welcome!

Infant Safety & Security
within the
Hospital Setting





Hospital Accreditation Standards

The Hospital:

EP 1: Identifies safety & security risks.

EP 3: Acts to minimize or eliminate risks.

EP 8: Controls access to/from security sensitive areas.

EP 9: Has procedures for abductions.

EP 10: Follows its procedures!



- An infant is missing and presumed to be abducted until proven otherwise.
- Motivation for abduction may be a "traditional" reason:
 - Pedophilia, Child Sex Trafficking, Custody, Ransom, Revenge or Power
- Non-traditional abductions are motivated by the offender's need to have a child to fill a perceived void in her life.



- Learners will be able to identify the five primary modes of operation of the typical abductor.
- Learners will demonstrate an understanding of the importance of preventing abductions, by naming three potential damages sustained by the hospital due to an infant abduction.
- Learners will be able to list three preventative measures they can use in their practice to prevent abductions.

Where / When does the abduction occur?

"In general, legally the abduction occurs when the abductor presents a ruse to the mom; mom gives her the baby and she leaves the mother's room with the infant.

The abductor does not have to exit the nursing unit, the floor or the healthcare facility for the crime to attach."

The abductor may choose a room close to a stairwell and may be in hallway for as little as 4 seconds.

5th room – told mom to take a shower – put baby in bag and left - alarm sounded – caught before she got off the unit



"Charged as felony kidnap. The perp concealed the baby and left the PP room. Electronic tags stop egress from unit, but don't prevent the actual kidnapping." John Rabun, NCMEC

Whose Responsibility Is It?



Nurses are caring for the infant and mom.



Per NCMEC, in the HC Facility, nurses are surrogate parents, and the frontline of defense in preventing abductions.



Security responds to all events.







The Typical Abductor

- Female of "childbearing" age (range now 12 to 53), often overweight.
- Most likely compulsive; relies on manipulation, lying and deception.
- Frequently indicates she has lost a baby or is incapable of having one.
- Often married or cohabitating
- Usually lives in the community.
- Frequently visits nursery and maternity units at more than one hospital prior to the abduction; asks detailed questions, may try to abduct from the home setting.
- Plans the abduction but not a particular infant seizes any opportunity.
- Impersonates a nurse or healthcare personnel.
- Becomes familiar with healthcare staff, routines, and victim's parents.
- Demonstrates a capability to provide good care to the baby.
 - Fakes one or more pregancies
 - Doesn't want to hurt the baby
 - Often has at least one other child.



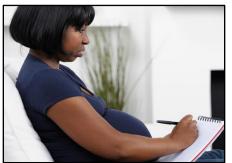
















Five Primary Modes of Operation of the Typical Abductor

Female of childbearing age, often overweight.

Proficient in lying, manipulation and deception.

Often has a partner and needs to present a baby to him.

Visits OB units, asks detailed questions and makes a plan for the attempted abduction.

Impersonates a nurse or other healthcare personnel.

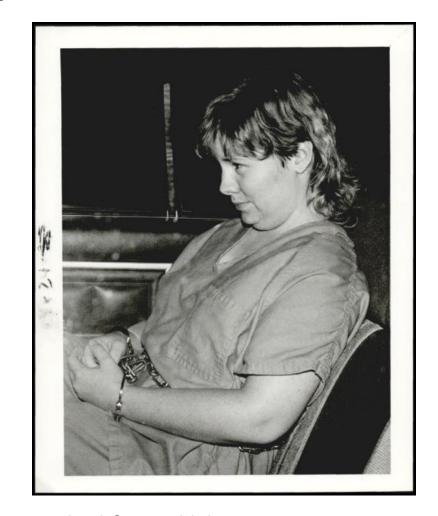
Deaconess Hospital, Oklahoma City June 20, 1990

Heather Brewster **pled guilty** on Oct. 9, 1990, after her attorney's **dropped plans for an insanity defense** at trial.

She admitted she disguised herself as a nurse and took "the baby nearest the window" at about 11:00 p.m. June 20th.

"The next day I drove home to Butler, MO. I told everyone the baby was mine."

She was arrested June 30th and Whitney Ryann Morse was reunited with her parents the next day.



https://www.koco.com/article/baby-snatched-from-oklahoma-city-hospital-now-adult-speaks-out-for-first-time/26105155

Suspicious?







