

Policy: CODE S.T.A.R.R.

ORGANIZATIONAL: Affects two or more departments.							
Folder	Organizational Choices: Emergency Mgmt			Sub-Folder (If Applicable)	n/a		
Original Effective Date	12/8/2014	Scope	<i>What departments does this policy apply to? State "All" as is may apply to the entire organization.</i> All				
Approved (Approver/Date)	EPC; 2/18/2019 EOC; 2/18/2019: Multi-Disciplinary Review Committee; 2/21/2019 MEC; 2/26/2019; Board: 3/2/2019						
Last Reviewed/ Revised Date	3/8/2019	OSHA Category (If Applicable)	III	Standard (If Applicable)	EC 02.01.01	Number of pages	9

PURPOSE: *Why does this policy exist?*

This policy is intended to guide the requirements for participation, training, response to and management of escalating behavior by patients, visitors, and others, before or during a violent eruption of aggressive or violent behavior to ensure the safety of all hospital staff, patients and/or visitors.

GUIDELINES: *What are some general statements regarding the use of the policy?*

- A. Safe Training and Responsible Restraints (S.T.A.R.R.) activation and response process is a team approach initiated to manage escalating behavior, before or during a violent eruption of aggressive or violent behavior that potentially will pose or immediately poses a serious danger to an individual’s safety or that of others.
- B. The S.T.A.R.R. team will consist of organizational staff who have been approved through Occupational Medicine (OCCMED) and have successfully completed the S.T.A.R.R. Control System.
- C. All S.T.A.R.R. certified staff must renew their certification every year through a re-certification course.
- D. The S.T.A.R.R. Response Team objectives include the utilization of verbal de-escalation techniques prior to the initiation of empty-hand non-aggressive or empty-hand positive control techniques, unless a safety issue demands an immediate physical control response.
- E. The S.T.A.R.R. Response Team members are trained to be cognizant of the potential for high-risk positions resulting in restraint-related positional asphyxia, and utilize proper training techniques to mitigate such occurrence, based on the totality of circumstances.
- F. If S.T.A.R.R. Response Team members and/or hospital staff observe a person using a weapon or threatening to use a weapon, Hospital Switchboard (Ext. 5200) should be notified as soon as practical. For additional information, refer to the Armed Violent Intruder Response Policy.

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- G. The Emergency Department is a closed and locked unit that has separate Standard Work Instructions (SWI) for the activation of Code S.T.A.R.R., see the attached SWI, Appendix B
- H. For offsite locations, call 911.

PROCEDURE: *Include: Definitions, Equipment, Process, and Documentation*

I. Definitions

- **S.T.A.R.R. Response Process:** An emergency response designed to deal with and control unarmed persons who display behaviors consistent with that of a person who has lost control of their actions and may pose an imminent threat (direct or indirect) to the wellbeing of themselves or others. This may also include persons who appear to be unmanageable and/or assaultive.
- **S.T.A.R.R. Response Team:** Team members who are certified in the Safe Training and Responsible Restraints (S.T.A.R.R.) control system. The team is composed of a *Team Leader* (definition below) and S.T.A.R.R. Response Team members. Team members may include the following: Security staff, Nursing House Supervisors, Emergency Department Staff, Pediatric Staff, ICU Nursing Staff, and designated staff from various nursing areas and ancillary departments.
- **Team Leader:** The Team Leader provides oversight and overall direction for team response; manages the environment (i.e. visitors, onlookers, etc.); releases surplus team members to return to home units; and facilitates evaluation of the S.T.A.R.R. Response. In a patient care area, ideally, the Team Leader will be the most senior S.T.A.R.R. trained member of the response team of the unit where the Code S.T.A.R.R. is occurring.
- **S.T.A.R.R. Response Team Members:** Perform quality checks; address safety concerns and quality issues; recognize need for change in strategy; and take action based on their relative training and experience.
- **Spotter:** A S.T.A.R.R. Response Team member whose role is to continuously monitor the individual’s breathing, circulation and neurological status while that individual is being manually restrained. The spotter immediately reports any condition change or deterioration in condition to the intervening team to ensure action is taken and may direct team to disengage. Spotters must have current competency in the use of restraints as per organizational policy.
 - **Note:** Ideally the Spotter should be clinically trained.
- **Escalating Mode:** Behaviors that range from a noticeable physiological change--ranging from anxiety to total loss of control--which may result in a physical acting-out episode and where the individual appears to be a potential threat to themselves or others.
- **Physical Restraint:** Any manual method, physical or mechanical device, material, or equipment that immobilizes or reduces the ability of a person to freely move his or her arms, legs, body or head and cannot be easily removed by the person.
 - The objective of physical restraint application is to ensure the person’s safety and that of others, while ultimately aiding the person in regaining control, and allow for

