

Home > Policies & Procedures > Clinical Documents > Interdisciplinary Clinical Manual > Searching Patients, Visitors, and/or their Property

**Disclaimer:** the information contained in this document is for educational purposes only. Any PRINTED version of this document is only accurate up to the date of printing. Always refer to the Policies and Procedures Intranet site for the most current versions of documents in effect.

PROCEDURE	Manual: Clinical	<b>Section:</b> Interdisciplinary Clinical	Code No.: I S025	Old Code No.: S S025
Title: Searching Patients, Visitors, and/or their Property			<b>Original Effective Date:</b> Dec 11, 2014	
			Review/Revised Effective Date: Jan 12, 2020	
			Next Review 2023	Date: Jan 01,
Cross Index:	<b>Authoring Com</b> Health, Quality a	<b>mittee/Program/Dept:</b> Mental and Risk	Approved By: SLT	

# **Purpose:**

- To provide a safe and therapeutic environment for patients, staff and visitors.
- To facilitate protection from harm for patients at risk of harm to self or others by removing items posing a threat to safety, such as weapons and other dangerous objects, illicit drugs, alcohol, and materials of a violent or pornographic nature that disrupt the therapeutic milieu.
- To provide staff with guidance for searching a patient in a manner that complies with the law and emphasizes respect for the rights and dignity of the person(s) involved

### **Definitions:**

- **Illicit Substances**: includes any substance used without medical consent or prescription for its psychoactive effects (e.g. narcotics, cocaine, etc.)
- Prohibited Items: includes any item posing a threat of harm to self or others, or encourages violence or illegal activity. Examples of prohibited items may include but are not limited to:
  - $\,^\circ\,$  Guns, knives or weapons of any kind, including any item that has been adapted to cause injury
  - Pornographic materials
  - Alcohol
  - Cannabis (when NOT approved for adult patient use)
  - Drug paraphernalia (eg. pipes, bong, needles, etc.)
  - CDs, movies, video games or clothing materials that may be offensive or harmful to others.
- Monitored Items: any item that must be stored in a secure location and used under supervision, due to potential risks posed by the patient's clinical presentation (i.e. patient is a risk of harm to self or others) or to the particular clinical environment. Examples include but are not limited to:
  - Magnetic Resonance Imaging unit: any metal objects.
  - Prescription or over-the-counter medications, herbal and/or naturopathic medications not prescribed by the MRP (also refer to <u>Patient's Own</u> <u>Medications</u> policy)
  - Cannabis (when approved for adult patient use see <u>Medical Marijuana (Cannabis)</u>
     <u>Patient Use of policy</u>)

- · Razors, scissors, nail files and clippers, glass and other sharps
- Ties, belts, scarves, shoe laces (where a patient is assessed to be suicidal)
- Matches, lighters, candles
- Nail polish remover or other poisonous chemicals

# Responsibility:

- Nursing staff
- · Allied Health staff
- Most Responsible Physician (MRP)
- Clinical Manager or Clinical Support Manager (CSM)
- Security

### **Equipment:**

N/A

#### Method:

#### **Patient Searches:**

Where a patient, visitor or other person is KNOWN to be carrying a weapon and is threatening self or others, call a <u>Code Purple</u>.

Where a patient, visitor or other person has threatened to trigger an explosive or indicated they are carrying explosives, call a **Code Black**.

A patient and/or his/her belongings may be searched when:

- the patient is acutely ill and unable to provide information, or staff need to determine potential causes of the presentation or get direction for care (e.g. identification; next of kin/substitute decision-maker; organ donor card, no-blood card, medic-alert bracelet, medications on person, etc.)
- staff have reason to believe the patient is carrying illicit substances, prohibited items or a monitored item that poses a risk of harm to the patient, other patients, staff, or the particular hospital unit milieu.
- staff have reason to believe the patient is taking medications or substances not prescribed by the MRP;
- staff have reason to believe patient has taken hospital property that is potentially hazardous (e.g. needle, medications, scalpel, etc.).
- the search is part of a unit/program's routine procedure (e.g. for admission to some units/programs, etc.).

