THE POSSIBILITY OF HOPE

GUN SAFETY, RED FLAG LAWS, AND MULTIFACETED INTERVENTIONS

Rick Petry, JD

1

WE ARE IN THE GRIPS OF TWO EPIDEMICS:

Workplace Violence

Mass Shootings

2

WORKPLACE VIOLENCE, SPECIFICALLY AS IT RELATES TO HEALTHCARE WORKERS.

3

WORKPLACE VIOLENCE IS A CHRONIC ISSUE DATING BACK ABOUT A DECADE HERE IN MINNESOTA…

Yet it remains unresolved.

4

2014 PATIENT ATTACK

HEALTH

After Twin Cities hospital rampage, lawmakers debate bills to make hospitals safer

As lawmakers take on worker safety issues, Ramsey County releases details of patient death investigation.

By Jeremy Olson Star Tribune | MARCH 10, 2015 — 11:36PM

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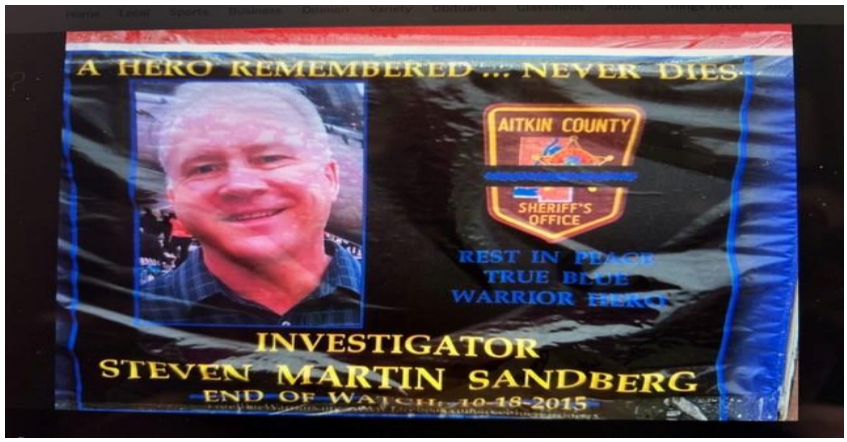
2015 DEPUTY FATALLY SHOT



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THE CHALLENGE OF UNDERREPORTING

76% of ER nurses said their decision to report workplace violence would be based on whether the patient was perceived as being responsible for their action.

- Violence Against Nurses, NACNEP 5th Report

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ON AVERAGE, 57 NURSES ARE ASSAULTED EVERY DAY IN THE U.S.

THAT'S TWO NURSES ATTACKED EVERY HOUR,

8

NURSES FACED THE HIGHEST NUMBER OF ASSAULTS IN PSYCHIATRIC UNITS AND EMERGENCY DEPARTMENTS.

9

WORKPLACE VIOLENCE RATES FOR HOSPITALS INCREASED 95% --

Specifically,

98% in psychiatric hospitals

10

THE "LEADING OCCUPATIONS" FOR WORKPLACE VIOLENCE IN 2019

According to the U.S. Bureau of Labor Statistics, were nursing assistants, orderlies, psychiatric aides, and home health and personal care aides, followed by registered nurses.

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THE DATA

- From 2016 to 2020 there were 207 deaths due to violence in the workplace in the health care and social assistance industry within the private sector (BLS, 2021).
- In 2020, health care and social assistance workers overall had an incidence rate of 10.3 (out of 10,000 full-time workers) for injuries resulting from assaults and violent acts by other persons. The rate for nursing and personal care facility workers was 21.8 (BLS, 2021).
- Data obtained from nurses (RNs/LPNs) in a major population-based study showed a rate of *physical* assaults at 13.2 per 100 nurses per year and at a rate of 38.8 per 100 nurses per year for *non-physical* violent events (threat, sexual harassment, verbal abuse) (Nachreiner, N.M. et al., 2007).

