



EAST TENNESSEE CHILDREN'S HOSPITAL

Category: Administrative
Unit/Division: Administration
Policy No.: A00115
Former Policy No.: O70 Code Boy/Girl
Page: 1:5
Effective Date: 1/12

TITLE: CODE BOY OR CODE GIRL – SUSPECTED PATIENT ELOPEMENT (RUNAWAY) PROCEDURE

PURPOSE: To provide guidelines for action and notification in the event of a suspected patient elopement.

SCOPE: All Hospital Staff, Medical Staff, and Volunteer Staff

POLICY:

Any staff member who finds a patient missing will take action as described in the procedure below.

RELEVANT FACTORS:

DEFINITIONS: N/A

PROCEDURE:

I. MITIGATION

Patients at risk for elopement are placed on elopement precautions (See Elopement Protocol) on admission and include:

- Patients with history of elopement from home or other institutions / treatment facilities.
- Patients admitted as suicide attempt / gestures. Patients with history of suicide attempt / gestures. Patients with verbal threats to commit suicide. See Suicide Precautions Procedure S34.
- Patients admitted with court orders / court hold.
- Patients with verbal threats to leave hospital.
- Patients with known or suspected substance abuse.

II. RESPONSE

A. Missing Patient

If a patient is missing and an elopement is not suspected, check desk to see if patient has been checked out. If not, notify Security to assist with locating the patient.

B. Suspected Elopement / Communication

If an elopement is suspected, check desk to see if patient has been checked out. If not, call Code Boy or Code Girl.

Call "333" and ask PBX Operator to page either:

"Code Boy" – Age – Location

"Code Girl" – Age – Location

Example: "Code Boy" – 16 – 2nd Floor

"Code Girl" – 14 – 4th Floor

Have operator contact Security via radio. (Give location/floor; i.e., 2nd Floor, etc.)



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C. Departmental Responsibilities / Staff Roles

All departments to turn on hand held radios (if applicable) when code is paged.

1. Nursing Unit

- a. Secure exit doors on the unit where the child was found missing. To prevent a possible elopement.
b. Recheck all rooms/unit.
c. Notify NM or NC.
d. Notify parents or legal guardians if not present.
e. Notify Primary Physician and Social Work.
f. Refer all media inquiries to Community Relations.

2. Nursing Administration (Nurse Manager or Coordinator)

- a. Ask Operator to beep:
1) Nursing Director
2) Hospital President or VP on call
3) Hospital Security Director
4) Community Relations
b. Set up a control center on the unit.
c. Hold all hospital personnel.
All employees should remain in department or report back to department until cleared to go home.

3. Other Staff

- a. Secure all hospital exits. Staff securing exits will ask everyone attempting to exit or enter to please exit or enter through the Emergency Dept. If person refuses to exit through ER, notify Security STAT.
Staff assigned will respond to the following stations and should know where the nearest phone is located for that area:

Table with 2 columns: Station, Responsible Dept. Rows include: WEEKDAYS DURING BUSINESS HOURS: (8:00am - 4:30pm) and WEEKDAYS 4:30pm – 8:00am; WEEKENDS & HOLIDAYS (24 Hrs/Day)



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- 4. Security
 - a. **Lockdown Hospital using the Access Control System.**
Everyone must enter or exit through the Emergency Department.
 - b. **Search the facility and hospital grounds.**
Staff from Engineering will assist Security in search (7AM - 11PM).
 - c. **Obtain information from patient's nurse, parents and others that may have been around patient. Check patients picture in Security Department.**
 - 1) **sex**
 - 2) **age**
 - 3) **name**
 - 4) **description**
 - clothing
 - ht, wt, race, color of eyes / hair
 - identifying markings
 - 5) **suspicious activity (define)**
 - 6) **any visitors that may be accompanying patient**
 - d. **Security will notify Knoxville Police Department.**
- 5. Community Relations
Respond to media; document.

III. RECOVERY

- A. **Security will authorize Code Boy/Girl clearance.**
- B. **Staff stress debriefing can be provided by Social Work if requested.**

PRECAUTIONS: N/A

SUPPORTIVE DATA:

Preparedness:

- 1. **Staff will be oriented to the plan during orientation.**
 - 2. **Code Boy/Girl procedure will be exercised annually.**
 - 3. **Incidents will be reviewed through the Safety Committee for possible improvements to the plan.**
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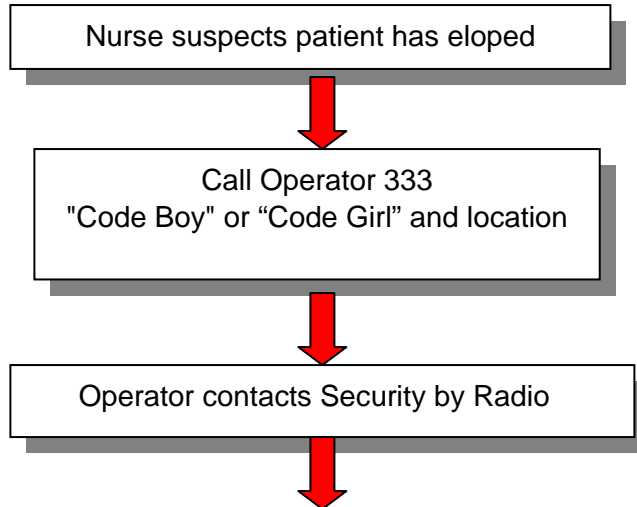
**TITLE: CODE BOY OR GIRL – SUSPECTED PATIENT
ELOPEMENT (RUNAWAY) PROCEDURE**

Policy Owner:	Emergency Preparedness Chair
Reference:	The Joint Commission Emergency Management Standards, 2012.
Related Policies:	Elopement Protocol Suicide Precautions Procedure
Related Documents:	
Origination Date:	7/02
Revision Dates:	2/06, 7/07, 1/08, 1/12
Last Review Date:	1/12
Next Review Date:	1/15
Date Retired:	
Approved:	Safety Committee



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Figure 1. Suspected Elopement Flowchart



<p>NURSING UNIT:</p> <ol style="list-style-type: none"> 1. Secure the area (elevator & exit doors) 2. Recheck rooms. 3. Notify NM or NC 4. Notify parents or legal guardian if not present. 5. Notify Chaplain/ Social Work. 6. Notify primary physician. 	<p>SECURITY:</p> <ol style="list-style-type: none"> 1. Lockdown Hospital. (ACS) 2. Obtain information from patient's nurse. 3. Search the facility. 4. Notify KPD. <p>OTHER STAFF:</p> <ol style="list-style-type: none"> 1. Secure all exits according to Section C1A.
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<p>NURSING ADMINISTRATION (NM or NC):</p> <ol style="list-style-type: none"> 1. Ask Operator to beep: <ol style="list-style-type: none"> a) Nursing Director b) Hospital Administration c) Hospital Security Director d) Community Relations e) Set up Control Center on the unit. 	<p>COMMUNITY RELATIONS:</p> <ol style="list-style-type: none"> 1. Handle media calls
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