

Preventing Elopement From Hospitals

Many factors may cause patients to elope from the hospital setting, including illnesses, medical conditions, and medication reactions. When a patient elopes, it "may present an imminent threat to their health or safety because of legal status or because the patient has been deemed too ill or impaired to make a reasoned decision to leave." Elopement not only puts patients at higher risk, but it also may increase hospitals' liability exposure.

Breakdowns in team communication and patient assessment play a significant role in elopement.³ To address these breakdowns and prevent patient elopements, hospitals need to maintain robust elopement policies and an elopement response plan that has a coordinated, system-wide approach. Ways to prevent elopement include assessing patients for elopement risk, educating staff, conducting drills, using patient-tracking devices, using environmental safeguards, and more.

In addition to maintaining elopement policies and a response plan, organizational leaders may find the following strategies helpful as they review and refine their risk management efforts.⁴

1

Ensure patients are assessed for elopement risk when they are admitted to the hospital and at other times throughout their hospital stay.

2

Use consistent criteria to assess patients that accounts for the patient's mobility, mental status, observed behaviors and statements, and potential elopement risks (e.g., previous elopement attempts, dementia, psychotic episodes, or substance withdrawal). Use decision-making tools or aids, such as a decision tree or checklist, to facilitate risk assessment.

3

Document all elopement assessments and outcomes (e.g., placing a patient on elopement precaution) in patients' health records, and include the rationale and decision-making process.

4

Create individualized plans for patients who are at risk of elopement. Plans should include preventive precautions that specify an appropriate level of supervision and observation. Consider using wristbands to identify those patients at risk.

5

Activate an internal alert system to signal staff when a patient elopes. Make sure your incident response policy and procedure includes details about what steps staff members should take and the order in which they should complete the steps. Also include staff accountabilities, communication requirements, and appropriate contact information.

6

Train healthcare providers and staff members on the facility's elopement policies and response plan so they can learn how to prevent and respond to patient elopements. Inform them about risk factors, accountabilities, and critical action steps.

7

Teach healthcare providers how to report a missing patient, how to search the facility and outside grounds, and which external agencies to notify. Ensure hospital leadership conducts periodic elopement drills.

8

Make sure providers and staff members are aware of the difference between elopement and leaving against medical advice. The latter occurs when competent adults who are capable of making decisions about their care leave without receiving or completing recommended treatment.

9

Use environmental safeguards to prevent elopement, such as door alarms, bed alarms, lighted paths, motion detectors, door/window locks, video cameras, and patient-tracking devices. Consider placing alarms on exit doors directly off patient care units or patient rooms.

10

Place patients who have a history of elopement in rooms in the middle of hallways, as opposed to rooms next to exits or elevators.

11

Position nurse stations by the doors to help clinical staff watch the exits. Instruct staff to carefully watch exit doors, particularly during shift changes and emergencies.

12

Implement a system in which staff members account for all patients on each shift at regular intervals.

13

Train hospital volunteers to sit with or observe patients at risk for elopement.

14

Implement diversionary activities that engage patients and encourage social interaction, including movies, physical activities, hobbies, pet therapy, reading, social visits, etc.



Develop a procedure to analyze all elopements and elopement attempts. Designate appropriate staff to review incidents and provide follow-up for improvement. Consider creating a severity-based classification system to evaluate elopement incidents.

Endnotes

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¹ The National Institute for Elopement Prevention and Resolution. (n.d.). *About us.* Retrieved from www.hospitalelopement.com/about-us.html

² Yale New Haven Health. (2017, February 2). *Hospital issues new guidelines for elopement risk*. Retrieved from www.ynhhs.org/publications/bulletin/archive/020217/hospital-issues-new-guidelines-for-elopement-risk

³ Gerardi, D. (2007, December 1). Elopement. *WebM&M Case Studies*. Agency for Healthcare Research and Quality. Retrieved from https://psnet.ahrq.gov/web-mm/elopement

⁴ The risk tips in this publication are adapted from the following resources: Cascella, L. M. (2022). *Case study: Lapses in elopement policies have grave consequences for behavioral health patient*. MedPro Group. Retrieved from www.linkedin.com/pulse/case-study-lapses-elopement-policies-have-grave-consequences-/; Gerardi, Elopement; Hattersley, R. (2018, March 15). Preventing elderly patient wandering and elopement: Part 1. *Hospital/School/University Campus Safety*. Retrieved from www.campussafetymagazine.com/hospital/elderly-patient-wandering-elopement/; MedPro Group. (2023). *Checklist: Preventing elopement in senior care*. Retrieved from www.medpro.com/documents/10502/2899801/Checklist_Preventing+Elopement+in+Senior+Care_MedPro+Group.pdf; University of Pittsburgh. (2019, February 1). *AMA/Elopement*. Retrieved from www.socialwork.pitt.edu/sites/default/files/ama_and_elopement.pdf