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THE DATA

- 80% of nurses do not feel safe in their workplace (Peek-Asa et al., 2009).
- In a survey of 125 ED nurses, intensive care unit and general floor nurses at a regional medical center, 82% of ED nurses had been physically assaulted at work in one year (May & Grubbs, 2002).
- 25% of psychiatric nurses experienced disabling injuries from patient assaults (Quanbeck, 2006).
- Studies show that between 35-80% of hospital staff have been physically assaulted at least once during their careers (Clements et al., 2005).

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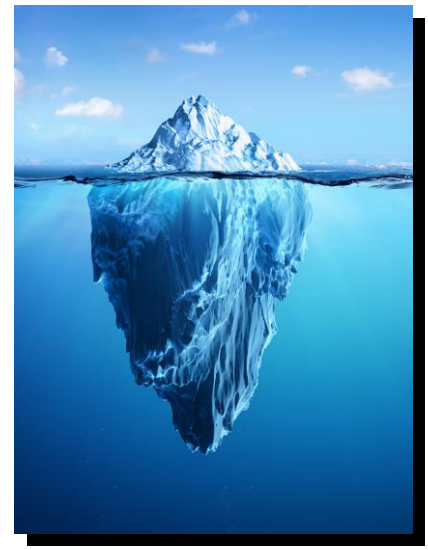
THE TIP OF THE ICEBERG

- A persistent perception within the health care industry that workplace violence is "part of the job";
- Poor or non-existent institutional policies, procedures, staff training or supports;
- Overly complex reporting procedures create a disincentive for reporting;



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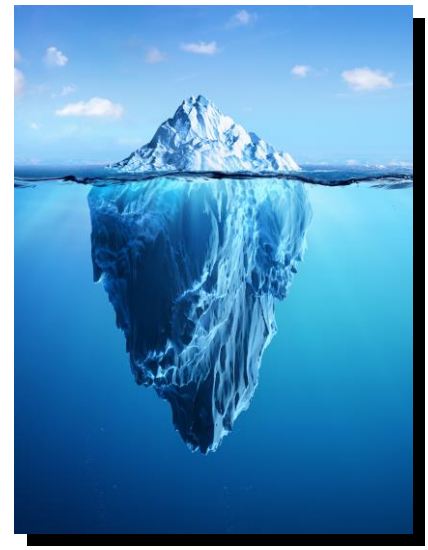
THE TIP OF THE ICEBERG

- Concern that violence happens so frequently that it's time-consuming to report every event, in addition to a lack of response when time is taken to report;
- Fear that reporting will reflect poorly on the nurse (victim blaming);
- Belief that some patients cannot be held accountable for their violent actions.



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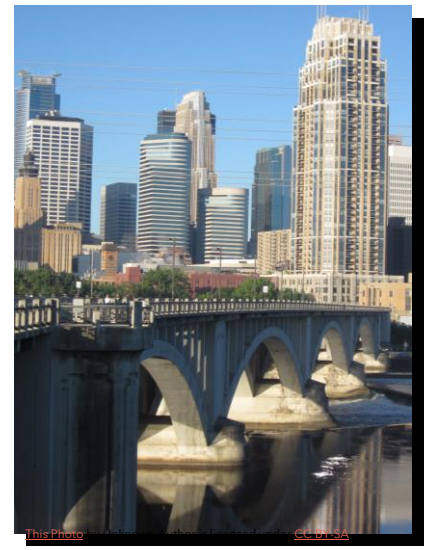
HERE IN MINNESOTA

- In nearly 90 percent of cases where MNA nurses filed a concern over the impact of short staffing on patient care, the nurses reported no response or inadequate action from hospital management.
- In this 2022 survey of 2,403 MNA nurses who left their bedside nursing positions, the top cited reasons for their departure by respondents were stress and "burnout" (75 percent), chronic under-staffing (71 percent), working conditions (63 percent) and management issues (49 percent).