the opportunity to establish therapeutic rapport with the individual who has lost control.

- **Note:** The Basic Two Hand Escort and the Upper Arm / Forearm Escort ARE NOT considered physical restraints.
- **Restraint-Related Positional Asphyxia:** Occurs when the person being restrained is placed in a position in which he/she cannot breathe properly and are not able to take in enough oxygen. Death can result from the lack of oxygen and consequent disturbance in the rhythm of the heart.

II. Process – Code S.T.A.R.R. Activation and Response

- A. The S.T.A.R.R. Response Process may be activated by any organizational employee as follows:
 - 1. Dial 5200 for Hospital Switchboard and state “Code S.T.A.R.R.” and the EXACT LOCATION (ie. Floor, Room Number, etc.)
 - 2. Be prepared to stay on the phone to provide further information to Hospital Switchboard.
 - 3. Emergency Department – refer to attached SWI, appendix B.
- B. Upon receiving a communication requesting a Code S.T.A.R.R. response, Hospital Switchboard shall announce via the overhead paging system, “Code S.T.A.R.R.” and the LOCATION, then contact Security by radio with Code S.T.A.R.R. information and give updates as they are received.
 - 1. Example: “Code S.T.A.R.R., 3 West, Room 356”
 - 2. REPEAT 3 TIMES
- C. Upon activation of a Code S.T.A.R.R., all available on-duty S.T.A.R.R. Response Team Members should respond to the announced location in a controlled, mindful approach.
- D. Upon receiving a communication requesting a Code S.T.A.R.R. cancellation, the Hospital Switchboard shall announce via the overhead paging system, “Code S.T.A.R.R. ALL CLEAR AND LOCATION. “
 - 1. Example: “Code S.T.A.R.R., 3 West, ALL CLEAR”
 - 2. REPEAT 3 TIMES
- E. Upon arrival, a S.T.A.R.R. Response Team member should assume the role of Team Leader as soon as practical and will identify themselves to the other Team members.
 - 1. The Team Leader, based on his/her training and experience, should evaluate the situation and determine if there are sufficient numbers of S.T.A.R.R. Team members present to safely resolve the situation. Should that determination be made, the Leader will ensure the following:
 - i. Hospital Switchboard is notified to announce a “Code S.T.A.R.R. all clear” at that location. Note: Team Leader may delegate this task to any other available staff during the incident.

- ii. Release any surplus S.T.A.R.R. Response Team members as necessary. Note: Team Leader may appoint other S.T.A.R.R. Response Team members to direct and/or release other responding team members.
- F. Security Officers responding to a Code S.T.A.R.R. activation shall locate the designated S.T.A.R.R. Response Team Leader and assist in formulating any subsequent courses of action.
 - 1. To directly participate in the S.T.A.R.R. control techniques, Security Officers must have successfully completed the Safe Training and Responsible Restraints (S.T.A.R.R.) control system end-user certification training, unless exigent circumstances warrant otherwise.
- G. If any type of restraint, including 4-point restraints and S.T.A.R.R. Techniques, is utilized the S.T.A.R.R. Team Leader shall do the following:
 - 1. Identify the R.N. and/or Physician responsible for the Patient and inform them of the S.T.A.R.R. response.
 - 2. R.N. will ensure that a face-to-face evaluation of the patient is conducted within one (1) hour by trained staff. Refer to Organizational Policy: Restraint and Seclusion.
 - 3. R.N. will notify the Attending Physician immediately to obtain an order for restraints.
 - 4. The R.N. and/or Physician will document the S.T.A.R.R. response in the Event Reporting System.
 - 5. This DOES NOT apply to normal activities such as safely /properly assisting a patient with movement or positioning. Basic two handed and upper arm escort is not considered a restraint.
- H. The Manager/House Supervisor will respond to all Code S.T.A.R.R. activations in-house and ER:
 - 1. Ensure that responding staff are identified to complete Code S.T.A.R.R. and event reports.
 - 2. Review event with appropriate staff to determine if escalation of event to appropriate administrative staff is needed.
 - i. If determined that event warrants escalation, collect all Code S.T.A.R.R. paperwork immediately and follow Organizational Patient Safety Event Reporting Policy or Abuse and Neglect Policy.

