



**Oregon Chapter
American College of
Emergency Physicians**

Date: February 13, 2024

**To: Rep. Jason Kropf, Chair
Rep. Tom Anderson, Vice-Chair
Rep. Kim Wallan, Vice-Chair
Members of the House Judiciary Committee**

**From: Hans Notenboom, MD, FACEP
Oregon Chapter of the American College of Emergency
Physicians**

Subject: HB 4088 Hospital Workplace Violence

Chair Kropf and members of the committee, my name is Dr. Hans Notenboom and I'm a long-time board member of the Oregon Chapter of the American College of Emergency Physicians. OR-ACEP is a medical society that has represented physicians specializing in emergency medicine since 1971 and its members share a commitment to improve emergency healthcare for all Oregonians.

OR-ACEP strongly supports of HB 4088 and the -2 amendments, which include provisions to enhance the penalty for assaulting a person working in a hospital. Let me try to help you understand what it is like to work in an emergency department where violence is routine.

First, healthcare workers operate in a vulnerable position of trying to help people. The nature of their work is not to be more concerned with trying to defend themselves as they offer aid. Violence impacts all parts of healthcare teams. Physicians, nurses, and other staff. This violence can be physical and non-physical.

I have personally witnessed fractures, contusions, and threats against healthcare workers in the hospital. Even outside. I have personally received more than one direct death threat that required police involvement. No consequences were served by these people.

The mental health of healthcare workers is horribly impacted by these events. We work in an overcrowded, understaffed climate. As example, recruitment and retention of nurses is a huge issue. Safety and security plays a big role in this, especially in high risk areas such as emergency departments, where we are bound by EMTALA to be the safety net for the entire community.

Chapter President- Craig Rudy, MD, FACEP

Chapter Executive- Sierra Acker

President-Elect- Christian Smith MD, FACEP **Government Relations Director-** Katy King

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Assaults and harassment result in loss of ability to work, loss of wages, and ultimately drives many out of the workforce.

Lack of accountability and enforcement then leads to reporting fatigue. People feel if there is no consequence, there is no deterrence. Reporting results in limited intervention and only increase the feeling of insecurity. This is another situation I have personally witnessed on many occasions.

There are other industries where these actions have much more serious consequence and the precedents could guide our path in healthcare. Punch an officer or find their home, say you are going harm their family and see what happens to that person.

Assault a flight attendant, face federal charges and be placed on a no-fly list. These are not the same industries, but there has been a clear effort to legislate consequences for those exhibiting violent behavior to other workers.

Health care workers take care of patients best when they feel safe, secure, and able to perform their job without fear. This is in the best interest of the public too. Everyone has been a patient at one time or another but when violence is routine in the healthcare setting, no one feels safe.

We appreciate concerns about protecting people with mental illness or intellectual disability. As experts in our field, we take care of people that have other hardships (e.g. mental illness) on a daily basis. We understand the difference and we treat these people with compassion a rule. This bill is only related to people outside of those difficulties.

Thank you for your consideration.

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