#14704 (eff 11-20-26)

Adopt Lab 1800 to read as follows:

CHAPTER Lab 1800 HEALTH CARE WORKPLACE VIOLENCE PREVENTION PROGRAM

Statutory Authority: RSA 277-C and RSA 151-J

PART Lab 1801 PURPOSE

Lab 1801.01 Purpose. The purpose of this chapter is to carry out the mandates of RSA 277-C and 151-J relative to compilation and reporting of health care workplace violence data by health care facilities to the New Hampshire health care workplace safety commission, and confidentiality of that reported data.

PART Lab 1802 DEFINITIONS

Lab 1802.01 “Attempted physical assault” for the purposes of this chapter means an individual tries to physically harm another person but does not make actual contact to the person’s body.

Lab 1802.02 “Clinical contributing factor” for the purposes of this chapter means the event was primarily caused by the patient’s clinical condition or diagnosis, such as delirium, dementia, and other neurologically based conditions such as emergence from anesthesia.

Lab 1802.03 “Commission” means the health care workplace safety commission as established by RSA 151-J:1.

Lab 1802.04 “Completed physical assault” for the purposes of this chapter means an act of aggression resulting in physical contact, whether or not it caused the person bodily injury, pain, or distress. This contact can be any form of direct physical interaction or the use of an object as a weapon.

Lab 1802.05 “Department” means the New Hampshire department of labor.

Lab 1802.06 “Development disability contributing factor” for the purposes of this chapter means the event was primarily influenced by the individual’s developmental disability which may affect their ability to regulate emotions, understand social cues, or communicate effectively leading to frustration, misinterpretation, or difficulty resolving conflicts in a nonviolent manner.

Lab 1802.07 “Emotional event” for the purposes of this chapter means the event was primarily caused by strong feelings or emotions, such as anger, frustration, or anxiety.

Lab 1802.08 “Emotional trauma” for the purposes of this chapter means trauma caused by an event where the victim was not physically impacted, but the victim required time off to recover. The victim can be formally referred to a mental health professional using existing emotional support, employee assistance program, or self-refer to emotional support treatment and must also be unable to return to work.

Lab 1802.09 “Health facility” means “health facility” as defined by RSA 277-C:1, I.

Lab 1802.10 “Hostile words” means “hostile words” as defined in RSA 277-C:1, III.

Lab 1802.11 “Medical restraint” or “chemical restraint” for the purposes of this chapter means that a patient’s behavior or movement is managed or restricted by medication that is not a standard treatment or dosage for the patient’s condition or symptoms and used as a one-time order.

Lab 1802.12 “Mental health contributing factor” for the purposes of this chapter means the event was primarily attributed to a diagnosed mental health condition.

Lab 1802.13 “Minor injury” for the purposes of this chapter means an injury occurred which resulted in no physical or mental health treatment sought by the victim or the injury that occurred required only self-administered treatment by the victim.

Lab 1802.14 “Moderate injury” for the purposes of this chapter means an injury occurred where the victim required treatment that could not be self-administered. The victim is formally assessed by a medical team.

Lab 1802.15 “No injury” for the purposes of this chapter means an event occurred with no physical injury to the victim and no medical treatment was required.

Lab 1802.16 “Premeditated action” for the purposes of this chapter means the event was a result of the aggressor’s pre-planned actions.

Lab 1802.17 “Physical restraint” for the purposes of this chapter means any manual method, physical or mechanical device, material, or equipment that immobilizes or reduces the ability of a patient to move their arms, legs, body, or head freely.

Lab 1802.18 “Security involvement” for the purposes of this chapter means the active participation of security measures, personnel, or protocols at any time during the event.

Lab 1802.19 “Serious injury” for the purposes of this chapter means an injury occurred where the victim required formal evaluation by a medical team and treatment was provided that could not be self-administered and required time off for recovery.

Lab 1802.20 “Sexually inappropriate behavior” for the purposes of this chapter means any unwelcome conduct of a sexual nature that creates an intimidating, offensive, or uncomfortable environment but does not meet the criteria for sexual assault.

Lab 1802.21 “Substance-related” for the purposes of this chapter means the event was primarily caused by the patient’s active use of or withdrawal from drugs or alcohol.

