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Oregon Chapter, American College of Emergency Physicians (O.C.E.P)

SB 132 Violence Against Health Care Workers

Senate Health Care Committee

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Chair Monnes Anderson and members of the committee, my name is Katy King and I'm testifying on behalf of OCEP, the Oregon Chapter of the American College of Emergency Physicians. OCEP is a medical society that has represented physicians specializing in emergency medicine since 1971 and its members share a commitment to improve emergency healthcare for all Oregonians.

OCEP supports Senate Bill 132 and was pleased to participate in the workgroup discussion at the request of Legacy Health and the Oregon Emergency Nurses Association. This bill would make it a Class C felony to assault a health care worker in a hospital.

The American College of Emergency Physicians has a clear position on the issue of violence against emergency department personnel at work. "Optimal patient care can only be achieved when patients, health care workers and all other persons in the emergency department are protected against violent acts occurring within the department. The violent trends in our society have been of increasing concern...Not only do ED personnel treat the results of this violence, but they witness violence acts in our EDs."

Here's a story from an emergency physician in the Portland area:

"I was physically assaulted by a patient. The patient was in her twenties and was in the emergency department for anxiety. I had reviewed her medical records, including records from other hospitals in the area. There had been multiple visits for similar symptoms and a concern for substance abuse.

I was in her room and she was laying on the bed and appeared very comfortable. I had already been in her room once before to get a brief history and do an exam and was called out of the room for a phone call. On return she still was laying on the bed and didn't seem in any distress. I continued my history and exam.

I explained to her my concern about her multiple visits and requests for benzodiazepine medications. These are part of a class of sedative medications that include Valium and Xanax, which can be addictive and are frequently abused. I also mentioned that according to other

physician's records they have expressed their concern about addiction to these medications. This is when she started to become upset and cry. She wasn't raising her voice or threatening. I offered to give her a non-benzodiazepine medication to help control her symptoms. She proceeded to tell me that nothing else would work to treat her anxiety and that I had to give her a dose and a prescription for the medication.

That's when I offered to have our social workers meet with her and talk to her about rehab options. The next thing I know is she's jumping out of the bed and heading toward me. I pushed back in my roller chair toward the door, but she was still able to swing and hit me in the cheek. She became irate and I exited the room and security was called to control her.

The police were called and she was arrested for assault. Several weeks went by and I received a letter from the district attorney's office saying that her court date was coming up. I found out that she spent less than 6 hours in jail and was released. The district attorney told me that she was expecting the patient who assaulted me to get some jail time since she was on parole for an unrelated conviction. However, if she hadn't had the previous conviction she probably would have community service or time served. That being said the DA wanted to see if I would be ok if she offered her a plea. The patient's mother had come down from Alaska after she found out that her daughter was having problems with drugs again. Her mother wanted to take her back to Alaska to go back into rehab. I gave my approval and to my knowledge she left for Alaska. I'm not sure if she followed through or if she had more incidents.

Several years ago right after I graduated from residency I had a patient kick me in the face after I refused to prescribe narcotic pain medications for a similar reason. I was so upset at that time that I just had security escort the patient out of the ER. If I had known better I would have called the police and charged him with assault. However, knowing now the type of punishment associated with such an assault concerns me that they would come back to retaliate since they may actually get out of jail before my shift ends."

In summary, violence against health care workers is a growing problem in Oregon and the rest of the nation. Health care workers have a right to a violence-free workplace. This bill sends a clear message to potential assailants and it also sends a message to health care workers that their jobs are important to society and that threats and acts undermining their jobs will not be tolerated.