

Reporting of Health Care Related Crimes

1. Important to report crime promptly to law enforcement.
2. The following are a must if prosecution is expected:
 - a. Details of events leading up to criminal incident, including what was said and by whom, what actions occurred and by whom, and extent of injuries.
 - b. Relationship of defendant with medical care. (Patient, relative of patient, friend of patient, etc.)
 - c. Names and contact information for victims of the crime.
 - d. Names and contact information for health care facility employees who intervened in the actions of the defendant.
 - e. Names and contact information for all persons present or who witnessed events.
 - f. Identification of any items used as a weapon or instrument of the crime.
 - g. Is there any video of the event or of the people involved.
3. Ask for case number of law enforcement report.
4. Ask who should be contacted with any additional information that comes up related to the case.

Follow-up by Health Care Facility

1. If the law enforcement agency or prosecutor does not contact the victim or health care facility when case is referred to prosecutor within a reasonable time established in discussions as noted below:
 - a. Contact them to re-enforce willingness and desire to prosecute.
 - b. Ask if they need any more information to complete the investigation or filing of charges.
2. Provide assurance to employees who are witnesses or victims that they have the facility's support in providing testimony and assisting in prosecution.

Points Of Pre-Incident Planning Discussion with Local Law Enforcement and Both County and City Prosecutors

1. Importance of prosecution of crimes against health care workers and facilities.
2. Review data on frequency and seriousness of impact on health care workers, facilities, and services.
3. Stress willingness of health care facility to support employees through prosecution process.
4. Reporting processes and expectations.
5. Expectations for follow-up actions or investigations of reported crime.
6. Expectations and decision processes for immediate arrest or referral of reports to prosecutor.
7. Information necessary for prosecution.
8. Prosecutor decision to prosecute or not prosecute.
9. Discuss any concerns with patient confidentiality involved in prosecuting of these cases.
10. Ask for guidance and suggestions for preventative measures and response planning.