

Elopement Prevention and Response Checklist

EL	ELOPEMENT PREVENTION AND RESPONSE:						
Item		Yes	No	Not Applicable/Comments			
ASSESSMENT							
1.	Are resident assessments begun before admission, and do they identify potential wanderers?						
2.	Are these assessments used to identify a possible cause of wandering?						
3.	Are family members/caregivers queried as to any history of wandering or elopement from home or another facility?						
4.	Since the majority of elopements occur in the first few days following admission, are residents observed more closely during the first week?						
5.	Are requirements for observation, assessment and reassessment incorporated into the plan of care and documented in the clinical record?						
ENVIRONMENT							
6.	Are exits monitored during shift changes, when residents might slip away unnoticed?						
7.	Are there regular checks for the presence of all residents several times on each shift?						
8.	Are stairwells and doors alarmed at all times, or are electronic sensors in place?						
9.	Do staff have a clear view of any door that is not alarmed?						
10.	Are supply closets & roof access doors kept locked?						



Item		Yes	No	Not Applicable/Comments
	ked exit doors automatically unlock fire alarm is activated?			
arrows,	ual cues, such as "stop" signs and , used so that residents can easily find ay or be redirected from exit doors?			
	idents who are at risk for wandering in rooms away from stairwells and exit			
POLICIES/PROCEDURES				
1	e a written policy or statement about e staff should manage the wandering at?			
	re written protocols for how staff respond to audible bed and door			
16. Is there	a written elopement prevention plan?			
17. Is there	a written elopement response plan?			
a. At immore imm	cedures for missing residents include: horough search of the unit and other mediate areas? e of an internal alert system to inform staff that someone is missing and to plement immediate response ocedures? systematic search, with a building floor an, of all areas of the facility? tification of management, family embers, and the attending physician? tification of local police with a scription of the resident and other rtinent information? eps to take when the resident is acovered (e.g., notifications, medical aluation, etc.)? mpletion of an event report?			
revised	cedures reviewed periodically and as needed?			
RESPONSE PROCEDURES				
	taff know how to initiate the protocol ney discover that a resident is missing?			
21. Are the	re defined roles for staff?			
comple	oriefing held after any attempted or ted elopement to identify unities for improvement?			



Item	Yes	No	Not Applicable/Comments
STAFF EDUCATION/TRAINING			
23. Does new employee orientation include training in identifying residents at risk to wander as well as techniques for managing wandering?			
24. Is there ongoing staff training on the appropriate use of electronic alarms and resident-specific tracking devices?			
25. Is the training provided for night and weekend staff as well as for agency and temporary staff?			

This is a sample guideline furnished to you by Glatfelter Healthcare Practice. Your organization should review it and make the necessary modifications to meet your organization's needs. The intent of this guideline is to assist you in reducing exposure to the risk of injury, harm, or damage to personnel, property, and the general public. For additional information on this topic, contact your Glatfelter Healthcare Practice Representative at (800) 233-1957

