

## Ohio Legislative Service Commission

Office of Research and Drafting Legislative Budget Office

H.B. 452 135 <sup>th</sup> General Assembly	<b>Final Analysis</b>
	Click here for H.B. 452's Fiscal Note
Primary Sponsors: Reps. White and Baker	

Effective date: April 9, 2025

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### SUMMARY

#### Hospital security plans

- Requires each hospital system and each hospital that is not part of a hospital system to establish a security plan for preventing workplace violence.
- Specifies various requirements for the plans, including that the plans be submitted to the Ohio Department of Health (ODH) and be reviewed and evaluated annually.
- Requires each hospital system and each hospital that is not part of a hospital system to establish a workplace violence incident reporting system.
- Makes it mandatory, rather than permissive, for all hospitals to post a notice that aggressive behavior toward staff will not be tolerated.
- Requires the Department of Higher Education, jointly with ODH, to survey colleges and universities that provide education and training to students seeking to become health care providers to determine whether the education and training they provide addresses workplace violence prevention.
- Requires the Chancellor of Higher Education to make recommendations and prepare a report for the General Assembly based on the survey results.

## Civil immunity for self or other-defense and nonprofit corporations

Specifies that the immunity that applies to nonprofit corporations for any of the following also applies to a for-profit corporation that leases its property to the nonprofit corporation or permits its property to be used by the nonprofit corporation for any purpose:

- Injury, death, or loss to person or property allegedly caused by or related to a concealed handgun licensee bringing a handgun onto the premises or to an event of the nonprofit corporation;
- Injury, death, or loss to person or property allegedly caused by or related to a decision to permit a licensee to bring, or prohibit a licensee from bringing, a handgun onto the premises or to an event of the nonprofit corporation.
- Generally grants civil immunity to a person for certain injuries allegedly caused by the person acting in self-defense or defense of another during the commission, or imminent commission, of an offense of violence to protect the members or guests of a nonprofit corporation.
- Specifies that a person who approaches or enters a nonprofit corporation's premises or event with intent to commit an offense of violence is presumed liable for any injury, death, or loss to person or property resulting from an act of self-defense or defense of another against that person.

## **DETAILED ANALYSIS**

#### Hospital security plans

#### **Establishment and requirements**

The act requires each hospital system, and each hospital that is not part of a hospital system, to establish a security plan for preventing workplace violence. In developing the plan, the hospital system or hospital must involve a team it selects that must include (1) at least one member who is a current or former patient or family member of a patient and (2) at least 50% of the total membership being health care employees who provide direct patient care.<sup>1</sup>

The act also requires that each security plan must:<sup>2</sup>

1. Be based on the results of a security risk assessment conducted for each hospital that addresses all high-risk areas of the hospital, including any emergency or psychiatric department. The assessment must consider any trauma-level designation held by the hospital, overall patient volume, psychiatric and forensic patient volume, past incidents of violence against staff and levels of injury resulting from those incidents, rates of crime in the community, and any other data points specified by the team making the plan. It must be conducted in consultation with the medical and nursing directors of each department or other high-risk area assessed.

<sup>&</sup>lt;sup>1</sup> R.C. 3727.18(A).

<sup>&</sup>lt;sup>2</sup> R.C. 3727.18(B).

- 2. Include an option for health care employees who provide direct patient care to request a first name only or first name and last initial only identification badge.
- 3. Require at least one hospital employee trained in de-escalation practices to be present at all times in any emergency or psychiatric department.

The plan may require at least one such trained employee to be present in other high-risk areas identified during the risk assessment. Additionally, based on the risk assessment, the plan must address whether hospital police officers, trained security personnel, or offduty law enforcement officers are required to be present in the hospital's emergency or psychiatric department, and in any other high-risk areas identified during the risk assessment.

4. Outline training requirements for security personnel, addressing the potential use of and response to weapons, defensive tactics, de-escalation techniques, appropriate physical restraint and seclusion techniques, crisis intervention, trauma-informed approaches, and safely addressing situations involving individuals who pose a risk of self-harm or harm to others.

For security personnel employed directly by a hospital system or a hospital, the Attorney General must adopt rules permitting the personnel to access any online training that (a) meets the training requirements under the hospital's security plan and (b) is available under peace officer training programs or otherwise provided by the Ohio Peace Officer Training Academy or at other approved peace officer training schools. The rules must be adopted by October 9, 2025.<sup>3</sup>

5. Include guidelines, developed jointly with local law enforcement authorities outlining when law enforcement officers, hospital police officers, or trained security personnel remain with a patient who has demonstrated violence or poses a risk of self-harm or harm to others.

#### **Review and evaluation**

Each hospital system or hospital must review and evaluate its security plan annually. The review and evaluation must involve the team that established the plan or a successor team that meets the same membership requirements. Plans must be revised if revisions are required as determined by the review and evaluation.<sup>4</sup>

#### Ohio Department of Health attestation; public records

The act requires hospital systems and hospitals to attest to the Ohio Department of Health (ODH), in a manner specified by ODH, that the hospital system or hospital has reviewed and, if necessary, updated its security plan.<sup>5</sup>

<sup>&</sup>lt;sup>3</sup> R.C. 109.7411.

<sup>&</sup>lt;sup>4</sup> R.C. 3727.18(C).

<sup>&</sup>lt;sup>5</sup> R.C. 3727.18(D).

The act provides that hospital security plans, annual revisions, and any of the verification information submitted to ODH are confidential and not public records.<sup>6</sup>

#### Incident reporting system

The act requires each hospital system, and each hospital that is not part of a hospital system, to establish a workplace violence incident reporting system. The reporting system must be documented, tracked, and analyzed. The results of the analysis must be used to make improvements in preventing workplace violence, including improvements achieved through continuing education in targeted areas such as de-escalation training, risk identification, and prevention planning. The reporting systems must track: the number of incidents reported through the systems; the number of incidents reported to law enforcement authorities, including those reported to a hospital police department; and the number of individuals involved in the incidents who are criminally charged as a result.

