Immigration
Sample Policies and Procedures
Updated January 29, 2018

As you may know, CaliforniaHealth+ Advocates (Advocates), the advocacy affiliate of the California Primary Care Association (CPCA), has developed six sample policies and procedures to help clinics prepare themselves and patients for the unlikely possibility of an immigration raid. We’ve been working with our immigration partners, including the National Immigration Law Center (NILC), to have these reviewed. We have also hired Feldesman Tucker Leifer Fidell LLP (FTLF) to provide a legal review on the procedures and have received feedback from members participating in CPCA’s immigration workgroup and Compliance Officers Peer Network.

In each policy you will find an introduction that will include information to help clinics understand the reasoning behind the procedures and help provide guidance to those who may prefer to create their own procedural language. The information under this section is not meant to be added into a policy. Also, I added certain terminology in caps and parenthesis to allow clinics the space to fill it in as they like. For example, (ORGANIZATION) is meant to be filled in with clinics name, (IDENTIFY) or (IDENTIFY MANAGEMENT) means indicate the staff you would like here.

If you have any questions please contact Liz Oseguera, loseguera@cpca.org.

List of Sample Policies and Procedures

1. Internal Protocol for Interacting with Immigration Officials and Law Enforcement
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   - California Primary Care Association - Immigration Talking Points for Clinic Staff
Introduction: Internal Protocol for Interacting with Immigration Officials and Law Enforcement

(NOTE: The information in this document is not meant to provide legal advice or to substitute for the guidance, counsel or advice of legal counsel on any matters particular to a specific primary care clinic.)

Tips for Creating Internal Protocols Concerning Staff Interactions with Immigration Officials

It is important that clinics prepare staff for a possible interaction with immigration agents and/or law enforcement so they can be prepared in the event of an immigration enforcement activity at the facility. This would include putting procedures in place that clearly depict the role of each staff member and identifying two to three staff that will be trained as the enforcement liaisons for the clinic. The California Primary Care Association (CPCA), in coordination with CaliforniaHealth+ Advocates, will be offering ongoing trainings to help the enforcement liaison be prepared to speak to immigration agents or law enforcement, and properly identify a valid court order or warrant. To ensure there is at least one enforcement liaison at each clinic during business hours, we recommend that the clinic assign a couple of staff to receive this training. This will guarantee that there are always personnel available to handle any inquiries or interactions with immigration agents or law enforcement.

We also recommend that clinics create a code, similar to a code black, to alert staff of the presence of immigration officials, and provide clear directions on what staff should do to prepare for a raid. It’s crucial that staff are trained and prepared to follow protocol to avoid panic or committing a mistake that can be construed as a violation of the law. When creating this code, the clinic should (1) consider how and when staff will be made aware of immigration officials that enter the clinic, (2) ensure that the enforcement liaison, or identified personnel charged with handling immigration agents, is able to meet with the agent(s) immediately (make sure the personnel at the door contacts them directly), (3) assign staff to contact legal counsel and other members of the response team (which include attorneys, members of the media, foreign consulates, immigrant partners and community leaders, including mayors and members of the Board of Supervisors), (4) consider who will document the raid in detail, especially if immigration agents entered the premises without permission or valid warrant, and (5) determine when and how patients will be informed if immigration officials enter the clinic. Please be aware that escorting patients out of the clinic or prohibiting staff from speaking to immigration officials, especially if a valid court order is presented, may be a violation of the law and could jeopardize the clinics ability to remain in operation.

Also, as a good practice, clinic staff should ensure that patient information is not left in plain view, while Human Resources staff should also ensure that employee files (including I-9s) are not left in locations where patients or immigration officials can easily see the information contained in the records. We recommend that clinics put procedures in place that clearly layout the private areas of the clinic and the circumstances when personal identifiable information and protected health information (PHI) will be released (please see sample policies and procedures regarding disclosure of PHI and private & public spaces).

The Department of Homeland Security (DHS), which oversees the actions of ICE and CBP, maintains a policy that immigration enforcement actions such as arrests, interviews, searches, and surveillance will generally not occur at sensitive locations, which includes health care facilities, like clinics. However, in exigent circumstances ICE may carry out enforcement actions in sensitive locations without prior approval. This would include situations related to national security, terrorism, or public safety, or where there is an imminent risk of destruction of evidence.
material to an ongoing criminal case. Absent such circumstances, ICE officials are generally required to consult with their supervisor and to obtain an approval prior to taking enforcement actions at sensitive locations.

Additionally, California has enacted the Immigrant Worker Protection Act, which prohibits employers from allowing immigration enforcement agents to access any private areas of a ‘place of labor’ or volunteering employee records if the agent does not have a valid judicial warrant. Any employer who violates the Act is subject to a fine up to $10,000. This Act was put in place to ensure employees are protected during an immigration raid. We recommend health centers, especially those who have allocated the waiting room as a private space, to designate all areas in which employee files are maintained to be accessed by ‘authorized personal only.’ This creates an added protection if immigrant agents attempt to access employee files during an immigration raid.

If immigration agents or law enforcement officers enter private areas without a valid court order, they may be in violation of the sensitive locations memo. Please contact legal counsel immediately, and ask that immigration agents or law enforcement officers leave the premises immediately.

For more information on this please see the FAQs put forth by the California Primary Care Association by clicking here.
I. **POLICY:** Given the national anti-immigrant rhetoric and the increased presence of immigration officials in communities, (ORGANIZATION) has provided procedures for staff to use in possible interactions with immigration enforcement agents or with patients, if Immigration and Customs Enforcement (ICE) agents, Law enforcement officials or Customs and Border Patrol (CBP) agents present themselves on (ORGANIZATION) premises.

