PRTC Emergency Guidelines

The following information has been reprinted from the *University of Wisconsin-Madison Psychological Research & Training Clinic (PRTC) Policies & Procedures Manual (2016-2017)*.

*Medical Emergencies* (page 28)

A client may arrive at the PRTC in need of medical attention, a client may develop a medical problem, or a client may be accidentally injured while at the PRTC. A first aid kit is located at the front desk. First aid materials can be offered to an adult client for self-use or to a parent for use on her/his minor child. Graduate clinicians, staff, and faculty will not deliver first aid or give medical advice.

For a client who is a student at UW-Madison the graduate clinician can expedite a referral for medical care by calling UW Student Health Services, (608) 265-5600, after obtaining written client consent. Additionally, graduate clinicians may consult, after obtaining written client consent, with their client’s other healthcare providers in an effort to coordinate care or obtain appropriate medical attention.

**If any client presents with a life-threatening injury or illness, call 911**. When the individual’s condition precludes the possibility of obtaining written consent, graduate clinicians are authorized to provide appropriate information to the medical personnel responsible for the individual’s care. Information is released only after verifying that a medical emergency exists, that the requested information is essential to the emergency, and that the inquirer is a medical practitioner providing care. When such disclosure occurs, the individual making the disclosure must enter into the client’s record via a written note:

1. The name and affiliation of the recipient of the information.
2. The date and time of the disclosure.
3. The nature of the medical emergency.

*Fire* (page 29)

If you discover or suspect a fire in the PRTC, pull the fire alarm. Warn other occupants by knocking on doors and shouting “Fire” as you leave the building. Notify the main departmental office that there is a fire. Call 911 and give as much information as possible to the 911 operator. Evacuate the building in an orderly fashion. Assist those in danger if you can do so without endangering yourself. During any emergency all clients, students, and visitors must be informed of the requirement to evacuate. Special attention should be given to persons with disabilities, especially those who are unfamiliar with the building. Once outside maintain a safe distance from the building, at least 50 feet, to allow ample room for emergency personnel and equipment to access the building. Remain outside until the fire department has given the “all clear.”

*Severe Weather* (page 29)

Weather emergencies can pose serious threats to university personnel. If weather conditions appear threatening, listen for a warning through commercial radio, weather radio, or local television. Move to an interior hallway or basement if time allows, or take shelter under a desk or heavy table and cover your head. Avoid upper floors and windows. Stay away from electrical panels and appliances, including computers. Use telephones for emergency calls only. Stay calm and alert.

*University of Wisconsin-Madison Emergency Procedures Guide* (page 29)

For further information on university emergency preparedness procedures (e.g., fire, severe weather, medical emergency, utility failure, bomb threat, active shooter, building evacuation, or chemical spill) please consult the University of Wisconsin-Madison Emergency Procedures Guide. Guides are available near each PRTC telephone and online:

<http://www.uwpd.wisc.edu/content/uploads/2016/09/EPFG-Final.pdf>

*PRTC Client Crises* (page 29)

A client crisis occurs when there is imminent risk that a client will cause serious harm to themselves or someone else. The Assistant Director and/or Director are available to guide graduate clinicians in formulating and carrying out intervention plans during times of greater risk. Below are general guidelines for an in-clinic client emergency.

When a client verbalizes a threat to himself or another person, attempt to determine how likely it is they will carry out the threat, whether they have the means to carry out the threat, and specifically, what it is they intend to do. If the threat seems credible, tell the client a clinical supervisor will be joining your session to discuss the client’s concerns and help develop a plan of action. Excuse yourself and notify the Assistant Director and Director of the situation. Possible resolutions include contacting friends or family members, working through a safety plan, referring the client for psychiatric evaluation, hospitalization (voluntary or involuntary), and/or summoning the police. The decision made will depend on the client’s state of mind and willingness to work towards maintaining safety.

If there is a possibility that the client will be subject to an involuntary emergency detention or if the client is without financial resources and desires a voluntary hospitalization, call the Journey Mental Health Center – Crisis Intervention Services for Professionals (608-280-2600). Clients may transport themselves to an ER or be transported by a family member, friend, bus, taxi, or police. Graduate clinicians never transport a client. If assistance is required to remove an out of control client from the PRTC call 911. Under no circumstances should you attempt to physically restrain or challenge a client. If an adult client leaves the PRTC and you believe they are in imminent danger, call 911.

**If a minor client leaves the clinic you are obligated to maintain physical or visual contact with the client until they are returned to the care of a parent or guardian**. If you follow a minor client, take a cell phone with you and call 911. The police can stop and detain a child in order to return the child to the custody of the parent.

*Referral for Psychiatric Evaluation* (page 39)

In certain cases, graduate clinicians and clinical supervisors may feel that a psychiatric evaluation for medication is appropriate. This should be fully discussed with the client. Graduate clinicians may assist their clients in obtaining an evaluation after obtaining written consent to exchange information with the health care provider. The level of assistance provided will vary from client to client and should be determined in consultation with the clinical supervisor.

A medication evaluation can be obtained from a number of providers. UW-Madison students can be seen for psychiatric evaluation at University Health Services. Community clients can discuss medication with a primary care physician or access psychiatric services through their insurance company. Primary care physicians are often able to see clients more quickly than psychiatrists. Clients who are *established* patients at Access Community Health Clinic may receive a medication evaluation there. Please note that individuals who are not established patients and are referred to Access *only* for psychiatric medication will not be seen. Journey Mental Health Center is a lower cost resource for all other residents of Dane County and accepts Medicaid and Medicare insurance. Lower cost services may also be available through Dane County Family Services, Lutheran Social Services, and Catholic Charities.

*Referring for / Obtaining Inpatient Services* (page 39)

If it is determined that a client is in need of hospitalization and/or further evaluation at an emergency room, obtain the client’s consent to exchange information with the potential provider (hospital) and the insurance company. If the client will be involuntarily hospitalized or does not have insurance, contact Journey Mental Health Center to obtain authorization for inpatient treatment. Once a hospital is identified, fax the signed release of information. Call and inform emergency staff of the circumstances surrounding the client’s crisis. If the client is not likely to stay in the hospital voluntarily, inform the hospital so they can decide if a court order for an involuntary hold is needed.

Assist the client in arranging transportation to the hospital. Ask the client if they will call a friend and/or family member for transportation. If the client has no one available to assist in transportation, contact the UW-Madison Police or the City of Madison Police and inform them you have a client who is in immediate danger and in need of transport. You are not allowed to transport the client to the hospital or ride in the client’s car. You may meet the client at the hospital if your supervisor gives permission.

If the client leaves the clinic before transportation arrives, call 911. Be prepared to give an accurate, description of the client, including what the client was wearing and in what direction they went when they left the PRTC. Communicate only that information which is necessary to ensure the client’s safety. For example, you can release information to police that describes the crisis and is helpful in locating the client (e.g., “I have a suicidal client who can’t swim and said he was headed down to Memorial Union Terrace to jump off the pier.”), but you may not reveal other confidential details (e.g., “He is suicidal because he was sexually abused by his father as a child”).