

During the 2026 General Assembly Session, legislators sought to strengthen hospital safety, improve transparency around workplace violence, and enhance protections for patients, visitors, and healthcare workers. This document provides a summary of the changes to law and provides background and guidance to assist you in compliance.

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## Summary

### AMENDS EXISTING LAW

**HB1489 (Tran)** clarifies the reporting requirements for incidents of workplace violence in hospitals by establishing required descriptors of incidents, identifying additional parties to whom hospitals are required to report collected data, and directing the Department of Health to publish a report containing an annual summary of such data in aggregate form according to the health planning region where the incident occurred and with any personally identifiable information removed from all data collected during the previous year. The legislation further exempts from the Freedom of Information Act any facility-level data and information relating to incidents of workplace violence in hospitals and required to be kept confidential under the new provisions. **The legislation also directs the Board of Health to promulgate regulations implementing the provisions of the legislation by January 1, 2027, and directs the Department of Health to publish its first report by December 31, 2027. The law is effective July 1, 2026.**

## Action Required

Evaluate the need for any changes to existing policies and procedures related to workplace violence incident reporting to ensure that they include required descriptors of incidents, expanded internal reporting to additional parties, compliance with pending regulations and Department of Health data submission requirements, and confidentiality protections for facility-level data exempt from the Freedom of Information Act, as necessary to comply with the requirements of the law.

## Background Information

Workplace violence in health care settings continues to rise, threatening the safety of frontline workers. In 2025, the General Assembly passed HB2269/SB1260 to require hospitals to implement workplace violence incident reporting systems and begin sharing data with certain hospital staff and the Virginia Department of Health (VDH).

The HB1489 legislation builds on the 2025 law by refining reporting requirements, establishing standardized incident descriptors, expanding who receives reports, and directing VDH to publish an annual, de-identified regional summary. The legislation also protects sensitive facility-level data from public disclosure.

## Statutory Text

(NOTE: The language in *italics* and ~~strikethrough~~ are the only changes to the law. All other language and requirements under the law remain unchanged.)

1. That §§ 2.2-3705.5 and 32.1-127 of the Code of Virginia are amended and reenacted as follows:

§ 2.2-3705.5. Exclusions to application of chapter; health and social services records.

The following information contained in a public record is excluded from the mandatory disclosure provisions of this chapter but may be disclosed by the custodian in his discretion, except where such disclosure is prohibited by law. Redaction of information excluded under this section from a public record shall be conducted in accordance with § 2.2-3704.01.

...

18. Facility-level data and information relating to incidents of workplace violence in hospitals and required to be kept confidential pursuant to subsection H of § 32.1-127. However, nothing in this subdivision shall prevent the disclosure of statistical summaries in aggregate form according to the health planning region where the incident occurred and with any personally identifiable information removed.

...

**§ 32.1-127. Regulations.**

A. The regulations promulgated by the Board to carry out the provisions of this article shall be in substantial conformity to the standards of health, hygiene, sanitation, construction, and safety as established and recognized by medical and health care professionals and by specialists in matters of public health and safety, including health and safety standards established under provisions of Title XVIII and Title XIX of the Social Security Act, and to the provisions of Article 2 (§ 32.1-138 et seq.).

F. Hospitals in the Commonwealth *with an emergency department* shall:

1. Establish a workplace violence incident reporting system, through which each hospital shall document, track, and analyze any incident of workplace violence reported. The results of such analysis shall be used to make improvements in preventing workplace violence, including improvements achieved through continuing education in targeted areas, including de-escalation training, risk identification, and violence prevention planning. Such reporting system shall (i) be clearly communicated to all employees, including to any new employees at the employee orientation, and (ii) include guidelines on when and how to report incidents of workplace violence to the employer, security agencies, and appropriate law-enforcement authorities;

2. Record all reported incidents of workplace violence as voluntarily reported by an employee; and

3. Adopt a policy that prohibits any person from discriminating or retaliating against any employee of the hospital for reporting to, or seeking assistance or intervention from, the employer, security agencies, law-enforcement authorities, local emergency services organizations, government agencies, or others participating in any incident investigation. Such policy shall comply with the provisions of § 40.1-27.3.

