



Queensland
Government

Mental Health Services

POLICE AND AMBULANCE INTERVENTION PLAN

Facility:

URN:	<input type="text" value="000000"/>	
Family Name:	<input type="text" value="CARTER"/>	
Given Names:	<input type="text" value="James Robert"/>	
Address:	<input type="text" value="224 Grillo Street Baxterville, QLD, 3009"/>	
Date of Birth:	<input type="text" value="07.10.1981"/>	Sex: <input checked="" type="checkbox"/> M <input type="checkbox"/> F <input type="checkbox"/> I
Telephone:	<input type="text" value="Ph: 07 4436 2211"/> <input type="text" value="Mob: 0443 345 234"/>	

Person Context:

- *Brief recovery focussed statement*

Identified Risks:

List not exhaustive, may include:

- Self harm
- Suicidal behaviours
- Violence to others
- Aggression, physical or verbal
- History of weapons
- Substance use
- Medication compliance
- Treatment compliance
- Consequences of ceasing medications
- Environmental risk factors
- Associates / Other householders
- Vulnerable to harm from others

Contact Persons:

- Business Hours contact
- After Hours Contact
- Support Person
- Friend, family, NGO, Private provider, GP

What to expect when attending:

Considerations:

- Behaviour
- Substance / Alcohol affected
- Ability to provide accurate history
- Attitudes towards police
- History of cooperation with services

Interventions /

Strategies:

What advice you wish to share regarding your knowledge of the consumer

- What is unhelpful
- What has been helpful in the past
- Protective factors
- Strengths
- Personal factors to engage person
- Suggested management strategies
- Phone coaching suggestions

James likes to be called Jimmy. Jimmy lives in supported accommodation. He spends his days at the local drop in center. He has a supportive relationship with John the hostel manger, a support worker and one of the police liaison officers from the local station. He also has contact twice a month via phone with his daughter Megan.

Risk Profile

PLEASE NOTE: Jimmy has a brain injury. Short sentences to ask questions or make requests and giving him ample time to process this and really is helpful. Jimmy is under a Forensic Order of the *Mental Health Act 2016*.

When mentally unwell

- * Carries a weapon/s on his person usually a knife and/or baton as a means to protect himself.
- * 2016 attended the building of his local member for parliament Harry Chambers. Using a knife he made threatening gestures towards staff.
- * Jimmy is fearful and he genuinely believes (a symptom of his illness) the Australian Federal Police (AFP) are part of a conspiracy with Harry Chambers (his local member of parliament) to harm him in some way.
- * Risk of significant deterioration of mental and physical health due absenting/disengaging from his health care treatment, accommodation and support network.
- * Vulnerable: at risk of being taken advantage of by others. He has given his money away and in his dis-inhibited/unwell state taken substances/alcohol to activate his "sixth sense". He hears "voices" (hallucinations) telling him the AFP are going to lock him away in a special facility in the Simpson desert and he won't be able to contact his daughter.

Contact Person/s

- * Mental health Clinician (Sarah)- Business Hrs: 3321 8876, Mob 0412 667 342, After Hrs: 3321 0211
- * Hostel supervisor (John)- Ph: 07 4436 2211 * Police Liaison Officer (Peter)- Ph: Mob 0403 665 309
- * Daughter (Megan)- 0404 608 456 * Support Worker (Justin)- Ph: Mob 0214 556 448

Behaviors that indicate Mr Carter is becoming unwell and what to expect when attending

- * Signs that Jimmy is becoming unwell include: **(a)** delivering letters to his local police station describing conspiracy theories about the AFP and his local member Harry Chambers; **(b)** absenting himself from his mental health treatment and/or his accommodation; **(c)** loitering around the Harry Chamber's office despite knowing he is banned from the area.
- * As Jimmy's mental health state deteriorates he becomes **(a)** fearful to the point of actively hiding in and around the city such as: **(b)** the botanical gardens, the train depot in Williams street; **(c)** his appearance is disheveled, personal hygiene neglected, burns on his fingers from smoking cigarette butts; **(e)** physically looks unwell, hungry and dehydrated.
- * When approached by police he: **(a)** has attempted to run away and/or **(b)** challenged officers with a weapon; **(c)** he looks frightened, perplexed and may accuse officers of colluding with the AFP and/or Harry Chambers; **(d)** will have difficulty attending and responding to officers, his speech will tend ramble and not get to the point and **(e)** this is further complicated by his slowed processing of information due to his head injury;
- * When mute and non responsive he is very unwell mentally.

