

# Emergency Admissions

## 410.1 PURPOSE AND SCOPE

State MODIFIED

This policy provides guidelines for when officers may place a person under an Emergency Admission (Mental Hygiene Law § 9.37 - 9.57).

### 410.1.1 DEFINITIONS

State MODIFIED

Definitions related to this policy include (Mental Hygiene Law § 9.01):

**Likely to result in serious harm** - Includes a substantial risk of physical harm to:

- (a) One's self as manifested by threats of or attempts at suicide, or serious bodily harm or other conduct demonstrating that the person is dangerous to themselves.
- (b) Others as manifested by homicidal or other violent behavior by which others are placed in reasonable fear of serious physical harm.

## 410.2 POLICY

Best Practice

It is the policy of the Syracuse Police Department to protect the public and individuals through legal and appropriate use of emergency admission process.

## 410.3 AUTHORITY

State MODIFIED

Any officer:

- (a) May take any person into custody for an emergency admission when the person appears to be mentally ill and is conducting themselves in a manner which is likely to result in serious harm and transport the person to a designated § 9.39 hospital, comprehensive psychiatric emergency program (CPEP), or crisis stabilization center as specified in Mental Hygiene Law § 9.41.
- (b) Shall, upon written direction from the Director of Community Services (DCS), take a person into custody or assist in the transporting of the person to a designated hospital, CPEP, or crisis stabilization center (Mental Hygiene Law § 9.45).
- (c) Shall, upon written direction of a qualified supervising or treating psychiatrist, take into custody a person for an emergency admission or assist in the transportation of the person to a hospital or CPEP designated by the qualified psychiatrist (Mental Hygiene Law § 9.55).
- (d) Shall, upon written request of the director or the director's designee of a hospital that does not have appropriate inpatient psychiatric services, take into custody a person for an emergency admission or assist in transporting the person. The person shall be transported to the hospital or CPEP designated by the director or the director's designee of the hospital (Mental Hygiene Law § 9.57).

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- (e) May, upon the request of an authorized physician who has certified that the person is mentally ill and in need of involuntary care and treatment in a hospital, take a person into custody and transport or assist in the transportation of that person to a hospital as directed. For purposes of this section, an authorized physician is one of the two physicians who are required to examine the person and who authorized the involuntary admission (Mental Hygiene Law § 9.27). This would include situations where the person has failed to comply with court ordered assisted outpatient treatment (MHL 9.60).
- (f) Shall, upon written request of the DCS, take a person who has been certified by the DCS as having a mental illness which is likely to result in serious harm into custody and transport or assist in the transportation of the person to a hospital for an involuntary admission (Mental Hygiene Law § 9.37).

Notwithstanding sections (a) – (f) above, none of the referenced mental hygiene laws alone provide a legal basis for entering a residence or building. A search warrant or valid exception to the search warrant requirement is necessary to enter a residence or building.

#### 410.3.1 VOLUNTARY EVALUATION

State MODIFIED

If an officer encounters an individual who may qualify for emergency admission, the officer may inquire as to whether the person desires to be voluntarily evaluated at an appropriate facility (Mental Hygiene Law § 9.41). If the person so desires, the officer should:

- (a) Transport the person to an appropriate facility that is able to conduct the evaluation and admit the person.
- (b) Document in the CAD notes section of the call the circumstances surrounding the individual's desire to pursue voluntary evaluation and/or admission.
- (c) Contact the parent or appropriate guardian if the person is under 17 years of age prior to proceeding with a voluntary evaluation and/or admission (Mental Hygiene Law § 9.13).

If at any point the person changes the person's mind regarding voluntary evaluation, the officer should proceed with the emergency admission, if appropriate.

#### 410.3.2 CRISIS STABILIZATION CENTER SERVICES

State

In all cases, officers should inform individuals of crisis stabilization center services where available (Mental Hygiene Law § 36.02).

#### 410.4 CONSIDERATIONS AND RESPONSIBILITIES

Best Practice MODIFIED

Any officer handling a call involving a person who may qualify for detention for the purpose of emergency admission should consider, as time and circumstances reasonably permit:

- (a) Available information that might assist in determining the possible cause and nature of the person's action or stated intentions.

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- (b) Community or professional health/mediation services.
- (c) Conflict resolution and de-escalation techniques

In order to accomplish the goals set out in (a) – (c) above, Members should consider the following:

- (a) Secure the scene.
- (b) Determine if the individual in question is alone or with someone else.
- (c) Determine if armed or access to weapons.
- (d) Determine need for additional resources (Liberty Resources, CIT, HNT, etc.).
- (e) Is the individual's vehicle on scene?
- (f) Is family on scene or available?
- (g) Does the individual have a history of self-harm or harm to others?
- (h) Attempt to establish communication with individual.
- (i) Conduct a canvass of neighbors to determine further information on subject's condition and history.
- (j) Utilize social media if available to obtain information on subject.
- (k) Stage EMS nearby.
- (l) Talk with the Doctors who signed the order to obtain the basis of the order.
- (m) Notify District Captain/Duty Chief.