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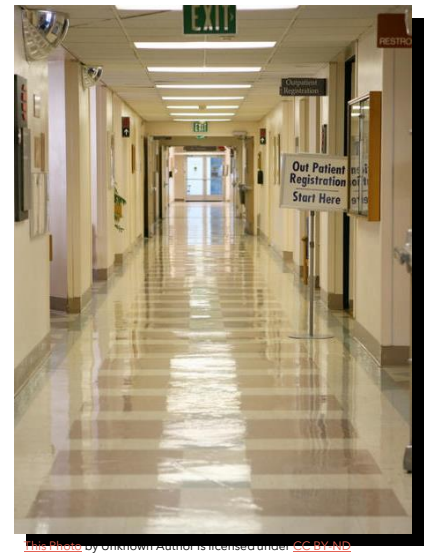
HERE IN MINNESOTA

- Improved staffing was the number one condition needed for nurses to return to the bedside, cited by 63 percent of nurse respondents.
- Nearly 40 percent of nurses who left the bedside in 2022 had only been in their nursing careers for less than five years.
- Over 75 percent of MNA members have indicated their desire to stay at the bedside for the near future.



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ACTION PLANS AND ACTION PLAN REVIEWS

Required to Address

Staffing and Violence

19

REQUIRED ELEMENTS OF ACTION PLANS; REPORTING WORKPLACE VIOLENCE.

(2) effective procedures for health care workers to report a violent incident, threat, or other workplace violence concern without fear of reprisal;

(3) effective procedures for the hospital to accept and respond to reports of workplace violence and to prohibit retaliation against a health care worker who makes such a report;

(4) a policy statement stating the hospital will not prevent a health care worker from reporting workplace violence or take punitive or retaliatory action against a health care worker for doing so;

20

REQUIRED ELEMENTS OF ACTION PLANS; REPORTING WORKPLACE VIOLENCE.

(7) effective procedures for obtaining assistance from the appropriate law enforcement agency or social service agency during all work shifts. The procedure may establish a central coordination procedure; and

(8) a policy statement stating the hospital will not prevent a health care worker from seeking assistance and intervention from local emergency services or law enforcement when a violent incident occurs or take punitive or retaliatory action against a health care worker for doing so.

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THE MINNESOTA HOSPITAL ASSOCIATION

The proposed legislation as it relates to implementing nurse staffing ratios would have drastic, negative impacts on patient care, access, and cost, reducing availability of hospital care across the state.

If a rigid registered nurse (RN) to patient ratio is implemented without flexibility to care for patients, MHA estimates it would reduce hospital care capacity by 15% and threaten care for 70,000 patients in Minnesota.

A MHA analysis also suggests that the proposed mandates would worsen the health care workforce crisis.

22

THE MINNESOTA HOSPITAL ASSOCIATION

There are currently 40,000 open positions in the healthcare sector, including over 5,000 open RN positions in Minnesota. Mandating a fixed RN to patient ratio during these shortages will inevitably lead to reduction in hospital services and a loss of needed hospital care for more than 70,000 patients annually.

23

THE MINNESOTA HOSPITAL ASSOCIATION

If a hospital cannot meet the mandated ratio, it will be forced to close units, hire traveling nurses, limit admissions and be unable to fulfil its mission of serving local communities with quality healthcare.

24

MINNESOTA NURSES ASSOCIATION

This Bill represents an act of desperation arising from nurses feeling like they are not safe from violence and work and as a result of inadequate staffing incapable of providing proper patient care.

25

MINNESOTA NURSES ASSOCIATION

- 2022, MNA survey of 950 nurse members about the challenges of violence against nurses and patients in Minnesota hospitals:
- 97 percent of nurses observed workplace violence in the last two years, including verbal abuse, intimidation, harassment, and physical violence.
- Only 47 percent reported these incidents to their employer, citing a lack of time, inadequate staffing, and lack of management action as the top barriers to reporting.

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MINNESOTA NURSES ASSOCIATION

- 75 percent of nurses cited chronic understaffing as a top risk factor for an unsafe work environment, second only to the risks that specific patients might present.
- 62 percent of nurses believe patient safety is at risk due to violence in Minnesota hospitals.
- 65 percent of nurses believe hospital executives have not adequately prepared them to prevent or respond to violence.

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MINNESOTA NURSES ASSOCIATION

Over half of all nurse respondents – 53 percent – have considered leaving their job or nursing entirely due to violence

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WHAT CAN WE DO?

