



Rancho Los Amigos National Rehabilitation Center

ADMINISTRATIVE POLICY AND PROCEDURE

SUBJECT: **PATIENT ELOPEMENT**
(Prevention and Response for Cognitively
Impaired Patients)

Policy No.: **B707**
Supersedes: **Sept. 18, 2018**
Revised: **May 25, 2021**
Page: **1 of 5**

PHILOSOPHY

Rancho Los Amigos National Rehabilitation Center (RLANRC) makes every reasonable effort to ensure patients under its care are provided a safe environment. This effort may necessitate the implementation of elopement precautions.

POLICY STATEMENT

Rancho's elopement guidelines are implemented to maintain patient safety. Patients with diminished mental/medical capacity; or patients with impaired cognition; or patients who are a danger to self may not leave the hospital unsupervised. Elopement guidelines do not apply to adults with capacity and who leave against medical advice or leave voluntarily.

DEFINITIONS

Elopement is defined as a patient who is incapable of adequately protecting him/herself, and who departs the health care facility unsupervised and undetected.

Capacity is defined as a person's ability to understand the nature and consequences of a decision, and to make and communicate a decision, and the ability to understand the significant benefits, risks, and alternatives of proposed healthcare. [Refer to Probate Code Section 4609]

PROCEDURE

ELOPEMENT PREVENTION

I. Inpatient Care Setting

Upon admission or any change in patient's clinical condition, the Registered Nurse (RN) or provider may initiate elopement precautions on patients lacking capacity or suspected to have diminished capacity for decision-making.

Key Point: When a patient is placed on elopement precautions, the provider must document capacity evaluation within 48 hours.

If the patient has a surrogate decision maker, the surrogate decision maker may opt to sign patient out against medical advice.

A. Criteria:

EFFECTIVE DATE: July 1996

COUNTY OF LOS ANGELES • DEPARTMENT OF HEALTH SERVICES

APPROVED BY:

Ben Ardo

If the patient lacks capacity or suspected to lack capacity, and if the patient is mobile, and has the ability to independently leave the unit or campus, any of the following criteria may be utilized to initiate elopement precautions:

- Patient's diagnosis includes dementia, or brain injury, or psychotic episodes, or alcohol or drug withdrawal, or cognitive delay, or any diagnosis that affects patient's capacity for decision-making.
- Patient has history of attempting to elope or previously placed on elopement precautions.
- Patient exhibits impulsivity and/or exit seeking behavior.
- Patient verbalized intent to leave or worried about something outside the facility.

B. Physician Responsibilities:

Patients admitted to the hospital are presumed to have capacity unless otherwise suspected of having diminished capacity.

1. The physician or designated consult is responsible for the determination of patient's capacity and medical record documentation of patient's capacity. [Refer to Probate Code Section 4658].
The physician is responsible for evaluation and reevaluation of patient's mental/medical capacity and may consult psychology for capacity determination as needed. The expectation is for the provider to document the capacity evaluation within 48 hours of initiating the elopement precautions.

Based on the provider's assessment, the provider will document the patient's capacity status and communicate with the patient's nurse.

C. Staff Nurse Responsibilities:

1. Upon admission or any change in patient's mental status or cognition, the nurse shall notify the patient's provider if the patient is suspected to have diminished or lacked capacity.
2. For patient's safety, the nurse may initiate the "Elopement Precautions," pending capacity evaluation by provider.
3. Patient on elopement risk will be identified by any of the following:
 - A. A green elopement clip attached to the patient's wristband
 - B. Green elopement top (gown, jacket, and/ or scrub top),
 - C. A green elopement wristband
 - D. A green triangle placed outside patient's room.

Key Point: Pediatric patients under the age of 13 with or without any cognitive deficit are to wear the patient elopement monitoring device at all times. The elopement monitoring system is not applied if a trained family member or care companion is continuously monitoring the patient. Patients under 18, unless emancipated may not leave the facility against medical advice unless authorized by the parent, guardian, or surrogate decision-maker.

