



Vice President and Chief Executive Officer of the Medical Center

MEDICAL CENTER POLICY NO. 0209

- A. SUBJECT: Patients Requiring Enhanced Security
- B. EFFECTIVE DATE: July 1, 2012 (R)
- C. POLICY:

The University of Virginia Medical Center is committed to serving the healthcare needs of all its patients. Occasionally, a patient may have unique security and/or privacy needs due to the patient's status, position, fame or circumstance; in many instances, such patients request security or privacy measures prior to admission to the Medical Center. However, when such patients are admitted in an emergency or otherwise without prior notice to the Medical Center, caregivers are empowered to request enhanced security measures for these patients.

In all instances involving patients with unique security and/or privacy needs, Medical Center Security and the University Police shall conduct a threat assessment to determine the level of enhanced security ([Medical Center Policy 0175 "Threat Assessment at the Medical Center"](#)) which may be necessary to protect the safety and privacy of the patient as well as the safety and privacy of all other patients at the Medical Center.

D. PROCEDURE:

1. *Patients admitted without prior notice to the Medical Center (including via the Emergency Department):*
 - a. When a patient requiring enhanced security and/or physical privacy is admitted in an emergency, or otherwise admitted with no advance notice to the Medical Center, staff involved in the patient's care shall promptly notify their supervisor or unit manager. The supervisor or manager shall assess the situation and contact the administrator-on-call and the Office of Patient Safety and Risk Management.
 - b. The administrator-on-call shall assemble an assessment team to identify the patient's security and privacy requirements. A threat assessment shall also be conducted ([see Medical Center Policy 0175 "Threat Assessment at the Medical Center"](#)).
 - c. The assessment team shall be responsible for ensuring that any enhanced security and physical privacy measures determined to be necessary and appropriate are communicated to and implemented in the unit or area where the patient will be receiving care and treatment.

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- d. In order to further ensure that the safety and privacy of the patient (and of all other Medical Center patients) are adequately safeguarded throughout the patient's stay, the assessment team may obtain information (including the patient's length of stay, general condition and likely locations of treatment), from sources that may include the patient, the patient's family or friends and Medical Center staff involved in the Patient's care; information required from law enforcement personnel shall be obtained by and coordinated through the University of Virginia Police Department and Medical Center Security.
 - e. At minimum, the assessment team shall consist of representatives of the Medical Center Security Department, the University of Virginia Police Department, and the patient care manager or charge nurse of the unit or area where the Patient is to be treated; additional persons may be included as deemed necessary and appropriate by the administrator-on-call.
2. *Patients admitted with security and privacy requirements communicated in advance of admission:*
- a. When a patient is admitted for whom security and privacy arrangements have been made in advance, the administrator-on-call will assemble and coordinate an assessment team; this team will be responsible for ensuring that security and privacy arrangements made in advance are communicated to and implemented in the unit or area where the patient will be receiving care and treatment. The administrator-on-call shall also notify the Office of Patient Safety and Risk Management. A threat assessment shall also be conducted ([see Medical Center Policy 0175 "Threat Assessment at the Medical Center"](#)).
 - b. In order to ensure that the safety and privacy of the patient (and of all other Medical Center patients) are adequately safeguarded throughout the patient's stay, the assessment team may obtain information (including the patient's length of stay, general condition and likely locations of treatment), from sources that may include the patient, the patient's family or friends, and Medical Center staff involved in the Patient's care; information required from law enforcement personnel shall be obtained by and coordinated through the University of Virginia Police Department and Medical Center Security.
 - c. At minimum, an assessment team shall consist of representatives of the Medical Center Security Department, the University of Virginia Police Department, and the patient care manager or charge nurse of the floor or treatment area where the Patient is to be treated; additional persons may be included in the assessment team as deemed necessary and appropriate by the administrator-on-call.
3. Patients requiring enhanced security and physical privacy shall be assigned rooms based upon the evaluation conducted by the assessment team.
 4. Patient visitation guidelines shall be established and closely monitored by the nurse manager of the unit or area where the patient is being cared for or treated.
 5. The Medical Center's Directors of Security and of Emergency Management or their respective designees shall serve as liaisons to the security staffs of individuals such as

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the President or Vice President of the United States, state governors, foreign heads of state, or other high ranking officials. A lounge or room on the patient's unit may be assigned for the security detail with additional private, secure space for dignitaries, staff, and the patient's immediate family.

6. The Medical Center Marketing and Public Relations Office shall release information to news media in accordance with [Medical Center Policy No. 0038, "Requests by News Organizations for Patient Information and Access for Photography or Electronic Recording"](#).

SIGNATURE:



R. Edward Howell, CEO, UVA Medical Center

6/21/12

DATE:

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Approved January 2000
Revised June 2003, June 2003, June 2006, June 2012
Reviewed June 2009
Approved by Chief Environment of Care Officer
Approved by Medical Center Administration