Cindy Ray July 23, 1987

First documented case of Fetal Abduction / Abduction by C/Section







Lisa Montgomery – Missouri 2004

- Strangled Bobbie Jo Stinnett
- Had <u>four children</u> from previous marriages
- Researched how to perform c-section
- "... I need to come up with a baby"

The ME's report said the bottom of her feet and between her toes showed she had been standing at the time her belly was cut open.



Brandy Badillo – Oregon 2009



- Desperate Said she knew it was wrong but she desperately wanted a baby
- "She was a woman willing to do anything for a baby, and was willing for it to become violent."
- "Thoughtful and methodical..."

Verna McClain – Houston (Spring), TX 2012



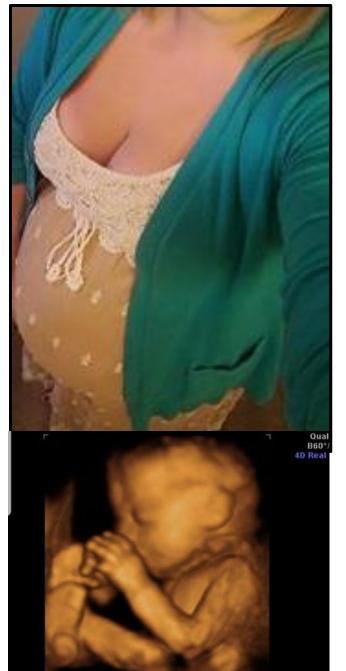
- Shot and killed Kala Golden <u>outside a pediatric clinic</u>
- Desperate for a baby to pass off as her own after miscarriage

Kathy Coy – Kentucky 2011





- Befriended Jamie Stice –attacked her with a <u>stun gun and used a drywall</u> <u>knife</u> to slit her wrists and throat.
- "She was <u>disemboweled</u>. The baby was cut out of her and she was facedown."
- The baby was attached to an umbilical cord and the uterus and ovaries.





DECEPTION

How to lie and get away with it

facebook



I've been here trying to type this status for a couple days now and just can't seem to find the right words. God decided our daughter was too beautiful for Earth. I know many of you will have lots of questions but right now I cannot answer them. I am in such shock. I will never be able to understand why she had to be taken from us, but I know God has his reasons. I am angry, I am lost, but most of all I am broken! I would do anything to have my daughter here with me. With all of that being said we would really appreciate prayers. Addison Joan mommy loves you with all of my heart! I know your Maw-Maw and your Poppy are going to take great care of you until I can be there with you. Fly high my

God decided our daughter was too beautiful for Earth.

Many of you have questions but I can't answer them right now.

I am in such shock.

I am angry, I am lost, I am broken. I know God has his reasons.

I would do anything to have my daughter here with me.

Addison, mommy loves you. Fly high my beautiful Angel Baby.

19

200 63

beautiful Angel Baby 😭 👵 💔

45 Comments



Anecdotal evidence strongly suggests there may be numerous abduction attempts at birthing facilities each year.

Attempted abductions?

Life Turned Upside Down in an Instant



Quotes

- "She's like a church lady, so I trusted her."
- "She didn't look like the type of person who would do something like that."
- "I didn't have any reason to mistrust her, she was wearing scrubs, and appeared calm and reassuring. She said she was going to weigh her and come right back."



- Hospital could be liable for:
 - Physical, psychological or other harm to the infant or family
 - The costs of any searches
 - Abductions outside the hospital after the infant's discharge
- Damages may include more than lawsuit awards and settlements
 - Potential loss of faith in the facility by the public.
 - Negative impact on staff members loss of work time, staff members, training costs, etc.

crowded with merry motorists who feel that the price of gasoline is advancing with sufficient rapidity without the a

THE DAILY OKLAHOMAN

BUXTY-SIX PAGES--- OKLAHOMA CETY, BUXDAY, MARCH 18, 1928,

Parents Sue City Hospital For \$56 Million

- The lawsuit claims the hospital was negligent because its premises were not adequately protected, monitored or patrolled.
- · The suit claims it was the <u>hospital's responsibility to provide a</u> <u>secure facility</u> so 1-day-old Whitney Ryann Morse would be safe.
- "In this case, the hospital allowed a stranger to take the baby from one of its own nurses. This phenomenon going on across the country is a known problem, and the hospitals are aware of it.
- "Our contention is that Deaconess chose to ignore that known danger..."





