SUBJECT: CODE PINK/PURPLE:

PURPOSE: To provide guidelines for coworker response in the event of an actual or potential abduction of an infant or child from MMSC.

POLICY & PROCEDURE:

I. Scope and Application:

This response plan has been designed to assist in making an appropriate response to an actual or potential abduction of an infant or child from MMSC. Any MMSC employee based on the information available to them at the time of the occurrence may initiate the plan. This plan is not intended to replace any MMSC Departmental Security Policy. The goal of this process would be that all hospital personnel and outside agencies are notified appropriately and to locate and reunite the infant/child with the family as quickly as possible.

II. Definition: Potential Abduction:

A potential abduction situation is defined as the presence of any person(s) likely or threatening to remove an infant or child from MMSC without a written Physician’s order.

III. Response - Potential Abduction:

This situation would be a Security Risk. Initiation of the procedure for a POTENTIAL security risk (EP Manual Section 10) would be appropriate.

IV. Definition - Missing or Actual Abduction:

An actual abduction situation is defined where an infant or child was known to be present at MMSC and is now missing.

V. Response - Missing or Actual Abduction:

GENERAL INSTRUCTIONS ALL PERSONNEL:

1. No Hospital employee or volunteer is authorized to make a public statement concerning this incident nor communicate with a member of the media without prior clearance from Public Relations or Administration.

2. Each Department should initiate a search of their work area, including stairwells, empty rooms.

3. If the infant or child is found, protect the scene (area where they are found) in order preserve the subsequent collection of any forensic evidence by law enforcement officials.
4. The safety of all persons directly or indirectly affected is the primary consideration. The **desired outcome is the successful return of the infant or child to MMSC property, while maintaining a non-confrontational, nonviolent environment. Physical detention of a security risk is not an option for MMSC personnel.** The description and direction of travel of anyone fleeing MMSC while suspected of an unlawful act must be given to police. Reasonable self-defensive actions commensurate with the situation may be exercised in those rare cases where the individual identified as the actual security risk forces physical intervention.

5. Each patient care area should account for the rest of the infants and children currently in their care.

**PERSONNEL IN THE AREA OF CONCERN**

1. When there is a suspicion that an infant or child is missing, the co-worker will immediately notify the Switchboard Operator by calling 5123. Tell them to announce “Code Purple to (the area of concern).”

   - Code Pink will identify an abduction of an INFANT. (0-1 year of age)
   - Code Purple will identify an abduction of a CHILD. (1-8 years of age)

2. Notify the Police directly at 9-911 on the hospital phone system or 8-911 on a patient phone as appropriate. Provide them with as much information as possible including exact MMSC location (Door, Elevator, Floor, Department/Area/Room number) of where to respond. Include information about the intensity of the situation and physical description of the individual(s) involved and your name and title.

3. The safety of all persons directly or indirectly affected is the primary consideration. The **desired outcome is the successful return of the infant or child to MMSC property, while maintaining a non-confrontational, nonviolent environment. Physical detention of a security risk is not an option for MMSC personnel.** The description and direction of travel of anyone fleeing MMSC while suspected of an unlawful act must be given to police. Reasonable self-defensive actions commensurate with the situation may be exercised in those rare cases where the individual identified as the actual security risk forces physical intervention.

4. Complete the Security Risk Worksheet and have it available for the appropriate authorities.

5. The co-workers in the area of the concern should account for the rest of the infants and children currently in their care.

6. Immediately search the work area for the missing infant/child

7. Notify the parents or guardian. Question the parent or guardian of the missing infant or child as to other possible locations of him/her within the facility.

8. Protect the scene (area where the abduction occurred) in order preserve the subsequent collection of any forensic evidence by law enforcement officials. Post a co-worker at the scene, prohibiting entrance to anyone but Law enforcement.

9. Move the parent or guardian (but not their belongings) to a private room. Assign one nurse to accompany them and protect them from stressful contact with the media or other interference.

10. Explain the situation to the other parents or guardians on the same patient care area, with their infant or child present. They should never hear this news from the media or law enforcement.

11. All staff on duty when the abduction occurred would remain in the department until the authorities complete proper questioning. All staff are to refrain from discussing this incident with anyone other than the authorities.
OTHER MMSC PERSONNEL
1. Immediately following the Code Pink or Purple page, the exterior perimeter of MMSC will be monitored as follows:
   - Minimum response would be one co-worker:
     - Southeast corner - Emergency Medical Services
     - Northwest corner - Security/Facilities Management
     - Sky Walk South entrance: Mon-Fri, 0600 – 1700 – Security/Facilities Management
   Ideally each corner of the block would be staffed with two co-workers. When possible, one co-worker from every MMSC department should respond to the un-staffed corners of the block to monitor suspicious activity or act as a runner to the Command Center. If each of the corners is staffed with two co-workers, extra personnel may return to their department.

2. The safety of all persons directly or indirectly affected is the primary consideration. The desired outcome is the successful return of the infant or child while maintaining a non-confrontational, nonviolent environment. Physical detention of the perpetrator is not an option for MMSC personnel. The description and direction of travel of anyone fleeing MMSC while suspected of an unlawful act must be given to police. Reasonable self-defensive actions commensurate with the situation may be exercised in those rare cases where physical intervention is forced by the perpetrator.

