



Missing or Suspected Missing Inpatient Procedure

1. Guiding Principles

The WA Country Health Service (WACHS) is committed to providing for the safety and wellbeing of patients and to minimise potential harm to the public.

WACHS owes a duty of care to all patients admitted to any of its facilities. This duty includes the responsibility to protect and care for people who because of illness, may come to harm by leaving a health site and potentially wander off into unfamiliar surroundings.

For guidance on missing or suspected missing mental health inpatients refer to the MP 0012/16 [Missing Person Policy – WA Public Mental Health Services](#).

2. Procedure

Please refer to [Appendix 1: Response to Missing or Suspected Missing Inpatient Flowchart](#).

A patient who has been admitted to any WACHS facility as a voluntary patient is considered to be missing when any of the following circumstances occur:

1. The patient is not accounted for during regular census checks or is noticed to be missing from the ward and is determined not to be in any scheduled activity or otherwise supervised by staff on the site.
2. The patient is seen leaving designated hospital facilities without a scheduled appointment or when discharge is not planned.
3. The patient leaves the ward for an appointment and either does not arrive as scheduled or does not return to the ward after the appointment.
4. The patient does not return as scheduled from a home visit or other authorised off site activity or
5. Staff have some other reason to believe that the patient may have left the facility without their knowledge.

Procedures currently exist relating directly to patients that are **not** covered by this policy. These include the following categories.

1. Children: Child and Adolescent Health Service – [Missing Patients](#).
2. Aged Care: WACHS – [Missing Aged Care Resident Procedure](#).
3. Mental health patients including persons who have involuntary status under the [WA Mental Health Act 2014](#): patients admitted to WACHS facilities – MP 0012/16 [Missing Person Policy – WA Public Mental Health Services](#) and [individual regions for procedures](#) particular to the facility.

When a voluntarily admitted patient is noted as being absent from a WACHS facility without explanation, every effort is to be undertaken to locate the patient as quickly as possible. This is to include:

1. a thorough and complete search of the facility and grounds is to be conducted immediately until all possibilities of locating the patient in the facility grounds are exhausted
2. reasonable attempts to contact the patient if a mobile phone number is available
3. communication with the family and/or next of kin as soon as possible to advise them of the situation and ongoing communication to inform them of progress with locating the missing patient
4. requesting assistance as required from the police and other appropriate agencies to assist in a coordinated search for the missing patient.

Individual sites may create specific procedures to include local responses/information that may be pertinent to the search.

Key Steps

- Patient is noted to be missing from the facility by a WACHS staff member. If the patient is a child, a Code Black Alpha Emergency response should be activated as per local site Code Black procedures.
- The missing patient is reported to the senior clinical staff member responsible for the patient
- The senior clinical staff member is to:
 - perform a rapid sweep of the area to try and locate the patient
 - ascertain if any person observed the patient leaving the ward area.
 - ascertain if the patient has any scheduled appointments or treatments that may necessitate the patient to leave the area
 - ascertain if relatives or friends were visiting the patient who may have taken the patient out of the ward, clinic or therapy area
 - attempt to contact the patient by mobile phone if it is known that the patient has their own phone with them.
 - document the patient's absence in the medical records
 - advise the Clinical Nurse Manager (or other senior nurse on duty) on duty of the situation.
- If the patient's location cannot be accounted for the Clinical Nurse Manager (or other senior nurse on duty) is to:
 - notify next of kin/carer/family
 - contact the treating medical team advising them of the situation and to determine current treatment requirements or any potential medical risk that may cause concern for the patient's wellbeing

- advise relevant Director of Nursing/Health Service Manager/Executive Director via the Clinical Nurse Manager (or other senior nurse on duty) of the missing inpatient
- advise WACHS security staff, if available, and in conjunction with security staff arrange a thorough search of the immediate area. Appropriate floor and site plans are to be accessed to identify all doors and compartments where an inpatient is able to hide. Staff are not to leave WACHS grounds during the search.
- activate local emergency procedures as required
- page all shift coordinators to advise of the missing patient.
- If the patient is not located, the senior nurse on duty is to:
 - notify the next of kin/carer/family of search escalation
 - contact the police or appropriate local authority
 - inform the relevant Director of Nursing/Health Service Manager/Executive Director of the search escalation.
- All information related to the search for the missing patient and notifications is to be documented in the medical records including personnel informed, actions taken to find patient and the outcome at that time.

Once found

Once the patient is found, WACHS clinical staff are to complete an assessment and in conjunction with the patient decide to either return to the facility or remain in their current location.

