COUNTY OF LOS ANGELES **DEPARTMENT OF HEALTH SERVICES**

HARBOR-UCLA MEDICAL CENTER

SUBJECT: LAW ENFORCEMENT USE OF FORCE ON HARBOR-UCLA CAMPUS **POLICY NO. 138**

PURPOSE:
To state that the Los Angeles County Sheriff's Deputies and Sheriff Security Officers (SSO) represent the County of Los Angeles in the administration of their duties.

POLICY:
At Harbor-UCLA Medical Center, the Sheriff's Department (LASD) is responsible for safeguarding patients, staff (workforce members, students, contractors, and volunteers), visitors and property.

PROCEDURE:

1. The Sheriff's Department is to be contacted at [redacted] to prevent a crime, or if a crime is being committed.

2. Deputies shall respond using law enforcement techniques according to Sheriff's policies and procedures. Deputies will determine the disposition of a subject according to the alleged crime and ascertain if medical care is needed. In the case of a patient, the deputies may return the patient to the care of the medical provider. If a patient remains in the Sheriff's custody, written notification is provided to the Los Angeles County Sheriff's Department personnel and appropriate medical and/or administrative staff by completing the Consent for Release of Medical Information for Patients in Police Custody (Form #M-811, 76C283R) (**Appendix B**) and placing the white copy in the patient's medical record.

3. In law enforcement situations where the use of force is required, the Sheriff's personnel will ensure that the incident and actions taken are documented on the Sheriff's Use of Force Report Form. In situations where use of force involves pepper spray, tasers or batons on a patient, appropriate clinical staff, Hospital Administration and the Sheriff's personnel will meet within 72 hours to: (a) review and evaluate the incident and the actions taken by clinical and law enforcement personnel, (b) ensure the incident was appropriately documented, and (c) record the results of this review and evaluation [redacted], and to determine what can be done to minimize similar situations in the future.

4. Whenever the Sheriff responds in a law enforcement capacity to a situation involving a patient, clinical staff who are present will document the date/time and description of the incident necessitating the call, the actions taken by the deputies; and whether the deputies removed the patient from the hospital or returned the patient to the custody of medical staff.

EFFECTIVE DATE: 6/05 **SUPERSEDES:**
REVISED: 5/10, 3/13, 1/17, 8/20
REVIEWED: 12/08, 5/10, 3/13, 1/17, 8/20
REVIEWED COMMITTEE:

APPROVED BY:

Anish Mahajan, MD
Acting Chief Executive Officer

Anish Mahajan, MD
Chief Medical Officer

Nancy Blake, PhD, RN, NEA-BC, FAAN
Chief Nursing Officer

[redacted]

Appendix B

COUNTY OF LOS ANGELES

HARBOR-UCLA MEDICAL CENTER

DEPARTMENT OF HEALTH SERVICES

CONSENT FOR RELEASE OF MEDICAL INFORMATION FOR PATIENTS IN POLICE CUSTODY

I HERBY AUTHORIZE THE HARBOR-UCLA MEDICAL CENTER TO RELEASE THE INFORMATION BELOW TO:

NAME OF POLICE DEPARTMENT/SHERIFF DEPARTMENT RESPONSIBLE FOR REFERRING PATIENT		
STATION NAME	STA. PHONE NO.	MCI NO.

PATIENT INFORMATION *(PLEASE PRINT)*:

PATIENT NAME LAST FIRST M.I.	DATE OF BIRTH	SEX	RACE
BOOKING NUMBER	FILE/URN NUMBER		

PURPOSE OF EXAMINATION:

VISIT/ADMIT/DATE	DISCHARGE DATE

VICTIM	IN CUSTODY
☐ SEXUAL ABUSE EVIDENCE COLLECTION	☐ BLOOD ALCOHOL WITHDRAWAL
☐ CHILD ABUSE	☐ PREBOOKING EXAM
☐ OTHER, SPECIFY: _____	☐ OTHER, SPECIFY: _____

PATIENT DESTINATION AFTER TREATMENT	
OFFICER'S NAME	OFFICER'S EMPLOYEE NUMBER
SIGNATURE OF OFFICER	DATE
SIGNATURE OF PATIENT	DATE
WITNESS SIGNATURE	DATE

DIAGNOSIS:

MEDICATION:

RECOMMENDATIONS:

CONDITION ON RELEASE:

PHYSICIAN'S SIGNATURE	DATE

PATIENT IDENTIFICATION

CONSENT FOR RELEASE OF MEDICAL INFORMATION FOR PATIENTS IN POLICE CUSTODY

FILE IN MEDICAL RECORD

M-811 76C283R (6/04)

WHITE - Medical Record
PINK - Outpatient Billing
CANARY - Officer's Record
GOLDENROD - Patient's Copy