

1 H.265

2 Introduced by Representative Cordes of Lincoln

3 Referred to Committee on

4 Date:

5 Subject: Labor; safety; occupational safety and health; health care; community
6 services; workplace violence prevention

7 Statement of purpose of bill as introduced: This bill proposes to require the
8 Commissioner of Labor to issue a standard under the Vermont Occupational
9 Safety and Health Act for violence prevention in health care and community
10 services workplaces.

11 An act relating to requiring the adoption of a Vermont Occupational Safety
12 and Health Act standard for violence prevention in health care and
13 community services workplaces

14 It is hereby enacted by the General Assembly of the State of Vermont:

15 Sec. 1. WORKPLACE VIOLENCE PREVENTION; OCCUPATIONAL

16 SAFETY AND HEALTH STANDARD; ADOPTION

17 (a) On or before December 31, 2023, the Commissioner of Labor shall,
18 pursuant to the provisions of 21 V.S.A. chapter 3, subchapter 5 and 3 V.S.A.
19 chapter 25, adopt a standard for workplace violence prevention for health care
20 and community services workplaces. The standard shall be based on the
21 Guidelines for Preventing Workplace Violence for Health Care and Social

1 Service Workers published by the U.S. Occupational Safety and Health
2 Administration in 2015.

3 (b)(1) The standard shall require all covered employers to adopt a
4 workplace violence prevention and crisis response plan for each of the covered
5 employer's health care and community services workplaces in accordance with
6 the standard within not more than six months after the standard takes effect.

7 (2) The standard shall require all workplace violence prevention and
8 crisis response plans to include the following:

9 (A) Specific measures the employer intends to employ to prevent and
10 mitigate hazards. The measures shall include engineering controls and work
11 practice controls such as:

12 (i) alarm systems;

13 (ii) adequate exit routes;

14 (iii) appropriate monitoring systems;

15 (iv) appropriate barrier protection;

16 (v) designated areas for patients and clients;

17 (vi) adequate lighting;

18 (vii) entry procedures for specific buildings and areas;

19 (viii) requirements for staffing and working in teams; and

20 (ix) systems to identify and flag patients or clients with a history
21 of violence.

1 (B) Specific measures and procedures to respond to an incident of or
2 credible threat of workplace violence against an employee delivering direct
3 health care or community services.

4 (C) A system for centrally recording all incidents of or credible
5 threats of workplace violence against an employee delivering direct health care
6 or community services, including the identification of patients or clients with a
7 history of violence.

8 (D) A training program to educate employees delivering direct health
9 care or community services about workplace violence and ways to reduce the
10 risks.

11 (E) The development and maintenance of a violence prevention and
12 crisis response committee that includes employees delivering direct health care
13 or community services to monitor ongoing compliance with the violence
14 prevention and crisis response policy and to assist employees delivering direct
15 health care or community services.

16 (F) An assessment and identification of specific workplace violence
17 risks and hazards and the employees exposed to those risks and hazards. The
18 assessment shall examine both environmental risk factors and patient-specific
19 risk factors.

20 (c) The standard shall require that all workplace violence prevention and
21 crisis response plans are:

1 (1) developed and implemented with the meaningful participation of the
2 workplace’s direct care employees, other employees, and employee
3 representatives, as applicable, for all aspects of the plan;

4 (2) tailored and specific to the conditions and hazards at the workplace,
5 including any patient-specific risk factors or risk factors specific to the
6 workplace;

7 (3) suitable for the size, complexity, and type of operation at the
8 workplace;

9 (4) in effect at all times; and

10 (5) reviewed annually, including an evaluation of the effectiveness of
11 the plan, the identification of gaps or shortcomings in the existing plan, and an
12 evaluation of whether any new workplace violence risks and hazards have
13 developed since the plan was last updated.

14 (d) Workplace violence prevention and crisis response plans may be
15 adopted in consultation with stakeholders and experts who specialize in
16 workplace violence prevention, emergency response, or other areas of
17 expertise that are relevant to the particular plan.

18 (e) As used in this section:

19 (1) “Covered employer” means a person that employs one or more
20 individuals to work at a health care and community services workplace.

21 Covered employer does not include an individual who privately employs, in

1 the individual's residence, a person to provide health care or home care
2 services to the individual or the individual's family member. As used in this
3 subdivision, "home care services" has the same meaning as in 33 V.S.A. § 502.

4 (2) "Health care and community services workplace" means a facility or
5 setting in which health care or community services, or both, are delivered,
6 including:

7 (A) a health care facility as that term is defined pursuant to 18 V.S.A.
8 § 9402;

9 (B) a residential treatment or long-term care facility, including a
10 nursing home, skilled nursing facility, hospice facility, memory care facility,
11 mental health treatment program or facility, or a substance use disorder
12 treatment facility;

13 (C) a nonresidential setting in which health care or community
14 services are provided;

15 (D) a residential community care setting, including a community-
16 based residential facility or group home; or

17 (E) any clinic or setting providing health care or case management in
18 a correctional or detention facility.

19 Sec. 2. EFFECTIVE DATE

20 This act shall take effect on passage.