4. Initiate the Risk for Injury Plan of Care in Interdisciplinary Plan of Care (IPOC) and create individualized patient goals. Review and revise Risk of Injury Plan of Care IPOC every shift as needed based on ongoing assessments and changes in patient condition. Identify applicable interventions including but not limited to:
 - Apply and activate electronic patient elopement monitoring device
 - Provide care companion in absence of “patient wandering system” and if needed.
 - Ensure patient wear the green Elopement Precaution top (gown, jacket, and/ or scrub top) green Elopement Precaution triangle clip to white wristband, and green Elopement Precaution wristband as appropriate.
 - Place green Elopement Precaution triangle outside patient’s room.
 - Place patient on telesitter monitoring device as appropriate**Key Point:** Refer to Nursing Telesitter Policy # A462 for additional information.

5. Initiate and document teaching given to the patient and significant other i.e. the purpose of elopement precaution and interventions in EHR.

6. Take the patient photograph and upload the picture and patient information onto patient wandering system device to activate the patient elopement monitoring system.

Key Point: IT staff will provide technical support and system maintenance.

- Security Staff will be notified when a patient is placed on Elopement Precaution by using the Patient Elopement Precaution Notice Form (see Attachment A). Print 5 patient photographs, labeled with patient’s name and unit. 1 Copy will be placed in the patients “paper chart” and the other 4 give to main JPI Securitas Station for distribution to the following; JPI Main Securitas Station, LA County Sheriff Dispatch Office, Outpatient Building (OPB) Security Station and Security at patient’s unit entrance. Upon discontinuation of elopement precaution, or when patient is discharged, the picture will be removed from the patient elopement monitoring system by unit staff nurse or designee Notify JPI Main Securitas Station, when elopement precaution is discontinued or when patient is discharged.

7. The patient will not be allowed to leave the unit unless accompanied by authorized staff or trained family members.

8. . Hand off communication will be done between caregivers and security staff.

C. Interdisciplinary Team (IDT) Responsibilities

1. All IDT members who provide care must adhere to the established elopement plan of care.
2. Nursing staff will be notified when patient is taken out of the unit for therapy or appointments.
3. The system will be suspended temporarily before taking the patient out of the unit.
KEY POINT: Temporary deactivation of the system will prevent false alarms.
4. Notify nursing staff upon patient return to the unit and provide hand off communication. Ensure that system is re activated upon patient’s return to the unit.
5. Report and document any pertinent patient changes in EHR.

D. Campus Sheriff and Security Officers will:

1. JPI Securitas Main Station will keep 1 of the 4 copies of the Patient Elopement information and the other 3 copies will be disseminated to: LA County Sheriff Dispatch Office, OPB Securitas Station, and Security Post outside the units.
2. Search process in accordance with LASD protocol
3. Notify outside police agencies as needed.
4. Coordinate the safe return of patient to unit, if located.
5. As applicable, Sheriff will enter required patient demographics and pertinent information into the Statewide Missing Persons System and will remove information accordingly if patient is found.
6. When elopement precaution is discontinued or when patient is discharged, discard the photographs in the HIPPA shredder bins.

WHAT TO DO IF A PATIENT ELOPES FROM INPATIENT AREA

Staff Who Identified the Patient Is Missing:

- A. Immediately search the area.
- B. Notify unit charge nurse and nurse manager, or administrative nursing supervisor. The nurse manager, administrative nursing supervisor or designee will lead and coordinate the search.
- C. If unable to locate patient, call x544 to activate "Code Green" and provide the following information:
 1. Patient's Unit/Area
 2. Brief patient physical description (age, sex, race, unit, etc.)
- D. Notify campus Sheriff by calling x551. Provide the following information:
 1. Missing patient's name
 2. Reason for elopement precaution status
 3. Description of the patient
 4. Last known whereabouts
- E. Afterhours, weekends, and holidays, and if the patient remains missing for more than 30 minutes, the ANS will notify Clinical Nursing Director and Hospital Administrator.
- F. If the patient sustains serious injury, notify Risk Manager Immediately.

