

TO: House Judiciary Committee

FROM: Morgan Gerhardt, RN, BSN, MBA Director, Emergency Department
Stormont Vail Health, Topeka, Kansas

DATE: February 10, 2022

RE: Proponent of House Bill 2620

On behalf of Stormont Vail Health and my co-workers in the Emergency Department, thank you for the opportunity to provide testimony in support of House Bill 2620.

I am a nurse. I am the director of the Emergency Department of Stormont Vail Health and have been an Emergency Department nurse for 15 years.

The doors to the Emergency Department where I work are 11 blocks west of the Kansas Capitol Building, making it the closest hospital to those in this building who may need care in the event of an emergency or trauma.

Stormont Vail is not-for-profit healthcare organization that provides primary and specialty medical care across a large region in northeast Kansas, including many rural and smaller communities around Topeka, and in partnership with our critical access hospitals and other providers and medical facilities.

Our acute care hospital in Topeka has approximately 435 staffed inpatient beds, which includes medical-surgical, intermediate care, adult intensive care, maternity, pediatrics and neonatal and pediatric intensive care. We also operate a behavioral health hospital in Topeka serving adults and children.

Our Emergency Department, which opened in 2010, has 34 beds, also has an adjacent Trauma Center. We are the only Level II Trauma Center in our region. In addition to our Emergency Department team, we have a Trauma team, all available 24/7.

We have a staff of 194 professionals in the Emergency Department. Overall, Stormont Vail Health has 5,455 team members in 30-plus locations. We have 278 employed physicians and 228 employed Advanced Practice Providers.

Stormont Vail is currently experiencing a severe staffing crisis, like many hospitals and healthcare organizations. This is due to people leaving the profession because of burn out from the pandemic, retirement - sometimes early because of the pandemic, and staff who have left to pursue higher paying travel jobs out of state. Because of these shortages, we have had to pull many of our nurses from non-nursing roles, RNs and Advance Practice Providers from positions in our clinics and have all of our regular hospital team work extra hours and shifts to handle patient volumes we experienced in the hospital.

In fiscal year 2021, Stormont Vail Health provided care for many in the hospital through 21,438 inpatient admissions, 146,042 outpatient visits and 52,288 Emergency Department visits. Across our clinics, we had 754,826 visits.

While Stormont Vail may sound like it is a large organization, it is actually is more like a big family. Many of our team members have family members who work for the organization in both clinical and non-clinical positions. Those who don't have real family in the organization soon find that our co-workers become like family to us. Only those who are in the trenches with us can fully understand and honor the commitment we make to serve our community and provide the very best in care.

That is why this bill, House Bill 2620, is extremely important to the Stormont Vail family. We're protective of those we consider family. All of us want to keep our families safe. This is no different. It's personal. Healthcare leaders have been longing to provide some accountability for safety - to our team, our family in the hospital. We need our team to be safe when we are caring for community members who arrive at the Emergency Room, Surgery area, Maternity floor or all of the other areas of our hospital to get needed care.

Increasingly, our team is experiencing disrespect, bullying and in some instances violent behaviors from patients and visitors. So much so that we now screen every patient for a potential for violence to create a heightened sense of awareness, and to ensure the appropriate measures are in place to keep our team, patients, and visitors safe. This bill creates new language that says interference with the conduct of a hospital is a Class A non-person misdemeanor, and aggravated interference with the conduct of a hospital (weapon) is a Felony.

It defines healthcare worker, which was not previously defined, and states that assault of a healthcare worker is a Class A person Misdemeanor, which is a higher level misdemeanor than plain Battery. While it does not rise to the level of law enforcement officer, for whose assault would be a felony, it at least includes a penalty where before there was none specified.

This bill is important because violence in Emergency Departments, including the one that is located 11 blocks west of the Kansas Capitol, is becoming more and more prevalent. At the same time, healthcare workers who report violent encounters continues to fall short.

There are two beliefs in my Emergency Department:

1. Being kicked, punched, bitten, and threatened is part of the job.
2. Nothing will happen when I do report it.

The mental toughness that is required to be threatened, kicked or spit at minutes before you're being asked to critically think and save the life of another patient is unlike that of any other profession, and it is certainly not sustainable.

