
OpenBeds® Crisis Management System

Mobile Crisis Unit (MCU) Team Member User Guide

NJ Specific - Version 1.0

3/3/25

Introduction

This guide details the responsibilities and distinct privileges for OpenBeds users with the role of Mobile Crisis Unit (MCU) team member.

MCU team member is the role assigned to staff who are responsible for responding to mobile crisis dispatch requests. Using this role, mobile responders will be able to:

1. View an assigned dispatch and either accept, decline, or reassign it.
2. Complete the Mobile Crisis Unit Response Report and disposition the dispatch.
3. Flag an encounter for follow-up and complete the follow-up as assigned.
4. Track status of unresolved dispatches on the site.

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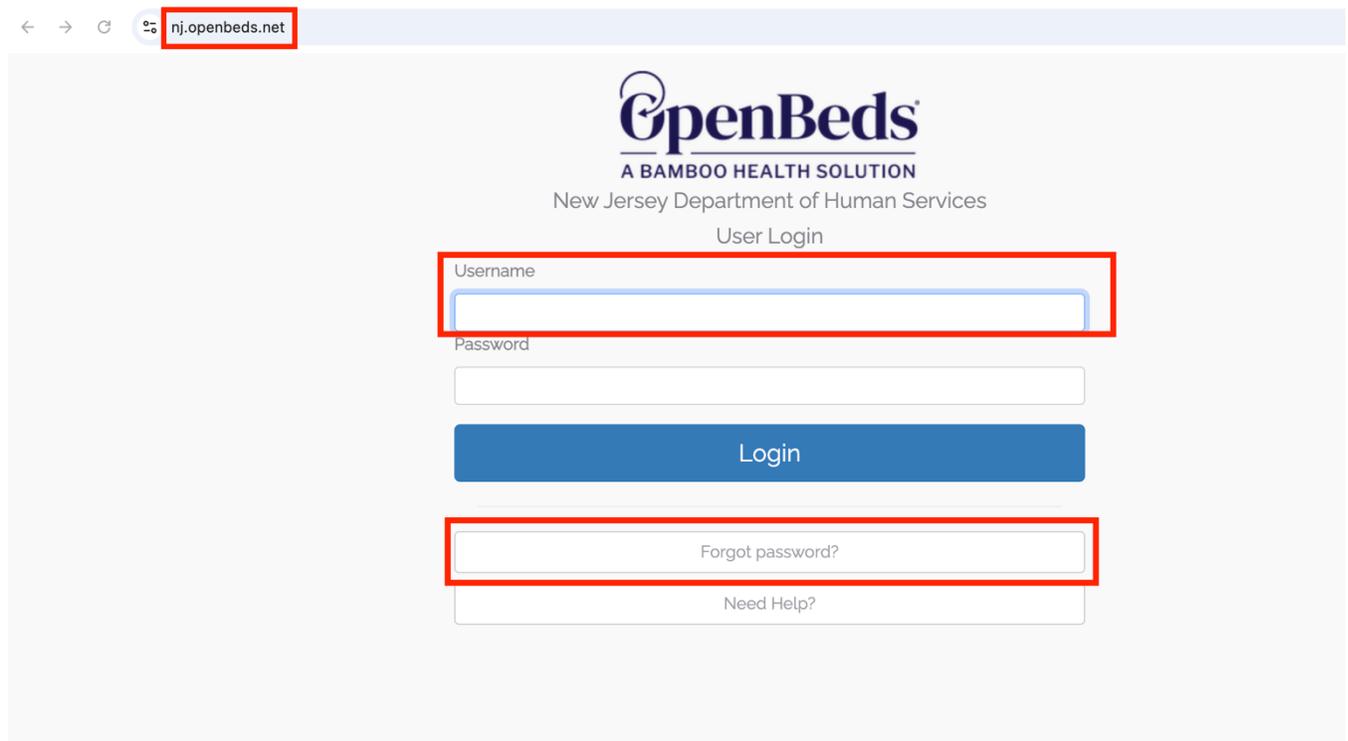
Account Creation

MCU team members are created by organizational users with the Crisis Administrator role. Your supervisor can assist with user account creation. Your Administrative Team can reach out to Bamboo Health’s help desk if additional Crisis Administrator accounts are needed.

Logging In

To log into your account for the first time:

1. From your web browser, navigate to the OpenBeds URL <https://nj.openbeds.net/> and select “Forgot Password”.
2. Enter your work email in the ‘Username’ box and click ‘Request Password’.
3. Enter the verification code sent to your email in the ‘Verification Code’ box.
4. Create a new password and click ‘Reset Password’.
5. Log in using your credentials.



