Truth in Testimony Disclosure Form

In accordance with Rule XI, clause 2(g)(5)*, of the Rules of the House of Representatives, witnesses are asked to disclose the following information. Please complete this form electronically by filling in the provided blanks.

Committee: Education and Labor
Subcommittee: Workforce Protections
Hearing Date: February 27, 2019
Hearing Title :
Caring for Our Caregivers: Protecting Health Care and Social Service Workers from Workplace Violence
Witness Name: Jane A. Lipscomb
Position/Title: Principle, Prevention at Work, LLC
Witness Type: O Governmental Non-governmental
Are you representing yourself or an organization? Self Organization
If you are representing an organization, please list what entity or entities you are representing:
N/A
If you are a <u>non-governmental witness</u> , please list any federal grants or contracts (including subgrants or subcontracts) related to the hearing's subject matter that you or the organization(s) you represent at this hearing received in the current calendar year and previous two calendar years. Include the source and amount of each grant or contract. If necessary, attach additional sheet(s) to provide more information.
Subcontractor to PEM-IEI, LLP (Prime Contractor) to serve as Expert Witness in Enforcement Related Compliance Assistance for federal OSHA. (up to \$50,000/yr) Consultant controctor to NIOSH on workplace violence training (on-line) for nurses. (\$10,000)
If you are a <u>non-governmental witness</u> , please list any contracts or payments originating with a foreign government and related to the hearing's subject matter that you or the organization(s) you represent at this nearing received in the current year and previous two calendar years. Include the amount and country of origin of each contract or payment. If necessary, attach additional sheet(s) to provide more information.
N/A