(ORGANIZATION) is dedicated to serving all patients, regardless of patient’s ability to pay, where they are from, or their individual circumstances. (ORGANIZATION) strives to create a safe environment for staff, patients, and anybody seeking health services.

II. **PURPOSE:** The purpose of these procedures is to ensure staff members are properly informed of (ORGANIZATION) protocols if law enforcement agents, including immigration officials, present themselves on (ORGANIZATION) premises. It is crucial that (ORGANIZATION) personnel be provided the tools and guidance necessary to protect patients and their confidential information in the presence of all law enforcement officials.

III. **SCOPE:** This policy and procedure applies to all (ORGANIZATION) sites.

IV. **PROCEDURE:**

1. **Sample Procedure Language – Preparing for Law Enforcement or Immigration Agents**
   a. (ORGANIZATION) will designate at least three staff members (JOB TITLES) as the enforcement liaison. At least one enforcement liaison that has completed their training will be onsite during business hours to handle any inquiries by immigration agents or law enforcement officials.

   - More specifically, the enforcement liaison(s) will:
     i. Attend 3 trainings provided by the California Primary Care Association (CPCA) and / or CaliforniaHealth+ Advocates (Advocates) related to immigration enforcement and geared towards the enforcement liaison(s) duties. Through these trainings the enforcement liaison will be required to learn how to:
       - Validate a properly issued court order, warrant, subpoena, or summons and differentiate between administrative requests and court ordered requests (please also see sample policies and procedures, “Disclosure of Personal Health Information”).
       - Correctly identify the information required on a court ordered request and ensure (ORGANIZATION) does not provide more than the required information.
       - Properly interact with immigration agents and law enforcement to deescalate the situation in the hopes of preventing a raid, especially if the agents lack authority from the courts to enter (ORGANIZATION) premises.
       - Help implement policies and procedures and ensure staff are assigned to specific duties during a potential or actual immigration raid, including making sure members of the response team, like attorneys and media outlets, are notified immediately.
- Patients in close proximity to the officers should also be notified immediately that law enforcement officials are at the site, and reminded that they all have the right to remain silent.
- Appropriately document all the facts about the raid, including any and all actions taken by ICE agents that may be unlawful, the information contained in the warrant, the names and badge numbers of ICE agents, the names and dates of birth of detained immigrants, and contact information for all witnesses. To ensure you properly document changes, please complete the “Immigration Official Sighting Reporting Template,” and submit it to your local consortia and Elizabeth Oseguera, loseguera@c pca.org, at CPCA.

ii. Will join and participate during the immigration workgroup meetings held by CPCA and/or Advocates.

iii. Form an Immigration Task Force (ITF) to help provide input, as needed, on the formation of (ORGANIZATION) protocols and code (COLOR/NUMBER) regarding immigration and law enforcement. ITF will help (IDENTIFY STAFF – (perhaps management or executive officers) implement procedures approved by the Board. ITF will also:
   - Ensure ALL staff are properly trained on these protocols and ‘Know Your Rights’ information provided to patients.
   - Obtain contact information (e.g., phone numbers) for foreign consulates around the clinic and the phone number of the local ICE detention center to help the families of patients who may be detained (A list of ICE detention centers is available here).
   - Establish relationships with at least one immigration attorney or a lawyer, such as a board member who is an attorney, who can be available if law enforcement or immigration agents come into the clinic.
   - Create a response team that includes member of the community, like attorneys, members of the media, foreign consulates, immigrant partners and community leaders, including mayors and members of the Board of Supervisors (for more information please see sample policy and procedure, “Creating an Integrated Rapid Response Team”).
   - Meet as needed to accomplish its intended goals.

b. The enforcement liaison(s) and (IDENTIFY) staff at (ORGANIZATION) will handle ALL contacts with law enforcement or immigration agents.
   i. If other (ORGANIZATION) staff come across immigration agents or law enforcement, they will immediately contact the enforcement liaison(s) and/or (IDENTIFY) staff and politely inform the immigration agent or other law enforcement official that only designated individuals are authorized to answer their questions, review a warrant or to consent to their entry into private areas.
   ii. If an immigration agent or law enforcement official contacts the clinic via phone or email, staff will direct them immediately to the enforcement liaison on duty and will politely inform the immigration or other law enforcement officials that only the designated individuals are authorized to answer their questions.
c. (IDENTIFY) staff, with help from ITF and the enforcement liaison(s), will establish a Code (COLOR/NUMBER) used to alert personal of the presence of immigration agents, and the possibility of an immigration raid. All staff will be notified of Code (COLOR/NUMBER) via (EMAIL, PHONE CALL) by (IDENTIFY) staff and/or enforcement liaison. ONLY (IDENTIFY) staff or the enforcement liaison can initiate a Code (COLOR/NUMBER).

i. As part of the protocols for Code (COLOR/NUMBER) staff will be directed to:
   - Shut down ALL computers and technological gadgets that contain patient or employee information and place all patient and employee files in a secure location with a lock.
   - Specified staff will calmly inform patients of immigrations presence in the clinic and remind them of KYR information, including their right to remain silent. Staff will also inform patients that they are taking steps to protect their patients and their information.
   - Assigned staff within ITF will document all the facts about the raid by completing the “Immigration Official Sighting Reporting Template,” and providing the names and badge numbers of agents, the names and dates of birth of detained immigrants, and contact information for witnesses.