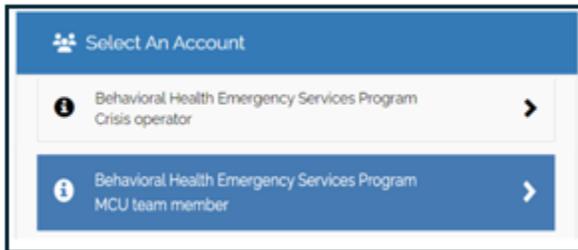
For subsequent log ins:

1. From your web browser, navigate to the OpenBeds URL <https://nj.openbeds.net/>

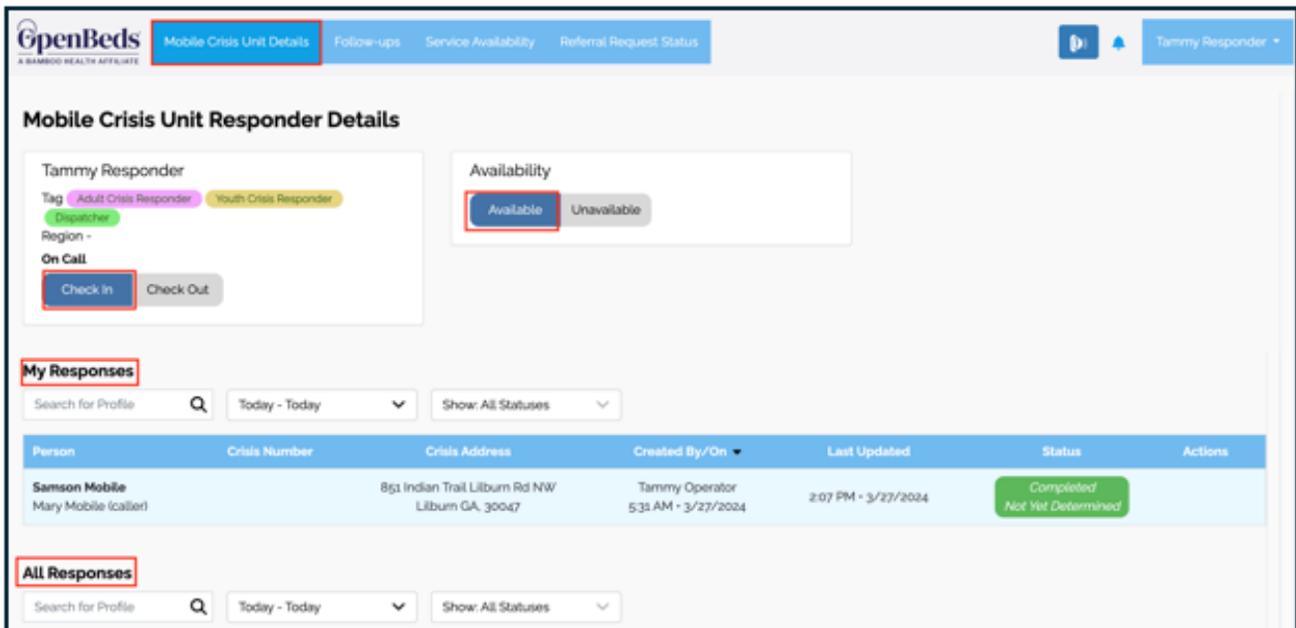
2. Enter your work email in the 'Username' box and your password in the 'Password' box.
3. You can change your password at any time. Once logged in:
 - a. Click the drop-down icon beside your name at the top right of the page.
 - b. Select 'Change Password' and complete the instructions as prompted.

Getting Started

1. Navigate to <https://nj.openbeds.net/> and log into OpenBeds.
2. You will see a 'Select An Account' page listing one or more accounts associated with your work email address.
3. Select your 'MCU team member' role.



Upon logging in you have several options to choose from.



PEER responder: when you login you will automatically be shown as “Check In” and “Available” (as seen above). The Peer should select “Unavailable”. This will allow the Peer to be unavailable for dispatch as the Dispatchers will assign the dispatch to the Bachelor role.

BACHELOR responder: when you login you will automatically be shown as “Check In” and “Available” (as seen above). No additional step is required to be available for dispatch.

Respond to a Dispatch Request

Upon login, you are defaulted to the **Mobile Crisis Unit Details** page where you will update your status and availability. **Bachelor** MCORTs should **Check in** at the start of each workday and **Check out** at the end of your workday. While checked in, to signal that you are available for a dispatch, toggle your Availability to **Available**. Your availability will automatically change to **Unavailable** once you accept a dispatch and change back to **Available** after you complete that dispatch. **Peer** MCORTS will **Check in** but select **Unavailable** so they will not be dispatched by Carelon. **Note:** The Bachelor responder is responsible for notifying the Peer team member of the dispatch and for completing the **Mobile Crisis Unit Response Report** once on scene. Peer MCORTS should have tags with similar wording to ‘**Do Not Dispatch**’ to ensure they are not directly requested.

Each MCORT can view all of your dispatches in the **My Responses** section and those of your organization in the **All Responses** section on this page based on the date range specified. This information automatically defaults to **Today**.



Mobile Crisis Unit Details (1) – See description above.

Follow Ups (2) – The follow-ups tab has details of all encounters that have been assigned to you or flagged by your organization for follow-up. [See the Follow Ups section for more information.](#)

