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Sample Critical Incident Procedure:

### Emergency Procedure—Immediate Danger

This procedure is to be followed when a client or staff member is in immediate danger. The focus of this procedure is to prioritize safety, call 911, and follow pre-established office procedures, including contacts for support.

**Definition:**

* Immediate danger—when a person is experiencing a medical or other emergency, including being a danger to oneself or others, and action needs to be taken quickly to help protect against harm.

**Examples:**

* An individual is hurt and needs medical intervention.
* An individual is acting violent or erratic and will not leave the office.
* An individual is experiencing a mental health crisis where they are threatening harm to themselves or others, have a high likelihood of hurting themselves or others, and/or are having delusions that could lead to injury (e.g., they can fly or stop moving cars).

**What to do:**

1. Identify the risk as an emergency. Ensure your safety—leave any situation that is dangerous and encourage others to leave the area as well.
2. Once safe, call 911 and seek support from other staff to help manage the situation.

* Explain the situation to the best of your ability. If you believe this is a mental health emergency, specifically request mental health crisis intervention support.
  + Inform the dispatcher of the language spoken by the individual and advocate for an interpreter or the use of a language line by first responders.
  + Ask the dispatcher for an Incident Number or Event Number. You can then easily reference your incident if you need to call the dispatcher back—for example, if the arrival time is extended, if the client has left, if you need an update, if you request a welfare check not at your location, or if you are asking for an update.

1. Contact [SUPERVISOR NAME] for consultation and to inform them of the incident. You may also need to contact your RA Safety & Security focal point depending on the type of emergency. If your supervisor is not available, contact:

* [SECOND DESIGNATED OFFICE CONTACT NAME] at [XXX-XXX-XXXX]
* [THIRD DESIGNATED OFFICE CONTACT NAME] at [XXX-XXX-XXXX]

1. After the crisis is over, debrief with your team and request any additional support you may need.
2. Follow any incident reporting documentation procedures required by your office.

**Confidentiality:**

* In an emergency, staff will need to share relevant information. This is a permissible time to share medical diagnoses or histories without a release of information.
* Only share information that is specifically relevant to the emergency, or that could benefit the client’s care and possible outcome.
* Limits on confidentiality should be discussed with all clients as part of their enrollment in any program.

**Common Questions When Calling 911:**

When dialing 911, callers will encounter common questions from the dispatcher including:

* What is the address of the emergency?
  + (If the individual is at their home, give this address; if at the office, give the office address.)
* Who are you? What is the best phone number to reach you?
  + (This is for arrival instructions or to allow first responders to call you back for more information and history on the individual.)
* What is the emergency?
  + (Be brief, e.g., “They are breathing heavy and gripping their chest,” or “They are saying they are going to kill themselves,” or “They are throwing chairs, threatening others, and refusing to leave the office.”)
    - There may be follow-up questions depending on the type of emergency, such as, “Who else is in the home? Does the individual have access to any weapons? Are they currently intoxicated?”
    - If this is a medical emergency, the dispatcher will ask as if the individual is conscious; if they are responsive; and if someone is monitoring the person.
    - If this is a mental health emergency, the dispatcher will ask about any known diagnoses and history.
* What is the client’s name? What is the physical description of the client?
  + (For example—"adult, female, Caucasian, long dark hair, average height, and build, wearing black pants and a white sweater”; this helps identify the individual when first responders arrive or if they leave their current location. Be sure to include relevant information about the client’s language proficiency and/or need for interpretation as well.)

**Staff Training Resources:**

* [RESOURCE 1]
* [RESOURCE 2]

**Relevant Client Resources:**

* [RESOURCE 1]
* [RESOURCE 2]

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