

Maryland State Council Safe Practice Safe Care

To: Maryland Senate Judicial Proceedings Committee

Miller Senate Office Building

Annapolis, MD 21401

Date: TBD

Re: SB 1158 Crime of Violence - Educational Facilities, Medical Facilities, and Places

of Worship – Penalty (Sacred Places Safety Act)
FAVORABLE oral and written testimonies

Good day Chairman Smith, Vice Chair Waldstreicher, Committee members,

My name is Tess Wiley, and I am testifying on behalf of the Maryland Emergency Nurses Association in FAVOR of **SB 1158.** I have 20 years' experience as a RN, with 13 of those in Emergency Departments.

In January of 2022 I was working as charge nurse in a Maryland ER that is close to a jail. An inmate arrived with two deputy sheriffs. The inmate was brought in because he said that he was hiding "Fentanyl" in his rectum and was refusing a cavity search at the jail. The deputies notified me that they did not believe he had Fentanyl. They said he was a flight risk and requested a room away from exits. The inmate immediately began requesting to use the restroom, stating he had soiled himself. I was not comfortable with him using the restroom. So, I directed them to a room where he could change and clean up.

With no medical complaint, and legally not being able to force an individual to submit to a cavity search, he was discharged. After leaving his room, the inmate again stated he soiled himself and needed to go to the restroom. The deputies asked the nursing staff for a change of clothes. They took the patient into the restroom where they unshackled his hand and feet so he could change.

In the restroom, the patient pretended to "pass out." The deputies called for medical assistance. A nurse entered the restroom to help. Shortly after she arrived, the patient pulled the female deputy to the floor and struck her head against the toilet. The RN yelled for help. When I arrived, I saw the nurse trapped in the back of the restroom, with the inmate wrestling on the floor with the female deputy, repeatedly slamming her head into the floor and toilet, while the other deputy was attempting to get the inmate off of the

deputy. I screamed for staff to call security and 911 for additional help. I then realized that the inmate was trying to get the deputy's gun.

The ER doctor and I grabbed the inmate's leg and attempted to pull him off the deputies, but he continued to kick and fight. When we realized that he had released the snaps of the gun holster, our ER doctor jumped on his back. The inmate continued to fight. As I stood at the door of that bathroom looking into the terrified face of the nurse who was stuck in the bathroom, and the injured deputy on the floor, I felt helpless. I wanted to run, thinking for sure that he was going to get the gun and start shooting. I could not leave my coworkers, but then thought about my child, and if my child would still have a mother. Luckily, an off-duty county officer, who was working security in the hospital, ran into that bathroom and pried the inmate's fingers off the weapon.

If you had told me 20 years ago when I graduated from nursing school, that I would be subjected to so much violence, and would fear for my life working as a nurse, I wouldn't have believed you. But unfortunately, violent instances like this are now commonplace in healthcare. Just last week at a hospital in Boise, Idaho, an inmate shot two officers and injured a third during an escape attempt.

Thank you in advance for a favorable vote on SB 1158. Please help send a message that there is no place for violence where patients are seeking medical care. Medical facilities are sacred places, and why SB 1158 is needed.

Respectfully,

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