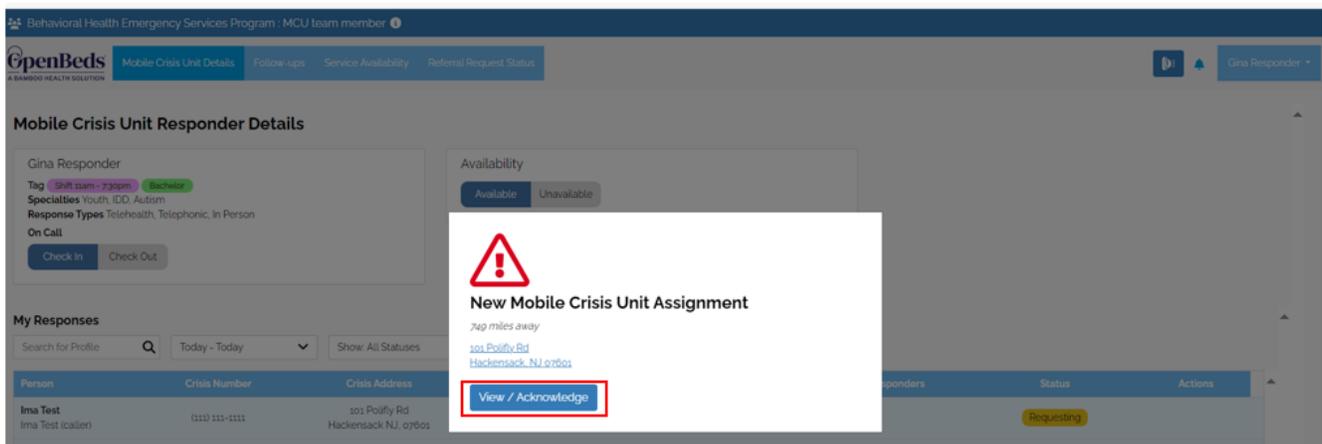
Service Availability (3) – The service availability tab opens the OpenBeds referral management system and has options for searching and connecting with various

providers based on an array of parameters. [See the Refer to Treatment Provider\(s\) section for more information.](#)

Referral Request Status (4) – This is where you can see all referrals that have been made by you and your organization and the status of each.

Username (5)– You can view your profile, change your password, and access educational and other materials from the dropdown options.

When you are requested for a dispatch, you will receive a pop-up to View/Acknowledge it before any Protected Health Information (PHI) is visible.



Clicking on **View/Acknowledge** will take you to the **Mobile Crisis Unit Response Report** Profile tab with the intake form completed by the Crisis Operator requesting the dispatch.

The screenshot displays the 'Mobile Crisis Unit Response Report' interface. At the top, there's a navigation bar with 'OpenBeds' logo and menu items like 'Mobile Crisis Unit Details', 'Follow-ups', 'Service Availability', and 'Referral Request Status'. The main title is 'Mobile Crisis Unit Response Report'. Below this, there's a 'Profile' tab selected. The profile section includes:

- Caller: Ima Test
- Call Start Time: 11:52 AM - 8/30/2024
- Crisis Location: 101 Polify Rd, Hackensack, NJ 07601
- Phone: (111) 111-1111

 There are also buttons for 'Export as PDF', 'Respond to Crisis?' (with 'Accept' and 'Decline' radio buttons), and a 'Submit' button. Below the profile, there's a 'Contact Resolutions' section with the text 'Risk Assessment Complete, Safety Plan Complete, Mobile Crisis Team Deployed'. The 'Incident Details' section shows:

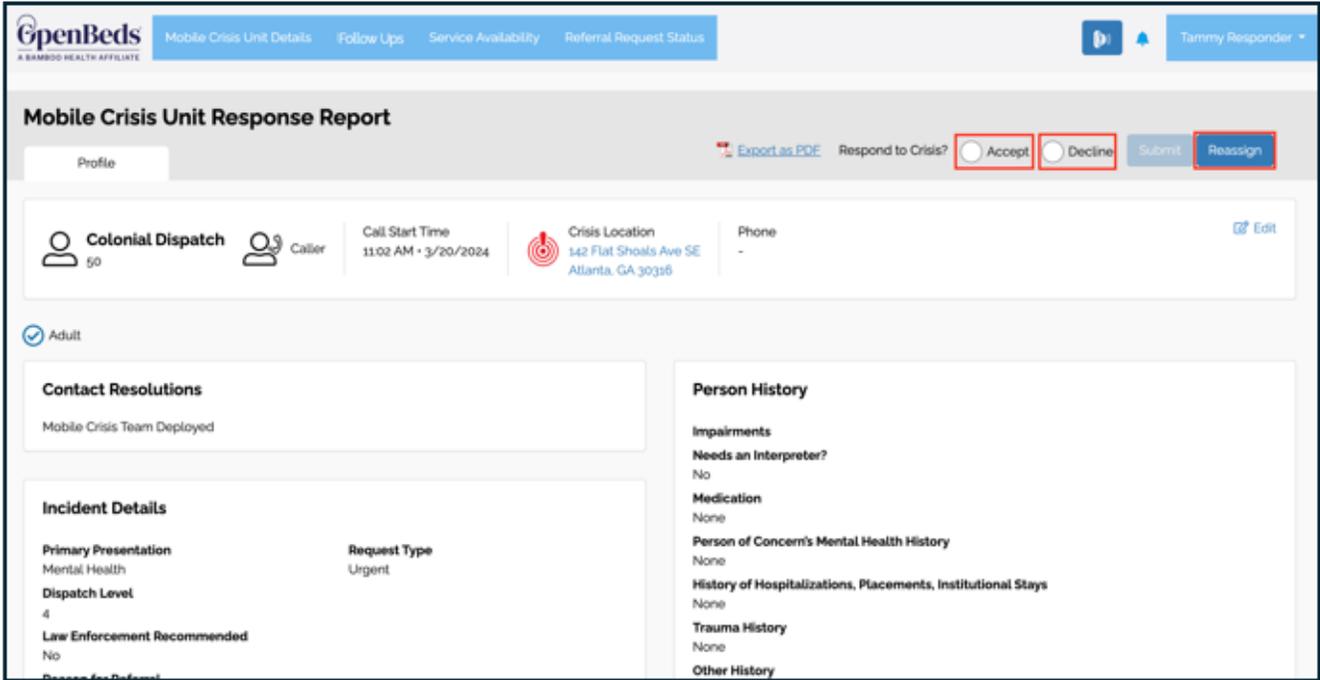
- Primary Presentation: Mental Health
- Request Type: Urgent
- Dispatch Level: 4
- Law Enforcement Recommended: No
- Reason for Referral: SI
- Primary Presenting Concern: Suicide
- Contributing Factors: Abuse, /Victimization, Criminal justice, /Legal, Financial, /Basic needs

