

Emergency Detention Medical Clearance Alternative Protocol (MCAP)

1. All processes start with a phone call to the Crisis Unit to determine if other alternatives have been explored. (Voluntary – Family Assistance, Geriatric patient Ed to Stoughton Hospital, etc...)
 2. Crisis will conduct an interview (face to face or phone) with the officer to determine:
 - a. If there is obvious evidence of Alcohol or Drugs
 - i. Detox may be appropriate.
 3. If ED (involuntary process) is appropriate a determination will need to be made as to whether or not a medical clearance is necessary. This will be determined by Mendota staff working through Crisis staff and Law Enforcement.
 - a. Clearance *may not* be necessary when:
 - i. Subject is a known client and was recently released (from Mendota or another treatment facility) and there is no evidence of recent alcohol or drug consumption
 - ii. Subject is a Child and has no known medical conditions/illness
 - iii. Subject is a resident from a nursing home, group home or residential treatment facility
 - iv. Subject is incarcerated and has a recent documented medical examination
 - b. Decision is made to have only labs completed. (Some factors considered in this decision are that a subject is not known to Crisis or Mendota staff, lack of information, suspicion of possible medical condition, presence of potential medical risk factors).
 - i. Police will take subject to the General Medical Laboratory, located across the street from Meriter Hospital (36 S. Brooks St.), for blood and or urine samples during their normal business hours (M-F 8A – 5Pm)
 - ii. Police will take subject to the Phlebotomy Lab located on the 4th floor of Meriter Hospital evenings and weekends for blood and or urine samples.
 - iii. Police generally may not need to wait for results and may transport to Mendota or another designated facility.
 - c. Admission will proceed to Mendota unless the subjects medical condition has now changed and the subject is judged to be medically unstable. Law Enforcement may have to transport back to ER or, in some rare cases, an Ambulance may need to be requested.
- 2) Each Law Enforcement Agency shall designate a Liaison person to work with Jim Poquette (Phone # 280-2600) of Crisis should a problem be encountered in the course of an involuntary or voluntary ED.
 - 3) Each Law Enforcement Agency shall decide when or if to disengage during a voluntary placement situation.

Proposed Best Practices Flow Chart
 JAH April 2005

