Behavioral Health
Emergency Response Plan (ERP)

Date Completed: _____

First Name: _____ Middle Initial: _____ Last Name: _____ Gender: _____

Address: _____ City: _____ State: _____

Zip Code:_____ Phone Number: _____ Date of Birth: _____ Primary Language: _____

Special Instructions (such as: housing, contact information or care of minor children, access codes, pet care, cultural/religious considerations, service dog information, dietary needs, WRAP plan and Advance Directive etc.)

_____
_____
_____
_____
_____
_____

Emergency Contact Information (*Consent to release information must be obtained by treatment providers*)

Name: _____ Relationship: _____ Phone #: _____

Address: _____ City: _____ State: _____ Zip Code:_____

Case Manager Name: _____ Phone #: _____

Conservator Name: (LPS-attach copies of documentation) _____ Phone #: _____

Medical Information (*For use by First Responders and emergency medical personnel only*)

Mental Health and/or Substance Use: _____

Medical Conditions: _____

Allergies: _____

Current Medications: List name, dosage & frequency (including herbal and over-the-counter):

_____   _____

_____   _____

_____   _____

Health Insurance Provider: _____ Insurance Phone #: _____

Subscriber's Name: _____ Insurance ID #:_____

Counselor/Therapist: _____ Phone #: _____

Psychiatrist:_____ Phone #: _____

Primary Care:_____ Phone #: _____

Preferred Hospital: _____ Phone #: _____

Preferred Crisis House: _____ Phone #: _____

I, _____ , authorize this form to be used and released to First Responders and emergency medical personnel.

Signature: _____ Date: _____

Information Submitted by (*print name*): _____

Relationship to Consumer (*if applicable*): _____ Phone #: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Signature: _____ Date Signed: _____

The ERP form is to be shared with First Responders and emergency medical providers and returned to the person presenting the form once the information has been obtained. The ERP should not be placed in the consumer's medical record without his/her consent.

When should I call Police/Emergency Services or 911?
There are many reasons why you might call 911. The following is a partial list of the primary mental health and psychological emergencies that 911, police and EMS handle.
Self-Assessment:
- I am feeling in need of urgent mental health assistance.
- I am feeling suicidal and I am at risk for attempting suicide.
- I feel I am at risk of harming others, or am having difficulty controlling impulses to harm others
When observing others:
- Exhibiting strange, unusual or disorganized behavior. When the behavior may be dangerous, a medical emergency or a mental health related problem.
- Exhibiting violent behavior. When there has been violence or there is evidence of an immediate risk of violence towards self or others.

When calling police for assistance: Things I might be asked.

When calling for yourself:	When calling for someone else:
• What is your name? • What is your location? • How old are you? • What is going on, or occurring now? • Do you have any weapons? • Are you or anyone else injured? If so, do you need the paramedics? • What is your description? (What color is your hair? How tall are you and how much do you weigh?) • What are you wearing? • Is there anyone else in the house with you? • Are there any pets on the property? • Have you been drinking, or using prescribed or non-prescribed medication or drugs?	• What is the person's name? • What is going on, or occurring now? • Does he/she have any weapons now, or immediate access to weapons? (Keep in mind a weapon can be any object, tool or device that can be used to hurt themselves or someone else. • What is the person doing now? • Where is the person now? (Be specific. i.e. if the person is in the house tell the dispatcher which part of the house the person last seen. • How old is the person? • How tall is the person and how much do you think the person weighs? • What is the person wearing now? (Be prepared to provide an accurate description.) • Has the person been drinking (alcohol), using prescribed or non-prescribed medication, or drugs? • Is the person violent now or does the person have a history of violence? • Is the person injured, and if so, does the person need paramedics? • Are there any pets on the property. • Is there anyone else in the residence?

Things I need to remember when police arrive:
- Remain Calm
- Be patient
- Identify yourself
- Secure any knives, guns or other weapons in a safe place prior to officers arriving.
- Have hands free and visible
- If possible, wait in front of residence
- Ask emergency dispatcher for special instructions
- Have lights turned on if dark or nighttime
- Secure Pets
- Identify a primary contact person to communicate with arriving officers
- Be prepared to answer many of the same questions asked by dispatchers
- Let officers know what kind of help you are requesting