

 <p><b>BAY OF PLENTY</b> DISTRICT HEALTH BOARD HAUORA A TOI</p> <p><b>CLINICAL PRACTICE MANUAL</b></p>	<p><b>PERSONAL SEARCH</b></p>	<p><b>Protocol CPM.M5.24</b></p>

## PURPOSE

It is the Bay of Plenty District Health Board (BOPDHB) Mental Health & Addiction Service's (MH&AS) policy intent that a clinically safe environment is provided in both community services and inpatient units. This requires maintenance through both regular and occasional searches of service user / whaiora's property.

## OBJECTIVE

This protocol provides advice about the legal and practice framework for conducting [searches](#) of inpatients or their belongings where this is permitted by law.

It provides services with a framework for managing the identification and removal of dangerous and inappropriate items in an inpatient unit.

Harm from interpersonal behaviour including violence and aggression is one of the most frequent health and safety risks reported and identified by hospital staff in their workplace.

In addition, interpersonal violence and abuse is a significant cause of harm and distress reported to have been experienced by service user / whaiora's while being in an inpatient mental health facility.

The aim of the safety procedure undertaken by inpatient facility staff is to identify and contain any personal property that may be used to harm self or others where this risk has been identified. This may include medication brought onto the unit, weapons, belts or cords, razors, any glass or breakables, toiletries and aerosols, sharp or cutting tools and lighters / matches.

Mental Health inpatient services aim to provide and maintain a safe therapeutic environment that promotes the safety, wellbeing and recovery of service user / whaiora's. The service endeavours to make every effort to protect service user / whaiora's from abuse and exploitation and minimise the risk of deliberate self-harm and suicide.

There is both a legal imperative under the Health and Safety at Work Act 2015 to ensure that the provision and maintenance of a work environment is without risks to health and safety

In addition, Mental Health inpatient services have a legislated duty of care under the Crimes Act 1961 to protect vulnerable adults. A vulnerable adult (18+) is someone who because of their age, sickness or mental impairment, or because they are in detention, is completely unable to remove themselves from the care or charge of another person.

While safety is the primary concern, human rights such as respect, privacy, dignity and confidentiality must be taken into account.

Searching a service user / whaiora or their belongings is an intrusive intervention that must only be used when it is the only reasonable and practicable course of action to avoid or prevent a serious risk of harm to a service user / whaiora or harm to others.

When a search is undertaken, every effort should be made to observe the person's rights to the greatest extent possible under the circumstances.

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## STANDARDS TO BE MET

### 1. Searches

- 1.1 There are 4 types of searches identified in this protocol and these are listed and explained as follows:
  - a) Service user / whaiora searches - personal and contact search
  - b) Search of a patient's room or belongings
  - c) Unit and grounds safety searches
  - d) Visitor searches
- 1.2 Personal and property searches are part of a health response, not a security response. Where consideration is given to conducting a search, this will be a planned, nurse-led initiative. The role of security staff assigned to Mental Health facilities is to support clinical staff when directed but not carry out searches.
- 1.3 When determining whether to search an individual service user / whaiora, the issues that must be considered by the treating team include the person's safety, past history of abuse / trauma, human rights issues, therapeutic relationship, environmental safety and occupational health and safety.
- 1.4 If there are less intrusive options to ensure safety, then these must be considered and the reasons why these options were or were not adopted documented in the clinical record.
- 1.5 Wherever possible, the mental health practitioner or Responsible Clinician treating the service user / whaiora must be involved in the decision making when consideration is being given to conducting searches.
- 1.6 If the service user / whaiora is a minor, a parent / carer should be asked to be present at the search and if risk is not thought to be imminent consideration should be given to postponing the search until the parent / carer is able to be present.
- 1.7 Within the legal framework described in this guideline, a search of a service user / whaiora's belongings and room may also take place.
- 1.8 Internal body cavity searches of consumers are not permitted under this protocol. If a body search is required to mitigate potential risk to safety, the Police must be contacted to undertake this search.
- 1.9 All searches will be recorded in the [incident management system](#) (Datix) and minimum details include the person being searched (Name, NHI) reason for search, type of search, MH status and consent status of the search.

