



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: 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 Lisa Tenney, and I am testifying on behalf of The Maryland Emergency Nurses Association in favor of HB 1308 Crime of Violence – Medical Facilities and Places of Worship – Penalty (Sacred Places Safety Act). I would like to address violence in medical facilities.

It is fair to say that Maryland healthcare providers were truly heartbroken to learn about the two recent violent incidents at the hospitals in York, PA and in Palm Beach, FL. (1) The senseless loss of life, the physical, and the emotional trauma will forever impact these healthcare providers, their family members, and communities.

It is also fair to say that healthcare providers were not surprised to hear about these violent events. You could almost hear a collective, "That could have easily happened here in our unit." That is how commonplace violence has become in medical facilities. Studies show that ER nurses and staff experience a violent event every two months, and that according to OSHA, healthcare workers account for 73% of "violence-related" injuries requiring missed workdays. (2)

For those of us who work in Maryland's emergency departments, we are truly exhausted having to take care of our patients in crowded conditions, with not enough space and human resources. It is hard to constantly apologize to our patients about the long wait times and ask them to be patient. When a violent event occurs, it often makes injured coworkers our patients, leaving us even more short-handed. The stress of dealing with a broken healthcare system where we cope with having the longest ER wait times in the nation is compounded by always having to be on guard for potential violence.

When violence in medical facilities occurs, it endangers everyone present; staff, patients, and visitors get injured. The violence interferes with patient care, extends the wait times, and can cause detrimental delays. (3)

Maryland's Patient's Bill of Rights states that patients have a RIGHT to be safe in hospitals. One of those rights reads: **Be provided care in a safe environment free from all forms of abuse and neglect, including verbal, mental, physical, and sexual abuse.** (4) This right should be supported by the strictest consequences for those who endanger vulnerable patients who are receiving medical care.

HB 1308 would reestablish respect for this sacred healing place where vulnerable patients come to receive health care. Patients need and deserve protection from those who would indiscriminately harm them.

Thank you to the sponsors for this commonsense bill that supports **ZERO TOLERANCE** for violence in medical facilities and places of worship, setting them apart as "sacred places." Maryland's emergency nurses thank you in advance for a favorable bipartisan review.

Respectfully,

Lisa Tenney

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Resources:

- (1) Landi, Heather. 2/27/2025. Nurses recount armed attack at UPMC as investigators search for motives. Fierce Healthcare. <https://www.fiercehealthcare.com/providers/police-officer-killed-several-staff-members-injured-upmc-hospital-shooting>
- (2) Emergency Nurses Association. 2023. Workplace Violence in Emergency Departments Infographic. gov@ena.org
- (3) 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/>
- (4) Maryland Patient's Bill of Rights Law. 2019.

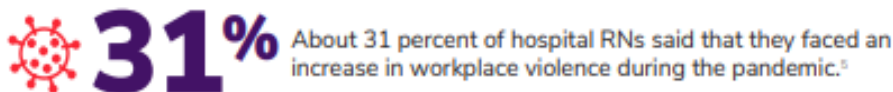
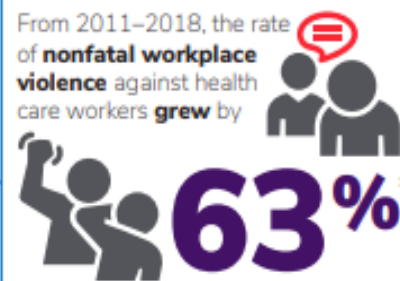


Workplace Violence in Emergency Departments

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/iif/oshwc/cto/workplace-violence-healthcare-2018.html#>
2. Kowalenko T et al. Prospective study of violence against ED workers. (2013). American Journal of Emergency Medicine - 31 (1), 197-205
3. Taylor & Rev, A systematic review of the literature: workplace violence in the emergency department (2017). Journal of Clinical Nursing
4. Gacki-Smith et al. Violence against nurses working in US emergency departments (2009). Journal of Nursing Administration
5. National Nurses United Survey: NNU unionized nurse members and non-union nurses in the U.S. and Puerto Rico (June 1-July 21, 2020).
6. Gacki-Smith et al. Violence against nurses working in US emergency departments (2009). Journal of Nursing Administration
7. Gallant-Roman M. Strategies and Tools to reduce workplace violence (2008). AACN Journal

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