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GUN SAFETY, RED FLAG LAWS

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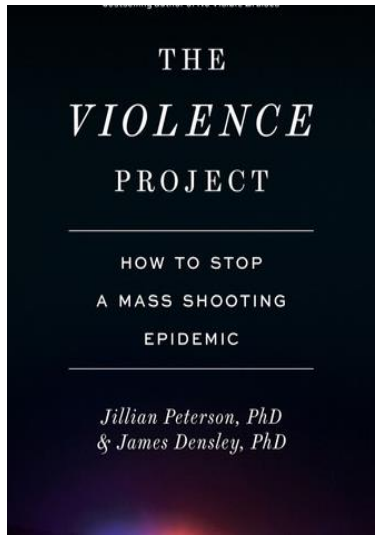

THE VIOLENCE PROJECT

Jillian Peterson, PhD and James Densley, PhD

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MASS PUBLIC SHOOTINGS ARE OCCURRING MORE FREQUENTLY…

and they are deadlier than ever before.

32

97% OF MASS PUBLIC SHOOTERS ARE MEN.

33

MASS SHOOTERS ARE NOT MONSTERS

34

THE MENTAL HEALTH OF MASS SHOOTERS IS…

Complicated.

35

APPROXIMATELY 30% OF MASS SHOOTERS EXPERIENCED PSYCHOSIS, BUT PERPETRATORS WERE ONLY ACTING ON THEIR HALLUCINATIONS AND DELUSIONS IN ABOUT 10% OF CASES. HOWEVER,

MANY MASS PUBLIC SHOOTERS WERE SUICIDAL.

36

80% OF MASS SHOOTERS

were in a noticeable crisis

prior to their crimes

37

38

WHAT WE ARE DOING TO STOP THESE TRAGEDIES IS NOT WORKING

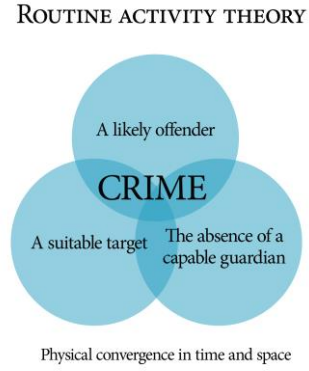
THERE HAVE BEEN MORE MASS SHOOTINGS

THAN DAYS IN 2023

163 as of April 17

39

WHAT WE ARE DOING TO STOP THESE TRAGEDIES IS NOT WORKING



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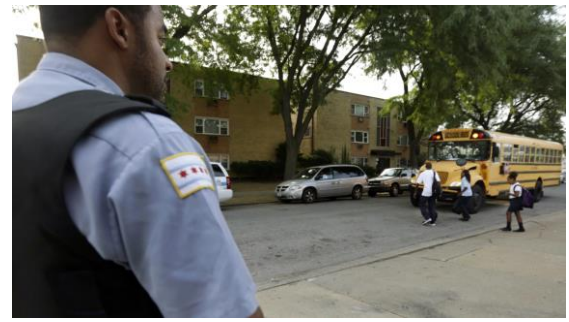