### 2. Reasons for Personal Search

Personal searches occur:

- as part of service user / whaiora admission procedure to an inpatient unit.
- as part of service user / whaiora re-entry to an inpatient unit following leave.
- as part of service user / whaiora admission to an Intensive Psychiatric Care or Low Stimulus area.
- prior to seclusion
- at any time as part of ongoing need to address and maintain patient and staff safety

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## 2.1 Preadmission / Assessment Safety

- Ensure that any luggage and personal items are stored separately in the transport vehicle's boot and remain stowed until the admitting nurse can undertake a search of the property as detailed below.
- The responsibility for service user / whaiora being transported to hospital rests with the transporting staff until such time as a decision has been made that the person will be admitted.
- Responsibility for the care of service user / whaiora including the conduct of any search procedure is transferred to the admitting nurse once a decision has been made to admit the person.

## 2.2 Service user / whaiora Property Search

**Prior to entry into the psychiatric ward environment a search of the persons clothing and property will occur:**

- Lighters / matches and tobacco products brought on to the ward by service user / whaiora must be handed to the staff
- A wand maybe used to augment the search of any service user / whaiora to isolate harmful items.
- Service user / whaiora's clothing and property will be checked to remove:
  - Any medication.
  - Any weapons or illegal contraband/substances.
  - Personal property that may be used to harm self or others. This may include belts or cords, razors, any glass or breakables, any toiletries and aerosols, any sharp or cutting tools.
  - Lighters / matches will be removed and held by staff in the nursing station.
- Property will be returned to the service user / whaiora's family/support, with consent, or stored safely on the unit. Any property removed should be recorded in the persons health record on the [Patient's Personal Property List](#).
- Service user / whaiora and whānau / support will be informed of reason for and outcome of search, along with recommendations and restrictions on any further property that may be brought into the unit.

## 2.3 Search Due To Increased Risk

- A search of the service user / whaiora's clothing and property will occur if the person is to be admitted to the IPC or seclusion areas. In these cases, particular vigilance will be required to ensure potentially harmful items are removed and stored with the persons belongings.
- If a service user / whaiora is displaying behaviour that could lead to increased risk to themselves or others or it is believed that they are in possession of a weapon, dangerous object or audio / visual recording device, they may be searched.
- Individuals known to bring potentially harmful objects to the unit or display potentially dangerous behaviour e.g. lighting fires.
- No search, regardless of type, should be undertaken for the purpose of suspicion of theft or concealed property. That is not the rationale for searches to be undertaken and alternative interventions should be considered, which may involve the Police.

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### 3. Personal Search Procedure

#### 3.1 Consent

- a) All the service user / whaiora's must be presumed to have capacity to give informed consent unless it can be demonstrated that the person lacks capacity at the time the decision needs to be made.
- b) Clinical staff have the authority to search a service user / whaiora's clothing and belongings if the service user / whaiora gives informed consent to a search in circumstances where the service user / whaiora is capable of giving informed consent.
- c) Where the service user / whaiora does not consent to a search, the search must not occur unless there is a lawful reason (i.e. Crimes Act 1961, Health and Safety at Work Act 2015).

#### 3.2 Cultural Safety

- a) Safety is our core concern however, search is an intrusive intervention that can diminish the mana of service user / whaiora and their whānau. We also acknowledge that as a Tiriti led DHB, when working with Māori clients that search also has the potential to diminish the mana of iwi and hapū. We are committed to demonstrating Manaakitanga when search is necessary. This may include:
  - i. Inviting whānau to be present to support the service user / whaiora;
  - ii. Including Pou Kōkiri as support for the service user / whaiora;
  - iii. Having whanaungatanga supported by Pou Kōkiri prior to search;
  - iv. Beginning this process with karakia;
  - v. Supporting the whaiora to provide feedback on the search process
- b) Before any search, the service user / whaiora will be informed of the reason for the search. It is preferable that they remain present throughout the search or if practicable are represented by their nominated family / whānau.
- c) Personal search is limited to a search of a person's pockets, clothing, carried property, bags and luggage. A wand maybe used to help isolate harmful items.
- d) A search is completed by at least two staff members with the person present and whānau / support, or where the consumer cannot or does not wish to be present.
- e) Any search will be conducted in a manner that maintains the person's privacy, rights and dignity as far as possible.
- f) Any items and property removed for safety or security reasons will be recorded as having been removed. Personal items will be stored in the patient property room or transferred to the Police if this property is considered contraband or a weapon.

