularly acute because of the expansive nature of the proposal and its applicability to large numbers of paraprofessionals who provide care to people with disabilities. Certain types of disabilities such as traumatic brain injury, dementia, autism, or mental illness, may in some cases manifest challenging behaviors, especially when an individual is in crisis. Unfortunately, on occasion these behaviors result in bodily harm to a caregiver. Under this bill a person with a disability could be charged with a Class H felony. While we acknowledge that intent is an element, that does not guarantee that a person with a disability will not be charged or convicted.

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Current law includes a battery statute. Policy makers should be cautious about adding expansive penalty enhancers that may have an unintended and disproportionate effect on people with disabilities.

We recognize and respect the important work of nurses and those who report to them, which is vital to the health and independence of many people with disabilities. Nursing staff and direct care workers often do not receive the support, training and mentoring they need to most effectively respond to a person with dementia or a disability who is in crisis. Additionally, in the face of today's healthcare staffing shortage, sometimes staff can be spread too thin, jeopardizing safety and resulting in an increased chance of injuries when responding to an individual who is in crisis or other complex needs. Although not directly relevant to the tragic situation that this bill is responding to, the broader scope of the bill provides an opportunity to reinforce the need to ensure that direct care and nursing staff receive the support, training and mentoring that they need and deserve. regarding how to respond to a crisis, including responding to challenging behaviors that are disability related.

Thank you for your consideration of these informational comments.

Testimony in Support of Nurse Workplace Violence Senate Bill 163

Senate Committee on Judiciary and Public Safety

Megan LeClair-Netzel, DNP, RN, AGCNS-BC
9-17-2019

Thank you for allowing me the opportunity to testify in support of the Nurse Workplace Violence bill. My name is Megan LeClair-Netzel. I am a doctorally prepared nurse and have been a nurse for over 8 years in Wisconsin. I currently work in Madison as the manager of Employee Health at UW Health with over 2500 nurses in many different settings. I am also the elected Secretary of the Wisconsin Nurses Association.

According to the American Nurses Association, 1 in 4 nurses has been assaulted at work in the United States. In 2018, the Wisconsin Nurses Association surveyed its Wisconsin members, your constituents, and of the 564 who responded, 65% had experienced or witnessed at least 1 episode of workplace violence in the previous 12 months. These types of episodes include patient punching the nurse, hitting, kicking, biting, throwing objects, headbutts, sexual assault and strangulation. Workplace violence against nurses is a national and local issue.

Workplace violence has a demonstrable negative impact on the nursing profession and the overall health care field. Multiple studies have shown that workplace violence can adversely affect the quality of patient care and patient care outcomes, contribute to the development of psychological conditions in nurses, and reduce the Registered Nurses's level of job satisfaction and organizational commitment.

I have personally experienced violence in the workplace on multiple occasions. I did not report these events as I believed the experiences to be part of my work as a nurse. Had I known legislation like this bill existed then, I would have been more likely to report as there would have been a consequence to the perpetrator.

Expanding the Level H Felony penalty to all settings where nurses work, will create increased visibility that assaults against nurses will not be tolerated. Nurses will be more empowered to report events knowing this consequence exists. 31 other states impose additional penalties on workplace violence against nurses in all health care settings.

Again, thank you for your time and the opportunity to testify in support of the Nurse Workplace Violence bill. I ask you to please support voting in favor of this bill moving out of the committee.

Sincerely,

Megan LeClair-Netzel, DNP, RN, AGCNS-BC

Verona, WI 53593

**Testimony in Support of
Nurse Workplace Violence Senate Bill 163**

Senate Committee on Judiciary and Public Safety

Nicole Kalscheur, MSN, RN

September 17, 2019

Good morning, my name is Nicole Kalscheur. I am a master's prepared nurse and have practiced in nursing for over 11 years. Currently, I hold a director level position overseeing Employee Health and Wellbeing at UW Health, an academic medical center serving 17,000 employees including 2,500 Registered Nurses. Thank you for allowing me to testify in support of the Nurse Workplace Violence Bill.