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WHAT WE ARE DOING TO STOP THESE TRAGEDIES IS NOT WORKING

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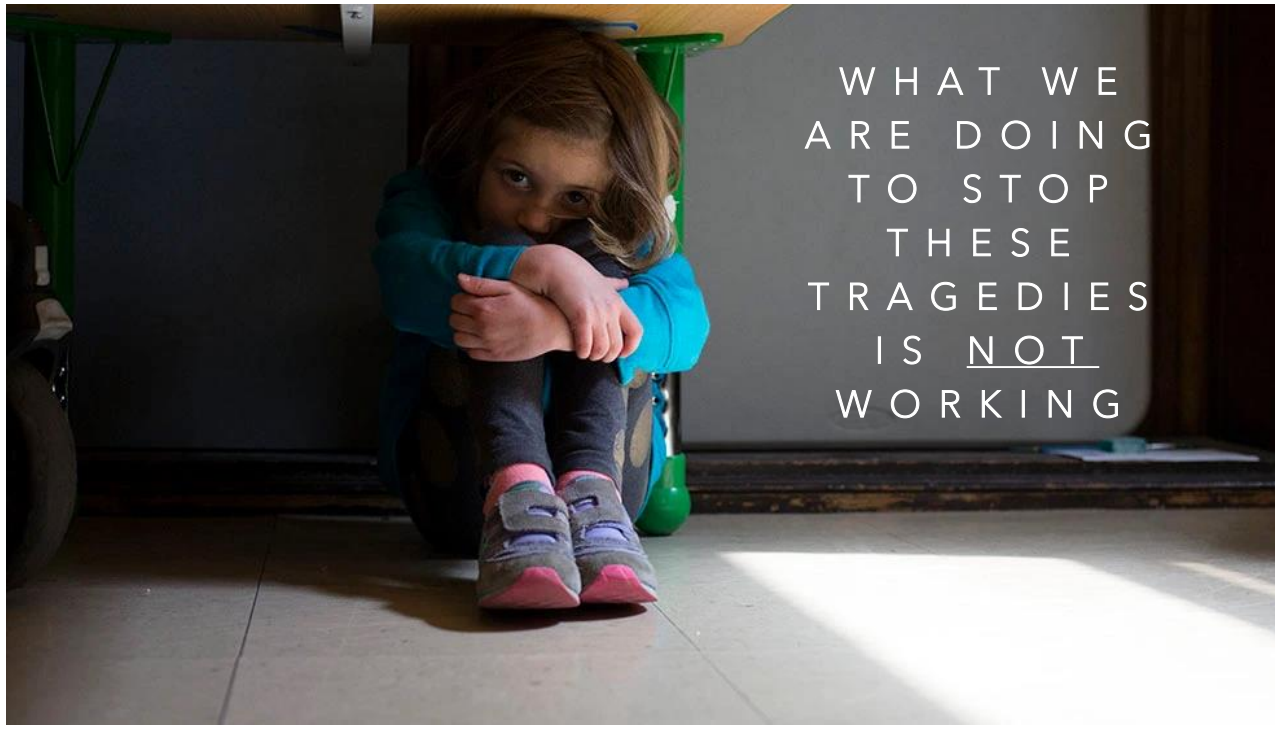

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EVIDENCE SHOWS THAT TEMPORARILY REMOVING GUNS FROM PEOPLE IN CRISIS CAN REDUCE THE RISK OF FIREARM SUICIDE

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RESEARCH SHOWS THAT ACCESS TO A FIREARM TRIPLES A PERSON'S RISK OF DEATH BY SUICIDE

45

EXTREME RISK PROTECTION ORDERS

"RED FLAG LAWS"

46

HEALTH RECORDS

(l) All health records and other health information provided in a petition or considered as evidence in a proceeding under sections 624.7171 to 624.7178 shall be protected from public disclosure but may be provided to law enforcement agencies as described in this section.

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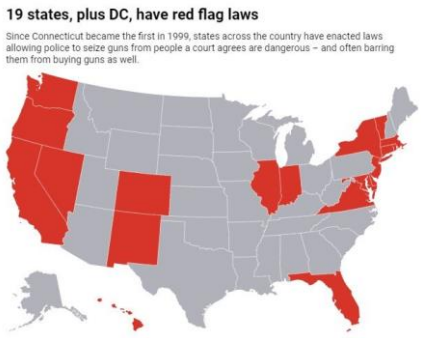

RED FLAG LAWS

Nineteen states now allow the removal of firearms from gun owners when there is a risk of violence. That means as of mid-2022, nearly half of the United States' population lived in a state with an extreme risk law.

48

DO RED FLAG LAW HELP PREVENT SUICIDE?

FOR EVERY 10 TO 20 RED FLAG ORDERS THAT ARE ISSUED, YOU REDUCE THE TOTAL NUMBER OF SUICIDES BY ONE

49

DO RED FLAG LAW HELP PREVENT SUICIDE?

After **Connecticut** increased its enforcement of its Extreme Risk law, one study found the law to be associated with a 14 percent reduction in the state's firearm suicide rate

50

DO RED FLAG LAW HELP PREVENT SUICIDE?

