Policy At A Glance:

Save Healthcare Workers Act (H.R. 3178)

The safety of healthcare workers has become a growing national concern due to violence in the workplace. This brief provides an overview of the issue and outlines how the Save Healthcare Workers Act (H.R. 3178) aims to provide protection.

Introduction

Violence in healthcare has become a national concern, with hospital personnel facing higher rates of intimidation and assault than employees in any other field.[1] These incidents range from verbal threats to physical attacks, which create an unsafe environment that undermines staff safety, impedes wellbeing, and affects patient care outcomes, leading to an increased amount of exhaustion, turnover, and operational disruptions.

In addition to the mental health burden, the impact of violence on healthcare workers has caused a substantial financial burden. In 2023 alone, U.S. hospitals incurred an estimated $18.27 billion in costs related to community and workplace violence.[2] This cost included prevention training, victim treatment, security, and productivity losses.[2]

It is critical to ensure the safety of frontline providers such as support personnel, nurses, and emergency staff, who regularly interact with patients and families, not only to uphold workforce stability but also to protect the quality of care delivered across healthcare settings, as these healthcare workers are found to be most at risk and endure most violent incidents.

The Save Healthcare Workers Act (H.R. 3178) proposes concrete steps that address this urgent issue through enhanced protection, accountability measures, and meaningful enforcement.

Violence in Focus

45.5% Of nurses said workplace violence increased on their unit over the past year.[3]

81.6% Of nurses reported experiencing at least one type of workplace violence in the past year.[3]

91% Of emergency physicians said that they or a colleague were a victim of workplace violence in the past year.[4]

Addressing Violence Against Healthcare Workers

Healthcare workers experience the highest rates of violence compared to any other profession, putting nurses and emergency staff most at risk. According to the U.S Bureau of Labor Statistics, healthcare and social service industries accounted for nearly 73% of all nonfatal workplace injuries due to violence in 2021.[5] These incidents range from verbal harassment to physical assaults and often go underreported. Surveys show that 8 in 10 nurses faced workplace violence in 2023 with nearly half considering leaving the profession due to safety concerns.[6]

In response, hospitals and agencies have started to take on preventive measures. Occupational Safety and Health Administration (OSHA) has sent out voluntary guidelines suggesting risk assessments, de-escalation training, and secure facility design.[7] More than half of the U.S. States have passed laws that strengthen penalties for assaults on healthcare staff or require hospitals to implement prevention programs.[8] However, protections for healthcare workers are inconsistent state to state, explaining the need for stronger federal standards such as those outlined in H.R. 3178.

While progress is being made with aforementioned efforts, many gaps remain in ensuring consistent protection across all healthcare settings. Many facilities are not capable of fully implementing these safety measures, causing incidents to go underreported. A federal standard such as outlined in H.R. 3178 would help establish protections, ensure accountability, and provide hospitals with necessary funding. This would not only keep healthcare workers safe but also strengthen patient care by creating a safer and more stable clinical environment.

Proven Strategies in Action

Case studies have shown real world success of workplace violence prevention initiatives. For example, INTEGRIS health in Oklahoma enhanced security protocol and used threat assessment teams, which resulted in improved staff confidence and fewer reported assaults.[9] At King's Daughters' Hospital in Southwest Indiana, staff engagement in violence prevention planning led to significant decrease in emergency department incidents. These examples show how thoughtful policy can be used to effectively diminish violent workplace incidents.[10]

Federal Action Though H.R. 3178

Bill Sponsors

The Save Healthcare Workers Act (H.R. 3178) was introduced on May 5, 2025, by Representatives Madeline Dean (D-PA) and Mariannette Miller Meeks (R-IA).

A companion bill, S. 1600, was introduced in the Senate by Senators Cindy Hyde-Smith (R-MS) and Angus King (I-ME). This bipartisan bill reflects widespread recognition of workplace violence in healthcare as a national issue requiring federal attention.[11]

Main Provisions

H.R. 3178 would create a new federal criminal statute under Title 18, of the U.S. Code, which would make intimidation, threats, or assaults against hospital personnel a federal offense. Penalties would range from up to 10 years in prison or up to 20 years if weapons or serious injuries take place, which are similar to protocols currently set in place for airline workers.[12]

The bill also establishes a grant program administered by the Department of Justice that allows hospitals to implement violence prevention strategies, such as coordination with law enforcement, de-escalation training, panic buttons, and surveillance upgrades. Funds must be equally distributed based on each facility's needs. To ensure accountability, Congress requires an annual report from the Department of Justice on the outcome of the programs.