 The 'Person History' section includes:

- Impairments: Alcohol/Drug Dependency
- Impairment Notes: 2-3x week meth user - quantity unknown
- Needs an Interpreter?: No
- Medication: Adderall
- Person of Concern's Mental Health History: Prior suicide attempt
- Safety & Stability: Drug/Alcohol Use, History of suicide attempts
- History of Hospitalizations, Placements, Institutional Stays: none
- Trauma History: domestic violence - spouse

Dispatch Request Decisioning

From the **Mobile Crisis Unit Response Report** Profile tab, you can **Decline**, **Reassign** or **Accept** the dispatch depending upon your organization’s business rules. **Note:** If you decline a dispatch, you are required to select a reason for the declination. Click into the **Reason for decline** text box to display the drop-down values and select the most appropriate one.



Manage Responders

This section appears in the platform, but this functionality is not relevant for NJ. It will NOT be used for the NJ MCORT.

Scene Information

This section captures information related to the meeting location.

The 'Scene Information' form contains the following fields and options:

- Number of First Responders** (1): A numeric input field with a value of 0 and +/- buttons.
- Number of Naloxone Dispensations** (2): A numeric input field with a value of 0 and +/- buttons.
- Law Enforcement at scene before our mobile crisis team?** (3): Radio buttons for 'Yes' and 'No', with 'No' selected.
- Family Support** (4): Radio buttons for 'Yes' and 'No', with 'No' selected.
- Dispatch Level** (5): A dropdown menu with 'Select an option' as the current selection.

Number of First Responders (1) – Indicate the number of first responders on scene at any time during the dispatch. Clarify this information in your dispatch summary.

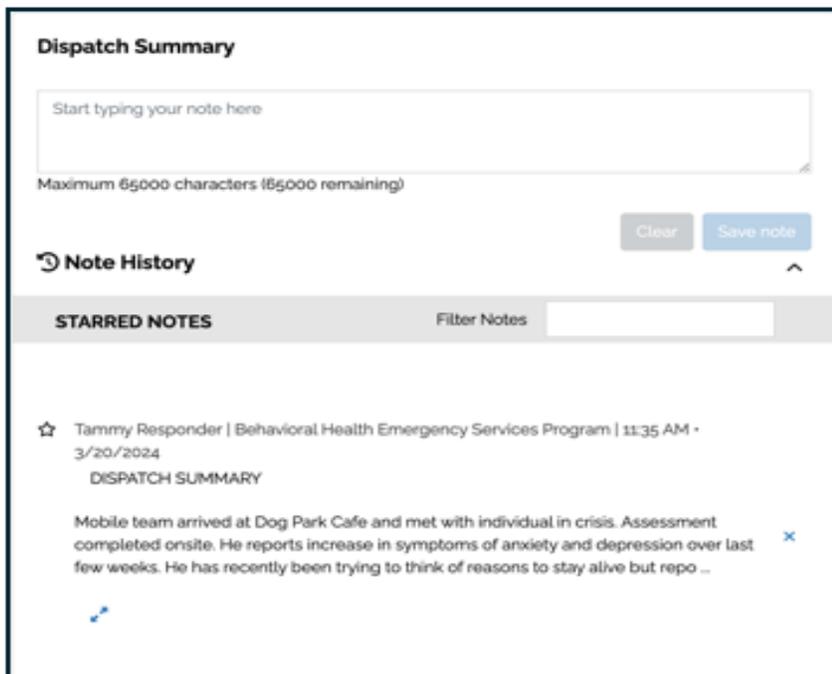
Number of Naloxone Dispensations (2) – Enter the number of times naloxone was used to reverse an opioid overdose during the dispatch.

Law Enforcement at scene before our mobile crisis team? (3) – Choose **Yes** or **No**.

Family Support (4) – Choose **Yes** or **No** to indicate if the person in crisis has family support present at the time the mobile crisis unit arrives or anytime while on scene. Expand upon this in your dispatch summary.

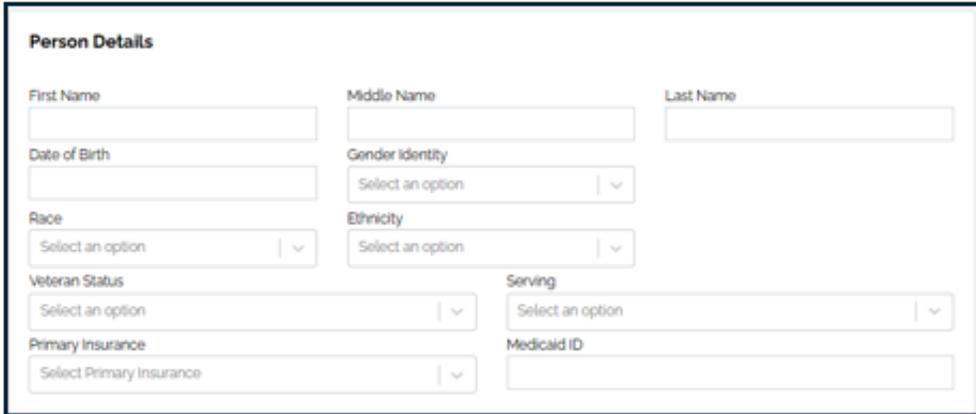
Dispatch Level (5) – The dispatch level defaults to what was entered by the crisis operator. You can change the dispatch level based on information at the scene and your organization’s business rules.

