
Department: UW Medicine Compliance

Subject: PP-16e Use & Disclosure of Protected Health Information (PHI)
Permitted to Avert a Serious Threat to Health or Safety

Policy Number: 16e

Established Date: April 10, 2003

Revised Date:

Review Date: December 14, 2006, October 8, 2009

Policy:

This policy describes the circumstances in which UW Medicine¹ may use or disclose protected health information (PHI) to avert a serious threat to health or safety when the purpose of the use or disclosure is not for treatment, payment, health care operations nor authorized by the patient.

I. Averting a Serious Threat to Health or Safety

- A) Consistent with applicable law and standards of ethical conduct, UW Medicine may use or disclose PHI if it believes in good faith that:
- 1) It is necessary to prevent or lessen a serious and imminent threat to the health or safety of a person or the public, and the disclosure is to person(s) reasonably able to prevent or lessen the threat, including the probable victim(s). In this situation only the minimum necessary information the recipient needs may be disclosed. Information concerning mental health treatment, STD, HIV, AIDs or drug/alcohol treatment should only be disclosed if absolutely necessary.
 - 2) An individual has escaped from a correctional institution or other lawful custody.
 - 3) An individual admits to participating in a violent crime that may have caused serious physical harm to another and there is a serious threat to the health or safety of the patient or the other individual. Only the

¹ UW Medicine includes the following entities: University of Washington Medical Center and Clinics; Harborview Medical Center and Clinics; UW Medicine Neighborhood Clinics (University of Washington Physicians Network); UW Physicians Sports Medicine Clinic; UW Physician's Eastside Specialty Center; Hall Health Primary Care Center; and University of Washington Physicians.

minimum necessary information to minimize the danger should be released, not to exceed the following:

- Name and address,
- Date and place of birth,
- Social security number,
- ABO blood type and Rh factor,
- Type of injury,
- Date and time of death, if applicable,
- Description of distinguishing physical characteristics including height, weight, gender, race, hair and eye color, facial hair, tattoos etc.

B) Health Care Providers have a duty to warn, or to take reasonable precautions to provide protection from violent behavior when the patient has communicated an actual threat of physical violence against a victim or victims that are reasonably identifiable. In these situations, health care provider must make reasonable efforts to communicate the threat to the victim(s) and to law enforcement. In this situation, the provider may only disclose:

- Dates of admission and discharge
- Authorized and unauthorized absences from the facility
- Other information pertinent to the threat or harassment

C) Exception: UW Medicine may not disclose PHI if the information is learned:

- 1) In the course of treatment to affect the propensity (inclination, tendency) to commit the criminal conduct that is the basis for the disclosure, **or**
- 2) Through a request by the individual to be referred or to start treatment, counseling, or therapy for treatment to affect the propensity to commit criminal conduct.

NOTE: In determining whether a particular set of facts creates a mandatory or discretionary duty to warn on the part of the health care provider, the health care provider should consult the Department of Social Work policy on Duty to Warn/Discretionary Warning and consult with professional colleagues.

II. Documentation of Disclosures

UW Medicine documents and retains in electronic or written format a record of all disclosures following record retention policies and procedures in accordance with UW Medicine Privacy Policy: *PP25 - Accounting of Disclosures of Protected Health Information (PHI)*.

References:

- I.** 45 CFR Parts 160 and 164; Section 164.512 – “Uses & Disclosures for Which Consent, Authorization or Opportunity to Agree or Object Is Not Required”.
- II.** RCW 70.96A.150 – Records of Alcoholics and Intoxicated Persons.
- III.** RCW 70.02.050 – Disclosure Without Patient’s Authorization
- IV.** RCW 71.05.390, .120, .445. – Mental Health Records
- V.** RCW 71.05.620 – Mental Illness Treatment Records: Informed Consent for Disclosure of Information
- VI.** RCW 70.24.105 – Disclosure of HIV/STD/AIDS Test or Treatment – Exchange of Medical Information
- VII.** 42 CFR, Part 2 – Confidentiality of Alcohol and Drug Abuse Patient Records

UW Privacy Officer: _____ Date: _____
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