Name of Policy: ABSENT WITHOUT LEAVE/UNAUTHORIZED DEPARTURE OF A PATIENT (AWOL) **Policy Number:** 3364-120-74 **Department: Nursing Service Approving Officer:** Chief Nursing Officer (CNO) / Service Chief **Responsible Agent:** Chief Nursing Officer (CNO) / Service Chief Effective Date: 4/1/2023 Scope: The University of Toledo Medical Center Initial Effective Date: 6/1/14 Minor/technical revision of existing policy New policy proposal

## (A) Policy Statement

In the event any patient leaves the premises without authorization, the following procedure will be initiated to alert appropriate personnel and significant others.

Reaffirmation of existing policy

## (B) Purpose of Policy

The following procedure is written to guide the Psychiatric staff members in the event a patient departs the premises without an authorized leave.

## (C) Procedure

1. Check the entire unit.

Major revision of existing policy

- 2. Notify Security with accurate description of the patient.
- 3. Further evaluate possible whereabouts of the patient by checking with his/her peers.
- 4. If patient cannot be located, notify:
  - a) Attending physician
  - b) Nurse Manager and Program Director.
  - c) Family or guardian as appropriate
  - d) Outpatient therapist (check to see if patient may be with him/her)
  - e) Probation officer and/or case worker (if applicable)
    - a. Even if patient returns, probation officer, and/or case worker MUST be notified on next working day.
- 5. Check the patient's room to evaluate the possibility of return. Check for clothing and personal belongings in closet and drawers.
- 6. Complete Occurrence Report and ODMH MUI report

## (D) **DOCUMENTATION**

- 1. In Progress Notes:
  - a. Behavior prior to departure
  - b. Time of approximate departure
  - c. Notification of above persons
- 2. Upon return of patient or discharge of patient, chart in Nursing Notes:
  - a. Time of return
  - b. Notification of above persons
  - c. Specific behavior displayed by patient
  - d. Implement Code Brown Procedure (SM-08-004)
  - e. Resolution of incident

Approved by:		Review/Revision Date:
Kurt Kless, MSN, MBA, RN, NE-BC	Date	6/2017 6/2020 4/2023
Chief Nursing Officer		
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Revision Completed By:Lindsay Watson LSW MSW PD		Next Review Date: 4/2026
Policies Superseded by This Policy: New		·