

**PROCEDURE FOR: Homicidal Patient: Management of**

- POLICY:**
1. All patients are assessed upon admission for homicidal ideation and/or intent.
  2. If at any time during the course of hospitalization a patient indicates homicidal ideation and/or intent the following actions are taken, the physician will be notified immediately.
  3. Nursing staff will initiate, at a minimum, 15 minute checks; Constant Observation (CO) or One-to-One (1:1) Observation may be indicated.
  4. Following RN and MD reassessment for homicidality, if the patient is determined to be a clear and present danger, the patient will; be placed in a private room with a CO or 1:1 status. The treatment plan will be updated and the Observation Plan will be initiated identifying care parameters.
  5. If the patient verbalizes homicidal ideation and/or intent toward a specific person, that person's name, address and phone number are noted in the Progress Note. The team will further evaluate and determine the need for "Duty to Warn" the specific person(s) identified by the patient expressing ideation and/or intent towards.
  6. In the event of patient AWOL (Absent Without Leave), individuals who are potentially at risk of harm must be notified by the unit staff in order to preserve the safety of any or all persons involved.
  7. In the event the patient AWOLs from the unit, the UCHC Police Department is directed to contact the appropriate local police department to alert them to the status of the patient. Every effort is made to either return the patient to the unit or bring to a secure area.

**APPROVAL:** Nursing Standards Committee

**EFFECTIVE DATE:** 1988

**REVISION DATES:** 12/90, 11/97, 1/00, 10/00, 11/03, 6/06, 7/08