



CODE YELLOW – Missing Patients/residents

Approved by: Administration	Effective Date: April 26, 2019	EP-07
Issued By: Administration	Review Date: July 5, 2022	
Department(s) All	Version: 6	Archived: Y

POLICY

In the event of a missing patients/residents, the **CODE YELLOW** will be followed to ensure a timely, coordinated and thorough search of the Hospital and grounds.

PURPOSE

The purpose of this policy is to ensure that all staff are aware of the actions to be taken in the event of a missing patients/residents.

GUIDELINES

The following general guidelines should be followed:

- 1) **CODE YELLOW** will be called to alert hospital staff to search for a missing patients/residents.
- 2) All departments/units will be responsible for searching their own areas and any adjacent areas (i.e. lobbies, lounges, storage areas, stairwells, etc.).
- 3) The Police Department is to be contacted immediately for any patients/residents who is likely to harm themselves or others, or are seriously ill.

ACTIVATING A CODE YELLOW:

Once a patient/residents has been determined to be missing from the unit/department, staff will call a **CODE YELLOW**. The Director/Manager, Team Leader or Charge Nurse (depending upon staff availability on site at the time of the **CODE YELLOW**) will become the Incident Manager and is responsible for making the following decisions:

- when to notify the Police
- when to notify the patient/resident’s family/next-of-kin
- when to notify the patient/resident’s physician
- when to notify the Administrator On Call

PROCEDURE:

- 1) Staff on the unit where the patient/resident is missing will first search their own department and adjacent areas thoroughly. This search should not take more than 10 minutes.
- 2) If the patient/resident is not found during the search a **CODE YELLOW** will be called. The nurse in charge of the unit where the patients/resident is missing will assume the role of Incident Manager (this may be the Team Leader or delegate).
- 3) The unit/department will either notify Switchboard of the **CODE YELLOW** or the unit will page from their area ensuring that they provide the location of the incident, a complete description of the missing patient/resident (age, sex, clothing, height, weight, hair color, eye color etc.) as allowed by *Personal Health Information Protection Act*¹, (“PHIPA”) and the area where the patient/resident was last seen.

¹ **Personal Health Information Protection Act, 2004, S.O. 2004, CHAPTER 3, SCHEDULE A Disclosures related to risks**

40 (1) A health information custodian may disclose personal health information about an individual if the custodian believes on reasonable grounds that the disclosure is necessary for the purpose of eliminating or reducing a significant risk of serious bodily harm to a person or group of persons. 2004, c. 3, Sched. A, s. 40 (1).



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- 4) The announcement will be repeated over the PA system two (2) times.
- 5) Upon hearing the **CODE YELLOW** announcement, all departments/units will conduct an immediate search of their area and any adjacent areas. The search should not take more than 10 minutes. Check off areas as searched and sign name to the zone once search completed.
(See **APPENDIX I** Code Yellow Search Response Record (Staff Actions) and Code Yellow Search Checklist to help guide search).
- 6) Once each department/unit has completed their search, they will contact the unit directly that initiated the **CODE YELLOW** and inform them of findings by stating that the area searched is all clear or that the patient/resident has been located. The checklist that is completed and signed will be given to the Incident Manager to be incorporated into the [Emergency Response Report Form 423](#).
- 7) The Unit will record the time each department calls and the name of the person calling in, using the **APPENDIX I** Zone Search Checklist and **APPENDIX II** Hospital Search Zones Maps, including the date/time and name of person returning the call and if the patient/resident was found (yes/no).
- 8) The Unit will contact any area that has not called in within 15 minutes.

IT IS THE RESPONSIBILITY OF EACH DEPARTMENT TO CONTACT THE UNIT AFTER COMPLETION OF THEIR SEARCH

- 9) If the missing patient/resident is still not located, the Incident Manager will make the decision (if not done earlier) to notify the Police, physician, family/next-of-kin as well as the Director On Call.
The decision to call off the search, when a patient/resident has not been located rests with the Incident Manager. This decision may be made in consultation with the CEO and/or delegate and the Police Department.
- 10) A full description of the missing patient/resident will be provided to the Police.
- 11) Once the patient/resident is located or the search is called off, Switchboard will announce "**CODE YELLOW All Clear**". This announcement will be repeated two (2) times.
- 12) Each Department is responsible for ensuring that Code Yellow Search Response Records are printed for use from the PPM via this policy.

DOCUMENTATION OF MISSING PATIENT/RESIDENT:

The following documentation must be completed and forwarded to the Director/Manager responsible for Risk:

- 1) Emergency Response Report on the missing patient/resident.
- 2) The completed Hospital Code Yellow Search Response Record – Appendix I (attach to incident report).
- 3) Any other relevant documentation made during the search.

The following information should be documented in the missing patient/resident health record:

- 1) Time patient/resident first noted to be missing.
- 2) Time Code Yellow called.
- 3) Times Police, physician and family/next-of-kin notified.
- 4) Time patient/resident found.
- 5) Condition of patient/resident upon return to unit.