Data from the reporting system must be shared with the team involved in developing or annually reviewing and evaluating security plans. The reporting system must be clearly communicated to employees, including to all new employees during orientation, and must include guidelines for when and how to report incidents to the employer, security agencies, law enforcement authorities, including hospital police departments, local emergency service organizations, or government agencies.

Each hospital system or hospital must adopt a policy that prohibits any person from discriminating or retaliating against any health care employee for reporting to, or seeking assistance or intervention from, the employer, security agencies, law enforcement authorities, including hospital police departments, local emergency service organizations, or government agencies. The policy also must prohibit discrimination or retaliation against a health care employee for participating in an incident investigation.<sup>7</sup>

#### Time to comply

For existing hospital systems and hospitals, the following must be done by July 9, 2025:<sup>8</sup>

- Establishment of the security plans and workplace incident reporting systems;
- Submission of security plans to ODH; and
- Compliance with the notice posting requirement described below.

#### Notice regarding threatening and aggressive behavior

The act makes it mandatory, instead of permissive under prior law, for all hospitals to post notices that threatening or aggressive behavior toward staff will not be tolerated. The act permits the notice to be in print or digital sign format. It maintains provisions that specify areas where

<sup>&</sup>lt;sup>6</sup> R.C. 3727.18(E).

<sup>&</sup>lt;sup>7</sup> R.C. 3727.181.

<sup>&</sup>lt;sup>8</sup> Section 3.

the notice may be posted. Finally, it makes minor modifications to the content of the notice, and provides that a hospital's notice may use the wording in the statute or similar wording.<sup>9</sup>

### Survey of education and training for health care students

The act requires the Department of Higher Education, jointly with ODH, to survey colleges and universities that provide education and training to students seeking to become health care providers, including medical students, nursing students, and allied health students. The purpose of the survey is to determine whether the education and training addresses workplace violence prevention. The survey must include a determination of whether de-escalation, conflict management, and risk identification and assessment are part of the education and training.

Based on the survey, the Chancellor of Higher Education, in consultation with the Ohio Council of Medical School Deans and the Ohio Council of Deans and Directors of Baccalaureate and Higher Degree Nursing Programs, must make recommendations and prepare a report for the General Assembly.

The survey and report must be completed by April 9, 2026.<sup>10</sup>

# Civil immunity for self or other-defense and nonprofit corporations

The act expands preexisting civil immunity granted to nonprofit corporations relating to licensees carrying concealed handguns, as follows. Continuing law, unchanged by the act, provides that, subject to specified exceptions, a concealed handgun licensee may carry a concealed handgun anywhere in Ohio if the licensee also carries a valid license when in actual possession of a concealed handgun.

The act specifies that immunity provided for nonprofit corporations under continuing law also applies to any for-profit corporation that leases its property to a nonprofit corporation or permits its property to be used by a nonprofit corporation for any purpose. That law provides immunity from civil liability for injury, death, or loss to person or property allegedly caused by or related to: (1) a concealed handgun licensee bringing a handgun onto the premises or to an event of the nonprofit corporation, unless the nonprofit corporation acted with malicious purpose, or (2) a decision to permit a licensee to bring a handgun onto the premises or to an event of the nonprofit corporation.<sup>11</sup>

Additionally, the act establishes a new immunity, under which no person is liable in a tort action for injury, death, or loss to person or property allegedly caused by the person's act of self-defense or defense of another when performed during the commission, or imminent commission, of an offense of violence<sup>12</sup> to protect the members or guests of a nonprofit corporation (including oneself) against the commission, or imminent commission, of that offense

<sup>&</sup>lt;sup>9</sup> R.C. 3727.182, as renumbered by the act.

<sup>&</sup>lt;sup>10</sup> Section 4.

<sup>&</sup>lt;sup>11</sup> R.C. 2923.126(C)(2)(d).

<sup>&</sup>lt;sup>12</sup> R.C. 2901.01, not in the act.

of violence, unless the person's act constitutes willful or wanton misconduct.<sup>13</sup> For this purpose, "tort action" means a civil action for damages for injury, death, or loss to person or property other than a civil action for damages for a breach of contract or another agreement between persons.<sup>14</sup>

The act creates a presumption that a person who approaches or enters a nonprofit corporation's premises or event with intent to commit an offense of violence is liable for any injury, death, or loss to person or property resulting from an act of self-defense or defense of another against that person, unless the person's defensive action constitutes willful or wanton misconduct.<sup>15</sup>

The act specifies that nothing in its provisions may be construed to affect a person's right to bring a civil action for injury caused by a criminal act, or any other civil action authorized under law, and that its provisions do not affect any immunities from civil liability or defenses established under common law, to which the person may be entitled.<sup>16</sup>

Action	Date
Introduced	03-20-24
Reported, H. Public Health Policy	06-26-24
Passed House (73-21)	06-26-24
Reported, S. Veterans and Public Safety	12-18-24
Passed Senate (30-0)	12-18-24
House concurred in Senate amendments (80-10)	12-18-24

## HISTORY

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<sup>&</sup>lt;sup>13</sup> R.C. 2307.221(B).

<sup>&</sup>lt;sup>14</sup> R.C. 2307.221(A), by reference to R.C. 2307.60, not in the act.

<sup>&</sup>lt;sup>15</sup> R.C. 2307.221(E).

<sup>&</sup>lt;sup>16</sup> R.C. 2307.221(C) and (D).