

Senate Judiciary Committee
Sen. Diane Larson, Chair
Jan. 27, 2021
SB 2268

Good morning, Chairwoman Larson and members of the committee. My name is Ernie Thurman and I serve as director of security for Sanford Health in Bismarck. I have led our security team for 14 years. Thank you for the opportunity to speak with you this morning.

I am here today to ask for your support of SB 2268. The purpose of this legislative change is to make it a felony if an individual assaults healthcare workers when those individuals are working within their scope of duties within a healthcare facility.

The law in its current state does protect those healthcare workers in an emergency department or as part of an emergency medical services personnel unit. It also includes as a felony an act where bodily fluids are made to come into contact with a healthcare worker. We are so grateful for these protections, but I'm asking that we send a message that those providing healthcare on the front lines, whether in an emergency department or elsewhere within a healthcare facility, are treated equally when it comes to being on the receiving end of workplace violence.

There may be a belief that assaults on healthcare workers is not commonplace, or that a felony is too severe a penalty for a patient coming to a hospital in need of care. I'm here to tell you that, unfortunately, you are four times more likely to be assaulted as a nurse than any other private industry employees according to the Occupational Safety and Health Administration.

Beyond nursing staff, those in the security services and other frontline healthcare roles, whether it is lab personnel or nutritional services, really any of those that come into contact with patients are unfortunately at risk for workplace violence.

I know that the felony designation works. We saw a noticeable decline in bodily fluid contacts after this legislature took action in 2017 and made that behavior a felony. From 2010-2018, the numbers for bodily fluid contacts ranged anywhere from 25-42/year. However, in 2018 we had 25, in 2019 we had 5 and in 2020 we had 1. This is a steady decrease since that legislative change.

As assaults have become more frequent and more violent, we are working to protect our workforce in as many ways as we can. We have invested in training and providing tools for staff to protect themselves and de-escalate

situations. One of these tools is MOAB training. MOAB training presents principles, techniques, and skills for recognizing, reducing, and managing violent and aggressive behavior both in and out of the workplace. While MOAB works and is a process and technique I believe in, the fact remains that there are situations that results in violent acts committed against our frontline healthcare workers. I believe the support of this legislature and making assaults on healthcare workers a felony will be instrumental in seeing a decrease much like we did after the increased penalty related to the intentional contact with bodily fluids.

I also want to be clear that we do not take reporting a patient lightly. When an assault occurs, there are discussions regarding what happened and why. If the situation is attributable to a patient's underlying condition, we do not make a report. It is only when behavior is purely that, bad behavior, we feel staff need to make a report and have the backing from this legislative body that this is unacceptable and such behavior is punishable by a felony.

In closing, let me say that I myself am a frontline worker and have experienced being assaulted by patients. I understand the concern and difference between a patient suffering from a behavioral health issue or a substance abuse disorder and when it is appropriate to refer a matter to law enforcement. We respectfully request that all healthcare workers providing care in a healthcare facility are treated the same and assaults on them by mentally stable patients are considered a felony.

I would be happy to answer any questions. Thank you for your time and your consideration.

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Sanford assault incident rates

2010 - 2020 SECURITY INCIDENT STATS											
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
TOTAL WORKPLACE VIOLENCE	342	210	156	132	122	515	202	237	239	166	168
TOTAL STAFF ASSAULTS/YR	58	44	24	2	11	12	3	12	17	36	41
TOTAL OFFICER ASSAULTS/YR	25	24	9	5	6	142	24	15	10	7	5

Sanford intentional bodily fluid contact events

2010	38
2011	42
2012	32
2013	39
2014	35
2015	27
2016	33
2017	29
2018	25
2019	5
2020	1

Fact Sheet | Workplace Violence in Healthcare, 2018 | April 2020

Chart 1. Incidence rate of nonfatal workplace violence to healthcare workers, 2011-18

Year	Incidence Rate (per 10,000 full-time workers)
2011	6.4
2012	7.0
2013	7.8
2014	8.2
2015	8.0
2016	8.4
2017	9.1
2018	10.4

Last Modified Date: April 8, 2020 (Source: BUREAU OF LABOR AND STATISTICS WEB SITE)
<https://www.bls.gov/iif/oshwc/foi/workplace-violence-healthcare-2018-chart1-data.htm>