We can't eliminate fear, but we can offer healthcare workers security in that those who act violently will be held accountable for their actions. Physical abuse is NOT part of the job, and reporting WILL create a better work environment for healthcare workers.

I stand here today for all healthcare workers, but my heart is here to share the testimony of my friend Jami Potter. Jami was a nurse in our Emergency Department.

In 2016, Jami took over for another nurse who was 30-weeks pregnant at Triage. Triage is where a patient is initially checked to ascertain medical issues the patient may be having and to get him or her to appropriate care and treatment.

Jami called the next patient into the Triage box and like every patient, asked what brought him to our Emergency Department. There was a 2-hour wait on that particular day, which warranted getting additional patient history prior to asking the patient to wait in the Waiting Room. As Jami asked specific questions related to this patient's primary medical issue, the patient stood up and stated that he had been seen elsewhere and was at the hospital for better care. Unprovoked, the patient then quickly began striking Jami with his closed fist.

Jami remembers screaming "No!" and covering her face. She remembers falling backwards out of her chair, striking her head on the floor while her arm was caught behind her as she tried to brace her fall. She felt trapped. The attacking patient got on top of her and continued to repeatedly strike her. A paramedic came to her aid and was finally able to free Jami from her attacker. Jami ran to safety and was quickly surrounded by her Emergency Department peers.

Jami recalls the next 16 hours as a blur. She was admitted to the hospital for Observation for a concussion and was given medications to help her calm down. Jami was discharged the following day and went home to her husband and three small children, the youngest she was still breastfeeding. "I called the DA's office that next day to ask them what my options were," Jami recalls. "The lady said he was let go with a misdemeanor. I was in complete shock. I felt angry and betrayed. How could it be that he was released from jail before I was released from the hospital?"

Jami didn't just suffer from a concussion. She later required surgery to her shoulder that got pinned behind her during the attack. Jami was an athlete. She was known for her mental AND physical toughness. The physical recovery would be easy compared to the road to mental recovery. For that, she wasn't prepared at all.

Two days following the attack, Jami's milk supply dried up and she was no longer able to breast feed her 4-month-old daughter. She was warned that might happen, but she wasn't prepared. The shoulder surgery she had left her unable to pick up her daughter for weeks, and it required her husband to take leave from work to help care for their children.

“The nightmares and visions started immediately. I would see his face and remember everything about the attack.” She recalls, “I couldn’t sleep without medication, and if I woke up, there was no going back to sleep...I would overreact to the slightest thing. My middle child was two at the time and I feel like he was who I hurt the most. I overreacted to him so many times, for some reason he ignited me the way he cried, how he responded and then how I responded to him. I couldn’t control my reactions. I would feel my heart start to race, and I would get extremely anxious and mad. My relationship with my husband changed, and it was pointed out to me at one of my many therapy sessions that I separated myself from my friends as a way of surviving. I felt ashamed. I had missed out on so much.”

What happened to Jami that day in 30 seconds didn’t just happen to Jami.

- It happened to the Patient Care Technician who watched it all unfold, who jumped on the attacker’s back, but couldn’t stop this horrific attack from happening.
- It happened to the Paramedic who without hesitation put himself in danger to help free Jami from her attacker.
- It happened to the Security Guards who weren’t there soon enough to stop the attack.
- It happened to the male charge nurses who melted into a pile of tears because they weren’t there to save Jami and bring her to safety soon enough.
- It happened to the 30-weeks pregnant nurse who couldn’t help but think “that could have been me.”
- It happened to every one of us that day, and it changed everything, yet not enough.

It is time that Kansas stands up to protect our healthcare workers; to protect the Jami’s in our hospitals and to ensure that all healthcare workers who have been bitten, punched, kicked and attacked while they were trying to give the best of care, to help another human being, will know that these people causing this harm – in the very place of caring – will be held accountable and face consequences for their actions.

Thank you for your time and consideration of this bill.