



Vice President and Chief Executive Officer of the Medical Center

MEDICAL CENTER POLICY NO. 0220

- A. SUBJECT: Interactions with Law Enforcement Authorities
- B. EFFECTIVE DATE: April 1, 2013 (R)
- C. POLICY:

The Medical Center shall provide patient information to law enforcement authorities as required by law, and as permitted by law and required by this policy.¹ All other law enforcement requests for information or interviews in matters affecting the Medical Center shall be coordinated through the Office of Patient Safety and Risk Management or as otherwise listed below.

D. PROCEDURE:

1. Notification to Law Enforcement Authorities

- a. As required by Virginia law, notification shall be made to the sheriff or chief of police of the county or city in which the treatment is provided, and shall be tracked, if necessary, as required in Section D.1.e below, of the following:

Treatment provided to a patient for any wound that is reasonably believed to have been inflicted by a gun, knife, razor, flailing instrument, slingshot, dart, disc or other such weapon when the wound is not believed to have been self-inflicted. The patient's name and address if known, and known relevant facts, must be reported as soon as possible.²

- b. Law enforcement authorities shall be notified immediately of all criminal incidents occurring at the Medical Center or on Health System property, and shall be provided with any information that an employee believes in good faith constitutes evidence of criminal conduct.
 - i. The University Police Department will respond to incidents occurring in the University of Virginia Medical Center Complex, including the Medical Center Outpatient Surgery Center
 - ii. Incidents occurring at other sites should be reported to the appropriate law enforcement agency.

¹ Disclosure of protected health information and patient-specific information is primarily governed by the Health Insurance Portability and Accountability Act (HIPAA) and its implementing regulations, 45 CFR, Part 164 and by Virginia Code § 32.1-127.1:03.

² See Virginia Code § 54.1-2967.

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- c. Law enforcement authorities shall be notified of the following types of incidents occurring at the Medical Center or on Health System property in the manner specified in other Medical Center Policies:
 - i. Infant/Child Abduction ([Medical Center Policy No. 0141 “Infant/Child Abduction”](#))
 - ii. Bomb Threat Incident ([Medical Center Policy No. 0052 “Bomb Threat Incident”](#))
 - iii. Hostage Incident ([Medical Center Policy No. 0166 “Hostage Incident”](#))
 - iv. Behavioral Emergency Response ([Medical Center Policy No. 0172 “Responding to Behavioral/Security Emergencies”](#))
 - v. Prohibition of Firearms, Weapons and Destructive Devices on University Property ([Medical Center Policy No. 0174 “Regulation of Weapons, Fireworks and Explosives on University Property”](#))
 - vi. Threat Assessment ([Medical Center Policy No. 0175 “Threat Assessment at the Medical Center”](#))
 - d. Staff may provide law enforcement authorities with the minimum information concerning Medical Center patients which may be necessary for response to, or investigation of, a serious and imminent threat to public safety which may occur off site.
 - e. Police notification of any other matter involving Medical Center patients, and requests from law enforcement for patient information, shall be coordinated through the Office of Patient Safety and Risk Management, and shall comply with the requirements of [Medical Center Policy No. 0092 “Release of Patient’s Protected Health Information”](#) and the tracking requirements of [Medical Center Policy No. 0256 “Accounting of Disclosures of Protected Health Information”](#).
 - f. Information requested by law enforcement agencies concerning the location of patients and their release dates and times will be directed through the University Police Department. University Police, in conjunction with the Office of Patient Safety and Risk Management, will coordinate the release of appropriate information to the appropriate law enforcement agency. Releasing information through the University Police Department provides a central contact point for uniformly handling requests from outside law enforcement agencies that will assist the Medical Center in complying with HIPAA accounting for disclosures of protected health information requirements.
2. Questioning by Law Enforcement Authorities
- a. Requests to interview patients:
 - i. Law enforcement requests to interview a patient shall be directed to the individual patient or the patient’s surrogate decision-maker, as appropriate. Individuals working within the Medical Center shall not independently approve or deny such requests for interviews and shall not provide any advice to patients or their surrogate decision makers about whether to agree to the requested interview.


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- ii. If the attending physician has restricted a patient's visitors and telephone calls because visitation and contact is medically contraindicated, these restrictions shall apply to law enforcement authorities. Any such restriction shall be documented in the patient's medical record.
 - b. Requests to interview individuals working within the Medical Center concerning Medical Center business:
 - i. Law enforcement authorities may interview persons working within the Medical Center about matters related to Medical Center business at the workplace or at home, with or without prior notice. Individuals receiving such a request for an interview shall, unless prevented by law, contact the Office of Patient Safety and Risk Management to report any interviews that occur on Medical Center property. Individuals may retain legal counsel, at their own expense, before agreeing to an interview. Internal administrative/management reviews of incidents occurring at the Medical Center should not interfere with investigations being conducted by law enforcement agencies.
 - ii. Protected health information about patients shall be released during the course of any law enforcement authority interview only in the manner specified in [Medical Center Policy No. 0092 "Release of Patient's Protected Health Information"](#).
3. If there is reason to suspect that an aged or incapacitated adult has been sexually abused, a report must be made immediately to Adult Protective Services in the manner specified in [Medical Center Policy No. 0213 "Abuse, Neglect or Exploitation of Patients"](#).

SIGNATURE:



R. Edward Howell, CEO, UVA Medical Center



DATE:

Medical Center Policy No. 0220 (R)

Approved November 17, 2000

Revised June 2001, July 2004, September 2007, December 2010, March 2013

Approved by Special Advisor to the Chief Executive Officer

Approved by Medical Center Administration