III. Documentation

- A. The responding S.T.A.R.R. Response Team members will complete and submit the appropriate S.T.A.R.R. Response Form(s) to the S.T.A.R.R. Response Team Leader immediately or prior to the end of their shift.

1. S.T.A.R.R. Response Activation Incident Form(s) are available on Compass under Security, Shared Documents.
- B. The S.T.A.R.R. Response Team Leader will:
 1. Complete S.T.A.R.R. Response Activation Incident Form.
 2. Enter event in Event Reporting System.
 3. Collect and review all relative S.T.A.R.R. Response Team Supplemental Incident Forms.
 4. Collect and review all relative S.T.A.R.R. Response Witness Supplemental Incident Forms.
 5. Compile all S.T.A.R.R. related forms and submit to the house supervisor prior to the end of shift.
- C. The House Supervisor will:
 1. Ensure that Code S.T.A.R.R paperwork is complete and received prior to end of shift
 2. Submit the completed Code S.T.A.R.R. paperwork to the Security Director by sealed inter office- mailer.
- D. Security Director will review reports and submit forms to Quality Management for inclusion in the Event Reporting System.

IV. Process – Training and Scheduling

- A. Staff must be cleared through OCCMED prior to training and participation.
 1. New hires and transfers for Security, ED, Med Tele, ICU, Float, and CTU will be required to be assessed and cleared for physical readiness by OCCMED prior to participation in S.T.A.R.R. or P.A.S.T.
 2. If a staff member in a required department/area cannot be physically cleared for S.T.A.R.R. certification, they will be considered for P.A.S.T.
 3. If a staff member cannot be physically cleared for P.A.S.T. certification, he/she will be considered unable to participate in the program. Staff may be cleared at a later date by being assessed through OCCMED.
 4. Volunteers from other departments will be assessed for physical readiness by Occupational Medicine prior to participation in S.T.A.R.R. or P.A.S.T.
 5. OCCMED will notify Human Resources of those employees who were assessed and their results.
- E. Once cleared by OCCMED, new employees or transfers required to be S.T.A.R.R. or P.A.S.T. certified will enroll in training through EducationPATH.
 1. If new hire, enrollment will occur before the completion of GHO

- F. Security will send the Education department a list of employees who have successfully completed the program to be updated in EducationPATH.
- G. EducationPATH will notify the manager and the employee prior to expiration of the re-certification date.
 - 1. Human Resources will monitor re-certs in required areas
- H. All S.T.A.R.R. certified staff and P.A.S.T. participants must renew their certification every year through a re-certification course.
 - 1. Physical assessments will be completed every year or when a staff member has incurred a physical change that may affect his/her performance or safety.
 - 2. Human Resources and Education will maintain certification lists and coordinate assessments and training through OCCMED and the Security department.
- I. All S.T.A.R.R. Instructors must renew instructor certification with MDI (Mitigation Dynamics Incorporated) every 2 years.

REFERENCES: *What resources are used to support the policy and procedure?*

- Mitigation Dynamics Incorporated (2012). Instructor Manual for the Safe Training and Responsible Restraints (S.T.A.R.R.) control system.
- SEHEALTH Physical Therapy Criteria for S.T.A.R.R. and P.A.S.T. certification
- The Joint Commission (2012). Hospital Accreditation Standards. Oakbrook Terrace, Illinois Joint Commission Resources, Department of Publications.
- Missouri Hospital Association (2009). MHA Restraint and Seclusion Crosswalk. Revised 12/10/2014.
- Mosby Nursing Skills (2010). Aggressive Person (Mental Health).
- Aggressive and Violent Behavior (2012). Elseiver Inc., Internet.
- Mitigation Dynamics Incorporated (2013).
- Restraint and Seclusion Policy, Renown.CID.235.01