Lab 1802.22 “Threat of harm” for the purposes of this chapter means verbal or non-verbal behaviors that convey a sense of danger where there is a credible risk or indication that individuals or property might be subjected to imminent danger, potential violence, or other forms of harm.

Lab 1802.23 “Workplace violence” means “workplace violence” as defined in RSA 277-C:1, II.

Part Lab 1803 SUBMISSION OF DATA

Lab 1803.01 Filing of Reports and Submissions. Each health facility shall be subject to the following requirements:

(a) Health facilities shall report incidents of workplace violence and hostile words to the department monthly as required by RSA 277-C:2, IV-a. Monthly reports of workplace violence and hostile words incidents shall be reported using the "Healthcare Workplace Violence Survey" (11/2026);

(b) Health facilities shall report annually all information as required under RSA 277-C:2, V, as well as any additional information deemed relevant by the health facility preparing such report;

(c) Reports as required by this section shall be submitted to the department via regular mail at 95 Pleasant Street, Concord, New Hampshire 03301 or via email to DOL.WPVReporting@dol.nh.gov; and

(d) Monthly reports as required by this section shall be submitted to the department at least one week prior to a noticed scheduled meeting but no later than the second Friday of every month.

Lab 1803.02 Content of Monthly Reports and Submissions. Reports and submissions shall comply with the following requirements:

(a) Monthly reports required by Lab 1803.01 shall be completed in full and include all information required by RSA 277-C:2, V(a). Health facilities shall use the form "Healthcare Workplace Violence Survey" (11/2026) when submitting monthly reports;

(b) Patient names and other identifiable personal information shall not be included in the monthly report. Nothing precludes a health facility from attaching a police report with identifiable personal information to the monthly report; and

(c) The department shall review all reports and submissions and shall issue a press release within 60 days of the end of each calendar year. This press release shall highlight the active participation of health care facilities and any major findings or recommendations.

Lab 1804 CONFIDENTIALITY OF RECORDS AND ANNUAL REPORTS

Lab 1804.01 Confidentiality. Records and annual reports shall be subject to the following requirements:

(a) All records, other than police reports, submitted to or collected by the commission directly or as delegated through the department are confidential and privileged in accordance with RSA 151-J:5 and shall be exempt from requests made pursuant to 91-A; and

(b) The annual report filed by the commission in accordance with RSA 151-J:7 shall not be confidential. Information about process or outcomes referenced in the commission's annual report shall be aggregate data only and shall protect confidentiality as required by RSA 151-J:5, without referring to individual patients, incidents, or health care providers and facilities.

APPENDIX

Rule	Specific State Statute the Rule Implements
Lab 1801.01	RSA 277-C:1; RSA 151-J
Lab 1802.01 through 1802.03	RSA 277-C:2; RSA 151-J:8
Lab 1803.01 through 1803.02	RSA 277-C:2; RSA 151-J:5; RSA 151:J:8
Lab 1804.01	RSA 277-C:2; RSA 151-J:5; RSA 151-J:7; RSA 151-J:8

Healthcare Workplace Violence Survey

Respondent Information

Hospital Name:	
Respondent Name:	
Respondent Title:	
Respondent Email:	
Respondent Phone:	

Directions and Overview

ENTER DESCRIPTION OF PURPOSE.

1) Report ALL events of hostile words, threat of harm, inadvertent injury sustained while preventing patient self-harm, attempted physical assault, no contact, completed physical assault, and sexually inappropriate behavior in the table belo
2) Submit only ONE survey per hospital. For systems with multiple hospitals, please return a separate survey for each hospital.
3) Please only respond with information from the prior calendar month.

Any questions regarding the survey or specific data elements should be directed to Shaelyn Rix at Shaelyn.E.Rix@dol.nh.gov or (603)-271-1004.

Comments

If you have any comments about this month's data, trends in events observed in your hospital, or would like to share new best practices etc., please use the box below to do so:

Enter any comments here

DATA SUBMISSION

In the table below, please record ALL events of hostile words, threat of harm, inadvertent injury sustained while preventing patient self-harm, attempted physical assault, no contact, completed physical assault, and sexually inappropriat

Please note, definitions and terms for all data elements can be found in the Definitions tab.

Note: Only complete as many entries as you have violations; remainder may be left blank.