CODE YELLOW - Missing Person

APPENDIX I

CODE YELLOW SEARCH RESPONSE CHECKLIST

A – PATIENT/RESIDENT SEARCH	✓
Ward Searched (including 20m from exits)	
Liaise with persons in charge of other nearby wards/departments to complete a search of their area. Provide patients/residents description.	
Switchboard advised if on duty. Announce Code Yellow Overhead	
Admin on Call notified if on duty	
Security advised.	
Shift Handover - Communication	
B - PATIENT/RESIDENT FOUND	
Call Search Off – Announce Overhead	
Documentation on patient/resident record completed	
Director On Call notified if on duty. Notify Patient/resident family and keep updated.	
All checklists completed and submitted with Emergency Response Report.	
Emergency Response Record Form 423 completed.	
Records from other staff (Appendices checklists) obtained and forwarded with Emergency Response Report to Director/Manager of Risk.	
C - PATIENTS/RESIDENTS NOT FOUND	
Notify Admin On Call if on duty. Report progress as necessary.	
Notify Police - Name & Number of Officer to be noted. _____	
Provide Police with Hospital Map and description of patient/resident.	
Detail further actions taken (continue on insert if needed) See #9 of procedure.	
Family Notified	
Assemble search team.	
Patients/residents Found – See Section A	

CODE YELLOW ZONE SEARCH CHECKLIST

ZERP (Ground) LEVEL Search Zone	Time	Individual Reporting	Patients/residents Found Y/N
0-1			
0-2			
0-3			
0-4			
0-5			
0-6			
0-7			

FIRST LEVEL - Search Zone	Time	Individual Reporting	Patients/residents Found Y/N
1-1			
1-2			
1-3			
1-4			
1-5			
1-6			
1-7			

SECOND LEVEL -Search Zone	Time	Individual Reporting	Patients/residents Found Y/N
2-1			



