

P.L. 2007, CHAPTER 236, *approved January 3, 2008*
Assembly, No. 3027 (*First Reprint*)

1 **AN ACT** concerning prevention of violence against health care
2 workers and supplementing Title 26 of the Revised Statutes.

3
4 **BE IT ENACTED** by the Senate and General Assembly of the State
5 of New Jersey:

6
7 1. This act shall be known and may be cited as the “Violence
8 Prevention in Health Care Facilities Act.”

9
10 2. The Legislature finds and declares that:

11 a. Violence is an escalating problem in many health care settings
12 in the State and across the nation, and although violence is an
13 increasing problem for many workers, health care workers are at a
14 particularly high risk;

15 b. According to the Bureau of Labor Statistics, the incidence of
16 injury from nonfatal assaults of health service workers is
17 significantly higher than that of other workers;

18 c. The actual incidence of violence is likely higher than reported
19 for various reasons, including inadequate reporting mechanisms and
20 because victims under-report incidents out of fear of reprisal,
21 isolation and embarrassment;

22 d. Violence against health care workers exacts a significant toll
23 on victims, their co-workers, patients, families and visitors;

24 e. Insurance claims, lost productivity, disruptions to operations,
25 legal expenses and property damage are only a few of the negative
26 effects that workplace violence has on health care facilities;

27 f. Preventing workplace violence is essential for creating a safe
28 and therapeutic environment for patients;

29 g. Health care professionals who leave their occupations because
30 of assaults or threats of assault contribute to the general shortage of
31 health care professionals; and

32 h. It is possible to reduce and mitigate the effects of violence in
33 health care settings through employer-based violence prevention
34 programs.

35
36 3. As used in this act:

37 “Covered health care facility” means a ¹**[health care facility]**
38 general or special hospital or nursing home¹ licensed by the
39 Department of Health and Senior Services pursuant to P.L.1971,

EXPLANATION – Matter enclosed in bold-faced brackets **[thus]** in the above bill is
not enacted and is intended to be omitted in the law.

Matter underlined thus is new matter.

Matter enclosed in superscript numerals has been adopted as follows:

¹Assembly AHE committee amendments adopted January 18, 2007.

1 c.136 (C.26:2H-1 et seq.), a State or county psychiatric hospital,
2 'or' a State developmental center '[, or a health care service firm
3 regulated by the Division of Consumer Affairs in the Department of
4 Law and Public Safety pursuant to P.L.1989, c.331 (C.34:8-43 et
5 seq.)']'.

6 "Health care worker" means an individual who is employed by a
7 covered health care facility.

8 "Violence" or "violent act" means any physical assault, or any
9 physical or 'credible' verbal threat of assault or harm against a
10 health care worker.

11

12 4. Within 6 months of the effective date of this act, a covered
13 health care facility shall establish a violence prevention program for
14 the purpose of protecting health care workers. '[A health care
15 system with more than one covered health care facility shall have a
16 violence prevention program at each facility.]' The program shall,
17 at a minimum, include the requirements set forth in this section.

18 a. '(1)' The covered health care facility shall establish a violence
19 prevention committee, which shall include a representative of
20 management ', or his designee', who shall be responsible for
21 overseeing all aspects of the program. At least 50% of the members
22 of the committee shall be health care workers who provide direct
23 patient care or otherwise have contact with patients. In a facility
24 'or health care system' where health care workers are represented
25 by '[a] one or more' collective bargaining '[agent,] agents, the
26 management of the facility or system shall consult with' the
27 'applicable' collective bargaining '[agent shall select] agents
28 regarding the selection of' the health care worker committee
29 members.

30 The remaining committee members shall have experience,
31 expertise, or responsibility relevant to violence prevention.

32 '[A health care system with more than one covered health care
33 facility shall have a committee at each facility] (2) In the case of a
34 health care system that owns or operates more than one covered
35 health care facility or Department of Human Services facilities, the
36 violence prevention program and the committee may be operated at
37 the system or department level, provided that: (a) committee
38 membership includes at least one health care worker from each
39 facility who provides direct care to patients, (b) the committee
40 develops a violence prevention plan for each facility, and (c) data
41 related to violence prevention remain distinctly identifiable for each
42 facility'.

