Dear [Name],

Freedom of Information (Scotland) Act 2002

I acknowledge receipt of and refer to your e-mail dated 15 December 2014, requesting:

“Please can you provide me with the implementation dates for NHS Grampian hospitals missing person protocols as given in FOI/2014/312.”

I can now respond as follows:

Please can you provide me with the implementation dates for NHS Grampian hospitals missing person protocols as given in FOI/2014/312.

NHS Grampian can advise that that the following measures have been taken in pursuit of the Board’s missing person protocols.

**Royal Cornhill Hospital:**
Fire exit doors within the wards have a swipe card system to prevent unauthorised exit. Work commenced on installing proximity readers in December 2013 and Fire Exit doors were completed and went live in October 2014. The front door entrances to the four Acute Wards and Eden Unit went live from 8 December 2014. The garden fence between Brodie and Corgarff wards was raised in December 2013. Physical checks of all patients are carried out every hour and are recorded. This has been a standard practice for many years; however recording procedures were reviewed and updated in August 2014.

**Older Peoples’ Wards, Royal Cornhill Hospital:**
Strathbeg, Loirston and Davan Wards are routinely locked. All wards have improved training and communication with other professional groups such as medical staff, porters and domestic staff to ensure that vulnerable patients are kept as secure as possible. All wards have increased the provision of therapeutic activities in order to keep patients engaged and provide improved assessments of patients’ mental states/risks. All patients
are individually assessed and extra measures to manage risk, such as locking ward doors or observation by nursing staff, put in place as thought necessary. Patients thought to be at risk are routinely escorted by staff when outwith their ward areas.

Older Adult Mental Health (OAMH) has been working to improve links with other professional groups with regard to ward security since December 2013 in Davan and February 2014 in Loirston/Strathbeg/Muick and Skene. Since then it has been standard practice to promote awareness of absconding risk and how to prevent this. All dementia wards have notices to remind visitors to ensure that doors are closed properly and to be aware of persons attempting to leave the ward. Increasing the availability of activities and psychological therapies such as relaxation has been a priority since 2008 and is monitored annually via Mental Welfare Commission (MWC) visits and inspections.

Learning Disabilities Services:
Fern, Bracken and Hawthorn wards all have locked doors due to patient vulnerability and the high percentage of patients who lack capacity in relation to environmental risks in the community. Risk assessment is undertaken as part of the admission process. External garden gates are locked and garden access is directly off ward area. Patients who lack capacity are escorted by healthcare or care providers when off the ward. The closed door policy at Elmwood was originally implemented in 2003. Since then the policy has been reviewed on an ongoing basis as patient admission and discharge takes place. Routine review of the policy and corresponding risk assessment takes place on a yearly basis.

Neuro Rehabilitation Unit and Morningfield House:
A locked door system has been installed. This was a patient safety protection measure to ensure staff knew who was leaving the ward when and ensuring that it was in the patients’ best interest to stay on the ward where they were safe and secure. These measures were implemented in 2009.

Chalmers & Fraserburgh Hospitals:
All fire escape doors are locked and fitted with a mechanism that automatically releases in the event of a fire. Screens strategically placed in corridor areas disguise exits, while still complying with fire regulations. Tele-care alarm systems are used to alert staff when a patient moves outwith their area. A bell fitted to the ward door is also used to alert staff to unauthorised exit. Patients are moved within ward to allow better observation. Temporary increases in staffing levels also address absconding risks, sometimes one-to-one with high risk patients. Patients are assessed on an individual basis to determine what is likely to be a solution for their circumstances. These measures have been implemented over the years on the basis of risk assessment, all prior to April 2012.

Ward 4, Elgin:
A remote locking device is in operation at the main entrance to the Pluscarden Clinic which can be operated from within Ward 4, preventing unauthorised exit from the building. This has been in place since October 2008.

Under section 20 (1) of the Act, if you are dissatisfied with the way NHS Grampian has dealt with your request, you have a right to request a review of our actions and decisions in relation to your request, and you have a right to appeal to the Scottish Information Commissioner.
A request for review must be made within 40 working days and should, in the first instance, be in writing to: Directorate of Corporate Communications, Ashgrove House, Foresterhill, Aberdeen, AB25 2ZN or by email to grampian@nhs.net

Requests for appeal should be made in writing to: Scottish Information Commissioner, Kinburn Castle, Doubledykes Road, St Andrews, Fife, KY16 9DS
Telephone: 01334 464610, Fax: 01334 464611
E-mail: enquiries@itspublicknowledge.info

Yours sincerely

Chris Morrice
Information Governance Manager
NHS Grampian