## 1. Provide Notification:

- Ensure the patient or visitor is aware or is informed of what items are considered Illicit, or are Prohibited or Monitored on the unit.
- Provide information regarding routine belongings checks, where applicable, and explain
  the rationale for searching, removing and/or securing personal items that may pose a
  harm to patients or others, or that may disrupt the clinical environment or therapeutic
  milieu.
- Inform the individual what information has led staff to believe the patient possesses a Monitored or Prohibited Item
- **2. Obtain Consent:** Every effort will be made by staff to obtain verbal consent and co-operation of the patient and/or SDM prior to any search of personal belongings, bedside, clothing or person.

### Refusal or Inability to Provide Consent:

Where the **patient is incapable to give consent to a search** (e.g. the patient is unconscious, or has limited mental competency), consent may be sought from the patient's guardian or other authorized substitute decision-maker.

Where the **patient refuses to give consent, if** the staff have reasonable grounds to believe the patient may have item(s) in his/her possession that could cause harm to self or others (e.g. weapons, illicit drugs), the following steps may be taken as appropriate:

- the nurse will consult the MRP immediately and give report on the situation, background, assessment and recommendations (SBAR).
- The MRP will review the case and provide direction
- If necessary, security presence may be requested

Note: There is no legal authority for non-consensual search of a voluntary or informal patient UNLESS immediate action is necessary to prevent serious bodily harm to self or others. Once the MRP has assessed the situation, a voluntary patient is free to sign out Against Medical Advice (AMA) without being searched. Security will be asked to escort the individual from the property.

**Patients Certified under the Mental Health Act:** Patients certified under the MHA have been assessed to be a risk of harm to self, others or assessed to be unable to care for self. All efforts will be made to obtain the consent and cooperation for any search of a certified patient. If there is a risk of serious bodily harm to self or others, a search can be carried out without the patient's consent.

## 3. Conducting a Search:

**Who Can Conduct Searches:** Searches will be overseen by a minimum of two staff, comprising of a nurse or other primary clinical staff, and Security. As much as is possible, staff should be of the same gender as the patient being searched.

- Inform the Charge Nurse and management.
- Assess for the possibility of the patient becoming agitated or aggressive or the possibility of finding a weapon.
- Request Security to be present to assist with the search. Staff should never
  proceed alone, especially where there is grounds to believe there is a risk for
  aggression. Having two staff present also ensures there is a witness to the search
  procedure.
- Communicate the need for a search to the patients and continue therapeutic communication and de-escalation
- Inform the patient of the rational for a search (i.e. to maintain safety for all) while continuing to engage therapeutically.
- Provide an opportunity for the patient to surrender Illicit Substances, Prohibited Items and/or Monitored items.
- Maintain the patient's privacy and dignity during the search. Remove co-patients
  or provide a private room. If the patient's clothing is to be searched, provide
  hospital attire and direct the patient to change.
- Note: body cavity searches will NEVER be conducted by staff other than if the MRP or consulting physician deems it necessary for medical reasons and obtained consent where possible.
- Staff will wear gloves when undertaking a search of a patient's personal belongings.
- Secure and/or store illicit substances and prohibited items (as per <u>Illicit Substances and Prohibited Items Storage and/or Disposal</u> procedure.

Acute Mental Health areas [Emergency , Assessment Unit, Adult Inpatient Psychiatric Unit (IPPU), Psychiatric Intensive Care Unit (PICU), Child and Adolescent Psychiatry (CAP)] -

All patients admitted to the adult Inpatient Psychiatric Unit (IPPU), whether voluntary or certified under the Mental Health Act, are subject to a routine search of their belongings and, where clinically indicated, of their person, for Illicit Substances, Prohibited Items & Monitored Items. Patients admitted to IPPU will be present during this procedure.

