Steps to Develop an Organizational or Campus Amnesty Policy

- Dr. Lori Hart, Director of Educational Initiatives, Holmes Murphy Fraternity Practice
- Dr. Stevan Veldkamp, Executive Director, Piazza Center

An Amnesty Policy is intended to promote people calling 911. A policy can exist at the state, campus or organizational level. This guide is intended to help you think through fundamental questions, provide template language, and provide research to help drive the process. The following are cyclical steps to establish a formal protocol or policy. Amnesty Policies should be reviewed on an annual or biannual basis to inform the efficacy of the policy.

1. **Stakeholders**
   - Determine and assemble decision makers
   - Include students impacted by the policy
   - Legal team representation

2. **Assessment**
   - Use of policy data
     - Who are the responders
     - Increase in medical response (campus or community)
     - Geography or responders
     - Focus groups on perceptions of the policy
     - Create a plan for annual or biannual cycle of data use to inform edits to the policy

3. **Communications**
   - Brand the policy
   - Ensure the title connects with the philosophy and desired outcomes
   - **Amnesty Policy, Medical Amnesty, Good Samaritan Policy**
   - Market the proposal or policy

4. **Campus Resources**
   - Develop psycho-educational interventions for use in amnesty cases

5. **Exceptions**
   - Decide whether the protocol or policy will have exceptions for repeat episodes and severe cases

6. **Necessity**
   - Why do you think you need an amnesty policy?
   - How does our committee, board, or staff philosophically ‘feel’ about amnesty?

7. **Philosophical Approach**
   - How do you philosophically approach amnesty?
   - What are the barriers to implementing this philosophy?
   - Alignment with state laws, campus or organization policies, codes of conduct, and legal teams
   - Utilize assessment and research around amnesty to make informed decisions
   - Campus data on medical transports and incidents
   - Focus groups with students
   - Research efficacy of policies

8. **Who**
   - Individual or Organizational
     - Determine to whom amnesty will apply
     - Is amnesty for individuals or organizations or both?

9. **What**
   - Types of Behavior
     - Define what behaviors warrant amnesty
     - Health-related issues like alcohol, hazing, assault, drugs, or other substances
     - Medical emergency, life, or death situations

10. **Where & When**
    - **Jurisdiction and Timing**
      - Geography, property, or types of spaces
        - On or off campus
        - On or off group property
        - Interpretation of Clearly Act
        - Impact of State anti-hazing laws
      - Bystander intervention
      - Stay with person in need of medical attention as long as it is safe to do so
      - If school is not in session

Citation: Hart, L., & Veldkamp, S. (2023). Steps to Develop an Organizational or Campus Amnesty Policy: Professional and Volunteer Practitioner Guide. Holmes Murphy and Piazza Center.
References


Medical Amnesty Policy (MAP) Example

The Medical Amnesty Policy (MAP) aims to reduce barriers to seeking help and to encourage all members to make responsible decisions in potentially serious or life-threatening situations for members, new members, guests and themselves.

In potentially serious or life-threatening situations, the following three step process should be followed:

1. CALL 911 immediately to report the incident

2. CONTINUE to remain with the individual(s) needing medical assistance, so long as it’s safe to do so

3. COOPERATE with emergency officials and any subsequent investigation(s) by the university and the national/international organization

When the three-step process is followed, it allows the individual and/or chapter to do the right thing to help others and allows the individual and/or chapter to engage with the national/international organization for educational outcomes focused on future prevention.
Curated Summaries of References

JED Foundation: The Importance of a Thoughtful Medical Amnesty Policy


A well-considered medical amnesty policy forms an important part of a comprehensive campus plan for providing nimble emergency response in crisis situations, a plan of action for handling high-risk situations and promotion of interventions aimed at the prevention of devastating consequences from drug/alcohol use. Fear of college disciplinary action can prevent students from calling for help when they or a friend are in crisis due to drug and/or alcohol misuse. Limiting disciplinary sanctions for students who need to seek medical attention for themselves or a friend as a result of drug or alcohol misuse can reduce the perceived barriers to seeking help and make it easier for students to respond quickly and appropriately in a substance-induced medical emergency.

