

House of Representative Criminal Justice Committee Hearing on SB 250
Violence against Healthcare Professionals
October 9, 2013

Testimony by Renee Curtis RN, Emergency Room Nurse, University of Michigan

Good Morning, Chairman Heise and distinguished members of the Committee. I am proud to be here today speaking on behalf of Emergency Nurses throughout our fine state. Today, October 9th, is a special day for us as it is a day of recognition for all Emergency Nurses worldwide known better as Emergency Nurses Day. It is a day of celebration and acknowledgement for the continual hard work, dedication, and unwavering commitment emergency nurses display while providing patient care to our citizens.

Thank you for the opportunity to testify before you in support of SB 250.

Today as we celebrate our profession, we also are reminded of our workplace environment and the need for a sweeping change in dealing with an epidemic affecting emergency rooms nationally. That epidemic is one of violence against healthcare professionals. This violence has been the subject of much research and countless publications by various healthcare professions. These all clearly identify the issue; yet even though we write about it, we fail to stop the violence and hold the perpetrator accountable. Still the violence continues with increasing escalation in violent behaviors from patients, families and others while the discussion continues.

I have been an Emergency room nurse for well over a decade and am no stranger to the violence that occurs within the walls of an emergency department. I have worked in various size emergency rooms from a large educational system to a moderate size institution down to our small local community hospitals. I have received training in de-escalation and self-protection along with having increased sensitivity to escalating violent behaviors. No matter the size of the institution, one thing remains consistent; that the presence of violence against health professionals especially nurses does not change.

Let me share some of my experiences. During a six month timeframe, I was punched by an escalating patient who did not receive the amount of narcotic he felt was due him. A teenage male who was upset that his friends had called an ambulance due to his bizarre behavior spit in my face. An angry friend of a patient was upset that I would not provide her medical information, due to HIPPA laws, slapped me. A male patient who was over-beveraged and felt entitled inappropriately grabbed me. I have had full urinals thrown at me and stool wiped on my scrubs by angry patients. I have also received a shoe or two aimed at my head by under-aged intoxicated college students. These represent only some of the physical violence examples. Verbal violence occurs daily by patients and family

members. I am not alone in experiencing these types of events. These are common occurrences, as you will hear today in testimony.

If you ask how many nurses reported the violent act, a good portion would respond to you. "It is just part of our job." In the age of the perfect patient experience and the importance of Press Ganey patient satisfaction reports, hospitals seem more interested in patient satisfaction than holding patients accountable for their actions. None of these acts I experienced were ever prosecuted and most never left the hospital's security department internal files. Hence, we as emergency room nurses have managed and tolerated this behavior with a learned failure to report. If this becomes law, hospitals would be accountable for upholding the law and ensuring that these acts have an internal mechanism that mandates reporting to the proper authority for review and prosecution as appropriate.

Nurses are very much in the same line of work with the public as other professions. We see and touch people's lives in the mist of chaos, extreme anguish, moments of jubilee then fall in the pits of sorrow as the outcome of the emergent event is realized. Patient's and families wait long hours in waiting rooms experiencing pain, and other bothersome symptoms often coping with varied emotions and sometimes the lack thereof. We, as well as other emergency management professions are educated, trained and understand the human response and account for that in our professional approach to patient care. The difference is that under the current laws, it is against the law to physically assault an emergency management professional namely a police officer or firefighter. Yet, healthcare professionals, who deal with people who are often experiencing the same issues and variability in response, are left vulnerable to institutional interpretation and internal policies making it somehow acceptable for patients to behave in such an aggressive manner.

I am concerned about the future of emergency room nursing, as nurses are leaving the Emergency department in droves due to burnout. Some are forced out due to injuries sustained by physical violence from that environment. Others are just fed up with the conditions.

On a personal note, I am a mother of five children, four of which are in college, three of which are pursuing nursing degrees. I want to leave a work environment that is safer than what I have. By passing this bill, you help make emergency departments across the state safer for emergency nurses, physician colleagues, other emergency room personnel, patients and future generations.

I would ask on this special day acknowledging Emergency Nursing that you support the SB 250 in going forth out of committee, support it's passing in the house and being signed into law.