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| **POLICY TITLE: Searches (Drugs/Weapons) and Weapons on PSFHS Property** |
| **Department:** Security, Nursing, Physician, Pharmacy | **Policy Number:** IDP S-01-c |
| **History of Review/Revision Dates:***Searches (S-01-c);* 6/03, 6/07, 7/11Weapons (W-02-F); 11/03, 6/0, 12/08  | **Effective Date:** 2/27/2012 |

**SCOPE:** This policy applies to all departments at Penrose St. Francis Health Services (PSFHS).

**PURPOSE:** To define the regulation regarding weapons on PSFHS property and define the standard for searching individuals for weapons or illicit drugs.

**STATEMENT OF POLICY:** Penrose St. Francis Health Services(PSFHS) as a private entity has the right to ban weapons from its property. No weapons of any kind will be permitted on PSFHS property, either by visitors, patients, associates, staff or anyone else with the exception of law enforcement officials who are in possession of a commission card and are approved to carry weapons in PSFHS facilities. A Colorado Carry/Concealed permit does not authorize an individual to have a weapon on PSFHS property. Searches may be necessary to maintain control of weapons and substances designated as dangerous and/or illegal. A search is indicated when a Supervisor or Manager has reasonable cause to believe that patient, visitor, associate safety or hospital property may be endangered.

DEFINITIONS: (Extracted from the Colorado Revised Statutes 18-1-901 and Colorado Springs City Ordinance 9.7.101):

- Dangerous or deadly weapons: Includes any firearm whether loaded or unloaded, including, but not limited to, handgun, automatic, revolver, pistol, rifle, shotgun, air gun, gas-operated gun, spring gun, BB gun or any other instruments or device capable of intended to be capable of discharging bullets, cartridges, or other explosive charges; any bow; any cross knuckles, brass knuckles, lead knuckles, bludgeon or blackjack, billy club, sandclub, sandbag, or other hand-operated striking weapon, knife, dirk, dagger, stiletto, gravity knife, switchblade knife, or any other weapon, device, instrument, materials or substance, whether animate or inanimate, which, in the manner used or intended to be used, is calculated to produce serious bodily injury.

- Secured: Means that the weapon will be removed from the patient and locked in a security container under control of the hospital Security personnel until returned to the patient on discharge or until turned over to the Colorado Springs Police Department (CSPD). Drugs (prescription/non-prescription/over-the-counter) will be secured in the pharmacy until returned to the patient or destroyed at the physician’s direction. Illegal drugs will be given directly to the CSPD or destroyed by 2 staff members at the direction of the CSPD.

PROCEDURE:

 **Weapons:**

1. Any dangerous weapon as described above, found or observed on any person on the premises of the Penrose-St. Francis Health Service (PSFHS), will be immediately reported to the Security Department. The Security officer will contact his/her supervisor and one or both will then talk with the involved person in an attempt to obtain the weapon or ask that it be removed from PSFHS property. No physical attempts to acquire the weapon should be made by the Security/Hospital personnel.
2. In the event the person refuses to surrender said weapon, security will seek law enforcement assistance by immediately dialing 911. Notify manager/director during work hours and the Administrative Managers (after hours) and Administrator On-Call. . The person will be kept under observation by Security until he/she leaves the facility or until law enforcement arrives. To the degree possible, patients and staff should be removed to a more safe and secure area.
3. Any weapon obtained by Security will be unloaded, then locked in a secure area and returned to the person at the time they leave PSFHS property. A receipt will be furnished to the owner of said weapon. If the owner is not alert or oriented at the time of leaving the Facility (determination having been made by a treating physician or the security officer present when weapon requested) security will hold the weapon in a secured area for 24 hours. After 24 hours the weapon will be turned over to local law enforcement.
4. A receipt must be signed by the person to whom the weapon is being released. If this person is anyone other than the person whom the weapon was taken from, a photo ID and proof of ownership must be provided with a copy attached to the Security Incident Report. When appropriate, the weapon may be released to family member.
5. In the event of an emergency or disaster, any PSFHS administrator or the Incident Commander may authorize the following to carry a weapon:

