

**OLIVE VIEW-UCLA MEDICAL CENTER
MENTAL HEALTH NURSING
POLICY & PROCEDURE**

**NUMBER: 6187
VERSION: 3**

SUBJECT/TITLE: PERSONAL SEARCHES

MD ORDER: YES [] NO [X]

The Department of Psychiatry restricts items that are considered hazardous in the patient care areas in order to maintain a safe and secure treatment environment and to reduce the risk of harm to all patients, staff and visitors,

POLICY:

Personal searches of patients will be conducted upon admission to the Psychiatric Emergency Room (PER) to restrict the entry of hazardous items into the treatment environment. All searches shall be conducted in a manner that respects the patient's dignity and privacy to the greatest extent possible.

PURPOSE:

To provide guidelines for personal searches of patients admitted to the Department of Psychiatry - Emergency Service and Inpatient Units. To prevent potentially dangerous items or substances from being brought onto the secure treatment areas.

DEPARTMENTS: MENTAL HEALTH NURSING, NURSING, PER

DEFINITIONS:

I. DEFINITIONS

Contraband / Hazardous Items: are items that constitute a threat to the safety of patients and staff and/or the security of the unit. Examples of hazardous items, are but not limited to the following :

PROCEDURE:

- drugs
- belts, shoelaces, and cords from clothing (e.g. sweatshirts)
- Gowns or pants with draw strings long enough to wrap around the neck.
- razors of any kind, including electrical
- Glass items such as bottles, vases, make-up containers, picture frames, etc.
- metal items such as soda cans, scissors, tweezers, nail clippers, nail files, hangers
- Staples, paper clips, spiral-bound notebooks, silverware etc.
- electrical appliances such as hair dryers
- battery operated appliances such as a radio
- Any sharp items
- aerosols such as hairspray

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- liquids such as perfume, nail polish, etc. that would be harmful if ingested
- lighters, matches
- flowers and plants unless known to be non-toxic if ingested
- weapons such as pocket knives
- objects that may be used to cut, choke, asphyxiate
- Plastic
- Chemical items such as cleaning products

Patient Search: A patient search is a search of a patient and their clothing and belongings for the purpose of identifying and securing restricted items. A patient search may include the use of a security wand to detect potentially hazardous items. Patient searches are conducted upon admission. As with other searches, the extent of a patient search is based on a weighing of the relative risks and benefits of the search, including the potential for harm, the imminence of the harm, the risk of trauma to the patient, and whether less intrusive procedures exist which could verify the presence or absence of restricted items. All patient searches shall be conducted in a manner that respects the patient's dignity and privacy.

II. PROCEDURES

1. Explain the process to the patient, and specifically ask the patient whether he or she has any hazardous items in his or her possession.
2. Ask the patient to empty all pockets and turn them inside out.
 - Ask patient to stand with feet apart and with hands slightly raised
 - Move the scanner within two (2) inches of the person being inspected. Special attention should be given to the waist, underarm, and ankle areas. To scan feet and ankles, sweep the Scanner perpendicularly and approximately one to two inches high above the floor.

a. POLICE CASES – to be done in the presence of officers

- i. Search patient for contraband as per admitting protocol.
- ii. Wand patient after contraband search.
- iii. Request to have handcuffs removed

b. AMBULANCE CASES (*On Gurney*) -

- i. Bring patient into holding room.
- ii. Once off the gurney, search for contraband as per

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- protocol
- iii. Wand patient per protocol

c. **WALK-IN CASES** (*Placed on HOLD*) -

- i. Search for contraband as per protocol
- ii. Wand patient per protocol

d. **DEM Cases** (*via wheelchair/gurney*) -

- i. Bring patient back to holding room
- ii. Search for contraband
- iii. Wand per protocol

5. All clothing and other personal items are to be recorded on the Electronic medical record.

6. All valuables are to be listed on the Record of Valuables form (**OV 1093**) and placed in the valuables envelope. A copy of the record is to be placed in the patient's medical record and the envelope is to be placed in the locked cabinet in the Contraband Room. The number of the valuables' envelope is to be written on the inventory form (**OV1164**).

