

BATTLE CREEK HEALTH SYSTEM

POLICY NAME: FORENSIC STAFFING AND THE MANAGEMENT OF PATIENTS UNDER LEGAL OR ADMINISTRATIVE RESTRAINT			POLICY NUMBER: TX-060
CREATION DATE: 6/1998	EFFECTIVE DATE: 12/08	REVIEW DATE: 8/2001	REVISION DATE: 12/08
SUPERSEDES:		CROSS REFERENCE POLICIES: Restraints/Seclusion TX-070	
APPLIES TO: Security and Nursing Associates			MANUAL: Administrative
PURPOSE: To provide guidance for staff caring for patients in the custody of law enforcement.			
POLICY: Patients within Battle Creek Health System (BCHS) who are in the custody of law enforcement officers at the time of treatment or placed in custody while in the hospital will be provided with care consistent with other patients. For the purposes of this policy, these patients will be referred to as 'Prisoners'. A. A release of patient information will be in accordance with established hospital policies. B. When restraints are necessary for clinical purposes (not due to agency-required restrictions/or non-clinical purposes), the BCHS policy "Restraints/Seclusion" (TX 70) will be followed. BCHS staff will instruct law enforcement officers regarding policy requirements when clinical restraints are required. C. Restraints applied by the Agency for non-clinical (i.e., under legal restriction) reasons will be honored by the Hospital unless care is compromised. In situations where care is or may be compromised, a Hospital representative (Charge Nurse, Nurse Manager, Director or House Supervisor) will inform the attending Officer and request removal of the non-clinical restraint so patient care may be rendered. D. Nursing, or the responsible clinical staff, will provide Agency with basic orientation information on: <ul style="list-style-type: none"> • How to interact with patients • What to do in case of fire/other emergency • How to contact hospital Security, administration, or necessary personnel in order to report risk(s), incident(s), and/or to ask questions. • The distinction between administrative and clinical restraint • Anticipated length of stay/discharge planning as appropriate to the legal correctional restrictions and need for coordinated decision-making. 			
DEFINITIONS: Agency: non-BCHS Forensic company whose personnel is required to ensure Prisoner custody, including but not limited to; law enforcement officers/deputies, guards, sitters, etc. Officer: individual Agency staff/personnel assigned to Prisoner. Prisoner: BCHS patients who are in the custody of law enforcement officers at the time of treatment or placed in custody while in the hospital			

Administrative/Legal Restraint: applied by the Agency officer (i.e., handcuffs).

Clinical restraint: applied by nursing for clinical purposes. For the use of Clinical Restraints refer to Policy TX 70: Restraints-Seclusion.

PROCEDURE:

A. ASSOCIATES RESPONSIBILITIES

1. Associates will work cooperatively with Officers to assure that the safety and rights of the Prisoner will not be compromised. Should the safety of the Prisoner be restricted due to Agency-imposed restrictions (administrative or legal restraints) the Charge Nurse or designee will be notified to review the restrictions and determine a plan of action to maximize the safe, care of the Prisoner.
2. Nursing will review the "Forensic Staff Agency Information" brochure with each oncoming Officer assigned to guard the Prisoner. This brochure provides necessary information such as explaining the role of the Officer in the patient care setting and what to do should an emergency arise. Complete the *Patients Under Legal or Administrative Restraints Law Enforcement Agency and Officer Responsibilities, form # N-0476. (See attached document)* and place in the paper medical record.
3. The nurse will document in the Prisoner's medical record the name of Agency and name of Officers on duty during the shift and/or at a treatment or procedure.
4. When clinical restraints are necessary, complete all hospital documentation related to restraints and collaborate with the Officers assigned to the Prisoner to determine restraint release for patient care and activities of daily living. Refer to TX070 Restraints-Seclusion.
5. Nursing will monitor area of Prisoner restrained by use of Administrative restraint and document status in medical record at least every 4 hours.
6. The nurse will provide the Officer with information on how to contact BCHS Security, the department Director/Manager or the appropriate Vice President should the need arise.
7. Hospital Security will be contacted if assistance beyond that of the assigned Officer is needed.
8. Conduct discharge planning, address utilization review, and provide for the Prisoner's needs or continuum.
9. Upon discharge (whether as an inpatient, outpatient or emergency patient), the nurse will complete and give to the transporting Officer:
 - a. Off site referral forms
 - b. Medication prescriptions
 - c. Discharge instructions
 - d. Supplies (dressings, medications, or other devices as appropriate)
10. In the event of the death of a Prisoner while receiving health care, the Medical Examiner must be notified. If this occurs, Battle Creek Health System will notify the Agency of the death and will cooperate in the investigation of the circumstances leading to the death. In addition, nursing will notify risk management and complete a peers report.

B. AGENCY AND LAW ENFORCEMENT OFFICER RESPONSIBILITIES

1. Provide appropriate identification and notify/contact the BCHS Security office to let them know you are here with a Prisoner.
2. Provide the hospital with any information on the Prisoner necessary for safe care to be provided.
3. Remain with the Prisoner at all times.

ATTACHED DOCUMENTS:

Patients Under Legal or Administrative Restraints Law Enforcement Agency and Officer Responsibilities

EVIDENCE BASED REFERENCES:

N/A

GROUP (S) RESPONSIBLE FOR REVISIONS:

Patient Care Services, Emergency Department, Safety Committee, Human Resources, and Legal Services, Integrity and Risk Management.