OREGON CHAPTER
American College of Emergency Physicians®

OREGON MEDICAL ASSOCIATION

OR-ACEP and OMA comments on SB 537 Workplace Violence Prevention Training Provisions in OSHA Rules

The position of the Oregon Chapter of American College of Emergency Physicians (OR-ACEP) and the Oregon Medical Association (OMA) has been that any mandated training outside of board certification and other licensure requirements may represent an undue burden on healthcare workers.

Preventing violence against healthcare workers has been a long-time priority for OR-ACEP and OMA. They worked with Oregon Nurses Association (ONA) , Oregon Emergency Nurses Association (OENA), and other key stakeholders and legislative champions including Rep. Travis Nelson, on this issue over multiple sessions.

In 2025, Rep. Nelson sponsored a new workplace violence prevention bill at the request of the ONA. Dr. Patsy Chenpanas, OR-ACEP President and OMA member, testified on behalf of both organizations in support of SB 537 and shared her experiences with violence in the emergency department. Dr. Craig Rudy, a member of OR-ACEP leadership, provided written testimony in support of our shared goals to reduce violence and assault in the emergency department.

One concern emergency physicians raised for the Oregon Nurses Association early on in discussions was that the workplace violence prevention training should not be mandatory for health care workers. OR-ACEP did support the requirement that it be made available. We had a common understanding with ONA that the language in the bill accomplished that.

Here it is:
"(b) A health care employer shall provide [assault] workplace violence prevention and protection training to:
(A) A new employee, other than a temporary employee, within 90 days of the employee's in-
itial hiring date.
(B) A temporary employee, within 14 days of the employee's initial hiring date.

(c) A health care employer may use classes, video recordings, brochures, verbal or written training or other training that the employer determines to be appropriate, based on an employee's job duties, under the [assault] workplace violence prevention and protection program developed by the employer."

We raised that issue in the OHA and OSHA rules hearings. OHA's interpretation that the training must be offered versus must attend, for their rules for Home Health. OSHA is taking the stance that it is mandatory for healthcare workers.

We are concerned the OSHA rules may be adding a mandate not included in statute.

Again, OR-ACEP and OMA support having training provided but considers mandatory attendance as potentially shifting the burden of safety from the patient, institution, and environment to the clinician. Many providers are contracted, private practice, or salary based. This means that any new mandated training represents additional work on top of other administrative and clinical responsibilities without additional compensation or protected time. Many clinicians already have a very full schedule and this would take away from other opportunities to help patients. This training is also part of the board certification requirement for emergency medicine physicians and other physicians.