2. Sample Procedure Language – Protocol if Immigration or Law Enforcement Attempt to Enter (ORGANIZATION) Premises

a. (ORGANIZATION) staff that encounter immigration agents or law enforcement, especially those located at the main entrances of the clinic, will immediately notify the enforcement liaison on duty and (IDENTIFY) staff of the presence of immigration officials or law enforcement. Staff who encounter immigration agents or law enforcement are asked to:
   i. Remain calm, and remember that you are NOT REQUIRED to answer any questions from law enforcement or immigration. You have the right to REMAIN SILENT.
   ii. Politely inform the agent(s) that you will contact the enforcement liaison and/or appropriate staff members that can help answer their questions or requests.
      - Under NO CIRCUMSTANCES will unauthorized staff provide permission to law enforcement or immigration agents to enter (ORGANIZATION’S) private areas, (or premises if full clinic is considered private). ONLY the enforcement liaison or (IDENTIFY) staff can permit immigration or law enforcement entry, verify the validity of a warrant, or approve release of patient information.

b. The enforcement liaison meeting with immigration officials or law enforcement will:
   i. Direct the agent to a location away from patients and confidential patient or employee information (e.g. conference room or another part of the clinic that is away from patients)
   ii. Ask the agent(s) why they are there and request to see the agent’s badge and write down his or her name and badge number. If possible the enforcement liaison will instruct another member on staff to make a photo copy.
   iii. If the agent tries to enter into examination rooms or other private areas in the clinic, advise the agent that certain areas of the clinic are designated solely for patients, individuals accompanying patients and staff providing services.
iv. Clearly let the agent know that you **DO NOT CONSENT** to a search of private areas without a properly issued court-ordered warrant, a subpoena or summons issued by a judicial officer, or a grand jury (for more information on validating documents please refer to sample policies and procedures, “Disclosure of Personal Health Information”). If the agent requests information, ask the agents if they have a valid court-ordered warrant, subpoena or summons issued by a judicial officer, or a grand jury and any affidavit used to secure the document.

v. Validate all legal documentation presented (such as a warrant, court order, etc.) **BEFORE** allowing them to enter the clinic. **ONLY** provide information (ORGANIZATION) required to be provided in accordance to presented legal documents and the law.
   - The enforcement liaison or assigned staff will document all information that is provided and make a photocopy of all legal documents presented.
   - If patient information is provided please contact all patients affected in accordance to sample policy and procedure “Disclosure of Personal Health Information.”
   - After the incident please complete the “Immigration Official Sighting Reporting Template” and submit it to your consortia and Elizabeth Oseguera, loseguera@cpca.org, at CPCA.

vi. If agents enter notify designated staff **IMMEDIATELY**.

c. Once the enforcement liaison, or designated staff, informs the agent(s) that they **DO NOT CONSENT** to a search without valid legal documentation, and agent(s) decide to enter **WITHOUT PERMISSION**, the enforcement liaison or designated staff will:

i. Call a Code (COLOR/NUMBER).

ii. Immediately contact legal counsel and local media outlets, in addition to all other members of the rapid response team, and inform them of the illegal raid.

iii. Ensure Assigned staff document all the facts about the raid, by completing the “Immigration Official Sighting Reporting Template.” Please submit the sighting report to your local consortia and Elizabeth Oseguera, loseguera@cpca.org, at CPCA.

iv. Remind patients that they have the right to remain silent.

v. Contact the federal departments and agencies and notify them of the violation to the sensitive location memo.
   - ICE Enforcement and Removal Operations (ERO) through the Detention Reporting and Information Line at (888)351-4024 or through the ERO information email address at ERO.INFO@ice.dhs.gov, also available at [https://www.ice.gov/webform/ero-contact-form](https://www.ice.gov/webform/ero-contact-form)
   - The Civil Liberties Division of the ICE Office of Diversity and Civil Rights at (202) 732-0092 or ICE.Civil.Liberties@ice.dhs.gov
   - Customs and Border Patrol (CBP) Information Center to file a complaint or compliment via phone at 1 (877) 227-5511, or submit an email through the website at [https://help.cbp.gov](https://help.cbp.gov).
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**Introduction: Protected Health Information**

*(NOTE: The information in this document is not meant to provide legal advice or to substitute for the guidance, counsel or advice of legal counsel on any matters particular to a specific primary care clinic. It is important that the clinic consult competent legal counsel to help determine when and to what extent the clinic is required to comply with administrative requests or whether a legal document has been properly issued.)*

**Tips for Protecting Patient Health Information**

The Health Insurance Portability and Accountability Act (HIPAA) and the HIPAA Privacy Rules require clinics to protect the confidentiality of patients’ ‘Protected Health Information’ (PHI), with certain exceptions. In general, PHI is individually identifiable information that a health care provider receives from an individual that relates to their health status, treatment or payment, that could be used to identify the person. HIPAA provides covered entities, which include FQHCs and RHCs, flexibility in electing to disclose PHI under certain circumstances; meaning that permissible disclosure is allowed. Under other circumstances disclosure is mandatory. For this reason it is very important for clinics to implement procedures that inform staff what patient information they are allowed to release and under what circumstances, including when it can be provided to law enforcement or immigration agents.

We recommend clinics implement policies that are protective of patient information, and only allow staff to disclose patient information when required to do so by law. Since state laws may be more stringent than federal law in the disclosure of PHI, it is important that the clinic consult competent legal counsel to help determine the best way to protect patient information in their state.

Please be aware that as a covered entity under HIPAA, clinics may be required by law to report PHI to law enforcement officials under certain circumstances. State laws commonly require health care providers to report incidents of gunshot or stab wounds, or other violent injuries. State laws may also require health care providers to report child abuse or neglect and/or adult abuse, neglect, or domestic violence. In California, these are applicable exemptions and would require the clinic to contact law enforcement.