#### 3.3 Non-contact search of a person

- a) Consider the need to wear appropriate protective clothing (for example, gloves).
- b) Explain the search process to the person and ask him/her to disclose any dangerous or inappropriate items.
- c) Take the service user / whaiora to a private area and check the person using a handheld metal detector or similar non-invasive screening device near the person.
- d) Remove any items that may pose a risk of safety to the person or others.
- e) Store or dispose of confiscated items appropriately in accordance with [BOPDHB 6.9.3 Patient / Client Property](#).

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### 3.4 Contact search of Service User / Whaiora

#### a) *Level 1: Pat-down search*

- i. Consider the need to wear appropriate protective clothing (for example, gloves).
- ii. Advise the service user / whaiora that the search can be undertaken in the presence of a person nominated by them if they wish.
- iii. Explain the pat-down search process to the service user / whaiora and ask him/her to disclose any dangerous or inappropriate items.
- iv. Take the service user / whaiora to a private area and, in the presence of two staff, conduct a pat down of pocket areas and any areas that could be used for concealing items.
- v. Avoid the genitals and breast area unless previously agreed with the senior registered nurse and Responsible Clinician and conducted in the presence of nursing staff of the appropriate gender.
- vi. Remove any items that may pose a risk of safety to the service user / whaiora or others.
- vii. Store or dispose of items appropriately.

#### b) *Level 2: Partial removal of clothing search*

This is not a strip search. Even so, a partial removal of clothing search without consent can trespass upon the rights of patients and therefore must only be considered in circumstances where there is a clear and present risk of serious harm to service user / whaiora, staff or visitors, and there is reason to believe items may be concealed on the person. ***How to conduct a partial removal of clothing search:***

- i. Consider the need to wear appropriate protective clothing (for example, gloves).
- ii. Advise the service user / whaiora that the search can be undertaken in the presence of a person nominated by them if they wish.
- iii. Explain the search process to the service user / whaiora and ask him/her to disclose any dangerous or inappropriate items.
- iv. Take the service user / whaiora to a private area and provide him/her with alternative clothing prior to and for the duration of the search.
- v. Ask the service user / whaiora to remove all clothing except underwear so that the clothing can be examined by staff to ensure it does not contain dangerous or inappropriate items. Ensure that only part of the clothing is removed at any one time. service user / whaiora must not be physically handled during this process.
- vi. Where there are reasonable grounds to suspect that the service user / whaiora has concealed a potentially harmful object or substance in their underwear, a search of the underwear may be required. Such a search needs to be authorised by the Responsible Clinician and include senior nursing staff. Personal dignity and gender sensitivity are to be maintained while the service user / whaiora removes their underwear so a search of the underwear can take place. Appropriate arrangements should be made to ensure the service user / whaiora modesty in such circumstances. This may include providing a dressing gown, towel or new underwear. Every effort should be made to prevent this from being a debasing experience for the patient.
- vii. Remove any items that may pose a risk of safety to the service user / whaiora or others.
- viii. Store or dispose of items appropriately.

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### 3.5 At completion of all searches

- a) Offer and arrange a debriefing as soon as practicable
- b) Document the search in the [Incident Management System](#) (Datix) and the clinical record, clearly stating:
  - i. the reasons for the search
  - ii. whether and how consent was obtained
  - iii. staff involved in the search
  - iv. actions taken (description of the search)
  - v. the outcomes of the search
  - vi. whether a debriefing was offered and accepted
  - vii. arrangements for storing or disposing of any objects or substances found.

