



VICE PRESIDENT *and* CHIEF EXECUTIVE OFFICER  
*of the* MEDICAL CENTER



**MEDICAL CENTER POLICY NO. 0175**

- A. SUBJECT: Threat Assessment
- B. EFFECTIVE DATE: October 1, 2005 (R)
- C. POLICY:

To the greatest extent possible, patients, employees, and visitors at the University of Virginia Medical Center shall be protected from harm due to aggressive or violent acts of others. If a situation leads to a reasonable belief that an individual creates a threat of potential harm to others, Medical Center Security and University Police shall be available to conduct a threat assessment and to determine whether enhanced levels of security may be required to prevent a situation from escalating.

A threat assessment shall be requested for those situations in which there are reasons to suspect that a potential violence exists. Individual violent acts or behavior that may occur spontaneously within the Medical Center should result in an immediate call to Medical Center Security or University Police and should be handled in accordance with Medical Center Policy No. 0172, Behavioral Emergency Response.

D. PROCEDURE:

1. Each health care practitioner and all Medical Center staff member who, based upon specific facts, suspects that an individual creates a threat of harm to others shall immediately inform his/her supervisor or manager of the situation. The manager or administrator (or designees) shall assess the situation and determine when to contact Medical Center Security at 924-5048 or PIC# 1647 to request that a threat assessment be conducted.
2. Situations that may create a reason to suspect that an individual may pose a risk of harm to others and that may warrant a threat assessment include, but are not limited to:
  - Use of threatening or intimidating behaviors and/or statements;
  - A patient's expression of fear of harm from individuals who may be visiting the Medical Center;
  - Knowledge of previously violent, aggressive or assaultive behaviors of an individual as well as awareness of current events that may be contributing to the expression of aggression or violence;

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- Possession of a weapon (e.g., firearm, knife, other sharp or heavy object intended for use as a weapon)
3. Depending upon the situation, a threat assessment by the Director of Medical Center Security (or his/her designee) may be requested and completed before an incident occurs, after an incident occurs or both. Medical Center Security shall notify the University Police Shift Commander to coordinate collection of information from Medical Center staff, patients, family members, and/or visitors in determining where there is reasonable basis to suspect that a threat exists.
  4. If the source of the threat is a visitor:
    - Health care practitioners and Medical Center staff, with assistance from Medical Center Security as needed, may initially inform the visitor that continuation of visitation privileges is dependent upon appropriate behavior.
    - If the visitor continues to demonstrate behavior that is potentially disruptive to Medical Center operations, the Director of Security (or his/her designee) shall coordinate, in conjunction with the unit manager and clinical staff, restriction of visiting privileges to appropriate places and times. If the visitor refuses to comply with these restrictions, visiting privileges may be revoked and access to the Medical Center denied (except when the individual requires emergency medical treatment). See Medical Center Policy No. 0214 – Medical Screening and Stabilizing Treatment for Emergency Medical Conditions.
  5. If the source of the threat is an employee:
    - Healthcare practitioners and Medical Center employees who observe another practitioner or employee engaging in potentially threatening behavior shall report this information to their supervisors or managers. Using the guidelines and procedures set out in this policy, the supervisor or manager shall assess the situation and make the decision to contact Medical Center Security at 924-5048 (or PIC# 1647) to seek a threat assessment.
    - Medical Center Security, in coordination with the appropriate manager and/or administrator, shall gather information to determine the appropriate level of intervention. The supervisor or manager shall meet with the employee in accordance with the appropriate human resources policies to communicate the findings and interventions. Medical Center Security officers or police officers will stand by as requested to provide support and/or protection. Internal resources such as the Employee Assistance Program may be offered to the employee whose behavior is problematic.
  6. If the source of the threat is a patient:
    - In assessing the potential for violent behavior of a patient, consideration by the healthcare practitioner should be given to requesting an appropriate medical consultation (e.g., Psychiatry, Neurology). Interventions with patients should attempt a systematic de-escalation of the situation with consideration given to the patient's known medical and psychiatric needs.

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- The Office of Risk Management shall assist Medical Center Security in conducting threat assessments that involve patient behaviors which pose a risk of harm to the patient, other patients and/or staff. In some cases the Office of Risk Management may have to assist the clinical care team in developing a behavioral contract. Such a contract may place conditions on the circumstances under which the patient may receive care and treatment at the Medical Center. If the patient refuses to sign the contract or violates the contract, the attending physician and the Medical Center may implement procedures to dismiss the patient from care.
7. If a threat assessment indicates that a situation warrants an increased security presence, the Director of Medical Center Security (or his/her designee) shall develop and plan and implement appropriate measures. Measures used may include restricting the release of patient information, increasing security patrols or posting of a security or police officer in appropriate locations. Medical Center Security shall consult with the Chief Administrative Officer and the Director of Risk Management if authorization is needed for use of additional resources. The Director of Medical Center Security (or his/her designee) shall inform the appropriate manager and/or administrator of the actions being taken.
  8. The Director of Medical Center Security (or his/her designee) shall periodically review the situation to recommend modification of the plan based upon changing conditions.

SIGNATURE:

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R. Edward Howell, CEO, UVA Medical Center

DATE:

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Approved March 1996

Revised March 1998, February 1999, November 2002, August 2003, September 2005

Approved by Chief Operations Officer

Approved by Medical Center Administration