A clinic is also required to provide PHI to law enforcement officials in compliance with a properly issued court order, warrant, subpoena, or summons. The type of entity issuing the request determines a covered entity’s response. A clinic should only release the information expressly authorized by a court-ordered request, whether a warrant, subpoena, grand jury subpoena, or administrative order. When responding to these requests, the clinic must verify the identity and authority of the individual prior to disclosing the information, among other things, and should maintain documentation on this. Additionally, a clinic can also release a patient’s information if prior authorization / consent is provided by the patient or their legal guardian.

Disclosures to law enforcement are subject to the accounting of disclosures requirement under the HIPAA Privacy Rule. As such, if the covered entity makes a disclosure to law enforcement without a patient’s authorization, or their legal guardian, the covered entity should document the disclosure and include documentation supporting the decision to disclose the information to law enforcement.

For more information on this please see the FAQs [click here](#) put forth by CaliforniaHealth+ Advocates.
I. **POLICY:** Given the increased concerns that may cause immigrant families to avoid seeking critical services, (ORGANIZATION) is committed to maintaining ALL of our patient’s information safe while also providing a welcoming environment that minimizes the access barriers created by the national anti-immigrant rhetoric.

II. **PURPOSE:** The purpose of these procedures is to ensure that (ORGANIZATION) staff take every precaution necessary to protect and maintain information provided by (ORGANIZATION) patients confidential. (ORGANIZATION) will not provide law enforcement any personal identifiable information or protected health information pertaining to patients, unless required to do so by law. These procedures will direct (ORGANIZATION) personnel how to best maintain the safety, security, and privacy of our patients and their protected health information.

III. **SCOPE:** This policy and procedure applies to all (ORGANIZATION) sites.

III. **PROCEDURE:**

1. **Sample Procedure Language for Release of Patient Information**
   a. (ORGANIZATION) will provide patient information, including personal identifiable information and protected health information, **ONLY** when required to do so by law or when a patient provides written consent.
      i. Patient consent must be provided in writing and include a description of the information (ORGANIZATION) is permitted to release and to whom it can be released to. The patient (or legal guardian) must sign and date the consent in order for it to be valid.
      ii. If patients would like to revoke a consent, they would need to provide the request in writing. In order for the request to be validated it must be signed and dated.

   b. (ORGANIZATION) is required by law to disclose certain patient information without the patient’s consent. Those circumstances include:
      • Reporting child abuse or neglect, domestic violence, or incidents of violent injuries, such as gunshot wounds or stab wounds.
      • Responding to requests from law enforcement such as a warrant, subpoena or summons issued by a court, district judge or magistrate judge. In such circumstances, the enforcement liaison or (IDENTIFY) staff is required to verify the authenticity of the request and disclose only the information expressly described in the order as necessary to comply with the law.
      • Reports to funding agencies. In these circumstances (ORGANIZATION) will only provide summary information of all patients. The U.S. Department of Health and Human Services delineates how this can be done [here](#).

   c. When responding to requests issued by law enforcement, including immigration enforcement agencies, (ORGANIZATION) enforcement liaison or (IDENTIFY) staff must verify the identity and authority of the individual(s) requesting the information prior to disclosing it. This includes determining:
      • The specific agency the requester is from
      • The reason the requester wants the information
• The specific types of PHI the requester seeks
• Whether the requester has a judicial warrant or other court order for the release of the information

The enforcement liaison or (IDENTIFY) staff must make a copy of all documentation used to identify the items mentioned above (i.e. gathering identification, badge number, warrant, etc.).

d. ONLY the enforcement liaison or (IDENTIFY) staff are permitted to verify a warrant and approve release of patient information to law enforcement, including immigration agents.

2. Sample Procedure Language – Identifying Legal Documents

a. (ORGANIZATION) enforcement liaison or (IDENTIFY) staff are required to validate and make a photo copy of the court orders, warrants, subpoenas, or summons presented by law enforcement or immigration.
   i. Court-ordered requests: Generally, (ORGANIZATION) must disclose PHI if the information is requested pursuant to a court order or court-ordered warrant, or a subpoena or summons issued by a judicial officer, or a grand jury.
   iii. Administrative requests: An administrative request is issued by a federal or state agency or law enforcement official, rather than a court of law. Such requests include administrative subpoenas or summons signed by someone other than a judge or magistrate. (ORGANIZATION) is NOT required to respond or provide information asked through an administrative request.
      - If the administrative body claims to be authorized to require the production of information in an administrative order per 45 C.F.R. 164.103 and 45 CFR sec. 164.512, the enforcement liaison or (IDENTIFY) staff must consult with a lawyer before providing the requested information.
      - (ORGANIZATION) WILL NOT ACKNOWLEDGE an administrative warrant of removal (Form I-200 & I-205) unless signed by a judicial officer or grand jury.
      - Immigration officials are NOT allowed to enter (ORGANIZATION) premises with an administrative request.

b. (ORGANIZATION) will only comply with a judicial (court ordered) warrant that is valid and contains (sample judicial warrant can be found here):
   i. Name and signature of the issuing official with the time and date of issuance above
      signature (issued by a court and signed by a judge);
   ii. Name of a specific officer or the classification of officers to whom the warrant is addressed;
   iii. Names of the applicant and of all persons whose affidavits or testimony were given in support of the application;
   iv. A designation sufficient to establish with reasonable certainty the premises, vehicles, or persons to be searched;
   v. A description or a designation of the items constituting the object of the search and authorized to be seized.
c. The enforcement liaison will document **ALL** information that (ORGANIZATION) was legally obligated to provide to law enforcement, including any PHI and personal identifiable information related to (ORGANIZATION) patients. The enforcement liaison will also provide the legal reasoning (i.e. valid court order or judicial warrant was presented) that obligated (ORGANIZATION) to provide patient related information to law enforcement or immigration agents.

i. The enforcement liaison will provide this information to executive leadership.

ii. All patients whose information was released to law enforcement will be contacted by the enforcement liaison within 24 hours via phone, email or mail. (ORGANIZATION) will provide patients a description of the information provided, to whom it was provided and date is was given to law enforcement.

