

Handover Protocol for Patients Brought to ED by Police

This protocol applies to patients apprehended under the mental health act, and NOT being charged with criminal offense

Patient arrives **with Police** for **Mental Health** complaints

Triage Patient
(If security is required for ongoing monitoring of the patient, triage patient to Intermediate area)

*“Under the Health Care Consent Act **any care provider** (MD, RN) within the hospital may restrain or detain a patient (or provide an order for this) for their own safety or the safety of others, when the patients capacity or competence is in question.” **A Form 1 is not required in this situation.***

RN (triage, secondary ED or crisis) to **ensure that EDP form is filled out** and includes:

1. Officers name/badge number and Division
2. The behavior that lead to apprehension
3. Nature of scene, collateral history
4. Previous history on patient (e.g. violence)

ED staff should

- Confirm with police the identity of the patient, history and/or any details of medical/criminal history relevant to them.
- Ask if they have been searched for weapons
- Discuss whether there are any concerns for safely transferring to hospital custody

Hospital Security is to be consulted to determine that they can safely take over the security of the patient in the area available.

Police may be released

Police may be asked to stay:

- if security/staff are unable to accept responsibility for the patient at present due to resource constraints
- until patient is restrained
- to assist with patient identification
- to assist with contacting next of kin