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| <b>Number:</b> PL 2024-10 (REVISED)                                         |
| <b>Title:</b> Implementation of a Workplace Violence Program                |
| <b>Provider Types:</b> Home and Community Support Services Agencies (HCSSA) |
| <b>Date Issued:</b> Revised August 19, 2025                                 |

requirements of SB 240 had to adopt and implement the workplace violence prevention programs no later than September 1, 2024.

The effective date for HCSSAs impacted by the requirements of SB 463 is September 1, 2025, and workplace violence prevention programs identified by SB 240 must be adopted and implemented no later than September 1, 2026.

### **2.1 Workplace Violence Committee**

An agency must establish a workplace violence committee that includes:

- one registered nurse who provides direct care to clients of the agency;
- one physician licensed to practice medicine in this state who provides direct care to patients of the agency, if applicable; and
- one agency employee who provides security services for the agency, if any and if practicable.

A license holder that owns or operates more than one agency may establish a single committee for all the agency offices if:

- the committee develops and maintains a violence prevention plan for implementation at each office (location or branch office); and
- data related to violence prevention remains distinctly identifiable for each office (location or branch office).

### **2.2 Workplace Violence Prevention Policy**

The agency must adopt, implement, and enforce a written workplace violence prevention policy to protect health care providers and employees from violent behavior and threats of violent behavior occurring in the agency. The workplace violence policy must:

- require the agency to:
  - provide significant consideration of the violence prevention plan recommended by the agency's committee, and
  - evaluate any existing agency violence prevention plan;

- encourage health care providers and employees of the agency to provide confidential information on workplace violence to the committee;
- include a process to protect from retaliation agency health care providers or employees who provide information to the committee; and
- comply with commission rules relating to workplace violence.

### **2.3 Workplace Violence Prevention Plan**

The agency must adopt, implement, and enforce a written workplace violence prevention plan to protect health care providers and employees from violent behavior and threats of violent behavior occurring in the agency. This prevention plan must:

- be based on the practice setting;
- adopt a definition of “workplace violence” that includes:
  - an act or threat of physical force against a health care provider or employee that results in, or is likely to result in, physical injury or psychological trauma; and
  - an incident involving the use of a firearm or other dangerous weapon, regardless of whether a health care provider or employee is injured by the weapon;
- require the agency to provide at least annually workplace violence prevention training or education that may be included in other required training or education provided to the agency’s health care providers and employees who provide direct client care;
- prescribe a system for responding to and investigating violent incidents or potentially violent incidents at the agency;
- address physical security and safety;

- require the agency to solicit information from health care providers and employees when developing and implementing a workplace violence prevention plan;
- require health care providers and employees to report incidents of workplace violence through the agency's existing occurrence reporting systems; and
- require the agency to adjust client care assignments, to the extent practicable, to prevent a health care provider or employee of the agency from treating or providing services to a client who has intentionally physically abused or threatened the provider or employee.

The content requirements of the workplace violence prevention plan can be satisfied by referencing other agency policies and procedures that address specific topics.

At least annually, the agency's workplace violence committee must review and evaluate the workplace violence prevention plan and report the results of the evaluation to the governing body of the agency. Each agency must make available on request an electronic or printed copy of the agency's workplace violence prevention plan to each health care provider or employee of the agency. If the committee determines the plan contains information that would pose a security threat if made public, the committee may redact that information before providing the plan.

## **2.4 Responding to Incidents**

Following an incident of workplace violence, an agency must offer, at a minimum, immediate post-incident services that include any necessary acute medical treatment for each health care provider or employee of the agency who was directly involved in the incident. An agency cannot discourage a health care provider or employee from exercising the provider's or employee's right to contact or file a report with law enforcement regarding an incident of workplace violence.

An agency cannot discipline, including by suspension or termination of employment, discriminate against, or retaliate against another person who:

- in good faith reports an incident of workplace violence; or
- advises a health care provider or employee of the provider's or employee's right to report an incident of workplace violence.

### **3.0 Contact Information**

If you have any questions about this letter, please contact the Policy and Rules Section by email at [LTCRPolicy@hhs.texas.gov](mailto:LTCRPolicy@hhs.texas.gov) or call (512) 438-3161.