	Date of Event (mm/dd/yyyy)	Time of Event	Type of Event	Type of Assault (If Applicable)	Location of Event	Contributing Factors - 1	Contributing Factors - 2 (If Applicable)	Contributing Factors - 3 (If Applicable)
Example:	*1/1/2024*	*7 AM - 3 PM*	*Completed Physical Assault*	*Punching*	*Emergency Department*	*Emotional / Situational*	*Substance-related*	

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behavior that occurred at your hospital during the previous month.

Level of Injury	Aggressor	Aggressor Age Range	Repeat Aggressor	Victim #1	Victim #2 (If Applicable)	Victim #3 (If Applicable)	Abatement / Act		
							Verbal Deescalation	Physical Restraint	Medical (Chemical) Restraint
Serious Injury – Medical Attention/Time Off Required	*Patient*	*Geriatric (60+)*	*Yes*	*Nurse*	*Aide/Tech*	*Security Officer*	*Yes*	*No*	*No*

tion Steps Taken			Descriptive Comments / Quotes
Trespassing / Ask to Leave (Visitor)	Security Involvement	Police Involvement	
Unknown	*Yes*	*Yes*	*Please utilize this section to document detailed comments or direct quotes from aggressors, victims, witnesses, or other parties involved in the event in order to capture the full scope/severity of the event.*

Workplace violence means any act or threat of physical violence, harassment, intimidation, or other threatening behavior.	
Data Metric	**Instructions and Definitions**
Counting Events	The data is to be collected for single events. **When to count an event as a single event:** An individual committing harm or abuse against one or more people in one continuous period of time. Inclusion: An aggressor hitting three nurses during a single act of violence. Note: If there are three different reports of the same event by different individuals, count it as one event. Exclusion: A patient harming three physicians at 3 different time periods in a day (each event should be counted separately). **When to count events as separate events:** An individual committing harm or abuse against one or more people at different periods of time throughout a day. Inclusion: A patient harming an individual, then after a period of time (ex: 30min later or when the scene is cleared), that patient harms the same or a different individual. Exclusion: A patient harming an individual, then harming another individual immediately afterwards.
Time of Event	Using the drop down, indicate during which shift the event was initiated. Shift options are 7am-3pm, 3pm-11pm, or 11pm-7am.
Type of Event	The types of events below are meant to capture what occurred at the event (the intent behind the event will be captured under contributing factors). Please note that when selecting an event type, please choose the highest level the event rose to. See definitions for each type of event below: **Hostile Words:** Aggressive and belligerent verbal abuse in which the recipient reasonably believes that the speaker intends to create excessive stress, or in which the recipient suffers actual psychological trauma. **Threat of Harm:** Verbal or non-verbal behaviors that convey a sense of danger where there is a credible risk or indication that individuals or property may be subjected to imminent danger, potential violence, or other forms of harm. Verbal threats of harm include spoken or written expressions that indicate an intention to inflict physical or emotional harm upon an individual or property. Non-verbal threats of harm refer to actions, gestures, or behaviors such as aggressive posturing, intimidating stares, brandishing weapons, or destructive gestures, all of which communicate an intention to inflict physical or emotional harm on an individual or property. **Inadvertent Injury Sustained While Preventing Patient Self Harm:** Any injury, physical or psychological, suffered by an individual intervening with a patient attempting to harm self. **Attempted Physical Assault, No Contact:** An individual tries to physically harm another person but does not make actual contact to the person's body. Inclusion: The assaulter using a weapon/object that missed contact with the person's body. An example: patient throws a chair but misses hitting anyone with the object. Exclusion: The assaulter makes physical contact with another person's body, even if the injury is minor (e.g., a bruise or small cut). **Completed Physical Assault:** An act of aggression resulting in physical contact, whether or not it caused the person bodily injury, pain, and/or distress. This contact can be any form of direct physical interaction or the use of an object as a weapon. **Sexual assault should be included here.** Inclusion: This might involve the use of a weapon but also any part of the patient's body making contact with an individual, and includes actions such as hitting, punching, biting, scratching, spitting, pushing, poking, head butting, chest bumping or kicking. Exclusion: An individual swings fist/kicks but misses contact with the intended victim's body. **Sexually Inappropriate Behavior:** Any unwelcome conduct of a sexual nature that creates an intimidating, offensive, or uncomfortable environment but does not meet the criteria for sexual assault. Examples include sexually explicit comments or jokes, unwanted flirting or sexual advances, requests for sexual favors, displaying sexually explicit materials, or any other behavior which violates workplace or social norms but might not be criminal.
	The types of assault below are meant to capture the nature and severity of an event of Completed Physical Assault. If there were multiple types of assault reported as occurring during the event, please choose the most egregious offense. Biting Choking

