

**Peace Orders – Workplace Violence
House Bill 126**

**Before the House Judiciary Committee
January 23, 2020**

Position – Support with Amendments

The University of Maryland Medical System (“UMMS”) supports House Bill 126, Peace Orders – Workplace Violence with the amendments proposed by the Maryland Hospital Association. UMMS is a thirteen member hospital and health system that employs more than 28,000 people.

House Bill 126 would (1) authorize an employer to file a petition for a peace order for the benefit of an employee for certain acts or threats against an employee at the employee’s worksite, (2) shield the employee’s address if disclosure would risk further harm to the employee, and (3) grant civil immunity to the employer from any civil liability that may result from the failure of the employer to file a petition for a peace order on behalf of an employee.

This bill is an important measure to promote the safety and well-being of individuals across the state and importantly from UMMS’ perspective, especially health care employees. Increasingly, sad tales are illustrated in the media of attacks and threats against hospital personnel by discontent patients and families. And, the incidence of workplace violence in health care settings is on the rise and it is pervasive:

According to the Occupational Safety and Health Administration (OSHA), approximately 75 percent of nearly 25,000 workplace assaults reported annually occurred in health care and social service settings and workers in health care settings are four times more likely to be victimized than workers in private industry. The National Crime Victimization Survey showed health care workers have a 20 percent higher chance of being the victim of workplace violence than other workers. Bureau of Labor Statistics (BLS) data show that violence-related injuries are four times more likely to cause health care workers to take time off from work than other kinds of injuries. The Joint Commission’s Sentinel Event data show 68 incidents of homicide, rape, or assault of hospital staff members over an eight-year period.

Alarming, the actual number of violent incidents involving health care workers is likely much higher because reporting is voluntary. Researchers at Michigan State University estimated that the actual number of reportable injuries caused by workplace violence, according to Michigan state databases, was as much as three times the number reported by the BLS, which does not record verbal incidents.

Page Two
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Unfortunately, the staff in our health system are not immune to workplace violence. Nor are these types of incidences limited to emergency rooms or psychiatry departments. By way of illustration, an incident at UM Baltimore Washington Medical Center (“BWMC”) highlights the scope of the problem and why UMMS fully supports expanding the current law to allow an employer to intercede. BWMC had a patient who was unhappy with the outcome of his treatment and blamed the physician. He threatened to “find her”, “get even”, and “make her pay”. On several occasions while the patient was in the hospital, security staff had to respond to prevent harm by the patient to employees. BWMC also learned that the patient had a violent past and was quick to resort to violence.

Throughout this ordeal, the physician was very fearful. Once discharged, BWMC sent certified letters banning him from visiting the hospital except for emergency medical treatment. Nonetheless, the patient returned to the hospital twice. Security staff consulted with Anne Arundel County police who recommended that the physician obtain a protective order; however, the physician feared retribution and did not want to make matters worse.

At the time, under the law, only the “victim” could seek a protective order. The hospital could not apply on her behalf or shield her address.

Medical professionals and health care personnel, especially in hospitals, are extremely vulnerable. Hospital workers have a public schedule and work in an environment that is open to the public. Victims are very frightened and may not seek a protection order for fear of escalating an aggressor’s behavior. The ability for a hospital representative to obtain a protective order on behalf of the victim protects not only the targeted employee, but also protects other employees and guests in the facility as well. This legislation will provide needed, additional protections for victims of workplace violence.

For these reasons, the University of Maryland Medical System urges a favorable report.

Respectfully Submitted,

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