



Rancho Los Amigos National Rehabilitation Center

ADMINISTRATIVE POLICY AND PROCEDURE

**SUBJECT: INFANT AND PEDIATRIC SECURITY, AND
ABDUCTION PREVENTION AND RESPONSE**

**Policy No.: A423
Supersedes: January 3, 2020
Revised: July 06, 2022
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PURPOSE:

The purpose of this policy is to inform and educate interprofessional workforce on procedures to follow in the event of a missing and/or suspected infant or child abduction from the facility by unauthorized individuals.

POLICY:

In the event of a missing or abducted Infant/child CODE PINK/PURPLE procedures will be implemented by all workforce members.

DEFINITION:

Infant— Under 1 year old

Child—1 year old to 17 years old

PREVENTION:

1. Each infant and child will have an identification band in place at all times. Nursing will verify the presence of an identification band at each shift.
2. For Pediatric patients 13 years old and below, the following will be completed by Nursing staff on admission.
 - a. Take a picture of the patient and attach in the front inside cover of the patient's hardback chart.
 - b. Load the photograph and enter patient information into the patient monitoring system (Wanderguard)
 - c. Apply the patient monitoring bracelet to the patient.

Key Point: If the patient refuses to wear the bracelet, the patient's parents or Legal guardian will be contacted such that they can attempt to obtain compliance from patient

- d. Patient refusal/ non - compliance will be documented in the medical record.
3. Admit to designated pediatric area in the unit.

EFFECTIVE DATE: April 2000

COUNTY OF LOS ANGELES • DEPARTMENT OF HEALTH SERVICES

APPROVED BY:

Key Point: The following rooms in JPI 1 North are primarily designated for pediatric patients: PN1002, PN1004, PN1008, PN1010, PN1014, PN1016. Room designation is subject to change for patient safety reasons or in order to comply with administrative, infection control, or regulatory mandates. Other rooms in the unit may be used as needed.

4. Inform the patient and/or family/guardian reason for taking a picture (for patient safety) and the policy regarding patients leaving the unit.

Key Point: Should the patient be absent without authorization from the unit, the picture will be used as a method of visual identification of the patient during the search process.

5. The Patient Monitoring System (Wanderguard) will be activated for all children 13 years of age and younger. If the patient monitoring device is not available, a care companion will be provided for safety. Telesitter will be utilized as deemed appropriate by clinical team.
6. Infants and Children may not be removed from the nursing unit except by a parent, legal guardian, or authorized workforce member. An exception to this requires a physician order and a verified written authorization from the parent/legal guardian to release the patient to specific individual.
7. Infants and children will be released from the unit for therapeutic activities only in the care of designated workforce members. Workforce member must remain with patient at all times when not on unit.
8. Patients going home on a pass or being discharged may be released, upon a written physician's order, in the care of a parent, legal guardian, or other adult with written authorization of the parent or legal guardian. Appropriate picture identification must be provided.
9. Visitors to the Pediatric Unit must check in and obtain a visitor sticker at the security substation of the facility via Outpatient Building or via Jacquelin Perry Institute (JPI). Entrance to the unit requires a card key. Staff will ask visitors for the purpose of the visit prior to being allowed in the unit. Visitors presenting to the unit without a sticker will be directed to check in to security station.
10. The northwest and northeast exit door of unit JPI 1 North will only be used for emergency purposes.

Key Point: These doors will alarm should someone attempt to use it to enter or exit the unit.

RESPONSE TO MISSING PATIENT OR SUSPECTED ABDUCTION:

A. UNIT STAFF

As soon as staff realizes that an infant/child is missing, the following steps will be done:

1. Call the operator at extension 544 and request that Code PINK or Code PURPLE be announced over the public paging system and provide the following information:
 - a. Unit/Location

- b. Patient age, gender and general description.
Key Point: Code Pink is activated for Infants (0-11 months old).
Code Purple is activated for missing Child (1-17 years old).
 - c. The operator will notify the campus Sheriff, JPI Security, Safety Officer, Hospital Administrator, and Nursing Administration.
 - d. Provide complete description of any suspicious individuals to Sheriff Department Dispatcher at Ext 57042 and JPI Security.
 - e. As applicable, assist JPI security/Sheriff in reviewing video footage to identify the patient.
2. Complete a rapid check of the unit and proximal area.
Key Point: Use the yellow “Checked ✓” stickers, kept in the labeled box at the Care Givers Station, to place on the door of each room to indicate which rooms in the unit have already been checked for the missing/abducted infant/child. Participate in the monitoring of exists within the perimeter.
 3. Call the operator and cancel the code if the infant/child is found.
 4. Notify the patient’s Provider.
 5. Notify Nurse Manager or Designee or Nursing Resource Office
 6. Notify Regulatory/Accreditation Director if child is not located.
 7. Consult with Risk Management as needed.
 8. Complete documentation of the facts of the incident including efforts to locate the child in the electronic health record.
 9. Complete an event notification before your shift ends.

B. NURSE MANAGER/NURSING ADMINISTRATIVE SUPERVISOR (ANS) or DESIGNEE

1. Convene a unit huddle including but not limited to patient’s provider, area administrator, and social worker to brief all workforce members on the unit.
2. Consult with Risk Management as needed prior to family discussion.
3. Notify the parent/guardian that the infant/child is missing/abducted. Obtain any information that could assist in locating the missing infant/child.
4. Do not move or remove any items in the patient’s room or area where the infant/child was last seen. Law enforcement may need to investigate the area and collect forensic evidence.
Key Point: Workforce members will comply with directions from law enforcement during criminal investigation-
5. Provide a private location/room for the parents/guardian if they are present or when they arrive.
Key Point: A Nurse and Social Worker will remain with the parents/guardian at all times.
6. Contact the Chaplain and other support services as indicated.

C. SHERIFF/SECURITY

Sheriff and Security personnel may conduct the following but not limited to:

1. Security personnel will secure all hospital entrances/exits and monitor individuals exiting pending arrival of Medical Center Sheriff.

2. An immediate search of the patient unit and the last place the infant/child was seen will be conducted.

Key Point: The picture of the infant/child in hard back chart, and the picture in the patient monitoring system will be used to identify the patient during the search process. Unit staff will share available patient's photo with security and law enforcement.

3. Immediately establish a command post and coordinate a floor by floor search of the building, interior and exterior.
4. Assume control of the location.
5. Screen individuals exiting and check suspicious packages.
6. Contact the Downey/South Gate Police Department and other appropriate proximal Police Departments and the Sheriff Department as applicable.
7. Contact other agencies as needed including but not limited to FBI and National Center for Missing and Exploited Children.

D. HOSPITAL ADMINISTRATION

1. Notify Department of Health Services (DHS) Executive Office.
Key Point: Only Hospital Administration, Public Information Officer or Designee is authorized to release information to the public/media.

E. SOCIAL WORKER

1. Notify Department of Children and Family Services as applicable.

F. REGULATORY/ACCREDITATION DIRECTOR

1. As applicable, report the incident to regulatory entities.
2. Notify DHS of reports made to CDPH/CalHEART

REFERENCE: Comprehensive Accreditation Manual for Hospital, The Joint Commission Environment of Care (E.C.) 02.01.01
DHS Policy 905 "Emergency Codes"
Hospital Association of Southern California website:
<https://hasc.org/initiatives-resources/all-initiatives/hospital-emergency-codes/>
Rancho Administrative Policy A415 "Uniform Statewide Emergency Call Code"
Rancho Administrative Policy B704 "Event Reporting"

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AM 07/2022