MINUTES OF THE SENATE COMMITTEE ON JUDICIARY

Eighty-second Session March 27, 2023

The Senate Committee Judiciary called to order on was Chair Melanie Scheible at 1:03 p.m. on Monday, March 27, 2023, Room 2135 of the Legislative Building, Carson City, Nevada. The meeting was videoconferenced to Room 4412E of the Grant Sawyer State Office Building, 555 East Washington Avenue, Las Vegas, Nevada. Exhibit A is the Agenda. Exhibit B is the Attendance Roster. All exhibits are available and on file in the Research Library of the Legislative Counsel Bureau.

COMMITTEE MEMBERS PRESENT:

Senator Melanie Scheible, Chair Senator Dallas Harris, Vice Chair Senator James Ohrenschall Senator Marilyn Dondero Loop Senator Rochelle T. Nguyen Senator Ira Hansen Senator Lisa Krasner Senator Jeff Stone

STAFF MEMBERS PRESENT:

Patrick Guinan, Policy Analyst Karly O'Krent, Counsel Blain Jensen, Committee Secretary

OTHERS PRESENT:

David Bustos, Director, University Medical Center of Southern Nevada Jill Goodman, Director of Behavioral Health, Southern Hills Hospital and Medical Center

Kenny Monkel, Southern Hills Hospital and Medical Center Dylan Keith, Vegas Chamber Adrian Hunt, Las Vegas Metropolitan Police Department John Jones, Jr., Nevada District Attorneys Association Patrick Kelly, Nevada Hospital Association Joan Hall, Nevada Rural Hospital Partners

Marlene Lockard, Service Employees International Union 1107
Mari Nakashima Nielsen, Nevada State Medical Association
Mary-Sarah Kinner, Washoe County Sheriff's Office
Jimmy Lau, Dignity Health-St. Rose Dominican
Greg Herrera, Nevada Sheriffs' and Chiefs' Association
Johanna Mauer, Southern Hills Hospital and Medical Center
Suresh Bhushan, Medical Director, Behavioral Health Unit, Southern Hills
Hospital and Medical Center

CHAIR SCHEIBLE:

I will open the hearing on Senate Bill (S.B.) 289.

SENATE BILL 289: Revises provisions relating to crimes against providers of health care. (BDR 15-996)

SENATOR ROCHELLE T. NGUYEN (Senatorial District No. 3):

During the Southern Nevada Forum, <u>S.B.</u> 289 was developed by the Vegas Chamber, City of Las Vegas and several people who participated in this discussion. The Southern Nevada Forum talks about different issues, and one came to the forefront—workplace violence involving our healthcare providers and our frontline workers in hospital settings. This was especially true during the COVID-19 pandemic and brought to light problems within our existing statute.

There are two proposed amendments, one was worked on by various stakeholders ($\underbrace{\text{Exhibit C}}$) and the second is a friendly amendment ($\underbrace{\text{Exhibit D}}$) brought by Clark County and University Medical Center of Southern Nevada (UMC).

Page 2 of Exhibit C shows the removal of rebuttable presumption that is not present for any other alleged victims eligible for enhanced penalties. These two rebuttable presumptions are already in existing law and cover a lot of protected people. On page 1, it is noted that a provider of health care means a physician or medical student, and a list of people follows. Behavioral health technicians and other staff members are not included, but they are the ones interacting with the public frequently. What <u>S.B. 289</u> hopes to accomplish is to include people that were omitted in the original language of the bill.

At the bottom of page 1 of Exhibit C, there is in green language, section 1, subsection 1, paragraph (e), subparagraphs (I), (II) and (III) which emulates what is already existing in statute. We tried to copy that language from section 1, subsection 1, paragraph (d), subparagraph (8) to say, "A civilian employee or a volunteer of a law enforcement agency whose official duties require the employee or volunteer to" and the three paragraphs below. On Exhibit C, page 1, those paragraphs following a provider of health care mimics that section with "(I) Interact with the public; (II) Perform tasks related to providing health care; and (III) Wear identification, clothing or a uniform that identifies the employee or volunteer as working or volunteering for a health care facility." That language is more inclusive.