Type of Assault	Grabbing Hit By Object Kicking Pinching Poking Punching Pushing Scratching Sexual Assault Slapping Spitting Unknown Other
Location of Event	Using the drop down, indicate the setting where the event occurred. Location options include: Designated Psychiatric Area Email/Phone/Digital Emergency Department Home Care Visit Inpatient Unit Non-Clinical Setting (Business/Administrative Area) Outpatient (On and off-campus locations) Parking Lot/Campus Area Pediatric Unit Psychiatric Unit Urgent Care (Affiliated) Urgent Care (Stand Alone) Other
Contributing Factors	The goal of these data points is to capture what may have led to or influenced the event. When choosing Contributing Factors, select up to 3 options that you or your staff believes most strongly influenced the event. **Clinical:** The event was primarily caused by the patient's clinical condition or diagnosis, such as delirium, dementia, and other neurologically based conditions, emergence from anesthesia, etc. Included: A patient with dementia becoming disoriented and aggressive towards nursing staff. Excluded: A patient becoming aggressive after consuming alcohol. **Developmental Disability:** The event was primarily influenced by the individual's developmental disability which may affect their ability to regulate emotions, understand social cues, or communicate effectively, leading to frustration, misinterpretation, or difficulty resolving conflicts in a nonviolent manner. **Emotional / Situational:** The event was primarily caused by strong feelings or emotions, such as anger, frustration, or anxiety, etc. Included: A family member becoming aggressive towards healthcare staff due to frustration over a delayed treatment or perceived lack of attention to the patient. Excluded: A patient becoming aggressive due to a drug-induced hallucination. **Mental Health:** The event was primarily attributed to a diagnosed mental health condition. **Premeditated Action:** The event was a result of the aggressor’s pre-planned actions. This could include situations where the aggressor brought a weapon to the scene or had specifically targeted the victim in advance. Included: An individual who planned and executed an attack on a healthcare worker due to a personal grievance. Excluded: A spontaneous argument between a patient and healthcare worker that escalated into violence. **Substance-related:** The event was primarily caused by the patient's active use of or withdrawal from drugs or alcohol. **Drug seeking behavior should be included here.** Included: A patient experiencing hallucinations from illicit drug use and assaulting a healthcare worker. Excluded: A patient with a history of drug abuse, but not under the influence, becoming aggressive due to frustration with treatment options. **Unknown:** The factor that contributed to the event is unknown or unclear. Included: An altercation between a patient and healthcare worker where the reason for the patient's aggression cannot be determined. Excluded: A patient with a known history of violent outbursts due to a clinical condition, such as dementia, who

