



# KHA GUIDE TO WORKPLACE SAFETY & *Kentucky's Violence Felony Law and Resources*



**Kentucky  
Hospital  
Association**

*Helping Hospitals  
Serve Their Patients  
and Communities*



## ▶ INTRODUCTION

Workplace violence (WPV) is an unfortunate, difficult, and multi-faceted issue experienced in the hospital and other healthcare settings. Healthcare professionals experience a variety of behaviors, including physical assaults, verbal abuse, and psychological threats by patients, family members, visitors, and even colleagues. KHA's Guide serves to provide updated information about laws and other resources for our members to best serve and protect their heroic staff and the patients they serve.

As a concise definition, the Occupational Safety and Health Administration defines WPV as "any act or threat of physical violence, harassment, intimidation, or other threatening disruptive behavior that occurs at the work site."

In 2024, as detailed in this guide, Kentucky passed sweeping legislation, KRS § 508.025, to help protect healthcare professionals from WPV. These felony protections extend beyond the emergency department to the entire hospital setting, doctor offices, immediate care centers, long-term care facilities, and more.

**KHA recommends hospital leaders to meet with local prosecutors and law enforcement to ensure their awareness of the new law and familiarize them with the hospital setting via a tour and providing floor plans.** Even if a person is not prosecuted, the statute ensures that law enforcement should respond to calls for an emergency and arrest and/or remove the person from the premises.

### This document contains the following:

- ▶ **Overview Includes Prevalence and Impact of WPV, Risk Factors, and Actionable Strategies** ..... Page 3
- ▶ **Review of Kentucky's Felony Protection Statute for Hospitals, Doctor Offices, and Medical Clinics with Questions & Answers and a Sample Policy** ..... Page 5
- ▶ **KHA's Safety Awareness Posters** ..... Page 11
- ▶ **KHA's example Code of Safety Conduct** ..... Page 12
- ▶ **Additional Resources - Includes relevant Kentucky laws, federal and other guidance materials, and training and awareness information from KHA's WPV safety partner AVADE®** ..... Page 13



## ▶ PREVALENCE AND IMPACT

**Healthcare workers are disproportionately affected by workplace violence.** According to Time magazine, “data shows American health care workers now suffer more nonfatal injuries from workplace violence than workers in any other profession, including law enforcement.” (Time, August 7, 2023)

The following statistics illustrate the severity of this crisis (Healthcare Finance, June 2023):

- 40% of healthcare workers have experienced at least one incident of workplace violence within the past two years.
- 60% of healthcare workers who experienced violence identified themselves as bedside nurses.
- 34% of those nurses reported emotional or verbal violence.
- 66% experienced physical or sexual violence. Survey respondents who provided details:
  - 51% said they dealt with a combative patient.
  - 62% of respondents endured scratching, biting and hitting while dealing with a combative patient
  - 21% said the patient threw objects
  - 14% indicated sexual assault or harassment

Such incidents not only jeopardize the safety and well-being of healthcare professionals but also adversely affect the quality of patient care, leading to increased absenteeism, reduced job satisfaction, and higher turnover rates.

## ▶ RISK FACTORS

**Several factors contribute to the heightened risk of WPV in healthcare settings:**

- **Patient-Related Factors:** Patients with cognitive impairments, psychiatric conditions, intense stress, or under the influence of drugs or alcohol may exhibit aggressive behaviors.
- **Environmental Factors:** Overcrowded emergency departments, long waiting times, poor communication and status updates, and inadequate security measures can escalate tensions.
- **Organizational Factors:** Lack of training in de-escalation techniques, periods of understaffing, communication lapses between staff, and insufficient reporting procedures can exacerbate the risk.

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## ▶ ACTIONABLE STRATEGIES

Healthcare institutions can adopt the following measures to address WPV effectively:

- 1. Comprehensive Training:** Regularly train staff on recognizing early signs of aggression, de-escalation techniques, and personal safety measures.
- 2. Environmental Modifications:** Enhance security through controlled access points, surveillance systems, and design modifications that reduce isolated work areas.
- 3. Robust Reporting Systems:** Establish non-punitive and easy-to-use reporting program to encourage documentation of all incidents, facilitating data-driven interventions.
- 4. Support Systems:** Provide empathetic post-incident support, including counseling services beyond the standard EAP, to address potential psychological impacts on staff.

By implementing these strategies in alignment with regulatory guidelines, hospitals can create a safer work environment, thereby improving staff well-being and ensuring higher standards of patient care.