Patients admitted to PICU are required to change into hospital clothing. Two nursing staff will inspect and itemize all belongings in the nursing station; the PICU patient may not be present in this circumstance but will be informed of the list of belongings itemized. All personal belongings are placed in a locked cupboard and/or the nursing station.

All visitors, upon entry to the PICU, will be informed of the unit restrictions and what items are Illicit, Prohibited and Monitored. Staff will ask visitors to open packages, and other items brought to the unit, for inspection to ensure safety of patients and the unit.

# 4. Debrief with the patient:

• Reinforce the expectations/rules and their relation to safety.

- Re-establish working therapeutic relationship.
- Provide rights information
- 5. Document: Clearly document in the patient's electronic record the following:
  - information or reasonable grounds triggering the concern and subsequent search procedure.
  - explanation given to the patient regarding the reason for the search
  - · whether the patient provided consent
  - · any consultation to the MRP or on-call psychiatrist
  - communication with Unit Manager or CSM
  - any change to their legal status should they be placed on a Form 1
  - other directions from the attending psychiatrist
  - contact with security
  - efforts made to maintain the dignity of the patient (eg. same sex staff witness patient change to gown)
  - results of the search (i.e. what was found and/or seized)
  - where the seized item(s) are stored, if they have been sent home, handed over to police, or disposed of
  - rights information given

## **Special Considerations:**

- Complementary and Alternative Therapies: Substances related to complimentary and alternative therapies must be reviewed and ordered by the MRP. Where staff become aware that the patient has substances related to Complementary & Alternative Therapy (e.g. medical marijuana), as with medications from home, staff will secure these items until the MRP can be consulted for an order, or send them home. Possession of such substances, by itself, does not constitute grounds for a search. Refer to Medical Marijuana (Cannabis) Patient Use of policy and procedure.
- Emergency department Where a patient has been placed on a Mental Health Act certificate and/or is to be admitted to the Psychiatric Intensive Care Unit (PICU), the nurse and/or Crisis staff, with the support of Security, conducts a routine inspection and search of all patient clothing and belongings as soon as possible for the purposes of safety (refer to Personal Belongings of Certified (Formed) Patients in The Emergency Department Collecting and Securing procedure).
- Outpatients If a patient is on the premises for the purpose of a scheduled appointment
  and staff know or have reasonable and probable grounds to believe they are carrying a
  Prohibited Item or Illicit Substance, staff will notify the Clinical Manager or MRP and
  request Security to escort the patient from the premises. Should the patient refuse to
  leave the grounds, Security may contact York Regional Police Services to escort the
  patient off the grounds.
- **Visitors** Where there are reasonable grounds to suspect that a visitor has, in their possession, a Monitored or Prohibited Item that could pose a safety threat to any patient or the hospital environment, staff are to call Security. Staff and Security will inform the visitor of the relevant hospital policies and, if appropriate, Security will escort the individual from the premises. Security has the discretion to decide to notify York Regional Police as appropriate.

### References:

- Mental Health Act (2001). retrieved from the e-laws website: <a href="https://www.ontario.ca/laws/statute/90m07">https://www.ontario.ca/laws/statute/90m07</a>
- Criminal Code of Canada. (R.S., 1985, c. C-46). <a href="http://laws-lois.justice.qc.ca/eng/acts/C-46/">http://laws-lois.justice.qc.ca/eng/acts/C-46/</a>
- Personal Health Information Protection Act, S.O. 2004
- Management of Client Prohibited Property (2007) Northern Health, Prince George, British Columbia
- Contributing To Safe Surroundings Search Information/Resource For Patients Parents/Caregiver (2008) Mental Health And Addictions Programs - IWK Health Centre, Halifax, Nova Scotia.

Copyright ©1997 - 2021 Southlake Regional Health Centre