Unit Staff

- A. Will continue search and notify family that the patient is missing.
- B. Inform the unit Nurse Manager and/or Administrative Nursing Supervisor.
- C. Notify Attending Physician / on call Physician
- D. Enlist Social Worker assistance and Administrative Nursing Supervisor if event occurs after hours or on weekends in notifying the patient's family.
- E. If patient is found and returned to their assigned area:
 1. Call the operator to cancel "Code Green" announcement.
 2. Notify the Office of L.A. County Sheriff at Ext. 57042 and Nurse Manager or Administrative Nursing Supervisor of patient's return.
 3. Re-assess patient clinical condition and notify Physician for any pertinent findings.
 4. Re-institute elopement precautions and notify the family.
- F. Document patient's elopement and other pertinent information in the EHR.
- G. Enter an online event report or Safety Intelligence report prior to end of shift.

II. Ambulatory Care Setting

Missing Patient:

The patient's caregiver is responsible for accompanying the cognitively impaired patient at all times while on Rancho grounds. Patients who are not in the custody of Rancho staff or who are not under clinical staff encounter may be reported missing by caregiver. The following protocol applies:

- A. Notify campus Sheriff for assistance in locating the patient. Caregiver may provide campus Sheriff of patient's description, including attire, and last known location.
- B. Code green may be initiated to alert other staff members of the missing patient.
- C. Document incident in patient's medical record.
- D. Enter an online event notification system or Safety Intelligence report.
- E. Notify APS or DCFS as applicable if there is suspected patient negligence.

WHAT TO DO IF A PATIENT ELOPES FROM AMBULATORY CARE AREA

If the cognitively impaired patient or patient without mental/medical capacity is under the custody of Rancho staff or during clinical encounter, including transportation to another area by Rancho staff and the patient elopes, the following protocol applies:

Staff Who Identified the Patient Elopement:

- A. Immediately search clinic and surrounding area and last known location of the patient.
- B. If unable to locate patient call x544 to activate "Code Green" and provide the following information:
 - Patient's clinic area
 - Brief patient physical description
- A. If the patient is not located after searching clinic and surrounding area, call the campus Sheriff at x 551. Provide the following information:
 - 1. Missing patient's name.
 - 2. Reason for elopement precaution status.
 - 3. Description of the patient.
 - 4. Last known patient location

➤ **Key Point:** If patient is not located, the L.A. County Sheriff may notify the Downey Police and other local law enforcement agencies.

- B. Continue to search and notify family/ significant other if appropriate.
- C. Inform the Outpatient Care Nurse Manager and/or designee about the patient elopement.
- D. Notify physician.
- E. Enlist social work assistance in alerting the patient's family/significant other of the patient's elopement if appropriate.
If the patient sustains serious harm or injury, notify Risk Manager immediately .

If patient is found and returned to ambulatory care area or caregiver custody:

- A. Call the operator to announce "Code Green cleared".
- B. Notify the Office of L.A. County Sheriff at Ext. 57042 and Outpatient Care Manager or designee of patient's return.
- C. Re-assess patient clinical condition and notify physician for any significant findings.
- D. Document patient's elopement and other pertinent information in the EHR.
- E. Enter an online event report or Safety Intelligence report.

III. APPROACHING A PATIENT WHO ELOPED

Staff Responsibilities

A. Evaluate situation and observe for:

1. Calm demeanor
2. Confusion
3. Agitation
4. Talking to self
5. Aggression
6. Verbal abuse
7. Threat or commission of physical abuse
8. Readiness for fight or flight response

B. If patient is calm and passive:

1. Approach in a friendly, calm, and engaging manner maintaining a 3-4 feet distance.
2. Introduce yourself by first name and ask patient their name. Keep conversation simple. If patient is unable to state their name, ask to see their identification band.
3. Instruct available staff to alert the unit and L.A. County Sheriffs dispatch of the patient's location.
4. Offer to accompany patient to unit while providing needed assistance.
 - a. If patient accepts, assist with guiding the patient back to the unit.
 - b. If patient declines, remain with the patient and instruct other staff to notify unit and ask for assistance.

C. If patient is aggressive or agitated activate Code Gold for inpatients by calling x 544 or Code Gray for outpatient by calling ext. 551.