# KENTUCKY'S WORKPLACE VIOLENCE FELONY LAW

## *An Executive Guide for Kentucky's Hospitals*



In 2024 Kentucky amended KRS § 508.025 and made it a felony crime to assault a health care worker in a health care setting. Under the new law, a person who assaults a health care worker at a health care location is guilty of third-degree criminal assault and may go to prison for a minimum of one (1) year and a maximum of (5) years. These enhanced penalties are intended to provide a strong deterrent against acts of violence on hospital campuses and physician clinics.

To empower Kentucky's hospitals in protecting their health care workers, the Kentucky Hospital Association offers this executive guide with practical tips for understanding and applying Kentucky's heightened criminal protections for health care workers assaulted in the workplace. As with all legal matters, Kentucky hospitals are encouraged to seek legal counsel when interpreting and applying laws in hospital operations.<sup>1</sup>

### ▶ **BACKGROUND**

Historically, Kentucky laws allowed felony assault claims only for acts of violence against health care providers that occur in a hospital emergency room. Given the rise of violence occurring in all areas of hospitals and health care offices, the KHA launched a legislative initiative calling for enhanced criminal penalties to protect all health care workers in a wider range of health care settings.

In 2024, the Kentucky General Assembly enacted House Bill (HB) 194, which added language to KRS § 508.025 to expand the scope of protections for Kentucky's health care workers. With the passage of HB 194, KRS § 508.025 now states, in relevant part:

A person is guilty of assault in the third degree when the actor recklessly, with a deadly weapon or dangerous instrument, or intentionally causes or attempts to cause physical injury to a healthcare provider as defined in KRS 311.821 or other person employed by or under contract with a health clinic, doctor's office, dental office, long-term care facility, hospital, or a hospital-owned or affiliate outpatient facility, if the event occurs in or on the premises of a health clinic, doctor's office, dental office, long-term care facility, hospital, or a hospital-owned or affiliate outpatient facility.

An assault against a health care worker in a health care setting is a Class D felony. Class D felonies are punishable with imprisonment for at least one (1) year, but not more than five (5) years.<sup>2</sup> The legislative changes protecting health care workers from acts of violence went into effect July 15, 2024.<sup>3</sup>

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<sup>1</sup> This Executive Guide is for informational purposes only and should be neither considered as legal advice nor used as such. The Kentucky Hospital Association assumes no responsibility or liability, express or implied, for errors or omissions of any kind.

<sup>2</sup> KRS § 532.020.

<sup>3</sup> Kentucky OAG 24-04 (April 18, 2024).



## ▶ COMMONLY ASKED QUESTIONS

### Q. In what circumstances will the enhanced criminal protections of KRS § 508.025 apply?

A. The stiffer criminal penalties of KRS § 508.025 are broad, but there are limits. Generally, the enhanced criminal penalties apply only when health care workers are physically injured from an assault that occurs on health care premises.

### Q. Do the enhanced criminal protections apply to assaults on any health care worker?

A. As a practical matter, yes. KRS § 508.025 borrows the definition of “healthcare provider” from KRS § 311.821, which is very broad. This statute includes the expected list of health care workers, such as physicians, nurses and other licensed or certified health care professionals, but the definition goes further to include “any individual who may be asked to participate in any way in a healthcare service” or “any professional, paraprofessional, or any other person who furnishes or assists in the furnishing of healthcare services”. Additionally, KRS § 508.025 clarifies that health care workers are protected under the law regardless of whether they are employees or contractors.

### Q. What health care settings are covered by KRS § 508.025?

A. The law is specific as to which health care settings qualify for enhanced criminal protections. Assaults against a health care worker at any of the following health care settings are specifically covered under the law:

- Hospitals,
- Hospital-owned or affiliated outpatient facilities,
- Health clinics,
- Doctor’s offices,
- Dental offices, and
- Long-term care facilities

The law does not further define these health care settings, so there may be some ambiguity as to what constitutes a “health clinic” or “doctor’s office” in certain circumstances. Regardless, a hospital is likely to have a reasonable argument that any patient-facing setting that is owned or affiliated by a hospital may be a covered location under the statute.

