



EMERGENCY NURSES
ASSOCIATION

Maryland State Council
Safe Practice Safe Care

To: Maryland House Judiciary Committee
House Office Building
Annapolis, MD 21401

Date: March 11, 2025

Re: **HB 1308 / SB 1010 Crime of Violence – Medical Facilities and Places of Worship –
Penalty (Sacred Places Safety Act)**
FAVORABLE oral and written testimony

Good day, Chairman Clippenger, Vice Chair Bartlett, and Committee members,

My name is Angelica Marrero, and I am testifying on behalf of The Maryland Emergency Nurses Association in favor of **HB 1308 / SB 1010** Crime of Violence – Medical Facilities and Places of Worship – Penalty (Sacred Places Safety Act).

Thank you to the sponsors for this commonsense bill that supports **ZERO TOLERANCE** for violence in medical facilities and places of worship.

I would like to address violence in the medical facilities. Studies show that ER nurses and staff experience a violent event every two months. ⁽¹⁾ Emergency room nurses often experience all forms of violence including emotional, verbal, physical and sexual. For example:

- Upon entering a patient's room, without warning, the patient suddenly and violently kicked a large plastic garbage can at me and began yelling and cursing at me.
- A patient threw their cell phone at my chest while I was walking past them, leaving me with a large purple bruise.
- A patient approached the triage nurse, without saying a word, punched her in the face.

HB 1308 / SB 1010 would establish respect for this sacred place where vulnerable patients come to receive health care. Nurses, the backbone of healthcare, need and deserve protection from violence while performing their live-saving work.

When violence in healthcare facilities occurs, it endangers everyone present. Staff, patients, and visitors get injured. The violence interferes with patient care and can cause detrimental delays. When violence happens in emergency rooms it is especially difficult for patients because these patients are already coping with the longest ER wait times of any state in the nation. ⁽²⁾

Maryland's emergency nurses thank you in advance for a favorable bipartisan review.

Respectfully,

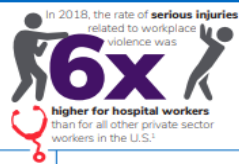
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Resources:

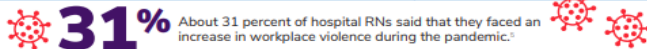
- (1) Emergency Nurses Association. 2023. Workplace Violence in Emergency Departments Infographic. gov@ena.org (attached below)
- (2) Brown, Danielle. 2023. Some of the longest emergency room wait times in Maryland can stretch almost a day. Maryland Matters.
<https://www.marylandmatters.org/2023/11/22/md-officials-local-commissions-and-hospitals-work-to-untangle-issues-contributing-to-long-er-wait-times/>

Workplace Violence in Emergency Departments

Prevalence of Workplace Violence in Health Care/Emergency Departments



ED workers are exposed to **significant rates of physical and verbal abuse**. Under-reporting of workplace violence in the ED is common and contributes to the difficulty in accurately tracking violence.^{3,4}



Impact of Workplace Violence on Nurses, Patients and U.S. Health Care System



1. U.S. Bureau of Labor Statistics. (n.d.). Fact sheet | workplace violence in healthcare, 2018 | April 2020. U.S. Bureau of Labor Statistics. Retrieved March 21, 2022, from <https://www.bls.gov/news.release/fos/workplace-violence-healthcare-2018.htm#>
2. Kowalewski T et al. Prospective study of violence against ED workers. (2003). American Journal of Emergency Medicine – 21 (5), 197-205
3. Taylor & Rex. A systematic review of the literature: workplace violence in the emergency department (2010). Journal of Clinical Nursing
4. Glick-Smith et al. Violence against nurses working in U.S. emergency departments (2008). Journal of Nursing Administration
5. National Nurses United Survey. NNU unrepresented nurse members and non-union nurses in the U.S. and Puerto Rico (June 1-July 21, 2020).
6. Glick-Smith et al. Violence against nurses working in U.S. emergency departments (2008). Journal of Nursing Administration
7. Garland-Roman M. Strategies and Tools to reduce workplace violence (2004). AAOHN Journal