

# Legislators try to reduce assaults on medical staff

An increasing problem at hospitals

By KRISTIAN FODEN-VENCIL  
Oregon Public Broadcasting



Kristian Foden-Vencil/Oregon Public Broadcasting

**Nurse Allison Seymour estimates she encounters violence or sexual harassment monthly, if not weekly.**

Registered nurse Allison Seymour remembers a terrifying incident from a few years ago when she was working nights at a hospital in Boise.

As in many hospitals, patients' beds were alarmed with pressure pads, alerting nurses to respond when patients get up. Seymour recalls being just behind another nurse when an alarm went off one night.

"We get up and run. She is about 10 steps in front of me. I hear her enter the room and hear her scream. When I got into the room, I see a man. And that man has her pressed against the wall and is choking her," she said.

Seymour managed to separate the patient before other staff, security personnel and police came to help.

"The part that's so disturbing about this case is that it was very premeditated," said Seymour.

"He scooted himself down to the very end of the bed so that he was able to set off that alarm but be in a position where he could attack — and that's why this moment has really stuck with me."

Seymour said the patient had been through alcohol withdrawal and was angry that he wasn't being released until the morning — a typical hospital policy.

Seymour said a lot of the violence isn't sinister. Many patients are just in an altered mental state because they're suffering from dementia or drug withdrawal.

"So when we're providing care for these people they often bat us away, they often try to hit us, some people get violent and they try to punch us or bite us. That's the majority of cases I encounter," said Seymour.

Seymour estimates she encounters violence at least monthly — maybe even weekly.

That's not unusual among health care workers. The U.S. Bureau of Labor Statistics finds nurses are more likely to be assaulted on the job than police officers.

And the violence is increasing. Another bureau study found it's gone up 12% in the last three years.

Many states have attempted similar fixes, without a whole lot of success. Thirty-eight states — though not Oregon — have made it a felony to assault a health care worker. But those states haven't seen the legal difference between a misdemeanor and assault deterring patients prone to lashing out.

Oregon lawmakers are looking to begin by tracking assaults more methodically. Senate Bill 823 would require hospitals to document when, where and how assaults occur — so new systems can be developed to prevent them.

Nurse Seymour hopes it will deal with sexual assault and harassment.

"I've experienced people saying little comments here or there. Calling you 'sweetheart,' calling you 'babe,' saying: 'Oh, where's your sexy nurse outfit?' Things like that," said Seymour.

"Then occasionally I've been touched, or groped inappropriately."

Seymour said she de-escalates by telling patients not to be inappropriate or to be more respectful.

"If it gets to a point where I've said that, then about 50% of the people still continue. And that's the problem, is that gap," said Seymour.

She considers herself lucky because the hospital where she works has integrated an alarm into staff identity tags. So she can hit her alarm and staff will immediately come to her aid.

**Limited success**

Senate Bill 823 has the support of health worker

unions. Kevin Mealy, with the Oregon Nurses Association, said it's unacceptable that 1 in 4 nurses report being physically attacked every year.

He thinks the violence is a result of the Byzantine nature of the health care industry and the stress of sickness.

"You're dealing with people who're feeling stressed; they're in a vulnerable state, who may have nowhere else to go, who may not like being in the hospital," said Mealy.

"And then you're also dealing with their family and friends."

Lawmakers tackled violence in Oregon health care facilities before, in 2007, when they mandated periodic security assessments at hospitals and clinics. Senate Bill 823 redefines those assessments as happening at least once every two years. The bill also aims to protect staff who report workplace violence, as well as requiring hospitals to report to the state when, where and how assaults happen.

"So you can start identifying trends and figuring out where your particular facility's problems lie so we can address it," Mealy explained.

Mealy thinks lots of things can be done to reduce violence, for example, ensuring clear lines of sight in hospitals, so staff can easily see what's going on.

He thinks medical staff

should also be allowed to put a sticker on the outside of a violent patient's room, to warn staff.

"We're ... behind on flagging people with violent behaviors and making that part of the medical record that travels with a patient," said Mealy.

**Hospital support**

Piling on requirements, with the possibility of adding staff and other expenses might be expected to draw opposition from hospital executives. But most hospitals and their trade groups are backing Senate Bill 823.

Hospital leaders say they don't want staff to be afraid to go to work or risk lawsuits from injured staff members. Legacy Health System's chief nursing officer, Carol Bradley, says the amount of violence is only growing.

"The violence and the challenges that our nursing staff, all health care workers are facing today, has escalated. And I think it's a reflection of some of the things going on in society and unfortunately it translates into our emergency departments and in the care environment that our nurses are involved in on a daily basis," Bradley said.

She's hopeful the new bill will start reducing violence. But she also thinks improving safety isn't just a question of adding staff and hiring more security.

"It's a combination of staff education, de-escala-

tion techniques and really the environment we create."

She said Legacy is already putting stickers on the doors of violent patients, and noting bad behavior in their medical records.

Katie Harris, an attorney with the Oregon Association of Hospitals and Health Care Systems, said hospitals have been working on this issue for a long time, including through the health care violence prevention bill she helped pass back in 2007. And she thinks there will be more bills in the future.

"When it comes to workplace violence prevention, this is always an area where more can be done. This is not the kind of thing where you can set it and forget it, when it comes to a program. It really is something where you need to develop, implement and sustain a program and continuously re-evaluate it," said Harris.

Meanwhile, Seymour is staying with her job, even though she feels like hospitals have generally downplayed workplace violence.

"It's terrifying and it lasts with you," Seymour said. "And it's contributed to my burnout ... I came into nursing to help people, not to get assaulted by people."

# Autopsy shows Forest Grove man died from intoxication

By BRENNIA VISSER  
The Daily Astorian

An autopsy from the state medical examiner determined Travis Todd, the Forest Grove man reportedly assaulted in Seaside in March, died from complications related to intoxication.

On March 30, Seaside police received a report around 3 a.m. from witnesses staying in a home near the intersection of Avenue K and S. Columbia Street saying they saw Todd have a loud conversation and interaction with another person.

The emergency call led police to initially believe a physical altercation had taken place.

Todd was treated at the scene for his injuries and eventually taken to a Portland-area hospital, where he died on April 8.

The autopsy determined the official cause of death was complications from acute intoxication that were accidental in nature.

Detectives are still looking for more information about where Todd was and who he was with one to two hours after he left local bars.



Travis Todd

Investigators believe Todd was with a white male that was wearing dark, baggy clothing.

The possible witness is believed to be in his late 20s to early 30s, approximately 6-foot tall, with a medium, athletic build. As previously reported, Todd may have been on the beach or walking along the Promenade prior to the incident.

Anyone with information is asked to call Seaside police at 503-738-6311.

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