

# Attacks on emergency room workers prompt debate over tougher penalties

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Patients hurl verbal abuse at Michelle Ravera every day in the emergency room. Physical violence is less common, she said, but has become a growing threat.

Ravera, an ER nurse at Sutter Medical Center in Sacramento, recalled an incident in which an agitated patient wanted to leave. "Without any warning he just reached up, grabbed my glasses, and punched me in the face," said Ravera, 54. "And then he was getting ready to attack another patient in the room." Ravera and hospital security guards subdued the patient so he couldn't hurt anyone else.

Violence against health care workers is on the rise, including in the ER, where tensions can run high as staff juggle multiple urgent tasks. COVID-19 only made things worse: With routine care harder to come by, many patients ended up in the ER with serious diseases—and brimming with frustrations.

In California, simple assault against workers inside an ER is considered the same as simple assault against almost anyone else, and carries a maximum punishment of a \$1,000 fine and six months in jail. In contrast, simple assault against emergency medical workers in the field, such as an EMT responding to a 911 call, carries maximum penalties of a \$2,000 fine and a year in jail. Simple assault does not involve the use of a deadly weapon or the intention to inflict serious bodily injury.

State Assembly member Freddie Rodriguez, who worked as an EMT, has authored a bill to make the punishments consistent: a \$2,000 fine and one year in jail for simple assault on any on-the-job emergency health care worker, whether in the field or an ER. The measure would also eliminate the discrepancy for simple battery.

Patients and family members are assaulting staff and "doing things they shouldn't be doing to the people that are there to take care of your loved ones," said Rodriguez, a Democrat from Pomona. The bill passed the state Assembly unanimously in January and awaits consideration in the Senate.

Rodriguez has introduced similar measures twice before. Then-Gov. Jerry Brown vetoed one in 2015, saying he doubted a longer jail sentence would deter violence. "We need to find more creative ways to protect the safety of these critical workers," he wrote in his veto message. The 2019 bill died in the state Senate.

Rodriguez said ERs have become more dangerous for health care workers since then and that "there has to be accountability" for violent behavior. Opponents fear stiffer penalties would be levied disproportionately on patients of color or those with developmental disabilities. They also point out that violent patients can already face penalties under existing assault and battery laws.

Data from the California Division of Occupational Safety and Health shows that reported attacks on ER workers by patients, visitors, and strangers jumped about 25% from 2018 to 2023, from 2,587 to 3,238. The rate of attacks per 100,000 ER visits also increased.

Punching, kicking, pushing, and similar aggression accounted for most of the attacks. Only a small number included weapons.

These numbers are likely an undercount, said Al'ai Alvarez, an ER doctor and clinical associate professor at Stanford University's Department of Emergency Medicine. Many hospital staffers don't fill out workplace violence reports because they don't have time or feel nothing will come of it, he said.

Ravera remembers when her community rallied around [health care workers](#) at the start of the pandemic, acting respectfully and bringing food and extra N95 masks to workers.

"Then something just switched," she said. "The patients became angrier and more aggressive."

Violence can contribute to burnout and drive workers to quit—or worse, said Alvarez, who has lost colleagues to suicide, and thinks burnout was a key factor. "The cost of burnout is more than just loss of productivity," he said. "It's loss of human beings that also had the potential to take care of many more people."

The National Center for Health Workforce Analysis projects California will experience an 18% shortage of all types of nurses in 2035, the third worst in the country.

Federal legislation called the Safety From Violence for Healthcare Employees Act would set sentences of up to 10 years for assault against a health care worker, not limited to emergency workers, and up to 20 years in cases involving dangerous weapons or bodily injury. Though it was introduced in 2023, it has not yet had a committee hearing.

Opponents of the California bill, which include ACLU California Action, the California Public Defenders Association, and advocates for people with autism, argue it wouldn't deter attacks—and would unfairly target certain patients.

"There's no evidence to suggest that increased penalties are going to meaningfully address this conduct," said Eric Henderson, a legislative advocate for ACLU California Action. "Most importantly, there are already laws on the books to address assaultive conduct."

Beth Burt, executive director of the Autism Society Inland Empire, said the measure doesn't take into account the special needs of people with autism and other developmental disorders.

The smells, lights, textures, and crowds in the ER can overstimulate a person with autism, she said. When that happens, they can struggle to articulate their feelings, which can result in a violent outburst, "whether

it's a 9-year-old or a 29-year-old," Burt said.

She worries that hospital staff may misunderstand these reactions, and involve law enforcement when it's not necessary. As "a parent, it is still my worst fear" that she'll get a phone call to inform her that her adult son with autism has been arrested, she said.

Burt would rather the state prioritize de-escalation programs over penalties, such as the [training programs](#) for first responders she helped create through the Autism Society Inland Empire. After implementing the training, hospital administrators asked Burt to share some strategies with them, she said. Hospital security staffers who do not want to use physical restraints on autistic patients have also sought her advice, she said.

Supporters of the bill, including health care and law enforcement groups, counter that people with mental health conditions or autism who are charged with assault in an ER may be eligible for existing programs that provide mental health treatment in lieu of a criminal sentence.

Stephanie Jensen, an ER nurse and head of governmental affairs for the Emergency Nurses Association, California State Council, said her organization is simply arguing for equity. "If you punch me in the hospital, it's the same as if you punch me on the street," she said.

If lawmakers don't act, she warned, there won't be enough workers for the patients who need them.

"It's hard to keep those human resources accessible when it just seems like you're showing up to get beat up every day," Jensen said. "The emergency department is taking it on the chin, literally and figuratively."

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