I write to comment on proposed UO Policy Number: III.05.02, Confidentiality of Student Health Care and Survivors’ Services Information, which I understand is under consideration for adoption in the near future. It is my understanding that this policy would deny UO medical practitioners access to legal counsel without first seeking permission from the patient or notifying the patient. Medical practitioners at the University Health Center have expressed concern that as currently drafted this policy will prevent practitioners (MDs, Nurse Practitioners, psychiatrists) from receiving the same legal services that private medical professionals would routinely receive and services that are routinely available to other UO officials.

My understanding is that UO personnel acting in the course and scope of their employment may receive legal advice about work-related matters, and that personnel should consult counsel if they are working on a situation that they reasonably believe may lead to legal action against the University and the personnel in question. In my 25 years as a leader on campus, I am aware that legal services is essential in protecting the university and ensuring that appropriate guidance is provided to leaders who, without that guidance, could inadvertently engage in action that places the university and themselves in legal jeopardy. I also believe that this guidance has assisted not only in reaching resolution for all parties short of formal legal action, but has helped prevent missteps that could otherwise lead to adverse consequences for patients, practitioners, and the university.

I have grave concerns about denying this resource to university medical practitioners for several reasons: 1. They would be the ONLY UO officials denied this resource. 2. They work with some of the most complex situations of any encountered by UO officials, making their access to legal counsel essential. 3. If medical practitioners inadvertently make an error in discussing a case with a patient or patient’s representative, there is not only exposure for the university (perhaps substantial exposure), but the practitioner would be putting their license and therefore their ability to practice at risk. 4. Implementation of this policy could place the existence of the Health Center in jeopardy because it will become increasingly difficult to retain and recruit medical professionals to work in the health center. 5. This is not a result that occurs in “private, off-campus” settings. Medical professionals are trained to consult legal counsel (risk management) when they encounter a case that they perceive may lead to legal action. Forcing those professionals to obtain the consent of the patient before they can consult with legal counsel will chill those professionals from seeking legal services and will result in the denial of that resource. I anticipate that this denial will increase the risk of inadvertent error at the Health Center and also make it difficult to retain and attract medical professionals to work in the Health Center.

UO’s current emergency policy achieves a result contrary to what former Provost Bronet and the Confidentiality Committee highlighted as the underlying purpose of any permanent policy: to provide University of Oregon students “the same level of strong confidentiality that they have in private, off-campus” medical care settings. I have no doubt that the temporary policy was well-intentioned. But by attempting to do more than provide “the same level of strong confidentiality” that one would receive in the private sector, the policy jeopardizes both the level of care and UO’s ability to attract the best medical professionals to carry it out.