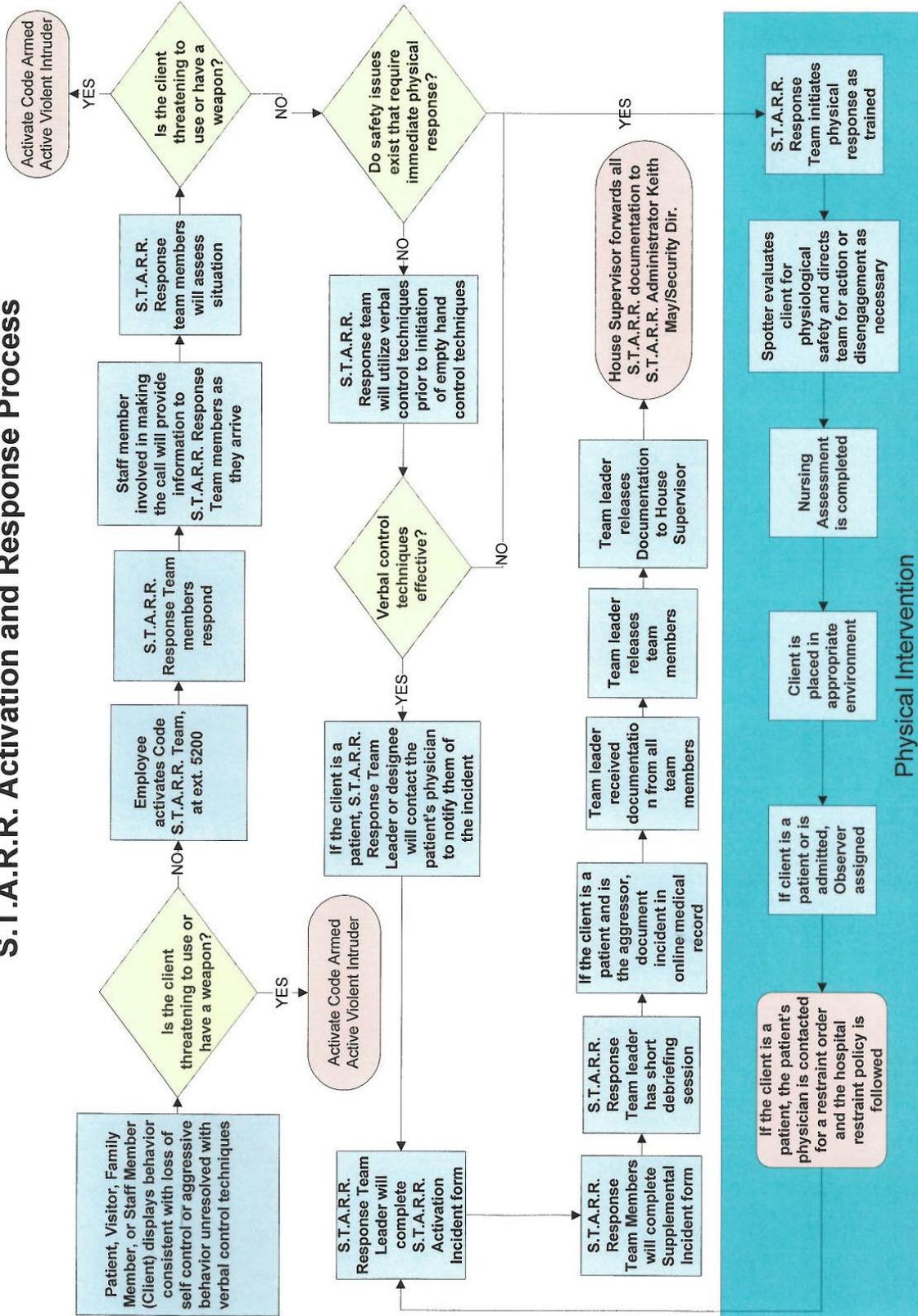
Attachments: (Label as Appendix A, B, C, etc.)