3. If a suspicious vehicle or pedestrian is noticed, report this information to the Police Officer in charge at the Command Center.

SWITCHBOARD
1. When receiving the call for the need for Code Purple, depress the paging system key and announce:
   “Attention Please, Code Pink or Purple(as appropriate), please go to (Department of concern.)
   Attention Please, Code Pink or Purple(as appropriate), please go to (Department of concern.)
   Attention Please, Code Pink or Purple(as appropriate), please go to (Department of concern.)”

2. Notify the Security Guard/Facilities Management Department.

3. Call the Communication Center at 911 to verify the reporting of the concern as well as informing them that the Command Center will be in the (Department of concern.)

4. Notify the Associate Director of Patient Care.

5. Notify the Administrator on Call and inform them that the Command Center will be in the (Department of concern.)

6. Notify the Public Relations Department and inform them that the Command Center will be in the (Department of concern.)

7. Notify the Patient & Family Services Department and inform them that the Command Center will be in the (Department of concern.)

8. When notified to do so by the Command Center, depress the paging system key and announce, “Cancel the call for Code Pink or Purple(as appropriate).”

9. Notify the perimeter guards when the event has been resolved. The Security Guard can be notified on the two-way radio or cell phone. The EMS co-worker can be notified through the Dispatch two-way radio.
DEPARTMENT DIRECTOR OF THE AREA or the ASSOCIATE DIRECTOR OF PATIENT CARE
1. Provide a description of the perpetrator to the perimeter security guards as soon as possible.

2. Secure the immediate area as a possible crime scene and post a co-worker at the scene, prohibiting entrance to anyone but Law enforcement.

3. Serve as the MMSC Liaison with the Police Department to assist with the collaboration and communication process involved. Provide a temporary Command Center for the Police Department and Administration in the department where the concern originated.

4. Notify the Switchboard Operator of phone number and the exact location being used for the Command Center.

5. Assist with the search if directed to do so by the Command Center. Question co-workers/volunteers along possible escape routes regarding any suspicious activity.

6. Notify the other hospitals in our area of the occurrence.

7. When the event has been resolved, notify the Switchboard Operator to cancel the page for Code Purple.

8. Consider arranging a Critical Incident Stress De-briefing with the Patient & Family Services Department.

SECURITY GUARD/MAINTENANCE DEPARTMENT
1. Immediately respond to the Northwest corner of the block to monitor the perimeter for suspicious vehicles or pedestrians.

2. Immediately respond to the SkyWalk South entrance, Mon-Fri, 0600 – 1700 to monitor the area for suspicious pedestrians.

3. When notified that the event has been resolved, notify the other perimeter guards.

EMERGENCY MEDICAL SERVICES
1. Immediately respond to the Southeast corner of the block to monitor the perimeter for suspicious vehicles or pedestrians.

PUBLIC RELATIONS DEPARTMENT OR ADMINISTRATOR ON CALL
1. Upon direction from the Command Center, contact the local media and request that they come to a designated media room at the hospital to receive information about the abduction.

2. Prepare the Switchboard with a written response they may use for outside callers.

VI. TERMINATION OF SEARCH
1. If the infant/child is not found, the searching will continue until all areas have submitted negative reports and until the Command Center decide to terminate searching activities.

2. In the event the infant/child is found, all areas will be notified to cease searching by the Switchboard Operator canceling the call for Code Pink or Purple.

3. The Department Director of the Area of Concern or the Associate Director of Patient Care will notify the perimeter guards that the event has been resolved.

4. All inquiries from the news media will be referred to the Public Relations Department.
VII. REPORTING AND DOCUMENTATION

A co-worker from the department of concern will initiate a variance report after the initiation of this Infant/Child Abduction Response Plan. This report will include the pertinent details of the occurrence and shall be submitted to the PI/PS department. As much information as can be furnished is needed for proper documentation of the security related incident.

Originated By: Emergency Preparedness Committee
            Safety Committee

Effective Date: March 1997

______________________________
Environment of Care Facilitator (Security)

______________________________
Chief Financial Officer

Revised: August 2001
Revised: July 2002
Reviewed: February 2004
Reviewed: February 2007
Revised: October 2011
Revised: January 2012

Cross-Reference: Administrative Policy # 151 – Elopement
Abduction of Infant/Child Response (cont.)

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Worksheet

Date: __________  
Time: __________  
Location Last Seen: ____________________________________________  
Direction Heading: ________________________________________________  
Sex:  Male          Female  
Race:  Caucasian  Black  Hispanic  Oriental  
Age:  Child  Teenager  Young Adult  Middle Aged  Elderly  
Height:  Short  Medium  Tall  Very Tall  
Weight:  Thin  Medium  Heavy  Very Heavy  
Descriptive Features: ________________________________________________  
____________________________________________________________________________  
Descriptive Clothing: ________________________________________________  
____________________________________________________________________________  
Was the perpetrator armed? _________ With what? ___________________________