Medical amnesty policies are also intended to promote trust, collaboration and communication among mental health services, college administration, emergency services, college personnel and students – without the delay of second-guessing the need for urgent medical treatment due to fear of a disciplinary response from college authorities. As a result, students are more likely to initiate use of college emergency resources.

JED supports a medical amnesty policy that is well publicized among the student body and that clearly outlines the purpose of the policy, defines what is meant by medical amnesty and clarifies how medical amnesty works. It is important to inform students on how to report a serious situation that requires medical attention and make that information easily accessible and widely available. A good foundation for making medical amnesty effective is to educate the college community about the signs and symptoms of alcohol poisoning and drug overdose and provide guidelines on helping a friend in crisis due to overdose or poisoning.

Safety first: A medical amnesty approach to alcohol poisoning at a U.S. university

- https://www.leg.state.nv.us/Session/78th2015/Exhibits/Assembly/JUD/AJUD613D.pdf

An institutional decision whether or not to develop some form of medical amnesty is likely to involve philosophical disagreements among key stakeholders. At Cornell, there was general consensus among students, staff, and faculty that medical amnesty was an appropriate approach for the university. There were some individuals who felt that amnesty should be broader (e.g., cover any violations by individuals or organizations) or complete (i.e., not include any follow-up educational requirement). By contrast, some colleagues who have attempted to institute medical amnesty at other institutions have reported that objections from student services or public safety staff prevented establishment of such policies. Some object that it is unfair to “reward” some underage students with amnesty while others are held accountable. Others argue that medical amnesty would undermine attempts to send a clear message that underage drinking is unacceptable and might even lead to increased reckless drinking by individuals who would believe that they no longer have to worry about judicial consequences. The prevailing view at Cornell is that the university can be both firm about enforcement of underage drinking and flexible in exercising reasonable discretion when balancing competing needs in relation to the law and emergency medical care. Based on the experience at Cornell, campuses seeking to develop a medical amnesty approach should consider the following recommendations:

- Establish a formal protocol or policy.
- Determine to whom amnesty will apply.
- Determine jurisdiction.
- Develop psycho-educational interventions for use in amnesty cases.
- Decide whether the protocol or policy will have exceptions for repeat episodes and severe cases.
- Market the protocol or policy.
- Measure the impact.
Evaluating the Effectiveness of a Medical Amnesty Policy Change on College Students’ Alcohol Consumption, Physiological Consequences, and Helping Behaviors

This study provides empirical support that MAP policies do not increase consumption or problems and may reduce barriers to seeking help in the event of an emergency. Additional research is needed to establish the effectiveness of MAPs as an environmental-level strategy to reduce harmful drinking on campus.

Student awareness of campus medical amnesty policies

Greater attention is needed to how amnesty policies are implemented on college campuses, including how they are communicated to and interpreted by student-athletes.

Implementation of an Alcohol Medical Amnesty Policy at an Urban University With a Collegiate-Based Emergency Medical Services Agency

Medical amnesty policies (MAPs) at universities attempt to encourage students to seek emergency medical care by reducing disciplinary sanctions. This study analyzed how a MAP affected requests for emergency medical help to a collegiate-based emergency medical services (CBEMS) agency for alcohol-related issues.

Conclusion: MAP implementation at a university with a CBEMS is associated with a higher call volume, requests for service that occur earlier in the evening, and reduction in ALS requests for alcohol-related emergencies.

Student Perceptions of a University Medical Amnesty Policy Are Impacted by Race and Racism: A Qualitative Study

Alcohol consumption on college and university campuses is a public health concern. Some universities have instituted medical amnesty policies (MAPs) to encourage calling first responders to the scene of an alcohol-related emergency. This study describes perceptions of a university MAP and the perceived risks of calling first responders among a sample of undergraduate students at a mid-sized, private, residential university.

Conclusions: MAPs may alleviate concern about some perceived risks of calling first responders, but that benefit may not be experienced equitably among students of color. More research is needed to understand the complex relationship between alcohol policies, alcohol-related injuries, policing, and race on college and university campuses.