7. Any personal items that could be harmful to patients, staff or visitors, are to be removed from the patient's possession. This includes, but is not limited to, sharps, matches, glass, electrical items and drugs. These items are to be recorded on the inventory form, tagged with the patient's name and placed in the Contraband Room.

8. If a gun, large knife, or other potentially dangerous or lethal weapon is discovered in a patient's possession, it is to be removed from the patient area immediately. The Sheriff's Office is to be contacted to confiscate the weapon(s).

9. If a patient wishes to retain an item of value, such as a piece of jewelry, he/she is to sign the Patient Valuable Release form (**OV 1093A**). A staff member is to witness the patient's signature. The original release form is to be placed in the patient's medical record. The patient is to receive a copy.

10. With the patient's consent documented in the medical record, the patient is to change into a hospital gown to facilitate an inventory of the patient's clothing and a skin assessment. This is to be completed in the restroom or other private area by a staff member(s) who is of the same

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sex as the patient. Respect for the privacy and dignity of the patient is to be maintained throughout this procedure.

11. The skin assessment form, Diagram for Skin Lesions (**OV 1105**), is to indicate any bruises, scars, lacerations, lesions, or other marks.

12. The patient may change back into his/her own clothing after the clothing inventory and total body skin assessment is completed.

13. If the patient's clothing is not wearable because it is extremely soiled, malodorous, damaged, or sexually inappropriate, the patient may be refused his/her clothing and required to remain in a hospital gown. A doctor's order is to be obtained and a Record of Denial of Patient's Rights form (**OV 1542**) , is to be completed, indicating next to #1 the date the patient's right to wear his/her clothing was denied, the date the right was restored, and the number of days the right was denied. The reason(s) the right was denied is to be entered on the form under Explanation of "Good Cause for Denial of Rights and in the progress note.

14. If the patient refuses to change into a hospital gown to facilitate the personal search, and there is probable cause to believe the patient has in his/her possession a weapon or contraband, a search of the patient's clothing may be conducted over the patient's refusal when there is no less intrusive way of ensuring the protection and safety of all persons in the area. A doctor's order is to be obtained and a Record of Denial of Patients' Rights form is to be completed indicating next to #2, the date the right was denied, the date the right was restored, and the number of days the right was denied. The reason(s) the right was denied is to be entered on the form under Explanation of "Good Cause for Denial of Rights", and in the progress note. Probable cause to believe the patient has contraband in his/her possession may be any of the following:

- A. The patient is suicidal and/or homicidal and there is reason to believe he/she may have brought weapons or contraband into the facility.
- B. The patient has, in the past, brought weapons, drugs, or other contraband into a facility.
- C. The patient has a recent history of illegal drug use and there is reason to believe he/she may have such drugs on his/her person.
- D. The patient appears to be under the influence of an illegal drug.

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The patient's drug usage and/or, possession while in the facility have been reported to staff.

E. The patient has had visitors who, there is reason to believe, delivered contraband to the patient

15. If during the search of the patient's clothing it is determined that there is probable cause to believe the patient is concealing contraband; such as a weapon, medication, sharp object, or matches, on his/her person, a total body skin assessment may be conducted over the patient's objection. A doctor's order is to be obtained and a Record of Denial of Patients' Rights form is to be completed indicating next to #g-Others, that a body scan was completed and the date. The reason(s) the body scan was performed over the patient's refusal is to be documented on the form under Explanation of "Good Cause" for Denial of Rights and in the progress note.

To determine if objects may be concealed, staff will scan patient with a metal detector wand. If there is any reason to suspect that restricted items may be hidden on the patient or in the patient's undergarments, staff will use the wand to conduct the body scan.

III. Documentation:

Staff will document the following after the search and scan are completed :

- Patient gave verbal permission.
- Reasonable cause to conduct a search/scan over patient's objections.
- Results of search and scan.
- What items (if any) were confiscated and actions taken.

Authority: Welfare and Institutions Code Section 5328.1 (b)

References:	
Approved by: Alex Kopelowicz (Chief Physician), Bonnie Bilitch (Chief Nursing Officer)	Date: 04/11/2018
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