

My name is Alison Davis and I am the medical director of the ED in Rutland. I'm here today to ask for your help and for your support. At a time when our hospitals are understaffed, when our EMS system cannot keep up with demand, and when our tertiary care hospitals are turning away transfers of dying patients because of capacity, hospital staff are increasingly being punched, kicked, spit on, and bitten. It should come as no surprise that our staff are leaving faster than we can replace them. I support this legislation because I believe it is a tool to help protect our staff and hold individuals accountable for their violent actions against hospital employees. One of the most disheartening statements I hear from staff when assaults happen is that "no one is going to do anything." I hope that I can go back to them and say that our legislature is going to help.

Our staff are not the only ones who believe that "no one is going to do anything." We are regularly taunted by our patients to go ahead and call the police. One night, a female staff member had a urinal thrown at her and was punched in the side of the head by a patient. The patient remained in the ED that night, awaiting bed placement, but the following day was reported by staff to be bragging about "hitting that broad" and asking staff "this is Vermont, what are they going to do?" Staff reported that the patient appeared to be fully aware of the physical assault he had carried out. In fact, he told staff that he did it to "see what you would do."

Later that day, this same patient punched a different staff member, another woman, in the face, breaking her nose so severely it required two surgeries to repair. As they waited for police to arrive, staff noted that the patient was "smiling/smirking while saying that it was our fault that she was punched and how we should've restrained him yesterday after he assaulted another RPMC staff member."

My sense is that law enforcement feels equally frustrated by the lack of consequences in these cases and their inability to intervene. In one instance, a staff member from our designated agency spoke with multiple law enforcement personnel asking for their intervention when a Covid positive patient was spitting, biting, and hitting staff after being told she needed to return to her court-ordered supervised residence. Their response was they would "consider a citation, but they would not bring her into police custody." And another officer reiterated that he could take statements from staff regarding the assaults, but "unless the assaults are a felony level, he will only be able to cite the patient and she will not be arrested."

When violent acts go unaddressed, it can affect healthcare for the entire community, and not simply as a result of staff attrition. Last fall, a patient held one of our nurses hostage by aiming at her face with pepper spray. When she called the police to report this, she was told not to bother because nothing would come of it. Later that week, the same patient went on to shut down a local urgent care facility for half the day by threatening staff there with a knife and pepper spray. The urgent care normally sees up to 100 patients in a day. Anyone who would normally have been seen that day was forced to delay care or come wait at the ED. So, if you were one of the people who needed urgent care, but couldn't go because it had been shut down, you would have had to wait extensively in the ED, not only because of our extra volume, but also because we were forced to restrain this patient repeatedly when police brought him to the ED.

To be clear, when staff are forced to respond to violent behavior in the ED, it takes time and resources that cannot be given to the patients waiting to be seen. We cannot resuscitate a cardiac arrest if we are responding to a patient who has tried to strangle a security guard. This legislation is a step in the right direction. When patients are attacking hospital staff, we need the option of having them removed from

the department so that we can continue to provide the care our community needs. Thank you for your time and for hearing our stories today.