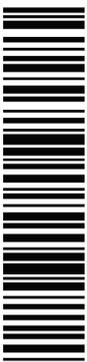
Interventions and strategies

- * A calm reassuring manner is helpful. * Short simple statements, give him time to process information and reply. * Acknowledge and validate his fears explain that you are part of the same service as the PLO Peter and you will keep him safe and take him hospital. * Trying to reason with him about his "beliefs" and/or "voices" will only make him more distressed and frightened; they are very real to him.
- * Strategies to reassure Jimmy that your intentions are genuine: **(a)** Jimmy is close to his daughter, he is very proud of her she is in her last year at university studying business and law; **(b)** Jimmy attends the Station Rd drop in center daily and has a rapport with the PLO Peter and support worker Justin (as above); **(c)** Jimmy likes to listen to music, his favorite radio station is 97.3 and he really enjoys reggae.
- * Peter and John both have in the past been able to assist with reassuring Jimmy that officers intentions are genuine and that they want to help him.
- * In the past Mr Carter has reported that he found the presence of paramedics reassuring when he been unwell and in the company of the police.

DO NOT WRITE IN THIS BINDING MARGIN

Do not reproduce by photocopying
All clinical form creation and amendments must be conducted through Health Information Services

MR A 10621
V5.0 - 07/2015
Locally Printed



00201:10621

POLICE AND AMBULANCE INTERVENTION PLAN



**Queensland
Government**

Mental Health Services

**POLICE AND AMBULANCE
INTERVENTION PLAN**

Facility:

URN:

Family Name:

Given Names:

Address:

Date of Birth: Sex: M F I

Telephone:

**Clinical information
for the QAS:**

- Considerations:**
- Relevant background information
 - Personal circumstances
 - Diagnosis & comorbidities
 - Allergies
 - Physical issues
 - Specific Interventions for this individual

QAS Information

Diagnosis

* schizophrenia; * acquired brain injury from a physical altercation; * problematic alcohol/ substance use; * emphysema; * delirium secondary to a right lower lobe pneumonia.

Clinical Information

* In March 2021 Mr Carter was treated for a lower lobe pneumonia complicated by a delirium. When he is delirious his symptoms are similar to an exacerbation of his mental illness and his vulnerable brain secondary to his head injury. Symptoms to assist with differentiating between psychosis and delirium include: Mr Carter experiences visual hallucinations usually insects; ants and cockroaches on the floor and walls.

* Due to Mr Carter's emphysema he can become short of breathe with minimal exertion physically such as walking up a short flight of steps.

* When unwell mentally Mr Carter neglects his physical and mental health he has in the past been dehydrated and malnourished when finally located by service providers.

Locations Mr Carter may be found at include

- (1) the Botanical Gardens in the city; (2) the train depot in Williams Street;
(3) under the Shellway Bridge.

If the person is known at multiple addresses e.g. mother's house, hostel etc. please include and / or provide as seperate document to accompany PAIP.

People involved in the development of this Police & Ambulance Intervention Plan (include name & designation)

- * Consumer - Mr James Carter; * Psychiatrist - Dr Garry Webster; * Mental Health Clinician - Sarah Jackson;
- * Team Manager - Rhonda Bailey; * Clinical Nurse Consultant - Richard Smith; * Multidisciplinary Team;
- * Mental health Intervention Coordinator - Glenda Seymour;
- * QPS Mental health Intervention Coordinator Senior Sergeant - Lesley Bradley
- * Police Liaison Officer - Peter Logger; * Hostel Supervisor John Dutton; * Support worker Justin Baxter;
- * Daughter Megan Carter.

Police & Ambulance Intervention Plan Review Details (Plans to be reviewed every 6 months)

Review date - valid to	Reviewing Clinician / Team / Committee Details	Review Outcomes
<input type="text" value="01/04/2021"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

Please complete before document saved.

Consumer invited to participate Yes Not clinically indicated CIMHA Alerts updated Yes No

Consumer participated Yes No Declined

Copy given to consumer Yes No Declined

Consent from consumer to share with QPS / QAS Yes No

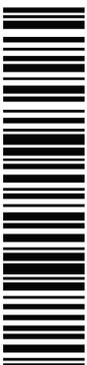
Endorsed by Clinical Director or delegate Yes No Not required - review only

DO NOT WRITE IN THIS BINDING MARGIN

Do not reproduce by photocopying

All clinical form creation and amendments must be conducted through Health Information Services

MR A 10621
V5.0 - 07/2015
Locally Printed



00201:10621

POLICE AND AMBULANCE INTERVENTION PLAN