While these steps are encouraged, nothing in this section is intended to dissuade officers from taking reasonable action to ensure the safety of the officers and others.

An emergency admission should be preferred over arrest for people who have mental health issues and are suspected of committing minor crimes or creating other public safety issues.

[See procedure for VIOLENT PERSONS](#)

#### **410.5 TRANSPORTATION**

**Best Practice** **MODIFIED**

When transporting any individual for an emergency admission (voluntary or involuntary), the transporting officer should have Onondaga County 911 Center notify the receiving facility of the estimated time of arrival, the level of cooperation of the individual and whether any special medical care is needed.

If transportation is needed to another facility's inpatient psychiatric ward after a patient has been committed, the patient will be delivered to the other hospital and Syracuse Police Department personnel will return to service. Under no circumstances will one officer transport a person under any provision of the Mental Hygiene Law.

Members of this Department may also be called upon to transport individuals who have been evaluated through the Mobile Crisis Team process. When called upon by medical personnel

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or Mobile Crisis team member, officers should establish the legal basis prior transporting an individual, documenting this in the incident report. No person will be transported unless the legal basis to transport has been established.

Officers may transport individuals in the patrol unit and shall secure them in accordance with the Handcuffing and Restraints Policy. Should the detainee require transport in a medical transport vehicle and the safety of any person, including the detainee, requires the presence of an officer during the transport, supervisor approval is required before transport commences. The officer shall be responsible for the care and safety of the individual until such time as they are turned over to medical personnel at the appropriate medical facility.

#### **410.6 TRANSFER TO APPROPRIATE FACILITY**

Best Practice MODIFIED

Upon arrival at the facility, the officer will escort the individual into a treatment area designated by a facility staff member. If the individual is not seeking treatment voluntarily, the officer should provide the staff member with the written application for an emergency admission and remain present to provide clarification of the grounds for detention, upon request.

Absent exigent circumstances (escape, preventing harm to hospital staff, etc.), the transporting officer should not assist facility staff with the admission process, including restraint of the individual. However, if the individual is transported and delivered while restrained, the officer may assist with transferring the individual to facility restraints and will be available to assist during the admission process, if requested. Under normal circumstances, officers will not apply facility-ordered restraints.

#### **410.7 DOCUMENTATION**

Best Practice MODIFIED

The officer should complete the appropriate facility documentation, whenever a person is taken into custody pursuant to the Mental Hygiene Law. The officer should also provide a verbal summary to any evaluating staff member regarding the circumstances leading to the involuntary detention.

For all involuntary emergency admissions (9.37 – 9.57) the officer will document their actions in an incident report. Officers will not be required to write a report if their only involvement with the patient is for transportation from one facility to another. Appropriate notes should be added to CAD indicating that it was just a transport from one facility to the next.

In cases where there is a written order (9.37, 9.45 - 9.57) for an emergency admission the investigating officer will ensure that the DR# is printed on a copy of the emergency admission order and said copy of the order is delivered to the Records Division.

#### **410.8 CRIMINAL OFFENSES**

Best Practice MODIFIED

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Officers investigating an individual who is suspected of committing a minor criminal offense and who is being taken into custody through an emergency admission should resolve the criminal matter by issuing a warning or a citation, as appropriate.

When an individual who may qualify for an emergency admission has committed a serious criminal offense that would normally result in an arrest and transfer to a jail facility, the officer should:

- (a) Arrest the individual when there is probable cause to do so.
- (b) Notify the appropriate supervisor of the facts supporting the arrest and the facts that would support the detention.
- (c) Facilitate the individual's transfer to jail and notify personnel of the individual's § 9.41 status.
- (d) Thoroughly document in the related reports the circumstances that indicate the individual may qualify for an emergency admission.
- (e) Mental health evaluations and treatment for individuals that are booked will be handled by booking staff.

#### **410.9 FIREARMS AND OTHER WEAPONS**

Best Practice MODIFIED

Whenever a person is taken into custody for an emergency admission, the handling officers should seek to determine if the person owns or has access to any firearm or other deadly weapon. Officers should consider whether it is appropriate and consistent with current search and seizure law or extreme risk protection orders to seize any such firearms or other dangerous weapons (e.g., safekeeping, evidence, consent).

Officers are cautioned that a search warrant or an extreme risk protection order may be needed before entering a residence or other place to search, unless lawful warrantless entry has already been made (e.g., exigent circumstances, consent). A warrant or extreme risk protection order may also be needed before searching for or seizing weapons.

The handling officer should further advise the person of the procedure for the return of any firearm or other weapon that has been taken into custody.

#### **410.10 TRAINING**

Best Practice

This department will endeavor to provide department-approved training on interaction with mentally disabled persons, an emergency admission and crisis intervention.