D. As applicable, 5150 may be initiated by trained staff for inpatients and law enforcement may initiate 5150 for ambulatory care patients.

➤ **Key Point:** Refer to Rancho Administrative Policies Code Gold – Behavioral Response Team B814.3 or Code Gray – Combative Person B814.4.

REFERENCES: RLANRC Policy No. B501 – Photographing of Patients and County Facilities

RLANRC, Office of L.A. County Sheriff, Policy No. 98-34

RLANRC Department of Pediatrics Policy No. P122- Safety

RLANRC Administrative Policy No. B814.3 Code Gold – Behavioral Response Team

RLANRC Administrative Policy No. B814.4 Code Gray – Combative Person

RLANRC Clinical Nursing Policy No. C211 – Care Plan Process and In- Patient Documentation

RLANRC Nursing Administrative Policy No. A 462 Telesitter- Remote Continuous Visual Monitoring of Pts.

DHS Policy 310.500 Care Companion Policy

Agency for Healthcare Research and Quality (AHRQ) “Elopement”

Revised Date: 05/2021

Myla Maranan MSN, RN, CNML

Deepa Kannampuzha, MSN, RN

April Macabuhay BSN, RN, CBIS

Bincy Mathews, MSN, RN

Konita Wilks DDS

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Page: 7 of 7

**RANCHO LOS AMIGOS NATIONAL REHABILITATION CENTER
ELOPEMENT PRECAUTION NOTIFICATION**

TO: Rancho JPI Main Securitas Station

FROM: Primary Nurse _____
(Print)

SUBJECT: PATIENT ELOPEMENT PRECAUTION NOTICE

Patient name _____

MRUN # _____
(Print)

Unit _____ Room# _____ Bed # _____

Eloperment precautions initiated: Date: ____/____/____

GREEN CLIP ON PATIENT WRISTBAND (ID) AND SOLID GREEN ARMBAND

- Green clip attached to patient wristband
- Patient refused green clip to wristband/ Patient refused/family will not consent patient wearing green armband

GREEN ELOPEMENT TOP

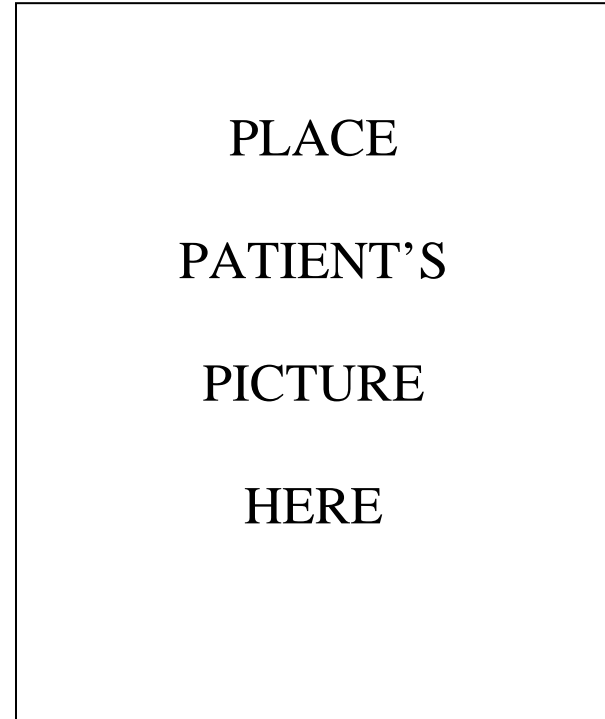
- Patient wearing green elopement top
- Patient refused /family will not consent to patient wearing green elopement top

PHOTOGRAPH

- Photos taken. One placed in patient's "paper chart" and 4 attached for JPI Main Securitas Station for dissemination. Photo Distribution: 1. JPI Main Security 2. OPB Security 3. LA County Sheriff Dispatch Office 4. Security outside patient unit

Questions, please contact _____ at, extension _____.
(Nurse Manager/ Designee - Print)

Completed By: _____ Date: _____
Print Name Signature



NAME
RLANRC#
DOB/GENDER
UNIT