The Clark County and UMC amendment, Exhibit D, regards the huge uptick of health care providers being followed on the hospital premises, like in parking lots or portico areas. In fact, nonclinical staff who are now being included in S.B. 289 were often called into situations and became subject to physical abuse and verbal threats in the past two years. University Medical Center of Southern Nevada had 132 incidents in 2021 and 293 incidents in 2022, an obvious increase. This problem was moving beyond the physical walls of the hospital and into the parking lot as employees or volunteers were being followed to their cars.

We will hear some statements from people in the career field, and David Bustos can answer questions the Committee might have concerning the medical facility. Senate Bill 289 is seeking to include those healthcare workers or volunteers that were excluded from the original language.

SENATOR DONDERO LOOP:

When you say on the property or premises in Exhibit D, where is that line being crossed? Is it once they step into the parking lot from the sidewalk? I know with UMC the surrounding area is not exactly square and most hospitals are not. Could you describe the actual property or where that line begins?

SENATOR NGUYEN:

I think the intention was to include the parking lot in the property. Not just within the context of the building, but I believe there is someone from UMC that might be able to answer the question of "What are the premises of the campus?"

SENATOR DONDERO LOOP:

I can clarify; I was trying to figure out what is considered property or premises. Is it when you step off the sidewalk onto the parking lot or is it when you walk into the building?

DAVID BUSTOS (Director, University Medical Center of Southern Nevada): Once a vehicle or a person is in the parking lot, that is considered the premises of the campus.

SENATOR NGUYEN:

If we need clarification in statute, I can work on language that would give more specificity to that definition.

Mr. Bustos:

I support S.B. 289. University Medical Center of Southern Nevada not only supports enhanced protection for healthcare clinicians but also requests the enhanced protection be extended to nonclinical employees, such as security officers, volunteers, concierges and interpreters, because they play a key role in providing the best service to patients and visitors. As Nevada's only Level 1 trauma center, UMC receives patients suffering from traffic accidents, burns, shootings and stabbings. In some cases, trauma victims do not arrive by ambulance but are dropped off at entrances and parking lots across the campus. Security officers, concierges or volunteers who are not clinical staff often are the first ones to receive reports of the emergency outside the building. Gunshot wound victims arriving by private vehicles place the entire UMC staff at risk because these patients are intense and create a volatile situation since they are sometimes connected to gangs. If patients are connected to gangs, it usually results in a large gathering of people on UMC campus. While clinicians are treating the patient, nonclinical staff are left to assist in the situation and often subjected to verbal or physical abuse.

Security and concierge are usually the first employees that visitors encounter for guidance and assistance. Unfortunately, some visitors and patients can be hostile and threatening toward our employees. In a recent incident, a visitor became threatening toward our concierge which resulted in calling law enforcement. Las Vegas Metropolitan Police charged the individual with a misdemeanor, but if the concierge was protected by *Nevada Revised Statutes* (NRS) 200.471, subsection 2, paragraph (c), the perpetrator could have been charged with a Category B felony. At UMC, we strive to ensure our employees

feel safe on campus and continue to update our security measures for our community.

JILL GOODMAN (Director of Behavioral Health, Southern Hills Hospital and Medical Center):

I have been a nurse in Las Vegas for 39 years and worked in the Pavilion for the last 4 years. I learned about the statute after a patient assaulted and injured a mental health technician without provocation. Las Vegas Metropolitan Police were called to the Pavilion, and I was told that a mental health technician was not a protected person under this statute. The victim can only make a report, resulting in the patient receiving a citation. If a patient had assaulted a registered nurse or physician with the injuries sustained, there would have been higher charges. Any person working in the healthcare industry and providing care to patients should be protected under this statute, including mental health technicians, who are providing continuous monitoring for safety and assistance for all recovering patients in our facility.

Since March 2019, we have had 86 employees assaulted facilitywide, and 54 of those assaults were in the Pavilion. This was documented by the healthcare department. Only nine people were removed from the facility with the assistance of the Las Vegas Metropolitan Police because of extremely violent behavior. These behaviors were not a result of a person's mental health diagnosis, which was reviewed by a psychiatrist prior to being removed. All staff are trained to verbally de-escalate patients who may be heightening or experiencing a crisis. Multiple strategies are implemented to prevent a patient from escalating. We have a hospital-wide Behavioral Emergency Response Team, otherwise known as BERT, with 1-to-1 assignment for an aggressive or escalated patient. The BERT teams conduct a multitude of interventions to make sure the input and protection of the patient are always first.

