

Health and Welfare Committee  
115 State Street, Montpelier, Vermont  
February 24, 2023

Honored Committee Members and Chair Virginia Lyons,

I have been a nurse for well over 30 years. I have had patients scream abuse, threaten me, try to poke me with sharp objects, hit, grab inappropriately, attempt to bite, and even stash guns they planned to use on another patient in the next room, and that happened in Vermont. Violence towards health providers has increased so much, that along with the effect of experiencing the pandemic, healing was needed, and I retired. I am glad to hear that the state is encouraging stronger protections to nurses via S.36. Patients have a bill of rights, yet nurses are often expected to accept violence as part of their job, another cause of the nurse shortage.

The COVID pandemic made nurse violence worse. A 2021 Workplace Health & Safety survey of RNs said about ½ had been physically assaulted.<sup>8</sup> Another survey had [59% reporting](#) abuse. On average, 57 nurses are assaulted *every day* in the U.S.- two nurses every hour, according to a 2022 Press Ganey analysis.<sup>12</sup> That is 5,000 nurses assaulted on the job in the second quarter of 2022 alone. Abuse comes from people with mental illness, substance abuse, family members and caregivers under stress or pain, not just the confused. Boyle (2022) notes anger and confusion about their medical conditions and care; grief over the decline of loved ones; frustration while trying to get attention amid staffing shortages are causes, citing examples:

- A patient angry about his back pain [shot to death](#) the surgeon, another doctor, and others
- Boston Children's Hospital staff were [targeted in a harassment campaign](#) with threats
- A man distraught over the death of his parents [punched unconscious](#) a nurse in the ICU.
- In a [survey of physicians](#) 23% reported "being personally attacked on social media."

From Nurse.org (2022):

- Oct 2022, [a gunman opened fired at Dallas Methodist Medical Center](#), killing two nurses.
- Certified nursing assistant Anrae James was murdered while on his hospital unit
- A nurse at a hospital in LA, saved another nurse, but he attacked her...She died days later
- A nurse was punched repeatedly by a man because his wife received the COVID vaccine
- A nurse 6 months into her job coming into the room to stop a beeping IV, was punched

Dvorak (2017) reported:

- A nurse in Arkansas [pushed down](#) a flight of stairs by a man arguing with medical staff
- An emergency room nurse [stabbed multiple times](#) by a patient in her hospital.
- Two nurses in Geneva, Ill., taken hostage. One was beaten and sexually assaulted
- a patient in South Carolina attacked 14 nurses

The result of violence causes physical and psychological injury for health care workers, making it more difficult to provide quality patient care, due to fear for their personal safety, distraction, post traumatic stress from prior violent interactions...<sup>1</sup> In states, such as UT, WI, NY, PA, WV, and NM, battery against a health care worker is a felony. Vermont's 13 V.S.A. § 1028 should be raised to a felony, as many nurses are injured for life, and are tired of being hit, bitten, choked,

kicked, spit on, and concussed. MA has [S.838/H.1578](#), pending. It feels we already survived a war, and cannot practice safely. S.36 helps. Stronger laws encourage nurses to practice here.

Pre-pandemic violence was already problematic. In a survey of 762 nurses, with over 10 years of experience, 76% experienced violence.<sup>13</sup> This is not something that should be part of the job. People go to jail for hitting a stewardess or talking back to a judge, so why can they hurt nurses? Mather, chief nursing officer, sees it getting worse, and believes it is due to insufficient support for people with mental health conditions or substance abuse problems. "As we see more mental health patients in the emergency room, we also see the number of injured nurses go up".<sup>10</sup> Vermont legislative members visited mental health facilities around the state due to the lack of mental health beds, and the long waits in emergency rooms, seeing for themselves the current shortage of mental health beds, and emergency rooms crowded by those with no place else to go, resulting in the suboptimal delivery of effective mental health care. A strategy is needed for this national crisis.

