

# **SUPPORT HB801 ASSAULT ON NURSES**

The Illinois Nurses Association (INA) is advocating for the passage of legislation that increases the penalties for individuals who assault all levels of nurses. Nurses are the **first responders** in the health care industry and are often subjected to abusive and violent actions by patients, patient's relatives and/or associates. At INA we believe **nurses** play a vital role in the delivery of quality, safe and compassionate health care services. Nurses contribute an enormous amount of skill and knowledge to patient care and play a major role in creating a high standard of nursing and the improvement of health care standards. Nurses need to be protected from people who pursue violence against them.

## **Background:**

In the 94<sup>th</sup> General Assembly, there was legislation passed (PA94-347) that created the Health Care Workplace Violence Act for the Department of Human Services and the Department of Public Health. This Act essentially created a training program about workforce violence for employers and employees and how to try to prevent it through a series of safety plans and security and safety assessments. Since the enactment of this Act, violence in our country as well as in our state has escalated over the years. The need for a more stringent form of punishment as an update to this existing law will substantially increase safety at the workplace.

## **Points of Interest:**

Health care and social service workers face an increased risk of work-related assaults stemming from several factors. These include:

- ❖ The prevalence of handguns and other weapons among patients, their families or friends;
- ❖ The increasing use of hospitals by police and the criminal justice system for criminal holds and the care of acutely disturbed, violent individuals;
- ❖ The increasing number of acute and chronic mentally ill patients being released from hospitals without follow-up care (these patients have the right to refuse medicine and can no longer be hospitalized involuntarily unless they pose an immediate threat to themselves or others);
- ❖ The availability of drugs or money at hospitals, clinics and pharmacies, making them likely robbery targets;
- ❖ Factors such as the unrestricted movement of the public in clinics and hospitals and long waits in emergency or clinic areas that lead to client frustration over an inability to obtain needed services promptly;
- ❖ The increasing presence of gang members, drug or alcohol abusers, trauma patients or distraught family members;
- ❖ Low staffing levels during times of increased activity such as mealtimes, visiting times and when staff are transporting patients;
- ❖ Isolated work with clients during examinations or treatment;
- ❖ Solo work, often in remote locations with no backup or way to get assistance, such as communication devices or alarm systems (this is particularly true in high-crime settings);
- ❖ Lack of staff training in recognizing and managing escalating hostile and assaultive behavior; and
- ❖ Poorly lit parking areas.

## **Other States that introduced legislation that sought penalties for Assault of Nurses:**

- ❖ Arkansas, Colorado, Hawaii, Maine, Massachusetts, Michigan, Missouri, Nebraska, New Jersey, New Mexico, New York, Ohio, Pennsylvania, Tennessee, Texas, Vermont and Virginia.

While risk of violence against nurses cannot be completely eliminated, it can be mitigated and nurses can be supported. Nurses are the fundamental backbone for success of patient care and safety.