Recently, a patient targeted a mental health technician by returning to the facility after being discharged and stood at the employee entrance of the Pavilion during the night shift to find the technician. Another staff member recognized the patient as recently being in our building and called security and the police. Once security arrived, the patient fled; this terrifying situation could have had a different outcome. I ask the Committee to understand the necessity of extending this NRS to include not only the mental health technician as a protected person but also extend the healthcare premises of the building and grounds where all employees enter and exit.

KENNY MONKEL (Southern Hills Hospital and Medical Center):

I work at the Behavioral Health Facility at Southern Hills Hospital, also known as the Pavilion. I hold the position of a mental health technician and have for more than 20 years. The importance of having NRS 200.471 changed is because I and other mental health technicians are not protected if a patient under our care becomes violently aggressive and injures one of us. During all my years working as a mental health technician, many staff members, including me, were hurt. Some were injured so severely they could no longer perform their job duties and quit.

As mental health technicians, we spend the most time with patients within our facility on 12-hour shifts. We get to know the patients well and are there to observe and report their behaviors, both good and bad. There are times that patients do not have their demands met and state to us they will become physically violent to get their demands met. Unfortunately, more times than wanted, the patient acts upon the threats and violently assaults a staff member.

All staff members should be protected along with the rest of the licensed healthcare workers that are protected today. As mental health technicians, we are given the opportunity to make a difference in the lives of patients who are going through some form of crisis.

DYLAN KEITH (Vegas Chamber):

The Chamber supports <u>S.B.</u> 289. We are experiencing a severe shortage of medical workers who serve Nevadans and do the tough work. The least we can do is give them the proper protections so they feel safe going to work.

ADRIAN HUNT (Las Vegas Metropolitan Police Department): We support <u>S.B. 289</u>.

JOHN JONES, Jr. (Nevada District Attorneys Association): We support <u>S.B. 289</u>.

PATRICK KELLY (Nevada Hospital Association):

We support <u>S.B. 289</u>. Our hospitals take a team approach to delivering health care, and every employee, contractor or volunteer is an essential part of that team. We believe all our team members should be afforded equal protection from violence under the law.

JOAN HALL (Nevada Rural Hospital Partners): We support S.B. 289.

MARLENE LOCKARD (Service Employees International Union 1107):

We support <u>S.B. 289</u>, which furthers the safety and enhancement of penalties for violence against healthcare workers. We were able to get important legislation passed to expand protections for our nurses a couple of sessions ago.

MARI NAKASHIMA NIELSEN (Nevada State Medical Association): We are grateful for the current protections and support <u>S.B. 289</u>.

MARY-SARAH KINNER (Washoe County Sheriff's Office): We support S.B. 289.

JIMMY LAU (Dignity Health-St. Rose Dominican): We support S.B. 289.

GREG HERRERA (Nevada Sheriffs' and Chiefs' Association): We support <u>S.B.</u> 289. The protection and safety of Nevada healthcare providers, workers and volunteers are paramount.

JOHANNA MAUER (Southern Hills Hospital and Medical Center):

Having spent the past nine years as a registered nurse working in the behavioral health field, I have personally witnessed numerous patients assault healthcare workers. In addition to witnessing these egregious events, I have been the victim of two assaults. Not only do patient assaults result in immediate bodily injury to a healthcare worker, they also leave that employee with lasting emotional trauma that he or she must overcome to continue the job of providing excellent patient care. As a licensed registered nurse, I fall under the protection of the current NRS in the event of a patient assault. However, some of my coworkers are not granted this level of protection under the law. These include unlicensed hospital personnel such as mental health technicians, security, dietary aids, environmental service employees and maintenance workers. Often these individuals are at the forefront of patient care in our facility and receive the brunt of patient assault behaviors.

Over the past 4 years of my department being open, there have been 54 patient assaults against healthcare workers. The extent of these assaults ranges from punches and bites to fractured bones, strangulation and even assault with the

use of a deadly weapon. Of the 54 incidents, 25 were assaults perpetrated on unlicensed mental healthcare workers. Therefore, approximately 50 percent of all patient assaults experienced in my facility have been committed against unprotected healthcare workers. These results are staggering and leave me questioning how my fellow coworkers' lives are seemingly not valued to the degree that licensed healthcare workers' lives are in the eyes of the law of this State. Please hear my concerns and make it your mission to extend the current statute to include these individuals who not only give of themselves daily for the betterment of human life but lack equal representation in the eyes of the law regarding safety in the workplace.