Appendix A: S.T.A.R.R. Activation and Response Process Map

Appendix B: Emergency Department Standard Work

[Appendix A:](#) S.T.A.R.R. Activation and Response Process Map, see next page.

S.T.A.R.R. Activation and Response Process



Note: Any time police are contact for response, follow established organizational notification process.

[Appendix B:](#) Emergency Department Standard Work Instructions

Title: Code STARR					Insert Picture of Finished Product or Condition (If Appropriate)
Department:		Name of Dept.	Area: Name of area within the dept.		
	Created by:	Lori Merritt	Date created:	1/4/19	
	Approved by:		Date approved:		

Tools and/or Supplies (if needed):	Code S.T.A.R.R. Certified
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Steps:	
<p>1)</p> <ul style="list-style-type: none"> Any Emergency Department (ED) Employee or Security can activate a Code S.T.A.R.R. <ul style="list-style-type: none"> Verbally notify the ED Secretary by stating “Code STARR” and exact location (i.e. back hall, room 17, room 9, etc) 	<p><i>I.E. “Code STARR Back Hall”</i></p>
<p>2)</p> <ul style="list-style-type: none"> ED Secretary, upon notification of Code S.T.A.R.R., is to: <ul style="list-style-type: none"> Announce and repeat x 2 via the department overhead paging system “Code S.T.A.R.R. AND Location” Notify Security by radio stating “Code STARR and Exact ED Location” Notify House Supervisor at 6442 and advise of Code STARR called in ED 	<p><i>Overhead: “Code STARR Room 17”, Code STARR Room 17”</i></p> <p><i>Radio: “Code STARR Room 17”</i></p>
<p>3)</p> <ul style="list-style-type: none"> All (on-duty) S.T.A.R.R. Response Team Members should respond to the announced location in a controlled mindful approach Upon arrival, a S.T.A.R.R. Response Team Member will assume the role of Team Leader as soon as practical and identify themselves to other Team Members 	
<p>4)</p> <ul style="list-style-type: none"> Team Leader is to evaluate the situation and determine if there are sufficient numbers of Team Members present to safely resolve the situation. When situation is resolved: 	

<ul style="list-style-type: none"> ○ Notify ED Secretary: “Code S.T.A.R.R. all clear” at that location. (team leader may delegate this task to any other available staff during incident) ○ Release any surplus response team members as necessary (may delegate to another response team member) 	
<p>5)</p> <ul style="list-style-type: none"> ● Upon notification of all clear, ED Secretary is to: <ul style="list-style-type: none"> ○ Announce and repeat x 2 via department overhead paging system, “Code S.T.A.R.R all clear” and location ○ Contact Security by radio stating “Code S.T.A.R.R. all clear and Exact Location” 	<p><i>“Code STARR all clear Back Hall”, “Code STARR all clear Back Hall”</i></p> <p><i>“Code STARR all clear, ED Back Hall”</i></p>
<p>6)</p> <ul style="list-style-type: none"> ● Complete required documentation: <ul style="list-style-type: none"> ○ Team Leader - S.T.A.R.R. Response Activation Incident Form ○ Team Members - S.T.A.R.R. Team Supplemental Incident Form ○ Witnesses - Witness Supplemental Incident Form (if applicable or needed) 	
<p>7)</p> <ul style="list-style-type: none"> ● Collection and submission of forms: <ul style="list-style-type: none"> ○ Team Leader - collects and submits all forms to House Supervisor, who submits to Security Director. ○ Security Director – provides Quality Management with the completed paperwork for incorporation into event reporting system 	
<p>8)</p> <ul style="list-style-type: none"> ● Refer to Organizational Policy: Restraint and Seclusion for: <ul style="list-style-type: none"> ○ Patients placed in violent restraints ○ Patients controlled using anything other than S.T.A.R.R. Basic Two Hand Escort or Upper Arm/Forearm Escort <p>*****</p> <p>Anything other than a S.T.A.R.R. Basic Two Hand Escort or Upper Arm/Forearm Escort are considered a restraint and will require:</p> <ul style="list-style-type: none"> ○ Order from Physician ○ Face-to-Face evaluation within 1 hour after initiation 	

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