



MEMORANDUM

To: Rep. Alyssa Black, Chair, House Health Committee
Rep. Francis McFaun, Vice Chair, House Health Committee
Rep. Mari Cordes, House Health Committee
Sen. Virginia Lyons, Chair, Senate Health and Welfare Committee
Sen. Martine Larocque Gulick, Vice Chair, Senate Health and Welfare Committee

From: Vermont Professional Nursing Organizations Coalition

Date: January 22, 2025

Re: Discussion Draft of the Workplace Violence Prevention Accountability Act

Purpose:

This memo accompanies the discussion draft of the Workplace Violence Prevention Accountability Act, which aims to improve health care worker safety and wellbeing. The draft legislation seeks to provide a common framework for workplace violence prevention programs to address increasing violence in the clinical environment and allow for adequate investment in health care worker safety.

Key Provisions:

The discussion draft includes the following key provisions:

1. A security plan to address risk assessment, de-escalation and defensive training plans;
2. Training in trauma informed care to support employees as victims throughout the recovery and legal process;
3. Support for investment in workplace violence prevention through¹:
 - an exemption from the certificate of need process for costs associated workplace safety projects;
 - a safe harbor for workplace violence prevention budget line-item expenditures from the GCMB budget constraints; and
 - a commitment from AHS to work with hospitals to identify incentives and funding sources.

¹ The exceptions to the GCMCB's authority to limit spending are base in part on exceptions to the federal Budget Control Act Discretionary Spending Limits such as the 21st Century Cures Act, which exempted spending for critical health care investments from otherwise applicable spending caps. Congressional Research Service, Exceptions to the Budget Control Act's Discretionary Spending Limits, R45778, (June 19, 2019)
<https://sgp.fas.org/crs/misc/R45778.pdf>

Background:

The proposed legislation provides an alternative to workforce violent prevention legislation enacted in other states and proposed in Congress, which seek to convert a myriad of existing workplace violence guidelines and accrediting standards into legally mandated, resource intensive, administrative processes. The enclosed discussion draft seeks to create equity for staff in all organizations, regardless of size by providing a common framework to increase health care system accountability to the health care workforce, enable essential investment, and create consistency in support from law enforcement officials throughout the state. The legislation is based in part on the most recent Ohio House Bill 452, which was signed into law by Governor Mike DeWine, and is effective April 9, 2025.² The draft legislation adapts the Ohio legislation to Vermont's unique financial barriers, and the landscape of critical access hospitals, community hospitals, and a large academic medical center all with variable needs. This legislation seeks to provide a meaningful opportunity to address the needs of the health care workforce through providing programmatic consistency, and funding mechanisms to invest in protecting the workforce to support retention and wellbeing, which is essential to preserve access for all Vermonters.

Next Steps:

We hope to circulate this discussion draft among interested legislators and schedule a meeting to gather feedback, and gauge support. Additionally, we look to reach out to relevant industry associations for their input before finalizing the draft legislation.

Please review the attached draft and provide any comments or suggestions.

Attachment: Discussion Draft of the Workplace Violence Prevention Accountability Act

² search-prod.lis.state.oh.us/api/v2/general_assembly_135/legislation/hb452/05_EN/pdf/