

Patient wishing to leave the clinical area unaccompanied and /or against medical advice

This section to be use in the event that a patient wishes to temporarily leave the clinical area unaccompanied and against medical advice; i.e. patient wishes to go outside for a cigarette.

If a patient has a 'assessment tool for safe transfer of patients' score of 0 in the disability section and wants to leave the clinical area temporarily and there are insufficient staff for them to be escorted, they should be advised of any subsequent risks by a health care professional and should be asked to sign a 'Leaving the Clinical area Unaccompanied, Against Medical Advice' form.

If the patient refuses to do this the health care professional present should document this in the medical notes.

The patient must be advised to inform nursing staff when they are leaving the clinical area, when they intend to return to the clinical area and their approximate location when they are away from the clinical area.

The patient should be advised that if they do not return to the clinical area within thirty minutes of their stated return time, the absconding person's policy will be activated and the police informed

Nursing staff must document this and a description of the patient in the nursing records.

If the patient refuses to comply with any of the above requirements this must be documented in the medical and nursing notes.

The patient must be informed that if they do not provide a return time and they do not return to the clinical area within thirty minutes of leaving the clinical area the absconding person's policy will be activated and the police informed

If the patient has already left the clinical area without discussing their intention with the staff then the missing person's policy should be instituted and if the patient is located near to the hospital they should be advised of the risk to them by a health care professional and asked to complete the relevant form.

Leaving the Clinical area Unaccompanied, Against Medical Advice form**Patients name:****Hospital Number:****Date of Birth:**

I (patients name) _____
have been informed that to leave the clinical area unaccompanied is against medical advice.

I (patients name) _____
have been informed and understand the potential risks that this imposes on my health. I accept full responsibility for my actions.

Patients signature: _____**Date:** _____**Medical staff:**

I (medical staff details) _____

I have assessed the patient as having a disability score of 0 in the 'assessment tool for safe transfer of patients', and I have explained the reasons and potential risks as to why it is against medical advice that the above patient leaves the clinical area unaccompanied. The patient has stated that they understand the information that I have given.

Medical staff signature; _____**Date;** _____**Note:** Ensure this form and all communication with patient is clearly documented in medical notes