   - Under 42 USC §1320(d)(6) individually identifiable health information is defined as any information, including demographic information collected from an individual, that:
     (A) Is created or received by a health care provider, health plan, employer, or health care clearinghouse; and
     (B) Relates to the past, present, or future physical or mental health or condition of an individual, the provision of health care to an individual, or the past, present, or future payment for the provision of health care to an individual, and:
       ▪ Identifies the individual; or
       ▪ With respect to which there is a reasonable basis to believe that the information can be used to identify the individual.
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Introduction: Private and Public Spaces in a Clinic

(**NOTE: Because of the need to make a case-by-case determination of the reasonable expectation of privacy, health centers should consult competent legal counsel when adopting and implementing internal policies and procedures related to the public/private space distinction. Also, please be aware that such designations do not guarantee that immigration officials will or must comply with those policies. In these circumstances the clinic would have the legal right to argue their case in court. In the case of a possible legal challenge, the health center should document as much factual information regarding what immigration agents did for the health center’s records.)

Tips for Clinics

To declare certain areas of the clinic as private spaces the health center would need to show that patients have a reasonable expectation of privacy in those locations, and to take necessary steps to ensure that the expectation is accurate. Under the Fourth Amendment, reasonable expectation of privacy looks at not only whether that person subjectively has a reason to expect privacy, but also whether there is an objective expectation of privacy.

According to Fourth Amendment case law, some factors that are relevant to whether there is a reasonable expectation of privacy may include:

- the number of people in the space;
- who has access to certain areas of the health center;
- how many people have access to the space at any given time;
- whether there are signs designating spaces or rooms as private space;
- whether there is a security guard present at the entrance

Given that an individual must have a reasonable expectation of privacy for Fourth Amendment protections to apply, we recommend that clinics have an intake person or security guard next to the main entrance (before arriving to the waiting room area) that will be tasked with signing in individuals seeking medical services, and anyone accompanying them (e.g. caretakers, children, parents, etc.). This may allow the clinic to not only make a more sound argument to declare the waiting room area as a private space, but will also ensure that any law enforcement officers, including an immigration enforcement agent, speak to clinic staff and explain the reason for their presence instead of immediately entering the clinic or waiting room area. However, please be aware that this does not guarantee that immigration officials will or must comply with set policies.

Furthermore, Health centers are cautioned not create barriers to health care service by creating intimidating entrances that might deter patients from accessing care at the clinic. A health center who chooses to have a security guard or intake staff by the door, must ensure that no consumer is turned away from receiving care. Such barriers to access to care may impact compliance with Section 330 program requirements.

We strongly suggest that clinics avoid referring to themselves as “sanctuaries” or “safe spaces.” These terms have been used as “catch-all” phrases and it is not clear to the public or patients what definition clinics have in mind when they refer to themselves as a “sanctuary” or “safe space.” Thus, health centers may find that it is better to use alternate terminology to decrease confusion among patients and put policies and procedures in place that clearly lay out the protections that the health center has for its patients.
Additionally, California has enacted the Immigrant Worker Protection Act, which prohibits employers from allowing immigration enforcement agents to access any private areas of a ‘place of labor’ or volunteering employee records if the agent does not have a valid judicial warrant. Any employer who violates the Act is subject to a fine up to $10,000. This Act was put in place to ensure employees are protected during an immigration raid. We recommend health centers, especially those who have allocated the waiting room as a private space, to designate all areas in which employee files are maintained to be accessed by ‘authorized personal only.’ This creates an added protection if immigrant agents attempt to access employee files during an immigration raid.
I. **POLICY:** Given the deportation threats that immigrant communities are facing under the current administration, many patients have been cancelling their medical appointments or asking to be dis-enrolled from programs, like Medi-Cal, for which they are eligible. (ORGANIZATION) is committed to providing a safe environment and minimizing the access barriers created by the national anti-immigrant rhetoric by implementing policies and procedures that protect patients on our premises.

II. **PURPOSE:** The purpose of this procedure is to guide (ORGANIZATION) employees on how to best maintain the safety, security, and privacy of our patients and protect them from immigration enforcement activity while they are onsite at the clinic.

III. **SCOPE:** This policy and procedure applies to all (ORGANIZATION) sites.

IV. **PROCEDURE:**

1. **Sample Policy and Procedure Language for Private Spaces**
   a. **All of (ORGANIZATION) premises,** with a few exceptions, are private spaces only accessible to staff, individuals with established business with (ORGANIZATION) (e.g. courier services, U.S. Postal Service, authorized maintenance personnel, volunteers, residents or students) prospective patients, and patients and persons accompanying them. (ORGANIZATION) premises at-large include, but are not limited to waiting rooms, examination rooms, offices, any area that has patient protected health information (PHI), employee files and records areas.

   b. All patients, prospective patients and persons accompanying them will need to sign in with intake staff located at the main entrances of the clinic immediately upon arriving at the facility. This will ensure a level of privacy for all those in our clinic facility where only staff, individuals with established business with (ORGANIZATION), patients, prospective patients and their companions are allowed.

   c. A member of Law Enforcement, including Immigration and Customs Enforcement (ICE) or Customs and Border Protection (CBP), is not permitted to enter (ORGANIZATION) facilities or premises at-large, including the waiting room area, without first presenting a signed court order or judicial warrant to the enforcement liaison on staff. (ORGANIZATION) will confer with legal counsel prior to responding to an administrative request for information made by a federal or state agency or law enforcement official, rather than a court of law.

   d. Only (IDENTIFY) staff and the enforcement liaison has the authority to allow enforcement officials to enter (ORGANIZATION) premises.