In the 10 years since **Indiana** passed its Extreme Risk law in 2005, the state's firearm suicide rate decreased by 7.5 percent

51

DO RED FLAG LAW HELP PREVENT SUICIDE?

Like Connecticut, another study estimated that Indiana's Extreme Risk law averted one suicide for approximately every 10 guns removed.

52

DO RED FLAG LAW HELP PREVENT MASS SHOOTINGS?

When it comes to preventing mass shootings, the numbers aren't as clear regarding the effectiveness of Red Flag Laws, in part, because mass shootings occur less frequently than suicides

53

DO RED FLAG LAW HELP PREVENT MASS SHOOTINGS?

A study in **California** details 21 cases in which a Gun Violence Restraining Order (GVRO)—California's name for an Extreme Risk order—was used in efforts to prevent mass shootings.

54

DO RED FLAG LAW HELP PREVENT MASS SHOOTINGS?

In **Maryland**, an Extreme Risk law passed in 2018 has been invoked in at least four cases involving "significant threats" against schools, according to the leaders of the Maryland Sheriffs' Association

55

DO RED FLAG LAW HELP PREVENT MASS SHOOTINGS?

Florida passed its Extreme Risk law in 2018, and the law has been invoked in multiple cases of potential school violence, including in one case involving a student who was accused of stalking an ex-girlfriend and threatening to kill himself. The law was also invoked in another case in which a potential school shooter said killing people would be "addicting."

56

DO RED FLAG LAW HELP PREVENT MASS SHOOTINGS?

In **Seattle**, a coalition of city and county officials launched a regional firearms enforcement unit that supports, tracks, and enforces all firearm surrender orders issued within the county. In the unit's first year, it recovered 200 firearms as a result of 48 ERPOs.

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WHAT WE CAN DO

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WHAT WE CAN DO

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WHAT WE CAN DO

As a Society

Trauma: ***We can*** teach social emotional learning in schools. Build a stronger social safety net with adequate jobs, childcare, maternity, leave, health, insurance, and access to higher education.

Crisis: ***We can*** reduce stigma and increase knowledge of mental health; open access to high-quality mental health treatment; fund counselors in schools.

Social proof: ***We can*** insist on notoriety protocols; hold media and social media companies accountable for their content.

Opportunity: ***We can*** insist on universal background checks, red flag laws, permit to purchase, magazine limits, wait periods, ban on assault rifles.

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SOLVING THESE PROBLEMS WILL REQUIRE MULTIFACETED SOLUTIONS

62

IMPERFECTIONS DO NOT RENDER SOLUTIONS COMPLETELY USELESS

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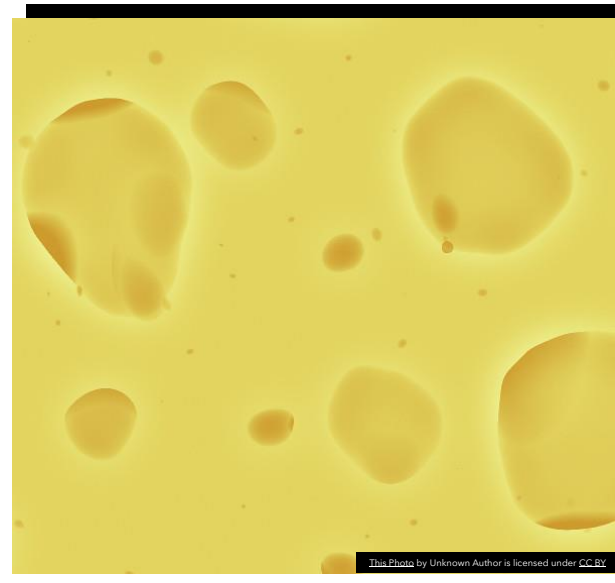
IMPERFECTIONS DO NOT RENDER SOLUTIONS COMPLETELY USELESS

"As with Swiss cheese, there are holes – but if you layer the slices, one on top of the other, the holes start to get covered up. And layering imperfect solutions, holistically, is the only way to prevent mass violence."

– Jillian Peterson



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THANK YOU!