

## Northwest Connections-51.15 Emergency Detention Education Sheet

- Many Names for One Hold: 72 hour hold, Behavioral Health Hold, EM1, 51, 51.15, ED, Emergency Detention
- No emergency detention may be completed –even if criteria is found if any of these exist:
  - Person is willing and able to cooperate with voluntary treatment. Every *document* must show this being explored through significant evidence and/or direct questioning of the client if you are going any higher in level of restriction. (Reference: Wis. Stats. §51.15(1) (ag) A requirement has been added that the law enforcement officer (or other authorized person) must have “a reasonable belief” that the subject is “unable or unwilling to cooperate with voluntary treatment.”)
  - A lesser restrictive option is able to be attempted first. Must clearly demonstrate that in your response planning and in documentation that the response plan was least restrictive (Wis. Stats. §51.15(1) (ar) (intro.)A requirement has been added that the law enforcement officer (or other authorized person) must have cause to believe, in addition to “mentally ill” and “dangerous,” that “taking the person into custody is the least restrictive alternative appropriate to the person’s needs.”)
- Dangerousness Evidence Required
  - A specific recent overt act or attempt or threat to act or omission by the individual which is observed by the officer or person.
  - A specific recent overt act or attempt or threat to act or omission by the individual which is reliably reported to the officer or person by any other person, including any probation, extended supervision and parole agent authorized by the department of corrections to exercise control and supervision over a probationer, parolee or person on extended supervision.
- Examples of Tiers of Restriction documentation:
  - The client was not appropriate to remain home alone, due to her continued suicidal thoughts, plan and attempt this day.
  - The client was not appropriate for a telephone stabilization plan in her home due to her home being the location of her medications (unwilling to have someone secure) and no available supports with her current suicidal ideation and plan
  - The client was not appropriate for a community response plan with supports as supports identified refused to provide supervision and client refused to go with supports or have supports be with her
  - A crisis bed was explored and discussed however, the client refused to go voluntarily to the crisis bed.
  - A voluntary admission to a inpatient hospital was discussed and the client stated she did not need a hospital and adamantly stated “I don’t need or want any help”
  - An emergency detention was approved on this date under criteria for Mental Illness as evident by self reported diagnosis of bi-polar disorder as well as “hopelessness”. Dangerousness to Self as evidence by consumption of a full bottle of alprazolam and being found unresponsive. Continued risk of dangerousness as client indicated frustration that her attempt did not work “clearly I need to take more”.

## Criteria Outline:

<u>Must have one or more of these</u>	<u>With one or more of these</u>
<p><b>Mental Illness</b></p> <p>“Mental illness” means mental disease to such extent that a person so afflicted requires care and treatment for his or her own welfare, or the welfare of others, or of the community.</p> <p>“Mental illness”, for purposes of involuntary commitment, means a substantial disorder of thought, mood, perception, orientation, or memory which grossly impairs judgment, behavior, capacity to recognize reality, or ability to meet the ordinary demands of life, but does not include alcoholism.</p>	<p><b>Dangerousness to self</b></p> <p>A substantial probability of physical harm to himself or herself as manifested by evidence of recent threats of or attempts at suicide or serious bodily harm.</p>
<p><b><u>Drug Dependent</u></b></p> <p>Drug dependent” means a person who uses one or more drugs to the extent that the person’s health is substantially impaired or his or her social or economic functioning is substantially disrupted.-Does not include alcoholism.</p>	<p><b><u>Dangerousness to others</u></b></p> <p>A substantial probability of physical harm to other persons as manifested by evidence of recent homicidal or other violent behavior on his or her part, or by evidence that others are placed in reasonable fear of violent behavior and serious physical harm to them, as evidenced by a recent overt act, attempt or threat to do serious physical harm on his or her part.</p>
<p><b><u>Developmentally Disabled</u></b></p> <p>“Developmental disability” means a disability attributable to brain injury, cerebral palsy, epilepsy, autism, Prader–Willi syndrome, intellectual disability, or another neurological condition closely related to an intellectual disability or requiring treatment similar to that required for individuals with an intellectual disability, which has continued or can be expected to continue indefinitely and constitutes a substantial handicap to the afflicted individual. “Developmental disability” does not include dementia that is primarily caused by degenerative brain disorder.</p> <p><b><u>“Developmental disability”, for purposes of involuntary commitment, does not include cerebral palsy or epilepsy.</u></b></p>	<p><b><u>Impaired judgment</u></b></p> <p>A substantial probability of physical impairment or injury to himself or herself or other individuals due to impaired judgment, as manifested by evidence of <b>a recent act or omission</b>. The probability of physical impairment or injury is not substantial under this subdivision if reasonable provision for the individual’s protection is available in the community and there is a reasonable probability that the individual will avail himself or herself of these services or, in the case of a minor, if the individual is appropriate for services or placement under s. 48.13 (4) or (11) or 938.13 (4). Food, shelter or other care provided to an individual who is substantially incapable of obtaining the care for himself or herself, by any person other than a treatment facility, does not constitute reasonable provision for the individual’s protection available in the community under this subdivision.</p>
	<p><b><u>Inability to care for self</u></b></p> <p>Behavior manifested by a recent act or omission that, due to mental illness he or she is unable to satisfy basic needs for nourishment, medical care, shelter, or safety without prompt and adequate treatment so that a substantial probability exists that death, serious physical injury, serious physical debilitation, or serious physical disease will imminently ensue unless the individual receives prompt and adequate treatment for this mental illness</p> <p style="text-align: center;"><b>NOTE-DRUG DEPENDENCY IS NO LONGER ABLE TO BE THE ONLY CRITERIA USED WITH THIS STANDARD</b></p>