## Dear Dan:

As an emergency physician for now almost 40 years I have a long and thorough understanding of the violence that health care providers, especially our nurses, face in the ED. One of my nursing colleagues was stabbed in the chest and almost killed a few years back. Thankfully that level of violence is rare. But violence in some manner, whether it's physical, or just bullying and intimidation occurs almost every shift. To put it in perspective, the ED is a high tension environment. Many patients are in pain, have waited hours, or are under the influence of drugs or alcohol. Our nursing staff are frequently seen as the object of their frustration. Pair that with the legal responsibility to treat every patient, the pressure from administration to please every "client/customer", and the unwillingness of administrations to allow security personnel to use any kind of restraint or force to control unruly or threatening patients, and the result is patients who act out in all levels of behavior with seemingly no regard for the safety of the providers. Sometimes, too often in fact, it can really get out of control. Administrators frequently put the responsibility on the providers to do the impossible and appear to treat the issue of providing a safe environment for their employees as "out of sight, out of mind". With that said, any legislation that requires assessment of workplace safety is welcome and long overdue. I especially appreciate that Delegate Cox's legislation appears to shift the burden of responsibility to hospital administration to provide such a safe working environment with safety valves for providers to opt out of caring for threatening patients. It's not a magic wand to end all workplace violence, but it is a good first step and I support it whole heartedly. Feel free to call on me for any further discussions of this issue. And feel free to refer other Delegates' questions to me.

Sincerely,

HB GCZ SUPPORTOR

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