## 4. Search of Visitors

- 4.1 Visitors to an inpatient Psychiatric Unit maybe required to have their property searched in order to maintain service user / whaiora safety / a safe environment.
- 4.2 A search of visitor's property / contents / pockets, may also occur prior to being admitted entry to Intensive Psychiatric Care (IPC) for the purpose of visiting a consumer;
  - a) As part of a service user / whaiora's risk management procedure
  - b) As an outcome of service user / whaiora's risk assessment; or,
  - c) As part of ongoing maintenance of a safe campus environment

## 5. Unit and Grounds Safety Maintenance Search

- 5.1 The unit may be searched as part of ongoing environmental safety maintenance. The aim of this search will be to locate and remove any potential weapons and any harmful substances including alcohol and drugs, which may find their way onto the unit. These searches may be conducted regularly, or in response to staff becoming aware of potential risk on the unit.
- 5.2 Two staff should conduct a search of all areas of the ward and grounds. Any findings should be removed and documented on an Incident form.
- 5.3 An Environment search that includes a search of a service user / whaiora's property should be conducted in the presence of the service user / whaiora if they wish. Any personal property removed should be recorded on the [Patient's Personal Property List](#).
- 5.4 Any drugs found will be disposed of in accordance with the BOPDHB protocol CPM.M5.21 Illegal Drugs, Alcohol & Other Psychotropic Substances

## REFERENCES

- Code of Health and Disability Services Consumer Rights
- Crimes Act 1961
- Health & Disability Services Standards NZS 8134:2008 Standards New Zealand
- Health and Safety at Work Act 2015
- Mental Health (Compulsory Assessment and Treatment) Act 1992
- Search and Surveillance Act, 2012

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#### ASSOCIATED DOCUMENTS

- [Bay of Plenty District Health Board Policy 6.9.3 Patient / Client Property](#)
- [Bay of Plenty District Health Board Clinical Practice Manual protocol CPM.M5.21 Illegal Drugs, Alcohol & Other Psychotropic Substances](#)
- [Bay of Plenty District Health Board Clinical Practice Manual protocol CPM.M5.27 Seclusion in MH&AS](#)
- [Patient's Personal Property List](#)

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## Search Procedure

TASK	ACTION	Who
Pre Admission	<p>Ensure that any luggage and person items are stored separately in the transport vehicle's boot and remain stowed until the admitting nurse can undertake a search of the property</p> <p>Accompany service user / whaiora in IPC assessment lounge</p> <p>Search of the service user / whaiora (personal search) occurs if there is reason to believe that the individual may have items on his / her person that may be deemed to be dangerous or potentially harmful. This includes medication, weapons or other potentially harmful objects and audio / visual recording devices.</p>	Staff members transporting service user / whaiora's
Admission	<p>Personal search procedure once a decision has been made to admit service user / whaiora</p> <p>Service user / whaiora clothing and property will be checked to remove:</p> <ul style="list-style-type: none"> <li>Any medication brought into the unit.</li> <li>Any weapons: these will be put into Police custody, to be reclaimed by the service user / whaiora on discharge from unit.</li> <li>Digital audio / visual recording devices such as mobile phones with cameras, ipads, laptops that could be used to record other service users / whaiora without their consent.</li> <li>Any personal property that may be used to harm self or others where this risk has been identified. This may include belts or cords, razors, any glass or breakables, any toiletries and aerosols, any sharp or cutting tools.</li> <li>Any lighters / matches will be removed and held by staff in the nursing station.</li> </ul>	Admitting Nurse
Service user / whaiora or Visitors entering the Unit	<p>Prior to entry into the psychiatric ward environment a search of service user / whaiora clothing and property will occur for;</p> <ul style="list-style-type: none"> <li>Any personal property that may be used to harm self or others</li> <li>Lighters / matches and tobacco products brought on to the ward by service user / whaiora must be handed to the staff</li> <li>A wand maybe used to augment the search of any person to isolate harmful items.</li> </ul>	Staff member(s)
IPC Seclusion Search	<p>A search of the service user / whaiora / visitor's clothing and property will occur if the person is to be admitted to the IPC or seclusion areas.</p> <p>In these cases particular vigilance will be required to ensure potentially harmful items are removed and stored with the person belongings</p>	2 Staff members
IPC Visitor Search	A search of the visitor's clothing and property will occur if the visitor is to be permitted entry to the IPC / LSA areas.	Staff member(s)

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