

## NAHN National ICE SBAR with Recommendations

### Situation:

The NAHN Phoenix Chapter is requesting that NAHN National share this resource toolkit through social media, and chapter wide dissemination, regarding the recent change allowing U.S. Immigration and Customs Enforcement (ICE) access to sensitive areas. We request this resource be made available to all NAHN members so those in every practice setting such as hospitals, schools, and community care can access this information. This toolkit will provide nurses with easy to use, well cited and credible resources to be made available in English and Spanish. It contains accurate, concise information to protect patient rights and promote health equity in Hispanic communities, aligning with NAHN's mission to advance health, safety, and the quality of healthcare delivery services for the Hispanic community.

### Background:

NAHN is committed to advancing the health of Hispanic communities and advocating for the safety and well-being of our patients. With increased ICE activities in healthcare settings, Hispanic patients face heightened fear and stress, creating barriers to accessing essential medical care.

It is well documented that these activities by ICE directly impact patient and community outcomes, in part by undermining trust in healthcare systems. The results of this include, but are not limited to, the following:

1. Public health impacts e.g. delayed or missed medical follow-up appointments  
(<https://doi:10.1353/hpu.2012.0052>, <https://doi-org.ucsf.idm.oclc.org/10.1080/10705422.2024.2311246>)

- Chronic illnesses e.g. hypertension, diabetes  
(<https://muse.jhu.edu/article/561579>)
- For community acquired infectious diseases e.g. TB  
(<https://www.atsjournals.org/doi/10.1164/ajrccm.157.4.9709071>)

2. Mental health impacts for e.g. anxiety, depression:  
(<https://pmc.ncbi.nlm.nih.gov/articles/PMC7944641/> , <https://doi:10.1002/pam.22443> )

3. Maternal Health impacts e.g. potential for change in birth outcomes:  
(<https://pmc.ncbi.nlm.nih.gov/articles/PMC5837605/>)

4. Environmental health impacts eg. increased greenhouse gas emissions attributed to transportation used in detainment: (<https://www.epa.gov/ghgemissions/transportation-sector-emissions>)

The toolkit created by NAHN Phoenix includes critical guidance for nurses and healthcare providers. Below are some important steps to follow whether acting on behalf of others or yourself:

- **Remain Calm and Professional throughout these interactions. One should not become confrontational.**
- **Have a plan in place beforehand for staff and may advise concerned patients on the following:**
  1. Designate a person that can notify family or friends if you become detained by ICE.
  2. Identify an immigration lawyer that can represent you if the need arises.
  3. Identify a trusted individual and grant them access to your financial accounts (Bank, investments, etc.) so they can pay bills or retain an attorney on your behalf should the need arise.
- **Request Identification:** Ask the ICE agents to present their identification. This includes their badge and a valid warrant or subpoena, if applicable. ICE agents are required to identify themselves and present valid credentials.
- **Ask for the Scope of the Visit:** Ask the agents for clarification on the purpose of their visit. ICE agents may be serving notice of a routine audit, executing a specific investigation, or seeking information about specific persons.
- **ICE agents are NOT police officers:** They cannot enter any private areas without a **judicial warrant signed by a judge**. Private areas are defined as homes, churches, or private hospitals.
- **ALWAYS ask for a warrant:** Verify if it's a valid *judicial* (not an *administrative*) warrant to enter nonpublic places for purposes of conducting a search or apprehension judicial warrant before allowing entry and report to hospital administration and legal teams. If they cannot produce a judicial order signed by a judge in the specific district, they cannot enter.
  - Administrative warrants issued by ICE do not grant access only judicial orders.
  - **No warrant means they need official documentation:** Without proper documentation, ICE agents have no right to access patient information.
  - **Obtain a Copy of the Warrant or Subpoena:** If the ICE agents have a warrant, subpoena, or court order, you are entitled to a copy. This document

will specify which records they can access and which individuals are being investigated.

- Employers are not required to grant ICE authority to enter nonpublic areas of the business to investigate or conduct an arrest without a valid judicial warrant. A valid judicial warrant will be signed by a US district court (or a state court) judge, includes the location to be searched and the persons or items to be seized, and is dated and has been issued within the past 10 days.  
Resource

- **HIPAA violations:** Sharing patient names, immigration status, or medical information without a court order is unauthorized and a violation.
- **Patients have the right to remain silent:** They do not have to speak to ICE or sign documents without legal representation.
  - **If arrested by ICE, they can "invoke their 5th Amendment right"** by clearly stating that they are choosing to remain silent and wish to speak with an attorney before answering any questions, essentially exercising their right against self-incrimination under the Fifth Amendment of the U.S. Constitution; this means they do not have to answer any questions about their immigration status or other potentially incriminating details without legal counsel present.

Resources shared on the flyer include:

- **Nationwide (United We Dream):** 1-844-363-1423
- **ACLU Healthcare Provider's Guide:** ACLU Healthcare Guide
- **National Immigration Law Center (NILC):** NILC
- **Arizona Immigrants and Refugee Services (AIRS):** (602) 944-1821

We can also add other States local resources per chapter's discretion

**Immigrant Legal Resource Center (ILRC):** how to obtain your own red cards in over 15 different languages

<https://www.ilrc.org/red-cards-tarjetas-rojas>

The informational slides also reference the **Nursing Code of Ethics**, reminding nurses of their duty to practice with compassion and respect for all individuals and to advocate for the rights, health, and safety of their patients.

**Assessment:**

The presence of ICE in hospitals and other sensitive areas poses a significant threat to health equity. Fear of enforcement can discourage Hispanic patients from seeking timely medical care, leading to worsened health outcomes, untreated chronic conditions, and increased emergency room visits. This fear also undermines trust in healthcare systems, exacerbating health disparities and negatively impacting patient outcomes. Patients have also expressed fear of leaving their homes including for grocery shopping in fear that ICE will “catch” them, which based on Maslow’s Hierarchy of Needs impacts their basic needs for nourishment and safety.

To mitigate these effects, a standardized, culturally sensitive toolkit is essential. It will equip NAHN chapters and members with the tools to:

- Educate nurses on protecting patient rights during ICE encounters.
  - In hospitals, clinics, school nurse’s offices, mobile clinics, homecare settings, etc.
- Provide resources for accessing healthcare safely, regardless of immigration status.
- Disseminate consistent, accurate, and culturally sensitive social media messaging.
- Advocate for policies that protect patient rights and promote health equity.

**Recommendation:**

We recommend that NAHN National develop and distribute this ICE-related resource toolkit to all chapters and members. By providing clear, actionable information, NAHN will continue to lead efforts to promote health equity, protect patient rights, and ensure the safety and quality of healthcare delivery services for Hispanic communities, in alignment with our mission and values.

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