### Q. What type of conduct constitutes “assault” under KRS § 508.025?

A. The statute defines the crime of “third-degree assault” as any action that causes, or attempts to cause, physical injury to another person and where the action is either intentional or reckless because it involves a deadly weapon or dangerous instrument. As a practical matter, whether an action constitutes “third-degree assault” may depend upon whether the facts of the assault fit within one of three (3) scenarios:

1. A person intentionally caused physical injury to a health care worker at a covered health care location

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2. A person recklessly caused physical injury to a health care worker at a covered health care location using a deadly weapon or dangerous instrument; or
3. A person attempted to cause physical injury to a health care worker at a covered health care location.<sup>4</sup>

If the facts of an assault align with one of the three scenarios described above, then the perpetrator of the assault may be prosecuted for felony third-degree assault under the enhanced criminal penalties of KRS § 508.025.

It should be remembered that law enforcement officials possess ultimate discretion in determining whether a person's actions constitute third-degree assault. Hospitals would be wise to seek the assistance of legal counsel when reporting an alleged assault to law enforcement.

**Q. What should hospital leaders do if a health care worker is assaulted on a health care premises?**

- A.** After any allegation of assault in a health care setting, a hospital's first priorities are to provide care for any injured person and restore safety to the health care environment. Once these priorities are addressed, a hospital should perform a preliminary investigation to understand the facts and circumstances surrounding the alleged assault of a health care worker on the health care premises.

Seek answers to the following questions:

- Was the victim a health care provider, employee or contractor?
- Did the assault occur on a health care premises?
- Did the assault involve a deadly weapon or dangerous instrument? If so, then the person may have acted recklessly under the statute.
- Are there facts that indicate the perpetrator "intended" to cause physical injury to the health care worker?
- If the perpetrator was a patient, consider the following:
  - Did the patient have a physical or mental condition that made him/her incapable of understanding the consequences of his/her actions?
  - Was the patient under the influence of any prescribed or illegal drugs that made him/her incapable of understanding the consequences of his/her actions?
- Was the health care worker acting within the scope of his/her employment at the time of the alleged assault?
- Does the health care worker want to inform law enforcement of the assault? If so, the hospital can assist the health care worker in reporting the assault to law enforcement.

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<sup>4</sup> See *Higgins v. Commonwealth*, No. 2003-SC-000639-MR, 2005 Ky. Unpub. LEXIS 17, at \*8 (Nov. 23, 2005).



**Q. Are hospitals required to report an assault of a health care worker to law enforcement?**

**A.** As a general rule, Kentucky hospitals should consider reporting to law enforcement any assault that occurs on a health care premises. However, Kentucky hospitals should discuss any allegation of assault with legal counsel to analyze whether the facts and circumstances of an allegation are reportable and to what government agencies a report should be made.

**Q. Should hospital update policies and procedures in response to KRS § 508.025?**

**A.** The enhanced criminal penalties of KRS § 508.025 apply to assaults on health care workers in health care settings. This fact necessarily means that law enforcement agencies may ask health care leaders to participate in the prosecution of a perpetrator that occurs on hospital premises. Hospitals should consider whether their existing workplace violence policies take into consideration the application and impact of KRS § 508.025. A sample policy is included in this guide as a helpful resource.





**Caveat:** *The following outline is offered as a resource for hospitals to develop a hospital workplace violence prevention policy. Hospitals should seek to assure that any final policy can be effectively implemented. Finally, hospitals should perform their own research and analysis to assure the final policy complies with any applicable accreditation standards, federal and state OSHA requirements and any local or state laws regarding workplace violence.*

## ▶ [HOSPITAL] WORKPLACE VIOLENCE PREVENTION POLICY<sup>5</sup>

1. **Introduction.** [Hospital] is committed to providing a safe and secure work environment for all employees, patients, and visitors. Workplace violence is unacceptable and will not be tolerated under any circumstances. This policy outlines [Hospital Name]’s commitment to preventing workplace violence and sets forth procedures to address and mitigate incidents should they occur.
2. **Scope.** This policy applies to all employees, contractors, volunteers, patients, visitors, and anyone else conducting business on [Hospital] premises.
3. **Workplace Violence.** Workplace violence refers to any act or threat of physical violence, harassment, intimidation, or other threatening behavior that occurs within or outside the workplace and that can cause harm to employees, patients, visitors, or property.
4. **Responsibilities.**
  - 4.1. **Management:** [Hospital] management is responsible for fostering a culture of respect and zero-tolerance for workplace violence. [Hospital] is committed to providing adequate resources, training, and support to prevent and address incidents of workplace violence.
  - 4.2. **Employees:** All employees are responsible for adhering to this policy, reporting any incidents or threats of violence promptly, and cooperating with investigations as required.
  - 4.3. **Security Personnel:** Security personnel are responsible for enforcing safety protocols, responding to incidents of violence, and implementing preventative measures to minimize risks.
5. **Prevention Measures.**
  - 5.1. **Risk Assessment:** [Hospital] will conduct regular risk assessments to identify potential areas of concern and implement appropriate measures to mitigate risks.