If the patient decides to return, upon arrival the patient is to undergo a full medical assessment identifying any changes of mental state and physical condition and appropriate treatment undertaken. Ongoing management of the patient is to be discussed with the patient and their next of kin to determine any additional interventions required.

If the patient chooses not to return to the facility, the WACHS [Admission, Discharge and Intra-hospital Transfer Clinical Practice Standard](#) is to be reviewed and, as documented, the local Discharge Against Medical Advice procedure is to be followed. This is to include:

- completion of the MR 36 Discharge Against Medical Advice form (iproc order 89351J)
- referral to General Practitioner and community supports as appropriate.

In either situation, a summary of the incident is to be documented within the medical records and where indicated a Clinical Incident notification and report completed in Datix CIMS.

If appropriate, a post incident debrief for staff involved is to be coordinated by the Director of Nursing/Health Service Manager/Executive Delegate.

If not found

If the missing inpatient is not found then in consultation with medical staff and the Health Service's management including Regional Medical Director, Regional Nursing and Midwifery Director or Regional Director, there is to be an escalation of the matter to local police.

Next of kin/carer/family are to be informed of the escalation via Health Service Management and advised of the situation and plan.

Comprehensive documentation of the incident is to be completed within the Medical Records and notification to Datix CIMS for investigation of a clinical incident.

Debrief and counselling is to be provided during and post incident for all staff involved and coordinated by the Director of Nursing/Health Service Manager/Executive Delegate.

3. Definitions

Absent without Leave	An involuntarily admitted patient that is away from the facility without prior arrangement with the clinical treating team either due to absconding or failure to return from agreed leave. The patient's whereabouts may be known.
Discharge Against Medical Advice	Discharge at the request of the patient prior to completion of an agreed medical care plan.
Involuntary Patients	Any patient admitted to a WACHS general or psychiatric facility under the <u>WA Mental Health Act 2014</u> for medical care.
Missing Patient	Any voluntarily admitted patient whose whereabouts cannot be accounted for despite efforts to locate them by the clinical treating team and other agencies e.g. police.
Senior Clinical Staff Member	WACHS nursing or medical staff member in charge of patient care within a unit, ward or facility.
Voluntary Patient	Any patient consenting to admission to a WACHS facility for medical care.
Clinical Incident	A clinical incident is an event or circumstance resulting from health care which could have, or did lead to unintended and/or unnecessary harm to a patient/consumer.

4. Roles and Responsibilities

Medical Team is responsible for the medical management of the patient in accordance with this procedure

Senior Nursing Staff are responsible for:

- coordinating all aspects of the procedure including search logistics
- communication with Next of Kin/Carer/Family, external agencies and other Health service staff including Director of Nursing/Health Service Manager/Executive Delegate
- completion of all required documentation, including Datix CIMS report
- initiation of post incident debriefing.

Security is responsible for supporting the onsite search as directed by nursing staff.

5. Compliance

Failure to comply with this procedure may constitute a breach of the WA Health Code of Conduct (Code). The Code is part of the [Employment Policy Framework](#) issued pursuant to section 26 of the [Health Services Act 2016](#) (HSA) and is binding on all WACHS staff which for this purpose includes trainees, students, volunteers, researchers, contractors for service (including all visiting health professionals and agency staff) and persons delivering training or education within WACHS.

WACHS staff are reminded that compliance with all policies is mandatory.

6. Evaluation

Monitoring of compliance to this procedure is to be carried out by the facility manager every twelve (12) months.

7. Standards

[National Safety and Quality Health Care Standards 1.7](#)

[EQulPNational Standards 15.21](#)

8. Legislation

[Western Australia Mental Health Act 2014](#)

9. References

Child and Adolescent Health Service – [Missing Patients](#).

[Swan Kalamunda Health Service Wandering and Missing Patients \(SPE006\) January 2014](#)

[North Metropolitan Health Service – Mental Health, Older Adult Mental Health Policy, Absconders/Absent Without Leave May 2013](#)

[North Metropolitan Health Service – Mental Health, Missing or Suspected Missing Patients, February 2013](#)

[South Metropolitan Health Service – Mental Health, Missing or Suspected Missing Mental Health Patients, May 2012](#)

10. Related Policy Documents

[WACHS Admission, Discharge and Intra-hospital Transfer Clinical Practice Standard](#)

[WACHS Missing Aged Care Resident Procedure](#)

[WACHS South West Health Campus Emergency Response Procedures - Code Black Goldfields Mental Health Service, Missing or Suspected Missing Patient Procedure](#)