Workplace violence is extremely prevalent in health care. The likelihood of health care workers being exposed to violence is higher than prison guards or police officers. Per the Occupational Safety and Health Administration, 70-74% of workplace violence injuries occur in health care and social service arenas. Violence against nurses is at epidemic levels. According to the American Nurses Association, one in four nurses has been abused in the workplace. Between 2012 and 2014, nurses and nursing assistants experienced higher rates of workplace violence injuries than other health care sector workers, according to a study by the Centers for Disease Control and Prevention.

The negative impacts on our system include but are not limited to: health consequences including physical injuries, emotional distress and psychological health concerns as well as operational issues, including inflated costs associated with lost work time, health care, legal fees, decreased productivity, low morale, and some individuals leave the nursing profession altogether.

At UW Health, we have implemented processes to evaluate and support victims of workplace violence. Consistent post event follow up and support to our staff and physicians is imperative, but in isolation of other protections, like this legislation, it severely limits our ability to seek appropriate resolution.

This legislation will strengthen the penalty for workplace violence against nurses in Wisconsin. The severity of the penalty will empower nurses to report incidents, increase awareness regarding the prevalence of workplace violence and support nurses who are victims of violence. It is my hope that the severity of the consequences and increased reporting will deter perpetrators from violent acts. We are in need of a legislative solution as violence of any kind from any source should not be tolerated.

Thank you for allowing me the opportunity to testify in support of the Nurse Workplace Violence bill.

Sincerely,

Nicole Kalscheur, MSN, RN

Fitchburg, WI 53711

Senator Van H. Wanggaard, Chair
Senate Committee on Judiciary and Public Safety
313 South, State Capitol
P.O. Box 7882 Madison, WI 53707-7882
RE: Wisconsin Nurses Association Support of SB 163/AB 175

September 17, 2019

Dear Chairperson Wanggaard,

Thank you for the opportunity to bring this issue to your attention. I have been a Registered Nurse for 39 years and violence by patients has been a part of my career throughout. As a Nurse Executive in long term care, part of my role was to work with staff that were injured by residents which affected both staffing and the ability to provide care. There were multiple times that I had to advise a resident that they could not abuse the staff – in one situation a resident purposefully used an electric wheelchair as a weapon to hurt a nurse on duty.

The American Nurses Association indicates that 67% of all nonfatal workplace violence injuries occur in healthcare, but healthcare represents only 11.5% of the U.S. workforce. In my role as a safety care consultant, we worked with facilities related to worker comp claims and there were multiple injuries to staff related to patient interactions. One of the major interventions to assist with residents who are prone to violence is to require two staff to work with the them to protect the staff. This can decrease efficiencies in staffing the facility.

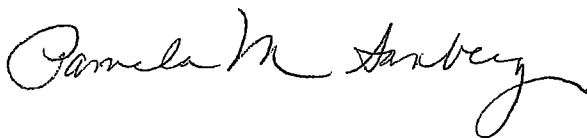
According to OSHA, Patients are the largest source of violence in healthcare settings, but they are not the only source. In 2013, 80 percent of serious violent incidents reported in healthcare settings were caused by interactions with patients. Other incidents were caused by visitors, coworkers, or other people. I have witnessed this firsthand and again in my role have had to bar family members from visiting due to threats to nursing staff. Hospitals have security staff – most nursing homes do not and rely on the local police to assist with emergencies.

Many people who study this issue include any type of violence or threat –which can cause significant psychological trauma and stress, even if no physical injury takes place. I would like to close with my own story.

I want to note that the location of violence may not limited to a physical building but can occur anywhere on the healthcare campus – the biggest concern would be the parking areas. As a young nurse, I was walking to the parking structure, and although I noticed a man walk quickly ahead of me when leaving the building, I did not anticipate that when I got into my car, he would jump from behind a pole and expose himself to me. I quickly drove to our security station but there was no recourse. Of course, this was anxiety inducing and something that has remained with me for my entire career.

It is important that protection is enacted for those that care for others. I respectfully request that on behalf of WNA that his bill be voted out of committee as soon as possible so we can support nurses in WI. I will gladly answer any questions you may have. Thank you.

Yours truly,



Pamela M. Sanberg, MS, RN, NEA-BC