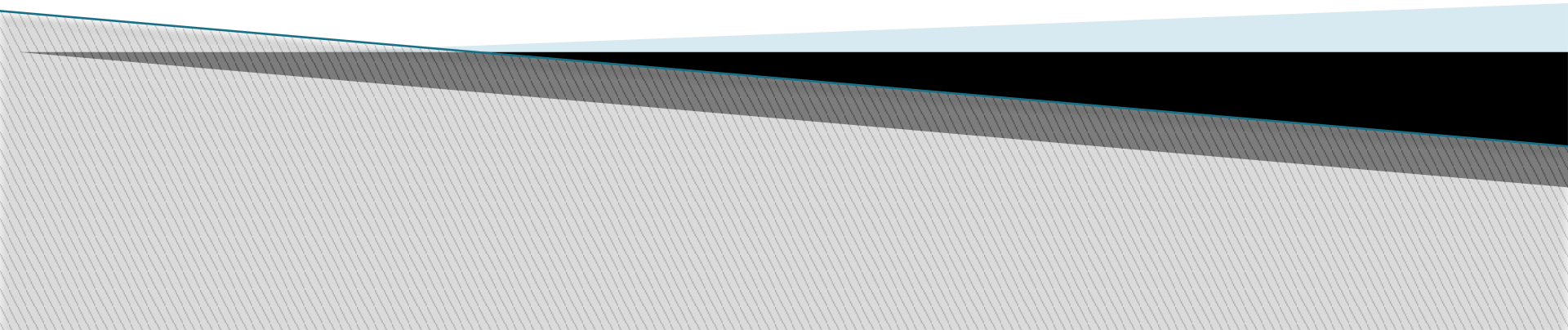


What You Should Know To Prevent An Infant Abduction!

Seton Medical Center Harker Heights
Infant Security 2015

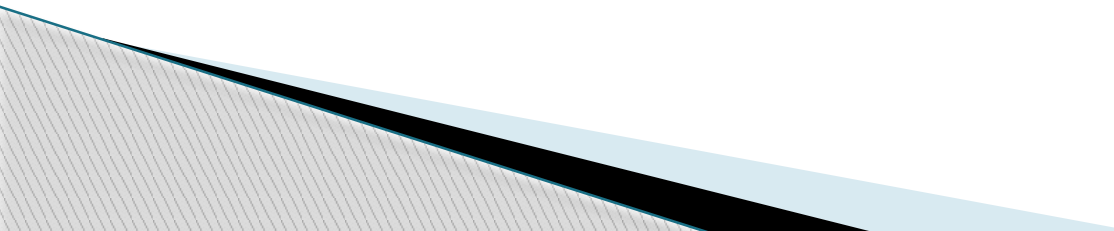


The birth of a baby is a joyous occasion for parents and families. To ensure the joyous event is not disrupted, infant security is of the utmost importance at Seton Medical Center Harker Heights. Infant abduction deterrence is a whole system approach including not only training/education for staff, families and visitors, but also includes many facility and equipment measures.

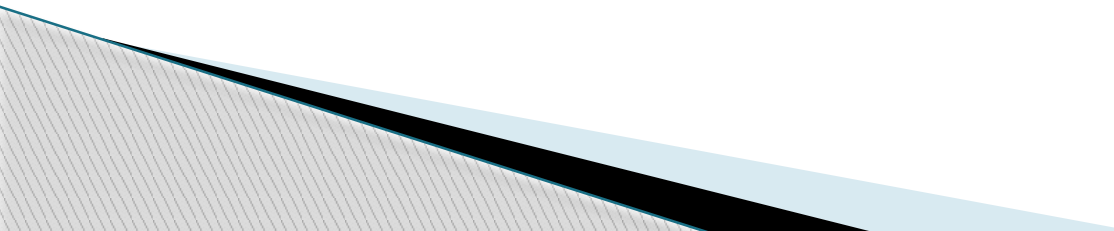
Since 1991, the National Center of Missing & Exploited Children reports that there are on average 11 infant abductions each year. An infant abduction is a tragedy for everyone – the infant, parents, staff and medical center. In order to prevent such an occurrence, security measures must be in place and staff must be ever vigilant. Therefore it will be part of the hospital policy that:

- ▶ 1. Training for all hospital employees will be completed within the first seven days of hire.
- ▶ 2. Staff who will be working directly with/caring for newborns will receive additional training before or during their first shift to the patient care area.

What safety measures are currently used (or will be coming soon) to prevent an infant abduction?