Stakeholders and Supporters

The American Hospital Association (AHA), the Emergency Nurses Association (ENA), and the American College of Emergency Physicians (ACEP) all strongly support H.R. 3178. ACEP has data showing 91% of emergency physicians experienced or witnessed violence in the past and half of them reported they would feel safer if the federal protections were set in place.[13] The AHA stresses that over $18 billion is spent annually by hospitals on costs that pertain to workplace violence, which will make this bill as both a safety and financial priority.

Implementation and Challenges

While moving toward protecting healthcare workers, it is important to remember that the main goal is patient care. Keeping that in mind, hospitals need to make sure they keep a balance among disciplinary action, security protocols and the proper care of patients who may have mental health issues or language barriers. Hospitals must enforce consistent staff training to recognize, de-escalate and report any incidents that may happen in the workplace. Effective implementation requires constant collaboration among hospital leadership, frontline staff, and law enforcement to ensure practical and sustainable protections.

Conclusion

Workplace violence in healthcare is not just an occupational hazard but a national crisis that puts the hospital systems, patients, and frontline workers at risk. Statistics make it clear that billions of dollars are lost annually, there is a widespread burnout, and the workforce is being pushed to their breaking point. Multiple case studies show that consistent action is required for change to be meaningful.

The Save Healthcare Workers Act (H.R. 3178) is supported by hospitals, nurses, and emergency physicians. It provides a path forward by establishing federal protections, funding prevention strategies, and holding perpetrators accountable. These policies not only provide immediate safeguards, but also contribute to long term workforce stability. Addressing this critical issue of violence against healthcare workers will improve staff safety and reduce turnover rates while strengthening patient outcomes and preserving trust in the healthcare system.

References

1. https://www.healthaffairs.org/doi/full/10.1377/hlthaff.2019.00642
2. https://www.aha.org/press-releases/2025-06-02-new-aha-report-finds-workplace-and-community-violence-cost-hospitals-more-18-billion-annually
3. https://www.nationalnursesunited.org/press/nnu-report-shows-increased-rates-of-workplace-violence-experienced-by-nurses
4. https://www.acep.org/news/acep-newsroom-articles/when-emergency-physicians-regularly-fear-violence-at-work-its-past-time-for-change
5. https://www.bls.gov/iif/factsheets/workplace-violence-2021-2022.htm
6. https://www.advisory.com/daily-briefing/2024/02/08/nnu-survey
7. https://www.osha.gov/healthcare/workplace-violence?utm_source
8. https://www.facs.org/for-medical-professionals/news-publications/news-and-articles/bulletin/2024/october-2024-volume-109-issue-9/violence-escalates-against-surgeons-and-other-healthcare-workers/
9. https://www.aha.org/case-studies/2017-07-21-integris-health-significant-threats-domestic-violence-and-forensic-patients
10. https://www.aha.org/system/files/2018-09/case-study-kings-daughters-active-shooter-protocol.pdf
11. https://dean.house.gov/2025/5/dean-miller-meeks-introduce-bill-to-protect-healthcare-workers#:~:text=WASHINGTON%2C%20D.C.%20%E2%80%94%20U.S.%20Representatives%20Madeleine%20Dean%20%28PA-04%29,individuals%20who%20knowingly%20and%20intentionally%20assault%20hospital%20employees
12. https://www.congress.gov/bill/119th-congress/house-bill/3178/text
13. https://www.acep.org/news/acep-newsroom-articles/congress-takes-strong-step-toward-better-protections-for-health-care-workers

Did you know?

Healthcare workers account for 73% of all nonfatal workplace violence injuries in the private sector.[8]

LOMA LINDA UNIVERSITY HEALTH

Institute for Health Policy and Leadership

11209 Anderson Street
Loma Linda, CA 92354
Phone: 909-558-7022
Fax: 909-558-5638
IHPL.llu.edu

Special guest contributor:
Jholie Douglas, Management Resident

Questions?
Please contact the Institute for Health Policy & Leadership (ihpl@llu.edu).