

# SECTION 11.10

## CODE GREEN: MISSING HIGH-RISK ADULT PATIENT

**PROCEDURES TO BE FOLLOWED IN THE EVENT AN ADULT IS MISSING or  
ELOPED WITHOUT STAFF KNOWLEDGE THAT OCCURS AT LOMA LINDA  
UNIVERSITY HEALTH**

### **RESPONSE**

#### **Hospital wide response to “Code Green”**

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| <b>Missing Patient</b>                 | <ol style="list-style-type: none"><li>1. When an adult high-risk patient is found to be missing the employee notifies Security Control Center by calling 911.<ul style="list-style-type: none"><li>• The employee provides as much information or details as requested by security.</li><li>• This does not delay the response time.</li></ul></li></ol>  |
| <b>Employee</b>                        | <ol style="list-style-type: none"><li>1. Make a rapid assessment of the situation, observing events and people in the area.</li><li>2. Alert all staff of the “Code Green.”</li></ol>   |
| <b>Area Staff</b>                      | <ol style="list-style-type: none"><li>1. The department ensures staff cover exits and stairwells on units and staff begin to assist with unit search.</li><li>2. The department ensures that staff search most likely areas.</li><li>3. The department assigns someone to search the patient rooms, closets, bathrooms, utility rooms, etc.</li><li>4. The department accounts for all patients on the unit.</li><li>5. The department notifies the manager/supervisor/director.</li><li>6. The department provides a private room for family of missing patient.</li><li>7. Items in the patient’s room are not to be moved in order to preserve evidence. Roommate shall be moved to another room if available in order to provide privacy for the family of the missing patient.</li></ol> |
| <b>Staff on other floors and units</b> | <ol style="list-style-type: none"><li>1. Immediately upon hearing “Code Green” staff will be alerted to missing patient.</li><li>2. Report any person not having proper identification, exhibiting suspicious behavior or appearing to be lost to the Security Department.<ul style="list-style-type: none"><li>• If any of the above are witnessed, ask the person to wait momentarily until the “Code Green” is over or the adult is cleared by security</li></ul></li><li>3. If the person refuses to stop and exits the facility, note their physical description, direction of travel, and immediately report any observations to Security Control at 911.</li></ol>   |

- Security Control Center**
1. Immediately notifies security officers to establish perimeter and conduct search.
  2. Announces Code Green and the floor from which the patient is missing (i.e. Code Green, seventh Floor).
  3. Sends out group page to appropriate hospital administrators/managers.
  4. Notifies local law enforcement if missing patient is confirmed.
  5. Initiates group page to administrators and managers.
  6. Dispatches Security Department representative to unit to meet with reporting employee when patient is confirmed missing.
  7. Completes written report.
  8. Establishes command post as needed.

**Administrative Supervisor/Nurse Manager/Designee** Notifies family/legal guardian, attending physician, blood bank and clinical lab to retain specimens for DNA identification, if needed when patient is confirmed missing.

- Other Hospital Staff**
1. Inform families/visitors/patients that a patient is missing and they should stay with their family member until the “Code Green Clear” is announced.
  2. Reports persons exhibiting suspicious behavior to security department at extension 911.

- Public Relations**
1. Activates emergency media proceedings.
  2. Arranges media briefing at regular intervals.

## PREPARATION

- Education and Training**
1. Staff are educated to the “Code Green”: Missing High-risk Adult Patient (over the age of 18) by the following:
    - General Hospital Orientation for new employees
    - Annual BLUE (Basic Learning Units for Employees) Book
    - Department/unit orientation
    - 10 minute (educational posted in-service)

- Policies**
2. The following policies are utilized for education and training:
    - LLUH Security Operating Policies MC-S-9 and CH-S-9 “Patients Missing from Units and Administrative Procedure MC-S9.A and CH-S9.A
    - LLUH Security Operating Policies MC-S-8 and CH-S-8 “Patient Identification”
    - LLUH HRM Operating Policies MC-I-24 and CH-I-24 “Employee Identification”

## MITIGATION

- Preventive Considerations**
1. Specific drills will be conducted to practice and assess response, process and procedures in the event of a vulnerable missing adult.

- The assigned observer critiques these drills.
  - Security and departments evaluate the findings from these drills.
  - Opportunities for improvement are identified and shared with Security, Environmental Health and Safety and presented to Safety Committee.
2. According to the LLUH Security Operating Policies MC-S-8 and CH-S-8, each admitted patient shall be identified by use of an identification band.
  3. According to LLUH Security Operating Policies MC-S-9 and CH-S-9, the physical security of vulnerable patients shall be protected by the following:
    - House-wide staff response to “Code Green”
    - Vigilant and trained hospital staff
  4. According to LLUH Security Operating Policies MC-S-9 and CH-S-9, patients will be determined missing when staff do not have knowledge of the patient’s location after an immediate search of the most likely areas.
  5. According to LLUH Security Operating Policies MC-S-9 and CH-S-9, if they cannot be located, the administrator/administrator on call shall be notified after the necessary actions have been taken and then the following shall be notified:
    - 6.1 Family/legal guardian
    - 6.2 Person listed on the admitting document for emergency notification
    - 6.3 Office of Public Relations
    - 6.4 San Bernardino County Sheriff’s Department (To be called by Security Control Center dispatcher)
  6. According to LLUH HRM Operating Policies MC-I-24 and CH-I-24, all employees on duty in the hospital shall wear an identification badge issued by HRM.

## **RECOVERY**

**Process upon  
Recovery**

1. According to LLUH Security Operating Policies MC-S-9 and CH-S-9, when a patient is located/returned the following events occur:
  - The charge nurse/social worker notifies the patient's physician to immediately evaluate physical status.
  - The charge nurse/social worker immediately notifies the family/legal guardian/emergency contact, and the security control center.
  - The security control center immediately notifies all the security officers, group page to administrators and managers, announces Code Green clear.
  - The administrative supervisor/Executive Director/Department Head /Director immediately notifies Blood Bank and Clinical Lab.
  - The Physician evaluates the patient and writes order to admit patient to appropriate unit for care.
  - The Director/Spiritual Care Clinicians provide an opportunity for debriefing within 24 to 48 hours post incident for staff members.
2. Security and the Code Pink, Purple, and Green committee evaluate the event for process improvement opportunities.