The Other Victim

- It seems unimaginable to realize caregivers must continue working with new mothers and soothe away their fears of this crime.
- PTSD

"...nurses at Deaconess are trying to return to a regular routine while they help each other cope with their sense of loss after the baby was unwittingly handed over to an imposter."



Layers of Protection

- Proactive
- Staff Training & Drills
- Alert to Suspicious Activity
- Photo ID Badges
- Confidentiality
- Patient Education
- Access Control
- Electronic Security System
- Immediate Response



What is your personal responsibility?

How do you do become the most important line of defense?

BE ALERT to Persons Exhibiting Behaviors of a Potential Abductor!

- Visitor in scrubs, badge wrong or missing. Ask the patient about her visitors.
- Carrying an infant in hallway or leaving on foot with infant.
- Baby wearing, car seats, bags, visiting repeatedly etc.
- Questions Phone (document # on caller ID) or in Person re:
 - When do babies go to mom's room, visiting hours, feeding times,
 - Security system, Layout of floor or emergency exits / stairwells
- Taking items such as identification, uniforms, baby blankets, etc.
- Loud disturbances, arguments, Fire Alarm, etc.
- Non-pregnant patients patient claiming to be pregnant but determined not to be.
- Loitering, looking lost / out of place. (NO visitors in hallway. Send out of the unit.)



Ask: May I help you? Who are you here to see? Do you have a room number?

Escort individual, make eye contact, observe behavior, note a description, get help!28



BOLO – ALWAYS BE ALERT TO SUSPICIOUS ACTIVITY / BEHAVIORS!

IMMEDIATE RESPONSE!

TRUST YOUR GUT INSTINCTS!

REPORT SUSPICIOUS ACTIVITY TO HOSPITAL MANAGER and/or SECURITY!

Do not violate HIPAA!

Comprehensive Security Measures

Confidentiality

Staff Identification

Infant / Mom Matching Bands

Staff Education

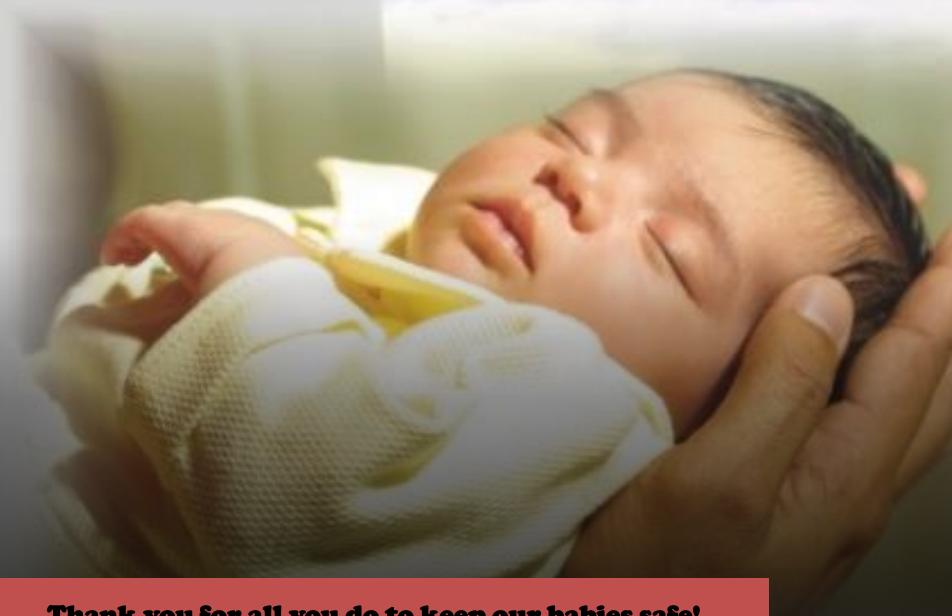
Patient Education

Transporting Infants – direct line-of-sight, always taken directly to another area.

Infant Supervision outside the Patient Room – always behind locked doors when outside the patient room.



- 1. What can you do to prevent an abduction?
- 2. What do you do when you identify something or someone that seems suspicious?



Thank you for all you do to keep our babies safe!