

# OREGON STATE HOSPITAL

PORTLAND – SALEM

## POLICIES AND PROCEDURES

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**SECTION 6:** Patient Care

**POLICY:** 6.002

**SUBJECT:** Reporting of Patients on Pass

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**POINT PERSON:** NANCY GRIFFITH  
PRS INTERIM PROGRAM DIRECTOR

SUE ZAKES  
FPS INTERIM PROGRAM DIRECTOR

  
**APPROVED:** GREGORY P. ROBERTS  
SUPERINTENDENT

**DATE:** OCTOBER 26, 2010

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### I. POLICY

It is the policy of Oregon State Hospital (OSH) to establish guidelines for placing patients on pass.

### II. DEFINITIONS

- A. "Day Pass" means an authorized leave from an inpatient psychiatric unit ordered by a Physician for a specified period of time, written for one or more days but not including an overnight stay.
- B. "Overnight Pass" means an authorized leave from an inpatient psychiatric unit ordered by a Physician for a specific period of time which includes an overnight stay.
- C. "State-Sponsored Pass" means an authorized leave from an inpatient psychiatric unit ordered by a Physician in which the patient remains under the supervision of hospital staff. If the pass needs to be extended, the Program Director and Unit Manager must be notified.

**III. PROCEDURES**

- A. A Physician Order is required for all passes.
- B. The order shall specify the time and date(s) the patient will be on pass. One order may authorize more than one pass.
- C. A Supervised Trip Authorization Form must be signed by a Unit Manager for trips inside Salem and by the Program Director for passes outside of Salem.
- D. For civilly committed patients, total time on continuous pass shall not exceed four (4) days and three (3) nights. A pass to discharge may be requested for up to ten (10) days. Permission for a pass to discharge is given by the Program Director.
- E. Patients committed to the Division under ORS 161.327, ORS 161.370, or ORS 161.336 may not leave the State of Oregon without approval from the Chief Medical Officer and Superintendent.
- F. While a civilly committed patient is on a pass to discharge, the Interdisciplinary Treatment Team (IDT) documentation requirements must be met. Reports received from the community must be cited.
- G. Patients put on pass to a general hospital for treatment shall be monitored by the OSH attending physician.
- H. All unsupervised passes for any Forensic Psychiatric Services (FPS) patient must be approved by the Forensic Risk Review Board, as well as approved by the patient's IDT. In addition, all passes for patients under ORS 161.327 and ORS 161.336 must be approved by the Psychiatric Security Review Board (PSRB). As with all other forensic patients, these patients may not leave the hospital grounds without staff supervision unless prior approval of the patient's IDT and Risk Review Board is obtained. A FPS form 3.002, "Off grounds pass when supervised by authorized persons other than OSH staff," must be completed.
- I. Overnight and State-Sponsored-Passes must be entered in the Oregon Patient/Resident Care System (OP/RCS).
- J. Civilly committed patients who overstay passes shall be considered as being on unauthorized leave and managed accordingly. If the patient is reported as dangerous to self or others after being placed on a pass, an entry must be made in the progress note stating the reason why the Physician now believes the patient to be dangerous where it was presumed he was not dangerous during the period of official leave. Notification of the

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**POLICY NUMBER 6.002**

**DATE: October 26, 2010**

**PAGE 3 OF 3**

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Program Director, Superintendent, and any appropriate jurisdiction agency noted above is required.

- K. The medical/treatment record of patients on pass shall remain on the unit.
- L. Patients under the jurisdiction of Recovery Services, PSRB, Parole Board, or Department of Corrections, and who fail to return from an authorized pass or leave, shall be considered as on unauthorized leave or escape.

#### **IV. REFERENCES**

ORS161.327, ORS 161.370, ORS 161.336  
OSH Medical Department Manual Policy 2.001, Physician Orders

Replaces Oregon State Hospital Policy and Procedure 6.002, *Reporting of Patients on Pass*, dated 6/13/2006.