You can add narrative information related to the assessment completed and elaborate on any scene information as needed in the **Dispatch Summary** text box. You can enter up to 65,000 characters in this text field.



Edit Profile

If the demographic information captured during the intake differs from the information validated on scene or additional information was provided on scene, capture those changes in the **Person Details** section.

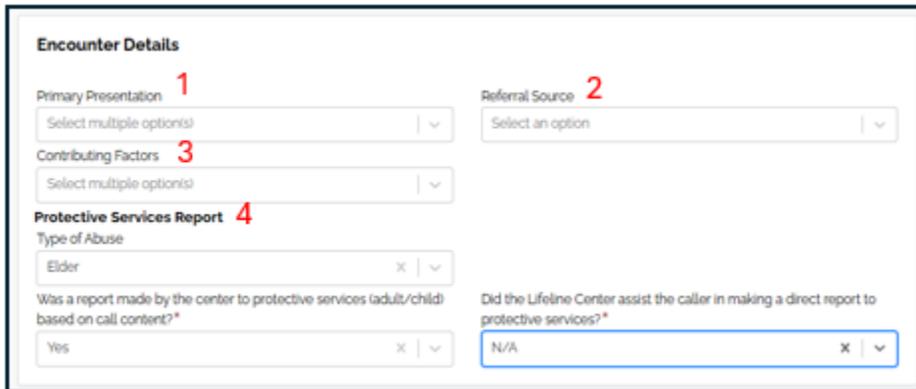


The screenshot shows the 'Person Details' form with the following fields:

- First Name (text input)
- Middle Name (text input)
- Last Name (text input)
- Date of Birth (text input)
- Gender Identity (dropdown menu: Select an option)
- Race (dropdown menu: Select an option)
- Ethnicity (dropdown menu: Select an option)
- Veteran Status (dropdown menu: Select an option)
- Serving (dropdown menu: Select an option)
- Primary Insurance (dropdown menu: Select Primary Insurance)
- Medicaid ID (text input)

Encounter Details

Complete the applicable portions of the Encounter Details section.



The screenshot shows the 'Encounter Details' form with the following fields and callouts:

- Primary Presentation **1** (dropdown menu: Select multiple option(s))
- Referral Source **2** (dropdown menu: Select an option)
- Contributing Factors **3** (dropdown menu: Select multiple option(s))
- Protective Services Report **4** (dropdown menu: Type of Abuse)
- Was a report made by the center to protective services (adult/child) based on call content?* (dropdown menu: Yes)
- Did the Lifeline Center assist the caller in making a direct report to protective services?* (dropdown menu: N/A)

Primary Presentation (1) – Select the main concern(s) driving the help seeker’s need for mobile crisis intervention from the dropdown

Referral Source (2) – Select the best descriptor of the help seeker or requestor for mobile crisis intervention.

Contributing Factors (3) - Select all factors pertinent to the current encounter. Only add a typed option if there is not a close enough match in the existing list and you would normally select 'Other'. Be sure to select everything that applies to this contact.

Protective Services Report (4) - As a mandated reporter, if child or elder abuse is indicated or suspected, you must report it. Document completion of the Protective Services Report section as shown. If a **Type of Abuse?** is selected, answers to the two report questions are required.

Accommodation

Document any ADA accommodation provided to the individual in crisis during your dispatch. This also informs any accessibility requirements if you need to coordinate additional care/support for this individual.

Emergency Services Intervention

If the person of concern poses an imminent threat to self or others document the **Meeting Location** and initiate Emergency Services Intervention.

Document the Emergency Services Intervention by toggling the **Active Rescue** section (1) on and completing the applicable fields.

The screenshot shows the 'Active Rescue' section of a form. It includes a toggle switch (1) at the top right. Below it are two dropdown menus: 'Active Rescue Type' (2) and 'Reason for Active Rescue' (3). There are three text input fields: 'Responder Name' (5), 'Contact Number' (6), and 'Badge/ID Number' (7). Below these is another dropdown menu for 'Consent for Dispatch' (8). At the bottom, there are three radio button options: 'Contact was successful' (9), 'Emergency Rescue could not locate individual' (10), and 'Undetermined' (11).

Active Rescue Type (2) – Select Homicide, Suicide, or Welfare.

Reason for Active Rescue (3) – Select one applicable reason from the dropdown.

Responder Type (4) – Select EMS, Fire, or Police.

Responder Name (5) – Enter the emergency responder’s or unit’s name.

Contact Number (6) – Enter the emergency responder’s or unit’s contact number.

Badge/ID Number (7) – Enter the emergency responder’s or unit’s badge or ID number.

Consent for Dispatch (8) – Select whether the person in crisis consented to the emergency intervention **Yes (voluntary)** or whether the Individual has not given consent **No (involuntary)**.