SURESH BHUSHAN (Medical Director, Behavioral Health Unit, Southern Hills Hospital and Medical Center):

We support <u>S.B.</u> 289. Many mental health technicians are our first line healthcare providers by being with patients every day, more than nurses or physicians. These workers bear the brunt of the most acute psychotic or aggressive behavior. I understand that most of our patients are mental health patients, but when patients become extraordinarily violent, there are other means to help them. My job is to make sure they are not abandoned from mental health treatment and get the right treatment in a safe setting for both the patients and the care providers.

SENATOR HANSEN:

After going over <u>S.B. 289</u> and listening to testimony, one thing that struck me about <u>S.B. 289</u> was on page 3, lines 20 through 41, identifying all the different providers. But then you have a beautiful catchall in lines 42 and 43 that says, "and any person who is employed by, serves as a contractor for or volunteers at a health care facility" would be defined as a provider of health care. We should cross out lines 20 through 41 because the person who called to give testimony said we have people working in the cafeteria. This bill includes contractors like somebody working on the HVAC system that gets beat up inside the building. I am just wondering why not start with that and just say, "anybody in any health care facility who is employed there, serves as a contractor or volunteers is a provider of health care."

SENATOR NGUYEN:

Seeing this list, I also intended in the amendment, <u>Exhibit C</u>, to include student of emergency medical services as well. We took out the contractor language which was something unintended when drafting the bill. If you look at page 1 of

the amendment, "provider of health care" is further defined as "any person who is employed by, or volunteers at a health care facility." A provider of health care means the physicians, but it also means they must "interact with the public," they must "perform tasks related to providing health care" and "wear identifying information, clothing or uniform that identifies them as an employee or volunteer as working or volunteering for a health care facility."

That secondary language is necessary. I think someone should look at our battery statutes because we have so many people who are carved out and listed here. What <u>S.B. 289</u> does is to include those people working in a healthcare setting, identifying as either an employee working in the healthcare profession in the hospital or around the hospital campus who are being targeted by this type of physical abuse.

SENATOR HANSEN:

I am happy keeping the contractor language. Honestly, anybody who gets beat up by somebody inside a hospital facility should have equal protection under the laws or at least equal punishment of the laws. A guy that is the doctor in a suit gets beat up, and a guy working who is the custodian not wearing a uniform gets beat up. Why is the doctor higher in the scale of punishment than anybody else in the building?

SENATOR NGUYEN:

Looking at the legislative history for other people included within this battery statute with this enhancement, it looks like it is applied to people who would be targeted because of their positions or jobs, whether it is law enforcement in section 8, firefighting in section 9, or judges and prosecuting attorneys in some of these other sections. The intent of the statute is the people who were being targeted because of their roles or positions. Providers of health care are being targeted because of their positions. In this case, the "employed by" covers the contractors and volunteers that are working in the building, but that language was taken out. Then the secondary language, which is consistent with the other language in the statute that the provider of health care must interact with the public, perform tasks related to help providing health care and wear identifying information, is just emulating what is already existing in statute for consistency.

SENATOR HANSEN:

Sometime, there will be another category added to the list; therefore, we should make it a big catchall for everybody in a healthcare facility who gets attacked

by a person whether the victim is a doctor, custodian, somebody working in the cafeteria or whoever it may be. I am always uncomfortable when I see different layers of punishment for specific individuals because they are licensed versus unlicensed or in uniform versus not in uniform. My idea is if somebody does something illegal, the punishment should be pretty much the same whether you are the President of the United States or a plumber.

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Senate Committee on Judiciary March 27, 2023 Page 11				
CHAIR SCHEIBLE: adjourn the Senate Committee on Judiciary at 1:43 p.m.				
	RESPECTFULLY SUBMITTED:			
	Blain Jensen, Committee Secretary			
APPROVED BY:				
Senator Melanie Scheible, Chair				
DATE:	<u> </u>			

EXHIBIT SUMMARY				
Bill	Exhibit Letter	Introduced on Minute Report Page No.	Witness / Entity	Description
	А	1		Agenda
	В	1		Attendance Roster
S.B. 289	С	2	Senator Rochelle T. Nguyen	Proposed Stakeholder Amendment
S.B. 289	D	2	Senator Rochelle T. Nguyen	Proposed Amendment by University Medical Center of Southern Nevada