AHS INSTRUCTIONS FOR REPORTING A FORM 3

The following outlines the process by which AHS Employees may report the issuance of a **FORM 3** to CPS.

- 1. Ensure the AHS Facility and its grounds have been thoroughly searched by AHS Protective Services <u>prior to</u> calling the Police.
 - a. Exceptions: the patient has left on a pass and failed to return as expected or where there are reasons to believe the patient is not on the grounds (e.g., patient was observed catching a bus)
- Ensure the FORM 3 Return to Facility Order has been completed. The order will remain active and enforceable on CPIC indefinitely, until such time as the patient is located and returned to the facility.
- 3. Call Calgary 911 at 403-266-1234 and advise them which facility you are calling from. You will be asked a series of questions about the patient, including whether or not a **FORM 3** was issued as the result of a patient's failure to return after being issued a "pass" from their unit or facility.
- 4. You will be provided with a CPS case file # for your records. Please write this number legibly on the top right corner of the completed FORM 3 and email it to FORM3@calgarypolice.ca. The order will be added to the National CPIC Database. Please note that incomplete order or orders without a CPS case file # written on them will NOT be accepted.

INSTRUCTIONS FOR CANCELLING A FORM 3

The FORM 3 authorizes police to apprehend (using force if necessary) and transport formal, eloped patients back to a medical facility for treatment.

These orders remain valid and enforceable until the patient returns to the facility and may be executed at any time. For these reasons it is imperative that AHS Staff contact CPS to cancel any **FORM 3** orders issued if the patient has returned to the AHS Facility or if the Physician's determine the patient no longer is required to return.

The process for cancelling a FORM 3:

- 1. Call Calgary 911 at 403-266-1234 to report the reason for cancellation.
- 2. Send an email to FORM3@calgarypolice.ca requesting the cancellation, including the patient's Name and Date of Birth.