Contact was successful (9)– Select this radio button to indicate if emergency personnel were able to contact/locate the person in crisis.

Emergency Rescue could not locate individual (10) – Select this radio button to indicate emergency personnel were unable to contact/locate the person in crisis.

Undetermined (11) – Select this radio button if you are unable to determine whether emergency personnel were or were not able to contact/locate the person in crisis.

Follow Up

The **Follow Up** section captures information related to any additional contacts needed by the mobile crisis unit for the person in crisis.

The screenshot shows a 'Follow Up' form with the following fields and callouts:

- 1**: Person Follow Up eligibility (dropdown menu)
- 2**: Type of Return Contact* (dropdown menu)
- 3**: Preferred contact method* (radio buttons for Phone and Email, with text input fields)
- 4**: Follow Up contact and date* (Name to ask for: text input field)
- 5**: Can we leave a voicemail?* (radio buttons for Yes and No)
- 6**: Can we leave a live message? (radio buttons for Yes and No, with a blue dot next to Yes)
- 7**: With whom* (text input field)
- 8**: Follow Up due date* (text input field)
- 9**: Three buttons: '24 hrs', '48 hrs', '72 hrs'
- 10**: Follow Up notes* (text area)
- 11**: Did the person reach out to the referrals provided? (radio buttons for Yes and No)
- 12**: Mark this Follow Up as completed (checkbox)

Person follow Up eligibility (1) – Select whether the help-seeker accepted and consented to the follow-up or declined the offered follow up.

Type of Return Contact (2) – Select whether the reason for making contact is to follow up or for safety support.

Preferred contact method (3) - If follow-up is accepted, document whether the help seeker wants to be contacted by phone or email.

Follow Up contact and date/Name to ask for (4) - Enter the name to ask for.

Can we leave a voicemail? (5) - Indicate whether a message can be left on voicemail.

Can we leave a live message? (6) - Indicate whether a message can be left with a person.

With whom? (7) - If a message can be left with a person, indicate the name of the person with whom the message can be left.

Follow Up due date (8) - Use the date picker calendar to select a date and time for follow-up or choose from the follow-up due date quick-pick options of **24 hrs**, **48 hrs**, or **72 hrs (9)**.

Follow Up notes (10) - Document notes for the follow-up and save.

Did the person reach out to the referrals provided? (11) - If the follow-up is completed via the Mobile Crisis Unit Response Report, select the applicable radio button.

Mark this Follow Up as completed (12) - If the follow-up is completed via the Mobile Crisis Unit Response Report, check the box to indicate this.

Because follow-up is typically conducted separately from the initial contact, most follow-up information is documented on the **Follow-Ups** page instead of in the Mobile Crisis Unit Response Report. [See the Follow-Ups section for additional information.](#)

Other Notes

You can use this section to document **General** notes about the encounter, information related to **Follow-Up**, and/or documentation of a **Phone Call**. This space is limited to 250 characters. Each note captures the writer's name, organization, and date/time stamp the note was saved. After saving a note here, it is viewable to the Crisis Operator. The Note History will show any **Before Arrival** or other note type completed by the crisis operator relative to this dispatch.

The screenshot displays the 'Other Notes' interface. At the top, there is a dropdown menu labeled 'Select the type of note' with the text 'Select multiple options' and a downward arrow. Below this is a text input field with the placeholder 'Start typing your note here'. Underneath the input field, it says 'Maximum 250 characters (250 remaining)'. To the right of the input field are two buttons: 'Clear' and 'Save note'. Below the input field is a section titled 'Note History' with a circular arrow icon and an upward arrow. Under 'Note History', there is a 'STARRED NOTES' section with a 'Filter Notes' input field. Below this, there is a list of notes. The first note is marked with a star and contains the text: 'Tammy Operator | Behavioral Health Emergency Services Program | 11:06 AM - 3/20/2024'. Below this text is a blue button labeled 'BEFORE ARRIVAL'. Underneath the button is the note content: 'Call 5 minutes before arrival so he can leave area with dogs.'

Dispositioning the Dispatch

To complete the dispatch, select a final disposition from the available options. This is required to close the encounter.

Final Disposition of Consumer

Final Disposition of Consumer

- 211/Social Services
- 911/Emergency Response
- Crisis Assessment Response and Enhanced Services (CARES)
- Crisis Receiving Stabilization Center
- Crisis Resolved
- Division of Developmental Disabilities (DDD)
- Early Intervention Support Services (EISS)
- Emergency Room/Medical Consultation
- Follow-up Call Authorized
- Harm Reduction Center
- MH Treatment (no 911, EISS, or PES)
- Not present Upon Arrival
- Outpatient Appointment
- PerformCare (Children's System of Care)
- Psychiatric Emergency Services (PES)
- ReachNJ / SUD Treatment
- Recommend Contacting Current MH Provider
- Recommend Contacting Current SUD Provider
- Welfare Check by Law Enforcement
- Other

Transportation Needed

If transportation is needed, and you are required to coordinate transport based on your organization’s business rules, toggle this option on and select the type needed from the drop-down menu.

Transportation Method (1) – Select how the person in crisis will be transported (e.g., Non-emergency Transport, Law Enforcement, or Natural Support).

Transport Location (2) – Indicate where the person in crisis is being transported (e.g., Crisis Stabilization, the Emergency Department, or to Home.)