"Sixty-seven percent of all nonfatal workplace violence injuries occur in healthcare... and 25% of psychiatric nurses experience disabling injuries from patient assaults.<sup>7</sup> Nurses are routinely yelled at, spat at, punched, kicked, scratched and stabbed by people they are trying to save. She shares examples of nurses pushed down stairs, held hostage, held at gunpoint, beaten and sexually assaulted, and notes that the rates of violence in health care are up to 12 times higher than rates for workers overall.<sup>5</sup> The problem is serious and growing more severe, and "more than eight in 10 health care workers reported in a National Nurses United survey that they had experienced at least one type of workplace violence during the pandemic, when the need for care grew amid nationwide staff shortages".<sup>6</sup>

Our own Senator [Sanders said](#), pointed out data suggesting the nation faces a shortfall of about 450,000 nurses and 120,000 doctors in the coming years. Critical shortages make it more likely for patients and families to take out their frustrations on health care providers. Workers in healthcare and social service experience the highest rates of injuries caused by workplace violence and are five times as likely to get injured at work according to the Bureau of Labor Statistics (BLS) and sometimes injuries are fatal. On average, 44 [workplace homicides](#) to private healthcare workers occurred each year from 2016 through 2020, according to the BLS.<sup>8</sup> Health care workers accounted for 73% of all nonfatal workplace violence-related injuries and illnesses (BLS, 2018). Per the Occupational Safety and Health Administration (OSHA), approximately 75% of nearly 25,000 workplace assaults are reported annually in health care and social service settings.<sup>11</sup>

Hospital safety directors say that aggression against staff escalated as the COVID-19 pandemic intensified in 2020, and in a survey by [National Nurses United](#), 48% of responding nurses reported an increase in workplace violence.<sup>3</sup>

While some nurses have missed work because of COVID-19 infections, others have had to take days off to recover from violent incidents on the job. Frustration and misinformation around COVID-19 and the pandemic spurred more verbal attacks.<sup>8</sup> We went from hero's to villains.

Neighboring state Maine appointed a task force last year as incidents increased during the pandemic, when “fuses were getting shorter” and patients or their family members were “acting out”. Representatives of Central Maine Medical Center and St. Mary’s Regional Medical Center agreed that [employees were facing a rise in patient assaults](#) and on some units rates doubled, with Austin noting 70% of workplace violence was committed against healthcare workers.<sup>4</sup> Some recommendations include<sup>9</sup>:

1. Expanding protections against healthcare workers to include anyone who is working in the hospital setting—not just doctors or nurses.
2. Increasing the number of community or mental health placements so folks aren't stuck in hospitals for weeks or months on end.
3. Looking for ways to encourage healthcare providers to report these assaults, while also being able to keep their privacy.

There was mention of the need for students and providers training in deescalating techniques. People that have experienced violence can be more reactive, and everyone needs to remain safe. Another suggestion was that “hospitals meet with law enforcement and prosecutors to establish working relationships and ensure that reports documenting violent attacks are adequate to move forward with prosecutions”(p.1).<sup>4</sup> In States where assaulting a health care professional is a felony, signs can notify patients and visitors that whoever intentionally causes bodily harm or threatens to harm a health care provider can be found guilty of a felony, fined, and imprisoned. This can reduce violence.

Nurses are more likely to be attacked at work than prison guards and police officers but incidents remain under-reported with existing protections inadequate to ensure the safety of nurses and patients.<sup>15</sup> Emergency departments have the highest amount of violence, with up to 90% of emergency department staff experiencing some form of violence.<sup>15</sup> When nurses on a *Vermont* webinar were polled, 83% had experienced violence at work, and 73% had experienced work place violence they did not report.<sup>2</sup> A school nurse neighbor in Fairfax VT shared this year how she and colleagues had a bucket where they put a slip in the bucket each time they were cursed to see who won the f### bucket that week. Hearing from so many, experiencing so much, became more than I could bear. A death is just a matter of time.

I experienced violence, like many. I did not report it then, knowing no change would occur, and I would be told that it was part of my job, which I did not want to risk. Colleagues were grilled on what they did to cause it. Hospitals such as Mass General report 2-3 assaults on caregivers daily. While 75% of nearly 25,000 workplace assaults occur annually in healthcare settings, only 30% of nurses and 26% of emergency department physicians report it.<sup>14</sup> It’s the norm. Well it’s no longer my norm, but that took leaving my workplace, and am considering leaving the profession. Violence happens here. It happens to many. It happened to me. Please help end the abuse.

Respectfully,  
Meredith Roberts, RN, PhD

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