   If needed, (IDENTIFY) staff and the enforcement liaison should consult with an immigration attorney to ensure that the legal documentation is valid. If the officer lacks any documentation, the staff member should promptly request that the agent leave the premises immediately. If the agent has a valid document, (IDENTIFY) staff and the enforcement liaison should take appropriate steps outlined during staff trainings to limit the overreach of the agent’s conduct.
2. **Sample Policy and Procedure Language for Public Spaces**
   a. There are few public spaces on (ORGANIZATION) premises, such as the parking lot. It is our Policy that even in public spaces, the general public, non-(ORGANIZATION) patients, or others must have a legitimate business need related to services offered or required by (ORGANIZATION) to access our premises at-large.

   b. (ORGANIZATION) parking lots are considered (ORGANIZATION) property such that, per this Policy, only authorized users can access them.
Introduction: Creating an Integrated Rapid Response Team

(Note: The information in this document is not meant to provide legal advice or to substitute for the guidance, counsel or advice of legal counsel on any matters particular to a specific primary care clinic.)

Tips for Creating an Integrated Rapid Response Team

It is very important that clinics create a rapid response team, to ensure staff know whom to contact if immigration or law enforcement officers appear at the clinic. As part of the rapid response legal team the Immigration Task Force and/or enforcement liaison(s) should try to include attorneys who specialize in immigration, criminal, and family law who can help gather facts about the raid, help the clinic respond to requests made by immigration or law enforcement, and help locate individuals in ICE custody if they are detained.

The rapid response team should include attorneys, local immigration advocates, members of the media, foreign consulates, immigrant partners and community leaders, including mayors, members of the Board of Supervisors, and other elected officials. For more information on this please see the training resources located on the California Primary Care Association Immigration Resource page by clicking here.
I. **POLICY:** Given the national anti-immigrant rhetoric and the increased presence of immigration officials in communities, (ORGANIZATION) wants to ensure it has in place an integrated response team that can be called upon if Immigration and Customs Enforcement (ICE) agents or Customs and Border Patrol (CBP) agents present themselves on (ORGANIZATION)’s premises. The integrated response team will include immigration partners, local advocates, media, and legal counsel. The (ORGANIZATION) will partner will local rapid response teams, if one exists in their area, to ensure that the rapid response team includes the widest group of allies.

This will help ensure that (ORGANIZATION) can provide a safe and welcoming environment for staff, patients, and anybody seeking health services.

II. **PURPOSE:** The purpose of these procedures is to ensure staff, specifically the enforcement liaisons and members of the Immigration Task Force, are aware of external partners who need to be contacted immediately if immigration agents were to present themselves at the clinic. It is crucial that (ORGANIZATION) personnel be provided the tools and guidance necessary to protect patients and patient’s confidential information in the presence of immigration officials.

III. **SCOPE:** This policy and procedure applies to all (ORGANIZATION) sites.

IV. **PROCEDURE:**

1. **Sample Procedure Language – Creating an Integrated Rapid Response Team**
   a. (ORGANIZATION) Immigration Task Force (ITF), in conjunction with (IDENTIFY MANAGEMENT) staff will create an integrated rapid response team that will include attorneys who specialize in immigration and health law, members of the media, immigration partners in the community, foreign consulates and community leaders.
      - Board members, especially those who are attorneys, should be encouraged to join the rapid response team.

i. ITF, in coordination with (IDENTIFY MANAGEMENT) staff, will contact members of the community who are attorneys, affiliates of the media, immigration partners, foreign consulates and community leaders to ask if they would be willing to participate in (ORGANIZATION) rapid response team.
   - ITF will explain that (ORGANIZATION) would like to invite (BLANK) to be a part of the rapid response team to help protect the rights of the clinic and those of its patients if immigration enforcement contacts or attempts to enter (ORGANIZATION) premises.

ii. ITF will obtain contact information (e.g., phone numbers) for foreign consulates and immigration partners (who may include the National Immigration Law Center, Immigrant Legal Resource Center, and American Civil Liberties Union) near (ORGANIZATION).
   - ITF will also obtain phone number of the local ICE detention center to help the families of patients who may be detained (A list of ICE detention centers is available [here](#)).
   - (ORGANIZATION) can also identify additional local immigration attorneys at these links:
2. **Sample Procedure Language – Responsibilities of the Integrated Rapid Response Team**

   a. The enforcement liaison, or assigned staff, will contact **ALL** members of the integrated rapid response team if immigration threatens to conduct a raid.
      - If law enforcement or immigration agents contact the clinic or present themselves on (ORGANIZATION) premises, the enforcement liaison or (IDENTIFY) staff will contact the attorneys that are part of the rapid response team immediately.

   b. In an event of an immigration raid, the rapid response team tasks will include, but is not limited to:
      - Reviewing and validating any legal documents presented by law enforcement or immigration.
      - Providing guidance to the enforcement liaison or (IDENTIFY) staff regarding any information the clinic would be obligated to release.
      - Helping ITF, and (ORGANIZATION) advise the media regarding the raid and develop messaging strategies to inform the public.
      - Assisting affected families identify local resources, including immigration lawyers;
      - Cooperating with immigration attorneys defending any patient or staff arrested during the raid. This would include, when appropriate, any documentation of the raid and any information provided to law enforcement and/or immigration.
**Title:** Training Clinic Staff on Immigration  
**Effective Date:** XX-XX-XXXX