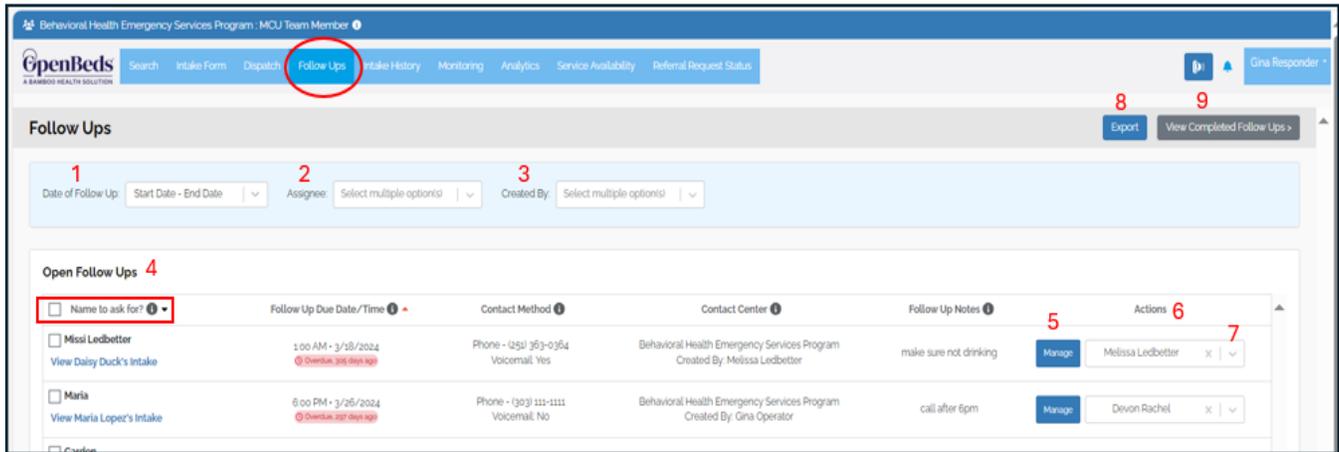
Special Accommodations (3) – Document any special travel accommodations the person in crisis needs.

Complete the Dispatch

Select **Submit and Close Session** to close the report and complete the dispatch.

Manage Follow Ups

The **Follow-Ups** page captures all dispatches that have been indicated as in need of follow-up and for which follow-up was accepted and consented to. Click on the link under the **Name to ask for?** column to see the full Intake Form.



Date of Follow-Up (1) - Select from the drop-down list or enter a custom date or range.

Assignee (2) - Select from the drop-down list or type the name of the staff member who is assigned to follow-up. Multiple names can be selected or entered. Note: Deactivated users will not appear in this drop-down menu

Created by (3) - Select from the drop-down list or type the name of the staff member who created the follow-ups you want to see. Multiple items can be selected or entered.

Open Follow Ups (4) - The open follow-ups section lists follow-ups that need to be completed within the search parameters you entered.

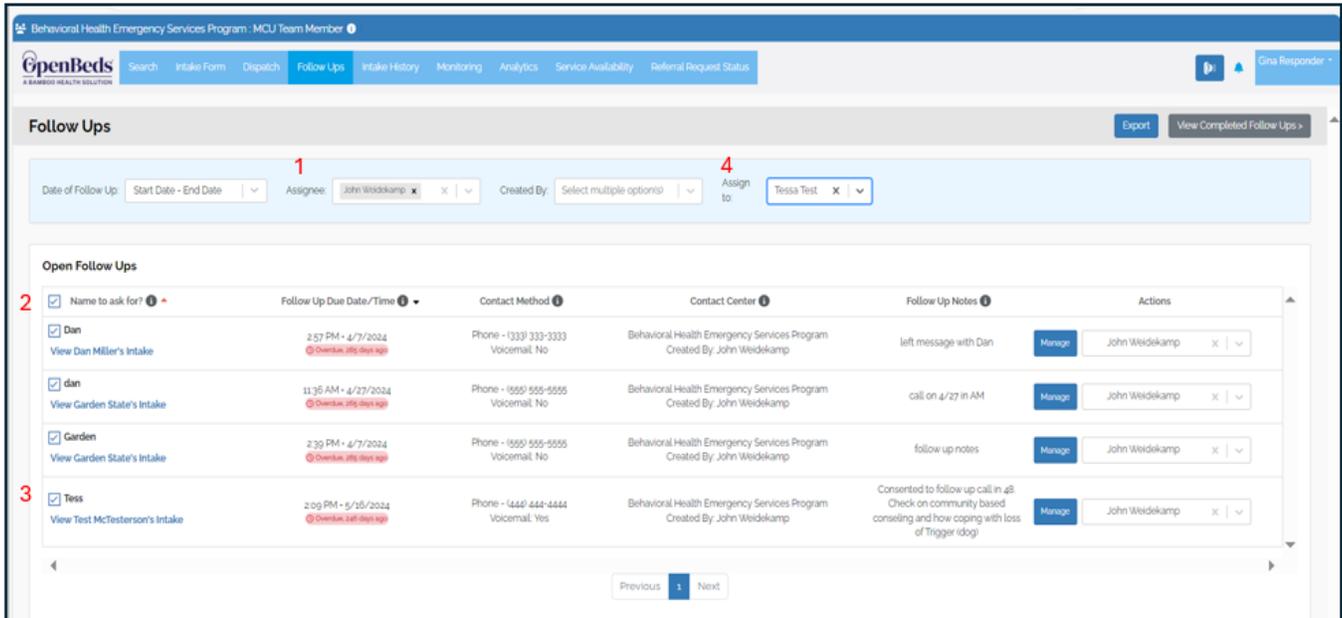
Manage (5) - Manage allows you to quickly see the contact information for the follow-up, annotate the result of your follow-up attempt, and to complete the follow-up based on your organization's business rules. Be sure to save your update before closing.