- ▶ Distinctive badges for Women's Services unit staff, including agency and traveling nurses
 - ▶ Distinctive badges for hospital-privileged Women's Services and Pediatric physicians and Advanced Practice Clinicians
 - ▶ Women's Services unique scrubs that are easy to distinguish from a distance
 - ▶ Limited access to Women's Services unit using card swipe access
 - ▶ Hospital employees presenting on the units must wear a hospital-issued photo ID badge
 - ▶ Students, contracted staff and non-healthcare service providers presenting on the units will wear accompanying school/company ID badge and a temporary unit-issued badge
 - ▶ All visitors will be greeted upon entry and validated to be on the care area
 - ▶ Random Security Checks
 - ▶ "Code Pink" and Infant Security Plans
 - ▶ Staff vigilance and prompt action
 - ▶ Newborn foot-prints
 - ▶ Application of mother/father/baby bands and use of Electronic Infant Security Devices
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How are infants transported in the facility?

- ▶ Infants are **only** transported in bassinets – never hand carried unless in the mother's arms while riding in a wheelchair or carrier
 - ▶ Infants are **always** discharged accompanied by a nurse
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What are your responsibilities in maintaining Infant Security?

- ▶ Wear your name badge at all times when on duty – **badge compliance will be strictly enforced**
- ▶ Make sure others do not enter with you as you open/enter through a secure door
- ▶ Be alert to unusual behavior
- ▶ Report ANY suspicious individuals to police/security
- ▶ Stop and question any suspicious individuals carrying an infant bag, package, backpack, etc...*“May I help you?” is the most effective means of stopping and later identifying a potential abductor*
- ▶ Call for “Code Pink” immediately if you are unable to stop and question a suspicious person. Dial 0
- ▶ Keep a suspicious individual in sight while assuring your own safety

**Prevention is the best defense against infant abductions.
Maintain your vigilance at all times.**



Now you are asking, what does a suspicious person look like?

- ▶ It is someone who may exhibit one or more of the following characteristics:
- ▶ Makes repeated visits “just to see” the babies
- ▶ Takes uniforms, scrubs, or other means of hospital identification as well as stethoscopes, pagers, etc...
- ▶ Loiters on the floors where the perinatal and neonatal units are located and around the doors
- ▶ Asks questions about the floor plans, location of nursery, procedures, etc. o *For example – “Where do the stairwells lead?” or “Do babies stay with mother at all times?”*
- ▶ Carries a large package from the care area (e.g. gym bag), particularly if the person is “cradling” or “talking” to the bag
- ▶ Carries an infant in a corridor instead of a bassinet
- ▶ Walks out of the hospital with an infant rather than riding in a wheelchair with a staff member or volunteer escort

The Abductor – Profile from the National Center for Missing & Exploited Children:

- ▶ Is usually female of “childbearing” age (range now 12 to 53) and often overweight.
- ▶ Is most likely compulsive; most often relies on manipulation, lying, and deception.
- ▶ Frequently indicates she has lost a baby or is incapable of having one.
- ▶ Is often married or cohabitating; companion’s desire for a child or the abductor’s desire to provide her companion with “his” child may be the motivation for the abduction.
- ▶ Usually lives in the community where the abduction takes place.
- ▶ Frequently initially visits nursery and maternity units at more than one healthcare facility prior to the abduction; asks detailed questions about procedures and the maternity floor layout; frequently uses a fire-exit stairwell for her escape; and may also try to abduct from the home setting.
- ▶ Usually plans the abduction, but does not necessarily target a specific infant; frequently seizes any opportunity present.
- ▶ Frequently impersonates a nurse or other allied healthcare personnel.
- ▶ Often becomes familiar with healthcare staff members, staff members work routines, and victim parents.
- ▶ Demonstrates a capability to provide “good” care to the baby once the abduction occurs.

There is no guarantee an infant abductor will fit this description. This is only a profile. An infant abductor can be of ANY sex, age, or description including.. a hospital employee.

Upon hearing the Code Pink or Code Pink Jack / Code Pink Jill page, all available employees will:

- a. **Immediately** move to all First Floor exits and stairwells to block all outgoing traffic. (See assignment table below).
- b. Request that all persons attempting to leave the facility remain in the building. If anyone insists on leaving during the Code Pink, the staff member will advise the individual that the police will be notified and given a description of the individual leaving during the Code Pink. Alert security (ext. 6261) for any person refusing to remain in the building after a request to do so. Under no circumstances are SMCHH staff obligated to physically detain a suspect or place themselves in harm's way to prevent a dangerous person from exiting the building.
- c. Be alert for person carrying duffle bags, diaper bags, infants or children, and alert security of their presence.
- d. All patients and accompanying persons who enter the Emergency Room after the Code Pink alert is activated will be advised that they will not be allowed to leave the premises until the Code Pink alert has been cleared. The double doors between the ED Lobby and the Main Lobby will be locked and monitored to prevent persons from exiting the ED lobby.

Please reference Policy GA-PC-Peds-006

**Thank you for your time and attention to
this important topic!**