**Policy No.:** XXXX-XXXX

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**Introduction: Internal Protocol for Interacting with Immigration Officials and Law Enforcement**

*NOTE: The information in this document is not meant to provide legal advice or to substitute for the guidance, counsel or advice of legal counsel on any matters particular to a specific primary care clinic.)*

**Tips for Training Clinic Staff on the Policies and Procedures Adopted**

To ensure that the policies and procedures are properly implemented, it is very important that staff be provided ongoing training; this is particularly important for the frontline staff who answer many of their patients’ questions regarding the policies maintained by the clinics. In giving proper training to staff, the clinic can ensure that patients are provided correct information regarding their rights and help reduce the fears that prevent families from securing critical services.

Clinics should be aware that some of their employees may have different opinions on immigration, and some may not agree with the proposed procedures. Thus, it is crucial that staff be trained not only on the procedures, but also on the reasoning behind these procedures, and why it is important for the clinic to help protect access to health care for all patients, regardless of their immigration status. Clinic staff should also be trained on how to have necessary conversations with patients in a culturally competent manner so that patients receive the same assurances from all staff, even if an individual staff member has different views on immigration.

To address potential misconceptions regarding immigration, the clinic could provide a staff training on the basics of immigration law, including the purpose and mission of the federal Health Center Program, the landscape at the intersection of health care and immigration, and a review of ‘Know Your Rights’ (KYR) information. The training can emphasize that all members of the community, regardless of their ability to pay or their legal status, must have access to health care services at (ORGANIZATION). Also, we ask that information indicating the immigrant status of patients not be collected in the health records. This would include photo copies of foreign identification and enrollment applications that specifically ask the legal status of patients.

Additionally, all staff should be informed about the Immigrant Worker Protection Act, which prohibits employers from allowing immigration enforcement agents to access any private areas of a ‘place of labor’ or volunteering employee records if the agent does not have a valid judicial warrant. Any employer who violates the Act is subject to a fine up to $10,000. This Act was put in place to ensure employees are protected during an immigration raid. We recommend health centers, especially those who have allocated the waiting room as a private space, to designate all areas in which employee files are maintained to be accessed by ‘authorized personal only.’ This creates an added protection if immigrant agents attempt to access employee files during an immigration raid.

For more information and / or materials to help train staff please see the training resources located on the California Primary Care Association Immigration Resource page by clicking here.
I. **POLICY:** Given increased concerns that may cause immigrant families to avoid seeking critical services, (ORGANIZATION) has provided procedures for staff to use if immigration or law enforcement officials present themselves on (ORGANIZATION) spaces.

(ORGANIZATION) strives to create a safe and welcoming environment for staff, patients, and anybody seeking health services at its facilities.

II. **PURPOSE:** The purpose of these procedures is to ensure that staff understands the importance of creating policy and procedures that protect ALL patients, regardless of their national origin, citizenship, or immigration status. It is crucial that (ORGANIZATION) personnel be provided the tools and guidance necessary to protect patients and their confidential information, and that (ORGANIZATION) creates an accountability mechanism to make sure that staff adapt and incorporate the steps needed.

III. **SCOPE:** This policy and procedure applies to all (ORGANIZATION) sites and to all staff at those sites.

IV. **PROCEDURE:**

1. **Sample Procedure Language – Training Staff on Immigration**
   a. (ORGANIZATION) Immigration Task Force (ITF), in conjunction with (IDENTIFY MANAGEMENT) staff will prepare trainings for personnel to ensure they are aware of:
      i. Know Your Rights information, for patients and staff.
         - Please see immigration talking points developed by CaliforniaHealth+ Advocates available [here](#) and also found under the policies and procedures titled “Messaging for Patients”
         - KYR training curriculum available [here](#).
         - CaliforniaHealth+ Advocates FAQs found [here](#).
         - KYR resources put forth by the National Immigration Law Center regarding patients’ access to health care services and rights of providers
   
   ii. All policies and procedures put in place by the Board of Directors, especially those newly implemented concerning immigration. ITF will train staff on the procedures, including the role of each staff member during a Code (COLOR/NUMBER) and (ORGANIZATION) expectation from each personnel (More information found in policies and procedures concerning ‘Disclosure of Protected Health Information,’ ‘Public and Private Spaces,’ ‘Messaging for Patients,’ and ‘ Internal Protocol for Interacting with Immigration and Law Enforcement’).
      - During these trainings, ITF will provide information on each policy in terms that all staff can understand.
      - ITF will also explain the reasoning as to why (ORGANIZATION) decided to implement these policies and procedures (explained under the policy and purpose sections of each sample policy and procedure).
      - ITF will ensure staff are aware of the “Immigration Official Sighting Reporting Template.”
      - ITF will ensure to inform all staff that patient records should not maintain information indicating the immigrant status of patients. This would include photo copies of foreign identification and enrollment applications that specifically ask the legal status of patients.
b. When appropriate, ITF will include role playing, step by step information for handling certain scenarios, and other training techniques to convey the stated information to staff. ITF, in coordination with (IDENTIFY MANAGEMENT) staff, will implement procedures to ensure ALL staff are trained, including new employees.
   - (ORGANIZATION) will conduct yearly trainings for staff to ensure they are provided updates on any changes related to policies and procedures and/or changes to immigration law as it pertains to the policies and procedures put in place regarding immigration.

c. The enforcement liaisons, and/or members of the ITF, will attend trainings provided by immigration partners and/or California Primary Care Association or CaliforniaHealth+ Advocates related to the implementation of policies and procedures. This will help (ORGANIZATION) ITF staff prepare all staff trainings and ensure the information is disseminated in different ways to ensure all staff learning needs are met.
Introduction

(Note: The information in this document is not meant to provide legal advice or to substitute for the guidance, counsel or advice of legal counsel on any matters particular to a specific primary care clinic.)