	becomes aggressive towards staff.
Level of Injury	Using internal reports and documentation of the event, use the drop down to indicate the level of injury directly resulting from the event (Please note that emotional injury is assumed to be inherent in ALL the following options). See definitions below for each level of injury: **No Injury Reported:** An event occurred with no physical injury to the victim(s) and no medical treatment was required. Inclusion: An individual makes a threat of harm that does not escalate. Exclusion: An individual makes a threat of harm that escalated to physical or emotional abuse. **Minor Injury – No Treatment Sought:** An event occurred but no medical or mental health treatment was sought by the victim. Inclusion: An event that resulted in a small bruise but staff member declines ice or evaluation and immediately returns to work. Exclusion: An event that led to a cut that required self-administered or medical attention. **Minor Injury – First Aid Required:** An injury occurred and treatment that could be self-administered was required. Inclusion: An event that led to a cut/injury that required self-administered application of Band-Aid or ice pack. Exclusion: An event where a person requires medical attention that cannot be self-administered, such as requiring a mental health professional, evaluation by a medical professional or treatment by others (stitches, x-ray, application of sling or other large bandage). **Moderate Injury – Medical Attention Required:** An injury occurred where the victim required treatment that could not be self-administered. The injured person is formally assessed by a medical team that may include Occ Health/ED or care giver present and care is rendered. Injuries requiring x-ray/imaging are in moderate injury category even if the final image rules out fractures. Inclusion: An event occurred where a victim received a laceration that required stitches/dermabond or other closure. Exclusion: An event occurred where a victim receives a small cut that only requires use of a first aid kit managed without formal evaluation. **Serious Injury – Medical Attention/Time Off Required:** An injury occurred where the victim required formal evaluation by a medical team (Occ Health/ED or other) and treatment was provided that could not be self-administered and required time off for recovery. Inclusion: The victim was hit in the head and was formally diagnosed with a concussion. Lost work time will be required for recovery and Occ Health clearance before return. Exclusion: The victim was able to treat their injury by themselves (e.g., using a first aid kit) and did not need time off for recovery. **Emotional Trauma – Medical Attention/Time Off Required:** An event where the victim was not physically impacted, but the victim required time off to emotionally recover. Victim may be formally referred to a mental health professional, use existing emotional supports, EAP or self-refer to some emotional support treatment AND MUST ALSO be unable to return to work. Inclusion: The victim feels sufficiently triggered or scared due to the event and unable to return to work due to the emotional distress/impact. Exclusion: The victim did not seek medical/mental health attention nor request time off after the event.
Aggressor	Using the drop down, indicate the type of person who caused the event from one of the options available. APRN Contracted Individual Coworker Manager PA Parent/Guardian Patient Physician Supervisor Visitor Visitor of a Patient
Aggressor Age Range	Using the drop down, indicate the age range of the aggressor involved in the event from one of the options available. Pediatric (0 – 12) Adolescent (13 – 19) Young Adult (20 – 39) Middle Aged Adult (40 – 59)

	Geriatric (60 +) Unknown
Repeat Aggressor	This question aims to identify if the aggressor involved in the event is known to staff as a recurrent instigator of violent events. It is not intended for staff to extensively review years of event logs. Instead, the focus should be logging aggressors who are considered "frequent flyers" in initiating violent events. Yes No Unknown
Victim	Using the drop down, indicate the type of person who was the primary victim impacted by the event from the options available. Aide/Tech APRN Companion/Observer Contracted Individual Non-Clinical Employee Nurse Other Clinical Employee PA Patient Physician Security Officer Visitor Other
2nd Victim (If Applicable)	This should be used only if there were multiple victims to the particular event. Using the drop down, indicate the type of person who was the secondary victim impacted by the event from the options available. Aide/Tech APRN Companion/Observer Contracted Individual Non-Clinical Employee Nurse Other Clinical Employee PA Patient Physician Security Officer Visitor Other
3rd Victim (If Applicable)	This should be used only if there were multiple victims to the particular event. If there are more than three victims at the event, please record the three victims that were most affected. Using the drop down, indicate the type of person who was the tertiary victim impacted by the event from the options available. Aide/Tech APRN Companion/Observer Contracted Individual Non-Clinical Employee Nurse Other Clinical Employee PA Patient Physician Security Officer Visitor Other
Physical Restraint	Any manual method, physical or mechanical device, material, or equipment that immobilizes or reduces the ability of a patient to move his or her arms, legs, body, or head freely. This includes the use of locking restraints, soft restraints and/or physical holds. **Seclusion in response to a workplace violence event should be included here.**
	Medication when used as a restriction to manage a patient's behavior or restrict the patient's movement, which is

Medical (Chemical) Restraint	not a standard treatment or dosage for the patient's condition or symptom. Like any other restraint order a chemical restraint is a one-time order.
Security Involvement	Security involvement in an event refers to the active participation of security measures, personnel, or protocols during the incident. Even if security was not present at the start of the event, if they became necessary at any point during the event to ensure safety, protection, or control of the situation, then 'Yes' should be selected to denote security involvement.
Descriptive Comments / Quotes	This metric is a qualitative data point that allows for the documentation and inclusion of detailed comments or direct quotes from aggressors, victims, witnesses or other parties that were involved in an event of workplace violence. The goal of this metric is to provide context that helps in understanding the full scope and severity of the event by capturing narrative evidence. Please be mindful in maintaining the confidentiality and privacy of the involved parties when including their comments and/or quotes.

Sources:

Occupational Safety and Health Administration. (2015). Workplace Violence in Healthcare. Retrieved from https://www.osha.gov/Publications/OSHA3826.pdf
Chapter 340 SB 459-FN-Final Version: