



Danbury Nurses' Union Unit #47 Local 5047

AFT-CT, AFT Healthcare, AFL- CIO

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Written Testimony of

Mary Consoli, President

Danbury Nurses' Union Unit #47, AFT Local 5047, AFL-CIO

**To Representative Betsy Ritter, Senator Andrea Stillman
and Members of the Public Health Committee**

**Re: S.B. No 970 AN ACT CONCERNING WORK PLACE VIOLENCE
PREVENTION AND RESPONSE IN HEALTH CARE SETTINGS.**

February 23, 2011

My name is Mary Consoli and I am President of the Danbury Nurses' Union Unit #47, American Federation of Teachers Local 5047, AFL-CIO, a labor union representing 600 registered nurses at Danbury Hospital. I am speaking on behalf of our 600 members in support SB 970. We are asking you to require each health care employer to establish and convene an ongoing Safety Committee to address issues of worker health and safety.

This bill is needed because the federal requirements for health care security in the Centers for Medicare & Medicaid Services Conditions of Participation and the Joint Commission Standards are not enough. A mandate is needed because OSHA does not regulate workplace violence, and in Connecticut there is no specific law to help prevent it. And all health care facilities consider the cost associated with providing a safe work environment, but at what cost is the life of a healthcare worker? This is why we need Senate Bill 970 now. Health care workers in Connecticut should not fear for their safety when going to work.

We are not seeking voluntary programs. Nurses have shared their concern for safety at staffing meetings. Over the last ten years, I have communicated these concerns to senior management in correspondence and during monthly labor management meetings, with no changes implemented to improve safety. In 2008, union and non union employees circulated a petition about the lack of security and requested a meeting with Frank Kelly, CEO of Danbury Hospital to express their concerns. He refused a meeting.

We filed a grievance in January 2009, when a nurse on the Inpatient Psychiatric Unit was hit by a patient who then threatened daily to throw her down a flight of stairs. Our internal grievance process can correct site-specific concerns, but is limited in scope. It cannot provide for comprehensive, system wide work place safety improvements.

In October, 2009 we filed a complaint with OSHA and the Department of Public Health after another nurse on our Inpatient Psychiatric Unit was assaulted by a patient, fell and broke her hip. On March 2, 2010 a nurse was shot while disarming a patient with a gun. This brought about an OSHA inspection of the hospital that resulted in a formal citation for not providing a safe work environment. It was only after the OSHA citation that Danbury Hospital agreed to address these long standing safety issues.

They hired a consultant to review the security at the hospital and make recommendations. The Union had no role with the investigation by the consultant; individual members were invited to meet in focus groups with the consultant. The hospital set up a task force to review the recommendations. I was invited to be part of the task force after it was convened. I was given a last minute notice and attended the last two meetings. I made recommendations at the table and sent a letter to management with suggestions. To date, my letter has not been acknowledged and there has been no evidence that any of the union's suggestions were implemented.

We did our own assessment of workplace violence with a survey of our members and offered the data we collected to the hospital. They were not interested in our survey results. We offered to bring in nationally acclaimed experts from the Work and Health Research Center of the University of Maryland School of Nursing, to give presentations to all employees, including management, on developing a comprehensive workplace violence prevention program. They refused our offer. We conducted two workshops to educate our members and raise awareness of what can be done to prevent workplace violence, in June and September, 2010.

The Union had no input into developing the Hospital's workplace violence prevention plan, nor has the hospital complied with our request for a copy of their violence prevention plan. We are not aware of any specific mechanism for reporting workplace violence incidents or how the effectiveness of the program is being monitored. We do not know how assaults will be reported to the local police department. If we are not part of the process to develop a plan, the plan will not address our concerns and will not prevent future incidents.

Workplace violence is not part of a nurse's or health care worker's job. It is a recognized occupational safety hazard that can be controlled and prevented with a comprehensive violence prevention plan and a committed management. We do not want that commitment to be the results of shootings and assaults at every health care setting in Connecticut.

I urge you to vote in support of Senate Bill 970. Thank you for your consideration,

Mary Consoli, RN, BSN
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