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<sup>5</sup> Borrowed and adapted from South Dakota Hospital Association, <https://sdaho.org>



**5.2. Training:** All employees will receive training on recognizing and preventing workplace violence, de-escalation techniques, and reporting procedures.

**5.3. Security Measures:** [Hospital] will maintain adequate security measures, such as surveillance cameras, access controls, and security personnel, to deter and respond to violent incidents.

**5.4. Workplace Design:** [Hospital] will design workspaces with safety in mind, ensuring adequate lighting, clear sightlines, escape routes, and secure entry and exit points.

**5.5. Communication:** [Hospital] will establish channels for employees to report concerns or incidents of workplace violence confidentially and without fear of retaliation.

## 6. Response Procedures.

**6.1. Reporting:** Any employee who witnesses or experiences workplace violence must report it immediately to their supervisor, security, or human resources department.

**6.2. Investigation:** [Hospital] will promptly investigate all reports of workplace violence, ensuring confidentiality and impartiality throughout the process.

**6.3. Support:** [Hospital] will provide support services to employees affected by workplace violence, including counseling, medical assistance, and legal guidance as necessary.

**6.4. Disciplinary Action:** Perpetrators of workplace violence will be subject to disciplinary action, up to and including termination of employment, and may face legal consequences depending on the severity of their actions.

**6.5. Report to Law Enforcement.** Perpetrators of violence against health care workers on a health care premises may be subject to enhanced criminal penalties under Kentucky law. If a [Hospital] employee, contractor, or volunteer is the victim of an assault on [Hospital] premises, [Hospital] will assist the victim in evaluating whether the assault qualifies for enhanced criminal penalties and will assist the victim in reporting the alleged assault to appropriate law enforcement authorities.

**7. Review and Revision.** This policy will be reviewed annually and updated as necessary to ensure its effectiveness and compliance with relevant laws and regulations.



**Our hospital is a healing place. Help keep it safe.**

**VIOLENCE AGAINST HEALTH CARE WORKERS IS A FELONY.**

Our caregivers vow to provide you and your loved ones with the best care possible. Any threat or assault towards our staff or volunteers is subject to enhanced fines and prosecution as part of Kentucky Revised Statute 508.025.



## PATIENTS & VISITORS

We have **zero** tolerance for acts of aggression:

- Physical assault or threats of harm
- Abusive or disrespectful language
- Verbal harassment or bullying
- Refusing to respond to staff instructions

**Aggressive behavior prevents us from providing quality care.**

**VIOLENCE AGAINST HEALTH CARE WORKERS IS A FELONY.**



Hospitals can download these posters to print and post from the link below. KHA will produce additional posters with different backgrounds and messages.

**Workplace Violence Prevention Posters**

# CONFIDENTIAL

## KENTUCKY HOSPITAL SAFETY CODE OF CONDUCT

Our hospital is committed to maintain a safe, inclusive, and respectful environment for our staff, patients, and visitors.

Offensive, abusive, or violent language or behavior threatens the safety of our staff and distracts from the treatment of our patients and could lead to criminal prosecution under Kentucky law.

### Violations include, but are not limited to:

- Disrespectful, aggressive, abusive, or violent behaviors or actions towards staff, patients, and visitors.
- Threatening, discriminatory, bullying, or offensive language towards staff, patients, and visitors.
- Possession of weapons or firearms.
- Taking photos or videos of patients, visitors, and/or staff without permission.



View Kentucky Revised Statute 508.025 by scanning the QR code

**Alert hospital staff immediately if you witness or are a victim of behaviors or actions that violate our Code of Safety Conduct. Retaliation for reporting a violation is prohibited.**

### All violations will be addressed by hospital staff and management:

- Anyone found violating the Code of Safety Conduct may be asked to leave and future visits may be restricted.
- Patients violating the Code of Safety Conduct may be asked to continue their care plan elsewhere.
- The hospital may report violations to law enforcement for criminal prosecution.

