Missing Patient Procedure

1.   Purpose

This procedure covers the delivery of the service or task as detailed in the procedure title; to ensure compliance with statutory legalisation, contractual obligations and contractual KPI requirements.

The procedure is applicable to all ENGIE employees, offices and operational work areas. All undertakings and activities carried out by all ENGIE employees in connection with their scope of employment within the RIE concession.

2.   Roles & Responsibilities

Employees also have a duty to cooperate with management and it is therefore also the responsibility of employees undertaking the task outlined to ensure they adhere to the requirements within this procedure at all times. If for any reason an employee is unable to comply fully with the requirements they should raise this through line management immediately, and prior to any works taking place.

Head of Soft Services – Responsible for the implementation of procedures, for ensuring compliance and reviewing all documentation created/updated by the Security supervisor. Responsible for inspecting operations, reviewing and updating documentation and providing training to appropriate employees.

Supervisor - Responsible for monitoring operations and compliance and reporting any relevant issues.

Security Officers – Responsible for complying with Local Operating Procedure, operating in a safe manner with regards to their own safety and the safety of others.

3.   Process Detail: Flowchart
N/A

3.1 Process Detail; Hazards, Equipment & Training

- Telephone call from ward / departmental staff reporting a missing patient.
- Officer in Control will take details ensuring that all relevant information is noted.
  Use the Missing Patient Questionnaire [RIE/ SEC019] to record this information and capture all relevant actions.
- Officer in Control will notify all Sierras of the missing patient giving them the details and description.
- Officer in Control will begin a CCTV search for the patient – using the information given by staff, the most likely route the patient may have taken should be assessed.
  CCTV searches should normally begin at the perimeter with Bus Stops, Taxi Rank, external public areas. The CCTV search should then move to the public areas – Mall, Restaurant.
- Once the live CCTV search has been completed, a review of CCTV footage should be commenced.
- Patrol officers should begin their search with one officer attending the ward and speaking to staff directly about the patient.

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- The foot search should begin at the ward area and try to follow the known route the patient took. Public areas of the main floors should be checked along with the Sanctuary and called in to Control for logging.
- Following a CCTV and foot search, the ward should always be updated (preferably in person) as to the result of this and they should be asked what further action is going to be taken – police call / Nursing Officer informed etc.
- All details need to be logged / reported with full details of the incident / areas checked / what staff have said etc.
- A missing patient incident is as serious as any other patient incident on the site and in the worst cases, could end up being a major police and NHS enquiry. It should be dealt with and reported on in the same way as other incidents with proper logging and reporting.

3.2 Process Detail; Hierarchy of Responsibility

Release of this information document, or any other documents mentioned within; either partially or as a whole; Must firstly, be approved by the RIE site operations manager before being released to an individual.

4.   Supporting Documentation, Records & Legislation

Officer:		**Date.**		**Time.**	
Caller's Name:		Position:		Tel No:	

Ask the following questions;

Question	Answer
1. Where has the patient gone missing from? *Ward / Room No:*	
Name of patient:	
When & where were they last seen?	
If walking, which direction were they going?	
Who last saw the person?	
How long have they been missing?	
Are they at risk / vulnerable if not found?	

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2. Physical Description of Patient	
Age:	
Height:	
Weight / Build:	
Hair (colour / length / style):	
Facial Hair (moustache / beard):	
Face (features / complexion):	
Distinguishing Marks (tattoos / scars):	
Walking / Mobility (limps / slow, etc):	
Do they have lines / Venflo inserted?	
Do they have a walking aid / wheelchair?	
3. Clothing description	
Style and colour of shirt / top:	
Style and colour of trousers / skirt:	
Style and colour of jacket or outerwear (coat / gown):	

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Glasses / Headwear?	
Type of footwear (shoes / slippers):	
Are they carrying bag(s) or other items?	
4. Behaviour / Personality of person	
Are they confused / have dementia?	
Does the individual smoke? If yes, where do they usually go?	
Does the individual use drugs?	
Have they gone missing before? If yes, where did they go?	
Have they taken any belongings with them?	
Has the person been aggressive / violent at any time?	

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5. Actions Taken	
Officer despatched to Ward: *Name(s) of staff spoken to:*	
Areas checked on CCTV	
External / bus stops / smoking areas / *Internal areas / Restaurant / shops*	
Areas checked on Patrol	
6. Follow-up Actions	
Patient returned to Ward? *Time returned / where were they?*	
Staff called police?	
Ongoing searches required by *incoming shifts?*	
7. Outcome of incident	

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5.   Definitions

ENGIE: -   ENGIE
Royal Infirmary of Edinburgh: -   RIE
Scottish Environment Protection Agency: -   SEPA
Facilities Management: -   FM
Safety Health Environment & Quality: -   SHEQ
National Health Service Lothian: -   NHSL
Consort Healthcare: -   CHC

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