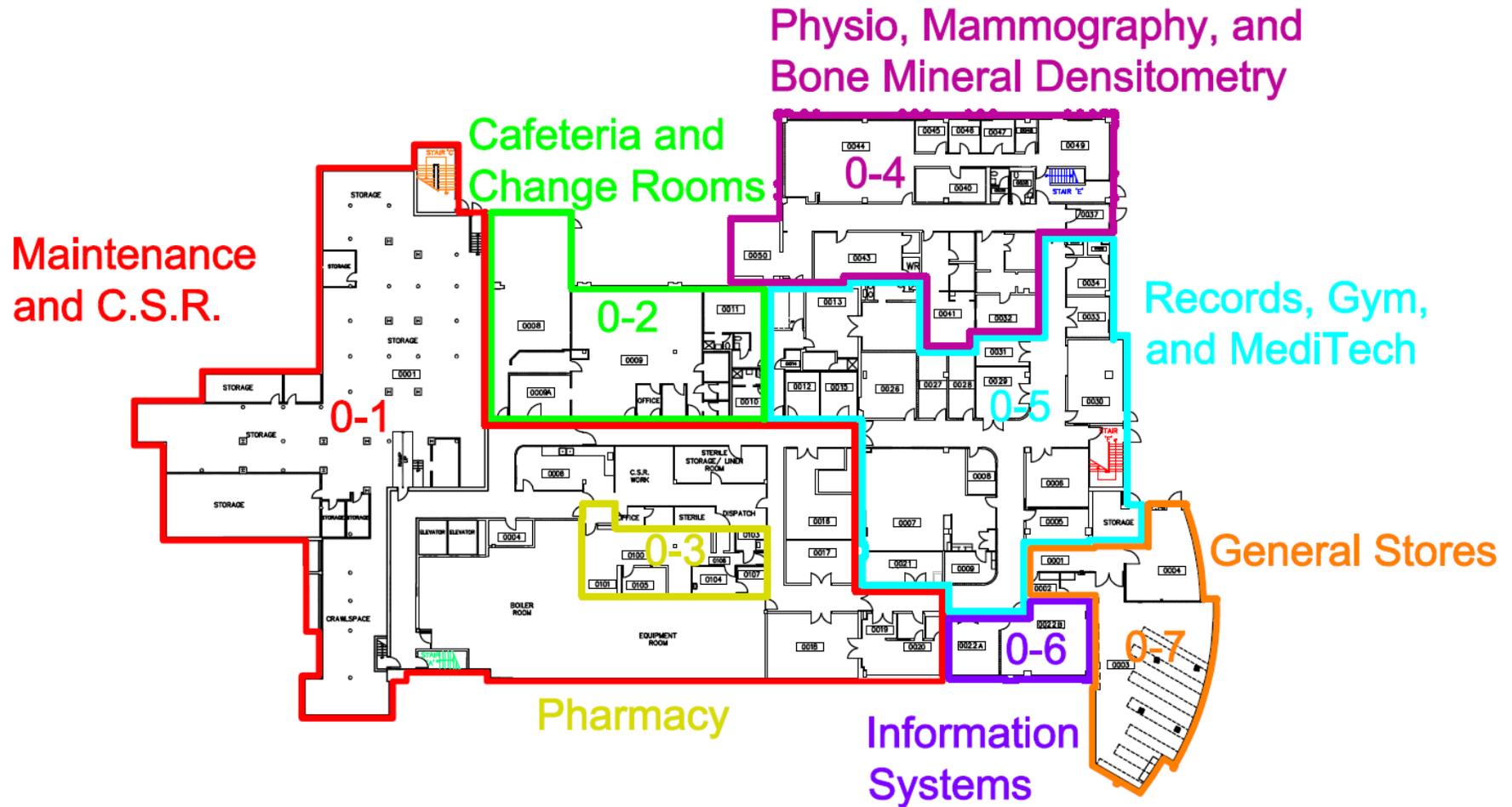
CODE YELLOW - Missing Person

2-2			
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CODE YELLOW - Missing Person

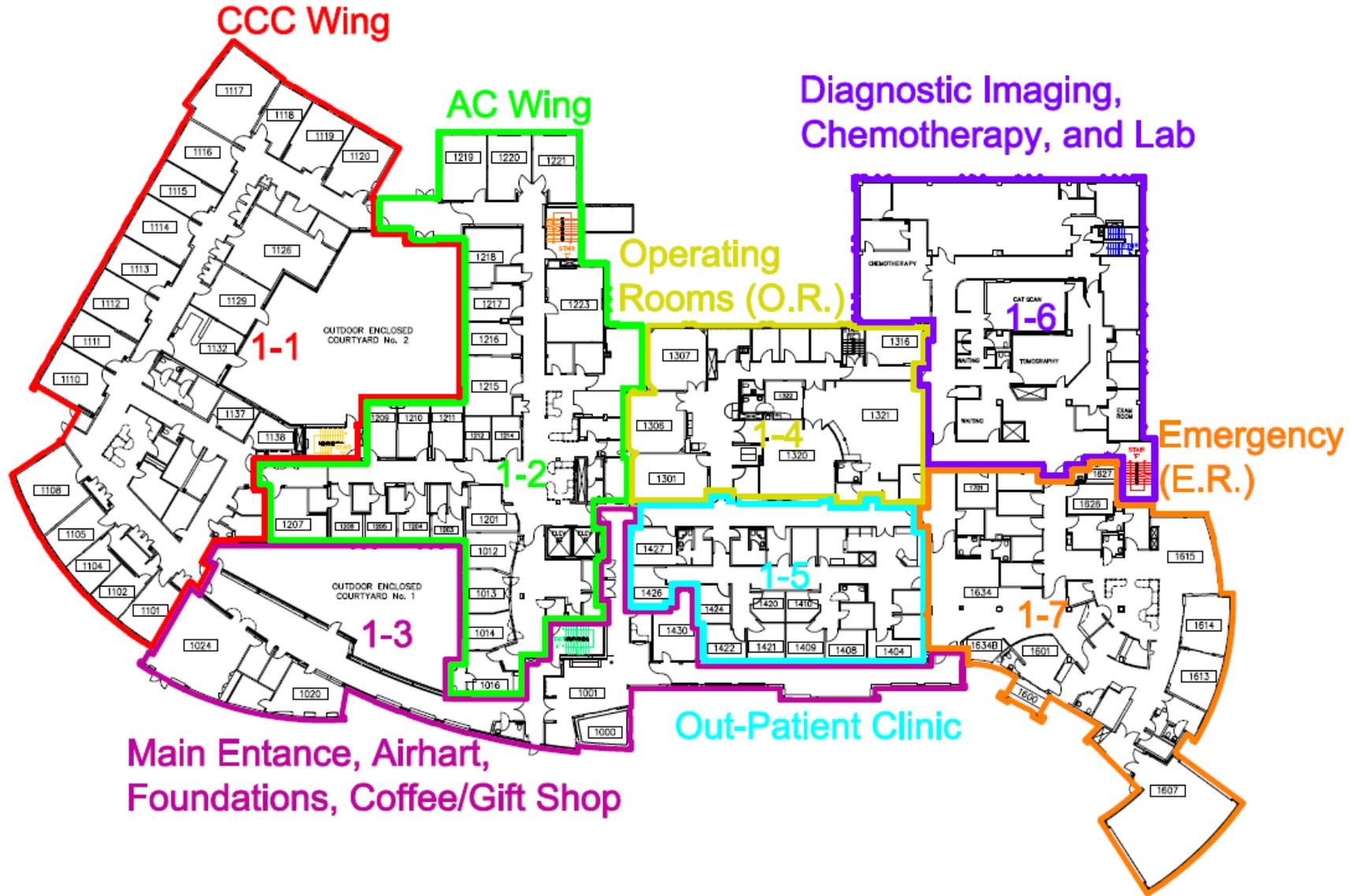
**APPENDIX II
HOSPITAL SEARCH ZONE MAPS**

GROUND LEVEL 0



CODE YELLOW - Missing Person

LEVEL 1



CODE YELLOW - Missing Person

LEVEL 2

