



Testimony on HB 2620

Sharon Barbosa

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Chair Barker and Members of the Committee,

My name is Sharon Barbosa and I have been an emergency room nurse for eighteen years. I am active member of ONA and serve as an officer at Providence Newberg Medical Center. I currently work in Newberg in a community setting emergency room and support HB 2620 as well as the forthcoming amendment to create a more meaningful, comprehensive, evidence-based workplace violence law.

Violence is not inescapable and a part of our world but in order to reduce it we need to change our culture and make it intolerable. A safe working environment is crucial for staff and the patients who seek a safe haven in crisis. There is a cultural assumption that violence is a part of our job as nurses. I have worked in many different emergency rooms from large trauma inner city ER down to community smaller emergency rooms and all have been dangerous. ER's are 24 – hour access, most lack visible security staff, and patients and family members are instigators of violence because of stress, long wait times, fear, anxiety, mental illness, substance abuse, and trauma. Workplace violence takes more than a physical form, its harassment, and intimidation, disruptive behavior that causes physical or emotional harm. As healthcare workers we are at the highest risk. Many nurses, physicians, and other staff are assaulted every year in US emergency rooms and is a well-documented phenomenon.

I could spend hours citing research, articles, and facts all which prove the need for change. Instead I would like to share experiences that have today become almost normalized in an ordinary ER nurses life. Two years ago, most of the staff I worked with watched a psychiatric patient assault a coworker where she was knocked unconscious and had irreversible damage done to her neck and mental well-being. She never returned to work again. Last year, an intoxicated patient ripped a paper towel dispenser off the wall and smashed a picture shattering the glass and violently attacked staff and herself with shards of glass. Another nurse two years ago was injured by a violent patient who had to be restrained and suffered back injuries and was out of work for an extended period of time. These are the worst of violence incidents but there are so many more. I myself have even been kicked in the face by an irate patient. I have been slapped, grabbed, scratched, spit on, handed feces, threatened, harassed, and have had objects thrown at me and the list goes on. If you were to ask most nurses how many times they have been assaulted they too could likely cite you a similar list.

We are healthcare workers, not police officers, self-defense specialists, or correction officers. Injuries and violence are so often unreported because of false perceptions that this is a part of our jobs. Health care organizations have a responsibility to provide a safe environment for employees as well as for the public. We are told to call the police to the ER when we are under attack but often it is too late, the damage is done, and quite frankly there are too few who care to act on our behalf. We are provided extra staff when dealing with high risk patients for extra "safety" precautions. The staff that we are provided are admitting clerks, housekeepers, other nurses or aides, personnel from engineering department, and dietary aides. Not only is this not

helpful but often serves to put more people at risk including the staff, the patients, and anyone in the ER. Security seems a luxury only reserved for certain situations in my hospital.

We need movement from cultural assumptions at the bedside up to the judicial system. We need better violence prevention, training, and incident reporting. Too often these incidents occur with little recourse or reporting mechanisms for nurses and other staff who are impacted. As health care workers we too often lack the support needed to address or prevent workplace violence issues and many have simply come to accept these occurrences as a way of life in many hospitals.

I urge you to support for HB 2620 and to also strongly consider strengthening the law with meaningful, evidence based practices like data collection and required security measures.