Patient Name (print)

Signature

Date

Hospital Representative (print)

Signature

Date

Facility Logo





# ADDITIONAL RESOURCES



## ▶ KENTUCKY STATUTES

- **KRS 508.025** - Assault in the third degree (as referenced above):  
<https://apps.legislature.ky.gov/law/statutes/statute.aspx?id=54935>
- **KRS Ch. 216 – Kentucky Workplace Safety Laws**
  - Note the reporting exceptions listed in KRS 216.703(3)
- **701 Definitions for chapter.**
- **.703 Cabinet for Health and Family Services to establish guidelines for developing workplace safety assessment -- Cabinet to audit health facilities for compliance -- Standards for compliance.**
- **.705 Health facilities to develop and execute workplace safety assessment -- Requirements.**
- **.707 Annual violence prevention training -- Guidelines -- Requirements -- Basic protective skills competency test for health care workers.**
- **.709 Reporting system for acts of workplace violence -- Recordkeeping -- Procedures to follow up with and support victims of workplace violence.**

## ▶ AVADE® - KHA'S WPV TRAINING PARTNER

KHA has partnered with a Joint Commission-accredited workplace violence prevention company, AVADE. Incidents in the workplace are inevitable, being victimized isn't. Proper awareness training prepares staff to be ready, responsible, and capable.

### Videos:

- [AVADE Workplace Violence Prevention Information](#)
- [AVADE Instructor Course: Highlight Reel](#)

### Course Outlines and Guides:

- [The PLAN – Building a Safe Workplace](#)
- [Workplace Violence Prevention Course Objectives](#)
- [AVADE Behavioral Health Instructor Course Outline](#)
- [Modules & Objectives](#)
- [Healthcare Training Flyer](#)
- [Joint Commission Compliance Alignment Guide](#)

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## ▶ AMERICAN HOSPITAL ASSOCIATION

Building a Safe Workplace and Community: Violence Mitigation in a Culture of Safety

This [issue brief](#) examines how hospitals' violence mitigation efforts can fit effectively into an organization's culture of safety strategy.

The [Hospitals Against Violence Initiative \(HAV\)](#) is sharing examples and best practices with the field, with a particular emphasis on youth violence prevention, workplace violence prevention and combatting human trafficking. Also see:

- [Fact Sheet: Workplace Violence and Intimidation, and the Need for a Federal Legislative Response](#)
- [Building a Safe Workplace and Community: Mitigating the Risk of Violence](#)
- [Video: Hospitals Can Be Part of the Solution](#)

## ▶ OCCUPATIONAL SAFETY AND HEALTH ADMINISTRATION

- [OSHA Alliance Resources](#)
- [Health Care Workplace Violence](#)
- [OSHA Enforcement](#)
- [OSHA Guidance](#)
- [OSHA Guidelines for Preventing Workplace Violence for Healthcare and Social Service Workers \(PDF\)](#)

The Guidelines describe the five components of an effective workplace violence prevention program, with extensive examples.

- [Workplace Violence Safety and Health TOPICS](#)
- [Health Care Wide Hazards: Workplace Violence](#) – This is a set of OSHA eTools for the hospital setting. It contains a variety of health care setting specific sections.
- [Hospital eTool Workplace Violence Checklist](#) – This is an example of a checklist that an employer might use or modify to help identify potential workplace violence problems.
- [Hospital eTool Workplace Violence Incident Report Form](#) – This is an example of a form which an employer might use or modify to help report a potential workplace violence problem.

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## ▶ CDC NIOSH WEBSITE ON WORKPLACE SAFETY & HEALTH

- [Violence on the Job](#)

This video discusses practical measures for identifying risk factors for violence at work, and taking strategic action to keep employees safe.

- [NIOSH on EMS Workers](#)
- [NIOSH on Hazardous Drug Exposures in Health Care](#)
- [NIOSH on Health and Safety Practices of Health Care Workers](#)
- [NIOSH on Health Care Workers](#)
- [NIOSH on Occupational Violence](#)
- [NIOSH on Stress at Work](#)

## ▶ JOINT COMMISSION

- [R3 Report: Requirement, Rationale, Reference](#) – Workplace Violence Prevention Standards
- [Workplace Violence Prevention Resources](#)
- [The Joint Commission's New and Revised Workplace Violence Prevention Standards for Hospitals](#)

## ▶ OTHER RESOURCES

- [Workplace Violence Training Programs for Health Care Workers: An Analysis of Program Elements](#) (SAGE Journals)
- [Active Shooter Planning and Response in a Healthcare Setting](#) (FBI.gov)
- [What to Do If There's an Active Shooter at Your Healthcare Facility](#) (Nurses Service Organization)
- [Workplace Violence: Hospitals](#) (Centers for Medicare & Medicaid Services)
- [Helping Victims of Mass Violence and Terrorism Toolkit](#) (US Office for Victims of Crime)