

# OREGON STATE HOSPITAL

PORTLAND – SALEM

## POLICIES AND PROCEDURES

---

**SECTION 8:** Safety, Security, Emergency Management

**POLICY: 8.018**

**SUBJECT:** Staff Response to Patient Unauthorized Leave

---

**POINT PERSON:** NENA STRICKLAND  
DEPUTY SUPERINTENDENT

**APPROVED:** GREGORY P. ROBERTS  
SUPERINTENDENT

**DATE: JUNE 19, 2012**

---

### I. POLICY

- A. Oregon State Hospital (OSH) has the responsibility to take any actions necessary to return any patient who leaves the hospital's care and custody without authorization prior to discharge.
- B. Oregon State Hospital staff are authorized to pursue appropriate physical interventions, including mechanical restraints, if the patient refuses to respond to verbal cues or less restrictive interventions when attempting to return a patient to care, custody, and treatment at Oregon State Hospital.
- C. The Superintendent or designee, in accordance with ORS 426.223, may require the assistance of any peace officer or other person to return any person committed or assigned to Oregon State Hospital.
- D. The OSH Director of Security or designee is delegated the responsibility to coordinate and direct the staff effort to attempt to apprehend and return in a timely manner all patients who have left the hospital and/or grounds without authorization.
- E. The OSH Director of Security or designee shall utilize unit staff as much as possible to assist in the search, rescue, or apprehension of a patient who has left the hospital and/or grounds without authorization. In the event that there are insufficient staff available on grounds to conduct a search, rescue, or apprehension, the Director of Security or designee shall consult the Administrative OD for authorization to increase staff resources through the use of overtime.

**II. DEFINITIONS**

- A. "Temporary Felony Warrant" means an entry placed via the Law Enforcement Data System (LEDS) by OSH Communications Center to all Oregon law enforcement agencies advising that a forensic patient has left on unauthorized leave or escaped.
- B. "Missing Persons Entry Unauthorized Leave" means an entry placed via the Law Enforcement Data System (LEDS) by OSH Communications Center to all Oregon law enforcement agencies advising that a civilly committed patient is on unauthorized leave status.
- C. "Attempted Unauthorized Leave" means a forensic or civilly committed patient attempts to leave the confines of the secure perimeter, or attempts to leave the supervision of an OSH employee while on the grounds of OSH or during authorized supervised travel in the community.
- D. "Unauthorized Leave" means a civilly committed or forensic patient leaves the confines of the assigned unit or secure perimeter, or leaves the supervision of an OSH employee while on the grounds of OSH or during authorized supervised travel in the community.
- E. "Excellent Travel Skills" means those patients who are street-wise, understand community transportation systems (including hitchhiking) well enough to get around, and communicate well with the public.

These patients usually move quickly to get away from the Oregon State Hospital campus or last known location. They have excellent skills in the areas of daily living, know how to hitchhike, or catch a taxi or bus. These patients are independent, and can find food and shelter. Patients with these skills may have histories of unauthorized leave or escape.

- F. "Partial Travel Skills" means patients who are not considered street-wise and cannot be assumed to understand transportation systems well enough to use them properly. They may have serious difficulties with their communication skills and should be considered at risk for self-harm.

It may not be the goal of these patients to get away from Oregon State Hospital, although for some, this may be the objective. Patients with these skills seldom have an idea about where they want to go, or if they do, they probably do not know how to get there. Their ability to seek food and shelter is limited. However, they have no serious problems with ambulation. Their personal safety, when on their own, would be in question.

---

**SUBJECT: Staff Response to Patient Unauthorized Leave**

**POLICY NUMBER 8.018**

**DATE: June 19, 2012**

**PAGE 3 OF 7**

---

- G. "Minimal to No Travel Skills" means those patients seldom understand the basic elements of travel. They have limited to no communication skills. These patients are severely affected by cognitive impairments such as dementia. When missing, they are lost because they have wandered from a known environment. They do not have a destination in mind, and they have minimal travel skills. Patients in this category present the greatest level of risk to their survival if they wander from the Oregon State Hospital grounds.

