Subject: University of Michigan Hospitals and Health Centers
C. S. Mott Children’s Hospital - Infant Security System Project

Action Requested: Approval to Proceed with Project

Background:

The National Center for Missing and Exploited Children (NCMEC) recently concluded a study on the nationwide incidence of infant abductions. Nationally, there were 171 abductions of infants by non-family members from 1983-1997, as reported to the NCMEC. Fifty-seven percent (97) of the abductions were from hospitals. Of this number, 57% (55) of the infant abductions were from the mother’s room; 14% (14) were from the nursery; 17% (16) were from pediatric units; and 12% (12) of the abductions were on hospital grounds. Eighty-eight percent of the abductions from the hospitals during the study period were from facilities with 200 or more beds.

Safeguarding newborns and infants requires the coordination of various elements of physical and electronic security as well as a comprehensive and integrated approach. This includes policy development, education, and teamwork by patient care personnel, security, risk management, and patient family members.

Presently, the Children’s Hospital includes an electronic infant security system on Level 5. This system was installed in 1992 and considered state of the art. Since then, there have been improvements in technology to enhance performance. In addition, increased patient activity has led to placement of infants on multiple levels and patient units.

As part of its commitment to the “Patients and Families First” theme, the Hospitals and Health Centers propose to purchase a new electronic infant security system for levels 4-7 of Mott Children’s Hospital. A cross-functional team of staff from nursing, security, project support, and purchasing collaborated to identify the components of an infant security system which would support the institutional goals to provide a safe and secure environment for patients, families, and staff. The team has defined a system that will include closed circuit surveillance cameras, door controls, alarms, monitors, and detection devices, all of which will respond to a bracelet that will be worn by each infant in Mott Hospital. The proposed infant security system has been installed in hundreds of hospitals across the country. The primary features of the electronic infant security system include:

- Flexible sizing of bracelets to fit any child.
- Infant bracelet tags electronically linked to allow exit monitoring of elevators, hallways, stairwells, and doors.
- Alarm activation if a bracelet tag is cut, disconnected, or wiring components are damaged.
- Automated door-lock and closed-circuit camera recording if an infant is transported near an exit.

APPROVED BY THE REGENTS ON
- Deactivation of elevators when a bracelet enters.
- Visual identification system at each nursing station to display alarm location.
- Historical documentation system for each coded signal.

In summary, this project will lead to increased emphasis on deterrence, documentation, and overall security of the Children’s Hospital environment. The system is designed to be comprehensive and customer friendly, and has been approved by the Executive Board of the University of Michigan Hospitals.

The total project is estimated to cost $1,456,800 with funding provided from Hospitals reserves. The project will begin immediately and be completed by Summer 1999.

We recommend the Regents approve the project as described.

Respectfully submitted,

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Executive Vice President and Chief Financial Officer

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