G. Each hospital in the Commonwealth *with an emergency department* shall maintain the record of reported incidents of workplace violence made pursuant to subsection F for at least two years and shall include in such record, at a ~~minimum~~:

1. The date and time of the incident;

2. A description of the incident, including ~~the~~:

~~a.~~ *a. The job ~~titles~~-title category of the affected employee;*

~~3.~~ *b. Whether the perpetrator was a patient, visitor, employee, or other person;*

~~4.~~ *A description of c. The location category for where the incident occurred;*

~~5.~~ *Information relating to the type of incident, including whether d. Whether the incident involved (i) a physical attack without a weapon;, (ii) an attack with a weapon or object;, (iii) a threat of physical force or use of a weapon or other object with the intent to cause bodily harm;, (iv) sexual assault or the threat of sexual assault;, or (v) anything else not listed in subdivisions clauses (i) through (iv);*

~~6.~~ *The response to and any consequences of the incident, including (i) whether e. The degree of physical injuries to staff according to the following categories: (i) no injuries, (ii) injury not requiring medical treatment, (iii) injury requiring medical treatment without admission, (iv) injury requiring admission, and (v) fatality; and*

*f. Whether hospital security or hospital law enforcement or outside law enforcement was contacted and, if so, their response and (ii) whether the incident resulted in any change to hospital policy; and*

~~7. Information about the individual who completed the report, including such individual's name, job title, and the date of completion to respond.~~

H. Each hospital shall:

~~1. Report the facility-level data collected and reported pursuant to subsection G to the chief medical officer and or chief of staff, the chief nursing officer, the chief executive officer, and the medical staff executive committee of such hospital or an equivalent position on, at a minimum, a quarterly basis; and~~

~~2. Send a report Submit facility-level data collected and reported pursuant to subsection G to the Department on an annual basis that includes, at a minimum, the number of incidents of workplace violence voluntarily reported by an employee pursuant to subsection. Any report made to the in aggregate with any personally identifiable information removed. In addition, the hospital shall include a statement regarding whether any changes were made to its workplace violence reporting policies or workplace violence prevention policies or other hospital policy as a result of workplace violence incidents reported during the reporting period. All information submitted to the Department pursuant to this subsection shall be confidential and shall be exempt from disclosure under the Virginia Freedom of Information Act (§ 2.2-3700 et seq.).~~

~~I. The Department pursuant to this subdivision shall be aggregated to remove:~~

~~1. Aggregate all facility-level data received pursuant to subsection H according to the health region where the incident occurred;~~

~~2. Remove from such data any personally identifiable information; and~~

~~3. Publish an annual report of such data in aggregate form according to the health planning region where the incident occurred and with any personally identifiable information removed from all data collected during the previous year.~~

I. J. As used in this section:

"Employee of the hospital" or "employee" means an employee of the hospital or, any health care provider credentialed by the hospital or engaged by the hospital to perform health care services on the premises of the hospital, and any contracted health care providers credentialed by or working in the hospital.

"Workplace violence" means any act of violence or threat of violence, without regard to the intent of the perpetrator, that occurs against an employee of the hospital while on the premises of such hospital and engaged in the performance of his duties. "Workplace violence" includes (i) the threat or use of physical force against an employee that results in, or has a high likelihood of resulting in, injury, psychological trauma, or stress, regardless of whether physical injury is sustained, and (ii) any incident involving the threat of using dangerous weapons or using common objects as weapons or to cause physical harm, regardless of whether physical injury is sustained.

**2. That the Board of Health shall promulgate regulations to implement the provisions of § 32.1-127 of the Code of Virginia, as amended by this act, by January 1, 2027.**

**3. That the Department of Health shall issue its first report pursuant to the requirements of subsection I of § 32.1-127 of the Code of Virginia, as amended by this act, no later than December 31, 2027.**

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