

## ELOPEMENT RESPONSE GUIDELINES

### Policy & Procedure

#### Policy:

It is the responsibility of all staff to provide a comfortable environment for each of our residents. The following guidelines will be followed in the event that a resident is identified as missing. For the purposes of this policy, elopement is defined as leaving the facility premises without following the facility's policies and procedures for leave of absence.

#### Procedure:

1. Upon admission, each resident shall receive a name band with their name and facility name identified on it. It is the responsibility of each nursing assistant to ensure that each of their assigned residents is wearing an identification bracelet and that it is legible. Replacement bands are available from the charge nurse.
2. During medication pass, nurses shall check that a name band is present, particularly for residents at risk for wandering or who are cognitively impaired.
3. After receiving permission to photograph two photographs of newly admitted residents will be taken. The photographs will be used for identification purposes only and one will be maintained in the resident's medical record, the other in the Medication Administration Record. Photographs will be updated as required to reflect changes in resident appearance.
4. Resident and/or responsible party will receive instruction on the facility's leave of absence policy.

#### Responding to a suspected elopement:

1. It is the responsibility of all staff within the center to respond to activated door alarms and to return residents to their unit when found leaving the facility premises without following the facility's leave of absence policy.
2. Any resident who is at imminent risk for elopement should be approached according to accepted guidelines as follows:
  - a. Approach the resident in a calm and reassuring manner.
  - b. Approach the resident one on one. Discourage large numbers of staff around the resident.
  - c. Avoid arguing with the resident. DO NOT say, "You can't," or "You have to."
  - d. Avoid touching the resident if possible, use redirection as the first choice.
  - e. Restraints are not to be used as the primary solution; rather, diversionary activities should be encouraged to prevent recurrences.
3. When a suspected elopement has occurred:

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*This policy and procedure is not intended to replace the informed judgment of individual physicians, nurses or other clinicians nor is it intended as a statement of prevailing community standards or minimum standards of practice. It is a suggested method and technique for achieving optimal health care, not a minimum standard below which residents necessarily would be placed at risk.*

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- a. Note the time the elopement is first suspected and the time that the resident was last seen.
- b. The staff members assigned to the unit where the resident resides will verify that the resident has not followed the facility's leave of absence policy.
- c. Staff members will do a thorough search to locate the resident. If the resident is not located, proceed with the following:
  - i. Notify the nursing supervisor and staff via overhead page (using facility selected code, i.e., Dr. Wander to room ).
  - ii. The charge nurse shall immediately check sign out books to determine if the resident has left without following the facility's leave of absence policy.
  - iii. The charge nurse shall assign one employee to physically check each alarmed exit to determine if all alarms are in working order (this may identify the exit the resident used to elope).
  - iv. The charge nurse shall initiate a search of the facility and grounds by assigning staff to specific areas of the facility.
  - v. If department heads are on duty, they shall be responsible for the search in their respective areas. If department heads are not on duty, the charge nurse shall oversee the search of all areas of the facility and grounds where it is believed the resident might be found.
  - vi. After the resident is located, the charge nurse shall page facility all clear code overhead three times (i.e., "Dr. Wander all clear").
  - vii. If a thorough search of the facility and grounds does not locate the resident, the charge nurse shall **immediately notify the Administrator and Director of Nursing Services.**

I have read, understand and agree to adhere to the requirements outlined in this policy and procedure.

Administrator Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Medical Director Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Review Dates: \_\_\_\_\_

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