### **III. PROCEDURES**

- A. A patient is presumed to be on unauthorized leave whenever that person:
1. Is not accounted for on the unit where the patient lives.
  2. Is reported absent from an area where the patient is assigned or supposed to be.
  3. Is reported missing while on pass to a specific destination.
- B. Reporting the missing patient:
1. Staff shall:
    - a. Immediately notify the OSH Communications Center at 945-2800 or via radio (Salem Campus) or OSH-Portland Reception at 731-8620 (Portland Campus) of patients who become unaccounted for or are absent.
    - b. Provide information on the patient's height, weight, color of eyes and hair, clothing, physical disabilities, physical and mental capability, and any other pertinent information that may be useful in apprehending the missing patient.
    - c. Communicate any information about the patient's risk of violence or self-harm.
    - d. Report the last known time the patient was seen. They shall be as accurate as possible about the time the patient was seen and where the patient was seen.
  2. Communications Center/Portland Reception shall immediately notify the patient's unit and the supervisor in charge.

---

**SUBJECT: Staff Response to Patient Unauthorized Leave**

**POLICY NUMBER 8.018**

**DATE: June 19, 2012**

**PAGE 4 OF 7**

---

3. Portland Reception shall immediately notify the Salem Communications Center.
4. Communications Center shall:
  - a. Immediately call 911 to report the missing or escaped patient to the Oregon State Police and the local authorities, i.e., Salem Police Department or Portland Police Department.
  - b. Make notifications in accordance with the Critical Incident Grid. The Superintendent or the Administrator on Duty after hours shall be notified within the first 15 minutes.
  - c. If appropriate, a "Temporary Felony Warrant" or "Missing Persons Entry" shall be issued by the OSH Communications Center as directed by the OSH Director of Security or designee.
  - d. Make required victim notification to any persons who may be endangered by the escape.
  - e. Notify the Fire Marshall in the event the patient's instant offense is arson or an arson activity.
5. Any information about the patient's risk of violence or self-harm should be communicated to responders, law enforcement agencies, and in the LEDS entry.

**C. Determine the level of the missing patient's travel skills:**

The supervisor on duty at the Communications Center or Reception Desk in Portland shall consult with unit staff, who shall determine the level of the missing patient's travel skills. This shall assist the supervisor in choosing the sequence of action most appropriate for immediate implementation.

**D. Determine the search and apprehension/rescue operation:**

1. The supervisor on duty at the Communications Center or Reception Desk in Portland shall choose the appropriate search response based on the following guidelines:
  - a. If the patient left the care of staff either on or off hospital grounds and the patient is within line of sight of the staff, the staff shall follow the patient and attempt to regain custody, if safe to do so (i.e., other patients are adequately supervised

---

**SUBJECT: Staff Response to Patient Unauthorized Leave**

**POLICY NUMBER 8.018**

**DATE: June 19, 2012**

**PAGE 5 OF 7**

---

and pursuing the patient will not put staff or other patients in jeopardy). If not safe, the staff shall attempt to keep a line of sight and send frequent updates on patient actions, location, and direction of travel to the Communications Center or Portland Reception Desk.

Staff shall continue to pursue until they lose sight of the patient, the custody of the patient is regained, or the patient enters a location that could be dangerous or prohibited (i.e., private building or property).

The Communications Center or Reception Desk may send responders to the area to assist in regaining custody of the patient. If the incident is a long distance from the facility, requesting assistance from an outside agency is required.