 - Law Enforcement Officials

 - Contracted Private Security Company Officer

 - Designated Hospital Staff (As defined by the Incident Commander)

1. Weapons that are of undetermined ownership will be held by the Security Department until ownership can be proven. If no proof can be established, weapons will be turned over to local law enforcement.
2. Law enforcement officers in the possession of a commission card will be allowed to carry weapons and will be given the option to secure their weapon in the event they are serving legal paper, conducting interviews, etc.
3. Violations of this guideline will result in the following:
* Associates will be counseled and sent home on their own time with the weapon. If a concern exists about the legality of the weapon, it will be kept and given to local law enforcement officials. Associates will be immediately terminated for threatening behavior with a weapon.
* Visitors will be told to take the weapon and leave the property. Alternatively they may relinquish the weapon to security on entrance to the property and reclaim it at the time they leave PSFHS property. A receipt will be furnished to the owner of the weapon.

 **Drugs:**

1. The Director/ Administrative Manager or Department Head (approving person) is to be notified by the patient caregiver of any indications that identify a reasonable belief that there is a need for the search. This notification MUST occur prior to the search being conducted. No search will be conducted without authorization by the person to whom the report is made. The physician should be notified of intent to search as well as the reasons.
2. Reasons for the search must be explained to the patient by the approving person prior to the search. Documentation in the patient’s medical record should include the rationale for the search as well as the patient’s response.
3. The patient must be present at the time of a search with the following guidelines being followed:
	1. Search all belongings. The patient will be asked to put on a hospital gown, and his/her clothing will be searched by staff members.
	2. Patient room and surrounding areas will be searched as deemed appropriate by the approving person.
	3. Patients themselves will be searched (non-invasive) ONLY in extreme cases when it is reasonable to believe that the patient may have hidden a drug on him/herself. Authorization must be given by the Director of the Department prior to a body search. This search will be performed by two staff members of the same sex as the patient. They will ask the patient to put on a hospital gown and do a visual review of the patient’s body.
	4. No cavity searches will occur on the general nursing units. The doctor may perform this if he/she deems it necessary.
		1. Patients with drug/alcohol diagnosis may not have their names disclosed to law enforcement without a Federal Court Order. All other patients may have their names and addresses given to law enforcement agencies upon request. The names of minors should be withheld until their parents or guardians are notified.
		2. Illicit drugs found must be turned over to law enforcement or destroyed per their direction.
* Destruction by hospital staff must be done by flushing the drugs down the hopper with two witnesses present: a note must then be made in the Clinical Information System stating what was done with the drug and by whom.
* If a patient possesses medical marijuana and has a medical marijuana registry card, the drug must either be sent home with a friend or family immediately or destroyed. It can *never* be stored on the PSFHS premises or sent to the Pharmacy.
	+ 1. If there is reasonable suspicion to warrant a search of a physician, the Chief Medical Officer (CMO) must be notified prior to the search so a decision can be made about drug testing. In the absence of the CMO, the chief of the medical staff will be notified.
		2. Complete an occurrence report and Security Incident Report.

**REFERENCES:**

Michies Legal Resources. (2010). *Colorado Regulatory Statutes, 18-1-901*. Retrieved December 5, 2010, from http://www.michie.com/colorado/lpext.dll?f=templates&fn=main-h.htm&cp=

Sterling Codifiers, Inc. (2010). *Colorado Springs Criminal Code, 9.7.101*. Retrieved December 5, 2010, from http://www.sterlingcodifiers.com/codebook/index.php?book\_id=855

**POLICY VIOLATION**

Any Centura associate who fails to abide by this policy may be subject to disciplinary action, including termination.

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| **Approval Body: Interdisciplinary Practice Committee** | **Signature/Date:**Katherine D McCord, RN, CNO |
| **Secondary Approval Body:** | **Signature/Date:**Jeff Oram Smith, MD, CMO |

Last review facilitated by Jeff Oram-Smith, MD, CMO