43 b. Within 18 months of the effective date of this act, the
44 committee shall develop and maintain a detailed, written violence
45 prevention plan that identifies workplace risks, and provides
46 specific methods to address them. The plan shall, at a minimum:

- 1 (1) provide an annual comprehensive violence risk-assessment
2 for the covered health care facility that considers, to the extent
3 applicable:
- 4 (a) the facility's layout, access restrictions, crime rate in
5 surrounding areas, lighting, and communication and alarm devices;
- 6 (b) ~~'[adequacy of]~~ impact of¹ staffing ~~'[levels]'~~¹, including
7 security personnel;
- 8 (c) the presence of individuals who may pose a risk of violence;
9 and
- 10 (d) a review of any records relating to violent incidents at the
11 facility, including incidents required to be reported pursuant to
12 subsection f. of this section, the 'Occupational Safety and Health
13 Administration' Log of Work-Related Injuries and Illnesses (OSHA
14 Form 300), and workers' compensation records;
- 15 (2) identify violence prevention policies; and
- 16 (3) specify methods to reduce identified risks, including training,
17 and changes to job design, staffing, security, equipment and facility
18 modifications.
- 19 c. The covered health care facility shall ~~'[provide]~~ make¹ a
20 copy of the plan 'available, upon request.'¹ to the Commissioners of
21 Health and Senior Services¹, Children and Families.'¹ and Human
22 Services ~~'[and the Director of the Division of Consumer Affairs]~~
23 for on-site inspection'¹, and upon request, to each health care worker
24 and collective bargaining agent that represents health care workers
25 at the facility¹, except that, in the event the committee determines
26 that the plan contains information that would pose a threat to
27 security if made public, any such information shall be excluded
28 before providing copies to workers or collective bargaining agents'¹.
- 29 d. The covered health care facility shall annually conduct
30 violence prevention training. The training shall include a review of:
31 the facility's relevant policies; techniques to de-escalate and
32 minimize violent behavior; appropriate responses to workplace
33 violence, including use of restraining techniques, reporting
34 requirements and procedures; location and operation of safety
35 devices; and resources for coping with violence.
- 36 e. The covered health care facility shall have ~~'[sufficient~~
37 ~~numbers of]'~~¹ personnel 'sufficiently'¹ trained to identify aggressive
38 and violent predicting factors and 'the ability'¹ to appropriately
39 respond to and manage violent disturbances.
- 40 f. The covered health care facility shall keep a record of all
41 violent acts against employees while at work. The records shall be
42 maintained for at least five years following the reported act, during
43 which time employees, their authorized representatives, and the
44 Department of Health and Senior Services shall have access to the
45 record. The record shall include:
- 46 (1) the date, time and location of the incident;

1 (2) the identity and job title of the victim¹, except that the
2 victim's identity shall not be included if it would not be entered on
3 the Occupational Safety and Health Administration Log of Work-
4 Related Injuries and Illnesses (OSHA Form 300) because it is a
5 privacy concern case under OSHA¹;

6 (3) whether the act was committed by a patient, visitor, or
7 employee;

8 (4) the nature of the violent act, including whether a weapon was
9 used;

10 (5) a description of physical injuries, if any;

11 (6) the number of employees in the vicinity when the incident
12 occurred and their actions in response to the incident, if any; and

13 (7) the actions taken by the facility in response to the incident.

14 ¹The records established pursuant to this subsection shall not be
15 considered public or government records under P.L.1963, c.73
16 (C.47:1A-1 et seq.) or P.L.2001,c.404 (C.47:1A-5 et al.).¹

17 g. The covered health care facility shall establish a post-incident
18 response system that provides, at a minimum, an in-house crisis
19 response team for employee-victims and their co-workers, and
20 individual and group crisis counseling, which may include support
21 groups, family crisis intervention, and professional referrals.

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23 5. A covered health care facility shall not ¹**[retaliate]** take any
24 retaliatory action¹ against any health care worker for reporting
25 violent incidents. ¹As used in this section, "retaliatory action" shall
26 have the same meaning as provided in section 2 of P.L.1986, c.105
27 (C.34:19-2).¹

28
29 6. A covered health care facility licensed pursuant to P.L.1971,
30 c.136 (C.26:2H-1 et seq.) that is in violation of the provisions of
31 this act shall be subject to such penalties as the Commissioner of
32 Health and Senior Services may determine pursuant to sections 13
33 and 14 of P.L.1971, c.136 (C.26:2H-13 and 26:2H-14). ¹**[A**
34 covered health care facility that is regulated pursuant to P.L.1989,
35 c.331 (C.34:8-43 et seq.) that is in violation of the provisions of this
36 act shall be subject to such penalties as the Director of the Division
37 of Consumer Affairs may determine pursuant to section 12 of
38 P.L.1989, c.331 (C.34:8-53).¹

39
40 7. The Commissioners of Health and Senior Services and
41 Human Services ¹**[and the Director of the Division of Consumer**
42 **Affairs in the Department of Law and Public Safety]**¹ shall adopt
43 rules and regulations pursuant to the "Administrative Procedure
44 Act," P.L.1968, c.410 (C.52:14B-1 et seq.) to carry out the purposes
45 of this act.

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47 8. This act shall take effect immediately.

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“Violence Prevention in Health Care Facilities Act,” requires certain health care entities to establish violence prevention programs to protect health care workers.