- b. If a patient escapes from the grounds of OSH Salem or Portland, staff may be sent to search the immediate vicinity of the hospital. Staff shall remain within the areas approved by the Communications Center or Reception Desk Supervisor in charge of the escape response.
- c. If a patient escapes off the hospital grounds while on a pass with staff or with authorized persons, and the patient is not within line of sight of the staff or authorized person, a search party shall not be dispatched. Assistance shall be requested from the appropriate law enforcement agency.
- d. Oregon State Hospital staff may be dispatched to locations off the hospital grounds to assist law enforcement officers or respond to possible sightings of the patient as directed.
- e. Expanding of the search beyond the guidelines of this policy shall be at the direction of the Director of Security or designee.
- f. Searches shall only be discontinued with the approval of the Superintendent or OSH Administrative OD.

**E. Equipment:**

All equipment necessary to facilitate a thorough and safe search, to include items such as secure transport restraints, flashlights, two-way radios, cell phones, etc., shall be provided to search staff by the Security department.

---

**SUBJECT: Staff Response to Patient Unauthorized  
Leave**

**POLICY NUMBER 8.018**

**DATE: June 19, 2012**

**PAGE 6 OF 7**

---

**F. Action upon discovery:**

1. Staff shall interact with the patient through the use of verbal cues. If the patient willingly follows cues, staff shall direct the patient in a manner that facilitates return to the patient's unit in the least restrictive manner possible.
  - a. If the patient will not follow cues and it is safe to do so, staff shall physically restrain the patient and place them in mechanical restraints to facilitate a safe return to the patient's unit. Staff shall notify Communications Center of the need to use restraints.
  - b. If the patient becomes violent, aggressive or assaultive, or there is a risk of injury to any party, staff shall keep the patient in line of sight and await assistance from additional OSH staff or law enforcement officials.
  - c. The staff participating in regaining custody of the patient shall also evaluate if the patient is potentially dangerous, and whether there is contraband involved. The patient shall be searched upon discovery.
  - d. Upon regaining custody of the patient, if a medical injury appears to be present, the unit psychiatrist/PMHNP, if available (or the on-duty psychiatrist), shall be consulted and shall determine whether medical attention is needed before the patient is moved. If on-site medical attention is not needed, the patient shall be returned to his/her unit or a unit designated by the Program Director. The unit nurse or on-call nurse shall conduct a nursing assessment to determine whether further medical attention is needed.
2. If medical attention is required, staff shall provide the maximum weather protection to the patient, and shall administer first aid and other temporary help. They shall notify the Communications Center, or Reception Desk in Portland, and request guidance given the on-site evaluation of the patient. The Communications Center may send a nurse or physician in response to the patient's condition on-grounds, or call 911 in the event of an off-grounds situation or serious injury.
3. The Communications Center shall notify all persons and agencies that were notified when the person was reported missing, including

---

**SUBJECT: Staff Response to Patient Unauthorized Leave**

**POLICY NUMBER 8.018**

**DATE: June 19, 2012**

**PAGE 7 OF 7**

---

the patient's unit. Any "Temporary Felony Warrant" or "Missing Persons Entry" placed into LEDS shall be cleared.

4. Incident Reports:

Staff who were with the patient at the time of escape, and staff who find the missing patient are required to file a detailed incident report describing the circumstances of the incident. This shall be submitted to Risk Management immediately upon discovery of the missing patient.

#### IV. REFERENCES

ORS 426.223, Retaking Persons Committed to Division; Assistance of Peace Officers and Others.

ORS 476.730, Notice prior to release or after escape of arsonist from state institution.

OAR 309-112-000 through 309-112-035, Use of Restraint for Patients and Residents in State Institutions.

OAR 309-116-0000 through 309-116-0065, Abuse of Patients and Residents in State Institutions.

OSH Policies and Procedures

8.016, Employee Response to Violent Situations, Civil and Internal Disturbances

6.003, Use of Seclusion and Restraint

6.017, Personal Searches

Replaces Oregon State Hospital Policy and Procedure 8.018, *Staff Response to Patient Unauthorized Leave*, dated 10/28/2011.