Tips for Clinics – Messaging to Patients

To help ease the fear that many patients feel due to the current political climate, it is important for clinics to post signage that welcomes the community to seek services. These signs could (1) provide educational information, such as ‘Know Your Rights’ (KYR), (2) reassure patients that the clinic will not share their personal information or collaborate with immigration enforcement unless required by law, (3) reassure patients that they have the right to access health care, as well as other public benefit programs, and should not fear that doing so will jeopardize them or their family members, and (4) remind patients that they are all welcomed at the facility regardless of immigration status or national origin. Clinics can also craft messages for their patients through informational videos that could be played in the waiting room area or by providing in person trainings for patients and the community.

Also, we strongly suggest that clinics avoid referring to themselves as “sanctuaries” or “safe spaces,” especially when communicating with patients. These terms have been used as “catch-all” phrases and it is not clear to the public or patients what definition clinics have in mind when they refer to themselves as “sanctuary” or “safe place.” Thus, health centers may find that it is better to use alternate terminology to decrease confusion among patients and put policies and procedures in place that clearly layout the protections that the health center has for its patients.

It may also be helpful to clinic staff, especially receptionist and intake personnel, if talking points were created to help staff answer patient questions regarding the clinic’s procedures and patients’ rights if immigration enforcement were to come on the premises. This will help reduce the community’s fears in seeking services.
I. **POLICY:** Given the uncertainty that immigrant communities are facing under the current administration, many patients have been cancelling their medical appointments and asking to be dis-enrolled from programs, like Medi-Cal, for which they are eligible. (ORGANIZATION) is committed to provide a safe and welcoming environment and minimizing the barriers for these families. (ORGANIZATION) will implement messaging strategies and signage to help inform our patients of their rights when it comes to immigration enforcement and to accessing health care services. All (ORGANIZATION) sites should aim to post signs in the languages most commonly spoken.

II. **PURPOSE:** The purpose of this procedure is to guide all (ORGANIZATION) employees on how to communicate with immigrant patients who express reservations in seeking services due to fears that it will place them or their family members at risk.

III. **SCOPE:** This policy and procedure applies to all (ORGANIZATION) sites.

IV. **PROCEDURE:**

1. **Sample Procedure Language – Signage**
   a. (ORGANIZATION) will display signage with Know Your Rights information throughout the clinic facility, including the waiting room area, hallways and examination rooms to help inform patients of their rights.
   
   i. **Sample KYR Signage**
      • [Know Your Rights Signage](#) in Arabic, Spanish, English, Chinese, Korean (United We Dream)
      • [Know Your Rights if ICE Comes to Your Door](#) (American Civil Liberties Union)
      • [Know Your Rights Signage](#) (IAmerica)
      • [Know Your Rights Regardless of Who is President](#)

   a. Federal law requires Federally Qualified Health Centers (or ORGANIZATION TYPE) to provide health care services to all individuals seeking these services at our clinic. Thus, (ORGANIZATION) will display signage that welcomes all members of the community to access these health care services at our facility. The signage will be available in the languages most commonly spoken by the communities that the facility serves.
   
   i. **Sample Welcome Signage**
      • [Immigrants Welcome](#) (Wisconsin Network for Peace and Justice)
      • [All Are Welcome Here](#) (Main Street Alliance)
      • [Immigrants and Refugees Welcome](#) (United We Dream)
      • [Refugees Welcome](#) (Just Seeds)
      • [Refugees & Family Welcome](#)
      • [Everyone is Welcome](#)
      • [Refugees and Immigrants Welcome](#)

   b. **Sample Procedure Language – KYR Handouts & Videos for Patients**
   a. (ORGANIZATION) is committed to provide a safe, healing environment for our patients by taking reasonable and appropriate steps to safeguard patients. In keeping with this commitment,
b. (ORGANIZATION) will make available Know Your Rights information to patients that can be found in the waiting room area.
   i. **Sample KYR Handouts and Videos**
      - [Know Your Rights](#) (Chinese) (Asian Health Services)
      - [Know Your Rights](#) (Vietnamese) (Asian Health Services)
      - [Know Your Rights](#) (Tagalog) (Asian Health Services)
      - [Know Your Rights](#) (Korean) (Asian Health Services)
      - [Know Your Rights](#) (Mongolian) (Asian Health Services)
      - [Know Your Rights](#) (English) (CaliforniaHealth+ Advocates)
      - [Know Your Rights](#) (Spanish) (CaliforniaHealth+ Advocates)
      - [Know Your Rights Red Wallet Card](#) (Immigrant Legal Resource Center)
      - [Know Your Rights Video](#) (American Civil Liberties Union)

c. **Sample Procedure Language – Sample Signage (Parking Lot)**
c. (ORGANIZATION) is committed to providing patients a safe environment to seek medical services. Thus, since parking lots are considered (ORGANIZATION) property, only authorized users can access them.
   i. **Sample Signage for Parking Lots**
      - Authorized Personnel Only
      - Authorized Personnel – Visitors Report to Office
      - All Visitors Must Report to Reception

**More information can be found on the [California Primary Care Association Immigration Resource Page](#)**