[Broome Mental Health Unit, Absent Without Leave and Missing Persons Procedure](#)

[Broome Mental Health Unit, Absent Without Leave and Missing Persons Flowchart](#)

11. WA Health Policy Framework

[Clinical Governance, Safety and Quality Policy Framework](#)

12. Appendix

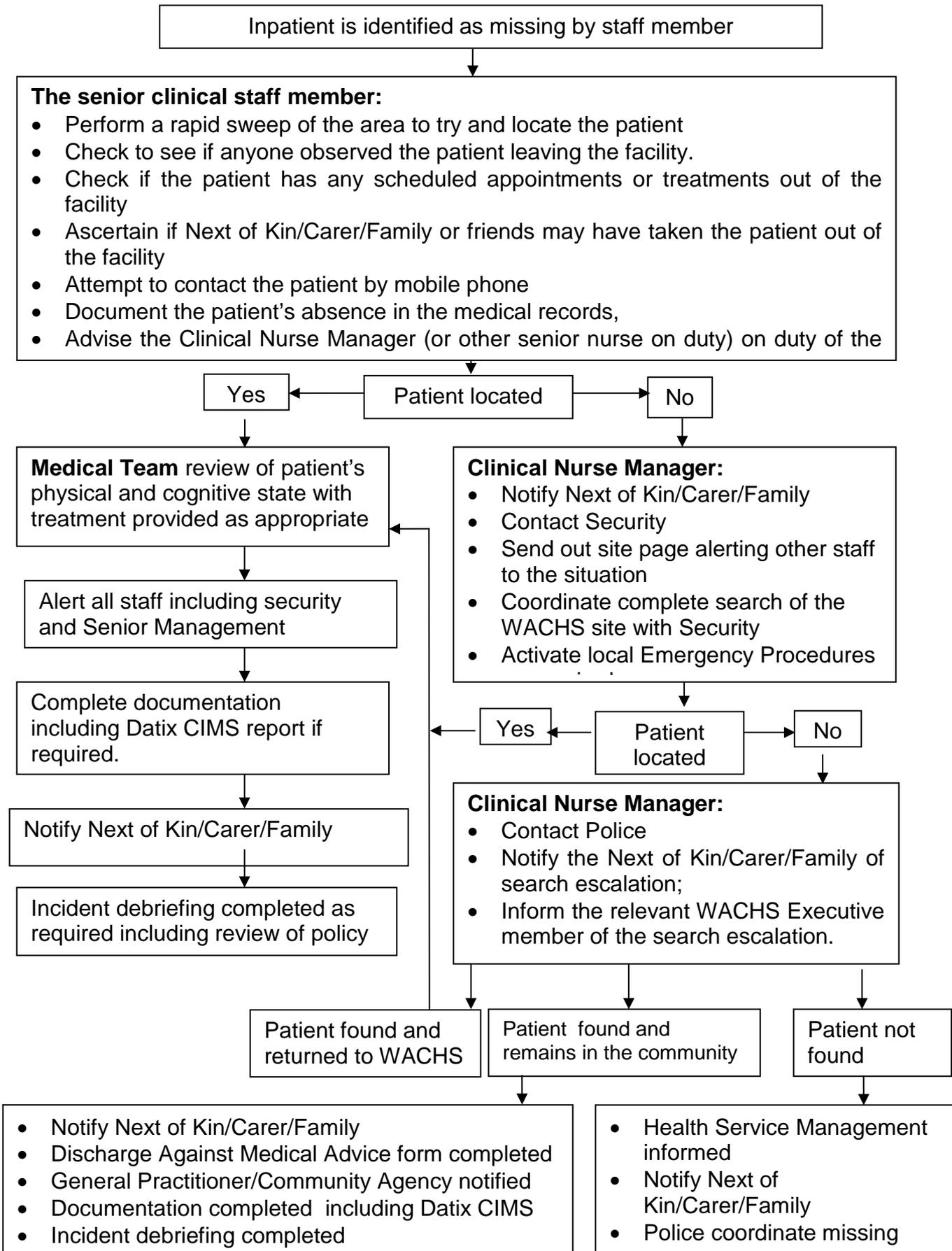
Appendix 1: [Response to Missing or Suspected Missing Inpatient Flowchart](#)

**This document can be made available in alternative formats
on request for a person with a disability**

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RESPONSE TO MISSING OR SUSPECTED MISSING INPATIENT FLOWCHART



Ongoing Documentation by all WACHS staff within the Medical Record of actions taken to locate patient.