Actions (6) - Once set, follow-ups are assigned by default to the staff member that created them. Depending upon your organization's business rules, you can assume follow-up responsibility by selecting your name from the drop-down list (7) or be assigned someone's follow-up by a user with a Supervisor permission within your organization.

Export (8) – Export allows you to set date range and status filters and export the results in Excel.

View Completed Follow-ups (9) – This option displays all completed follow-ups within the date range you have selected. You can reopen a follow-up closed in error by clicking the ‘Manage’ button and unchecking ‘Mark this Follow-up as completed.’

Users with the Supervisor permission can reassign one or more follow-ups to one or more users within their organization. To reassign one or more follow-ups:



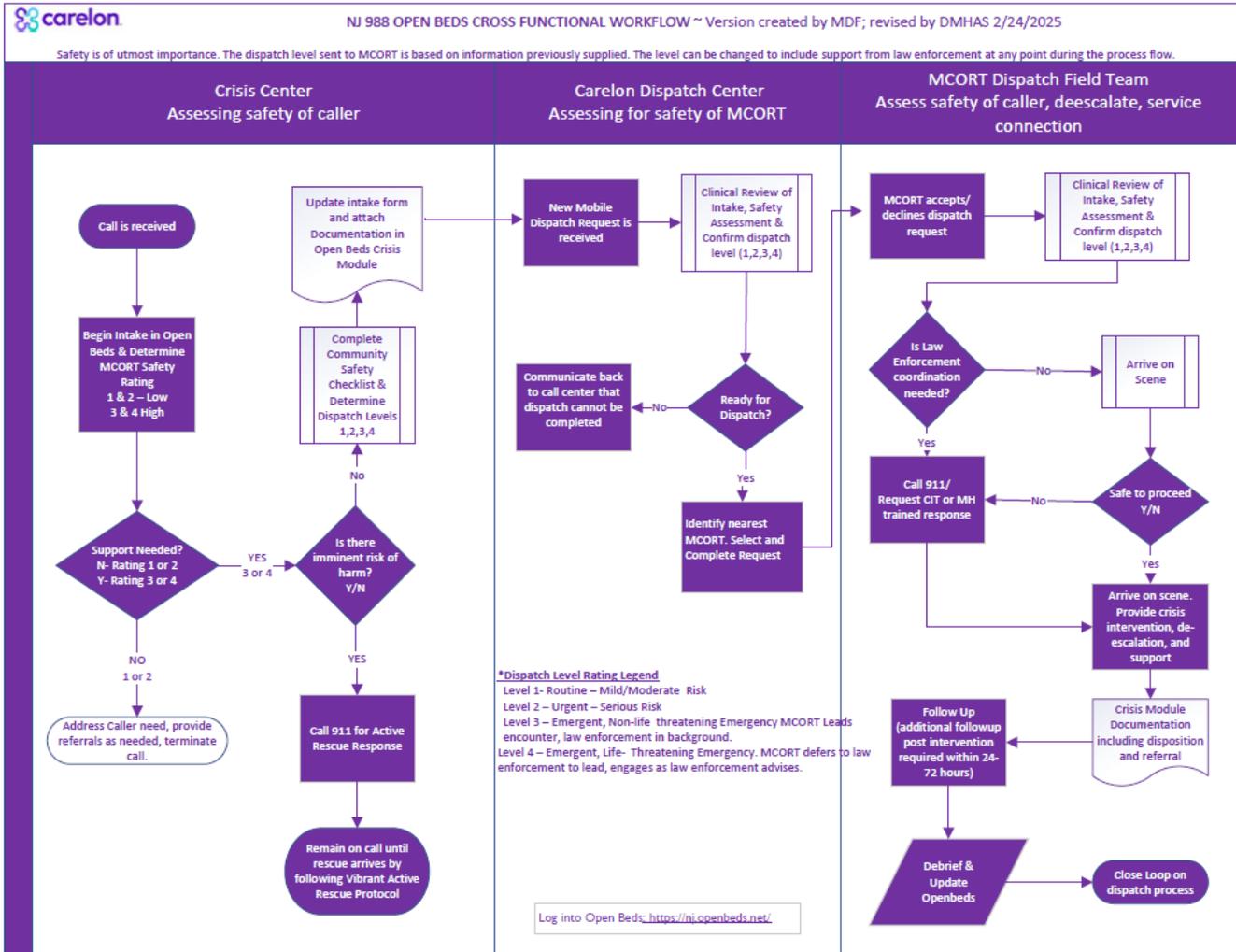
Filter by **Assignee (1)**.

Check the box beside the **Name to ask for?** column (2) to select all or by checking the box beside the name of the individual who consented to the follow-up (3) to select only one. This displays an **Assign to** filter (4).

Select the staff member the follow-ups will be reassigned to. This generates a pop-up alert to confirm the reassignment. Click **Complete** to finalize the reassignment.



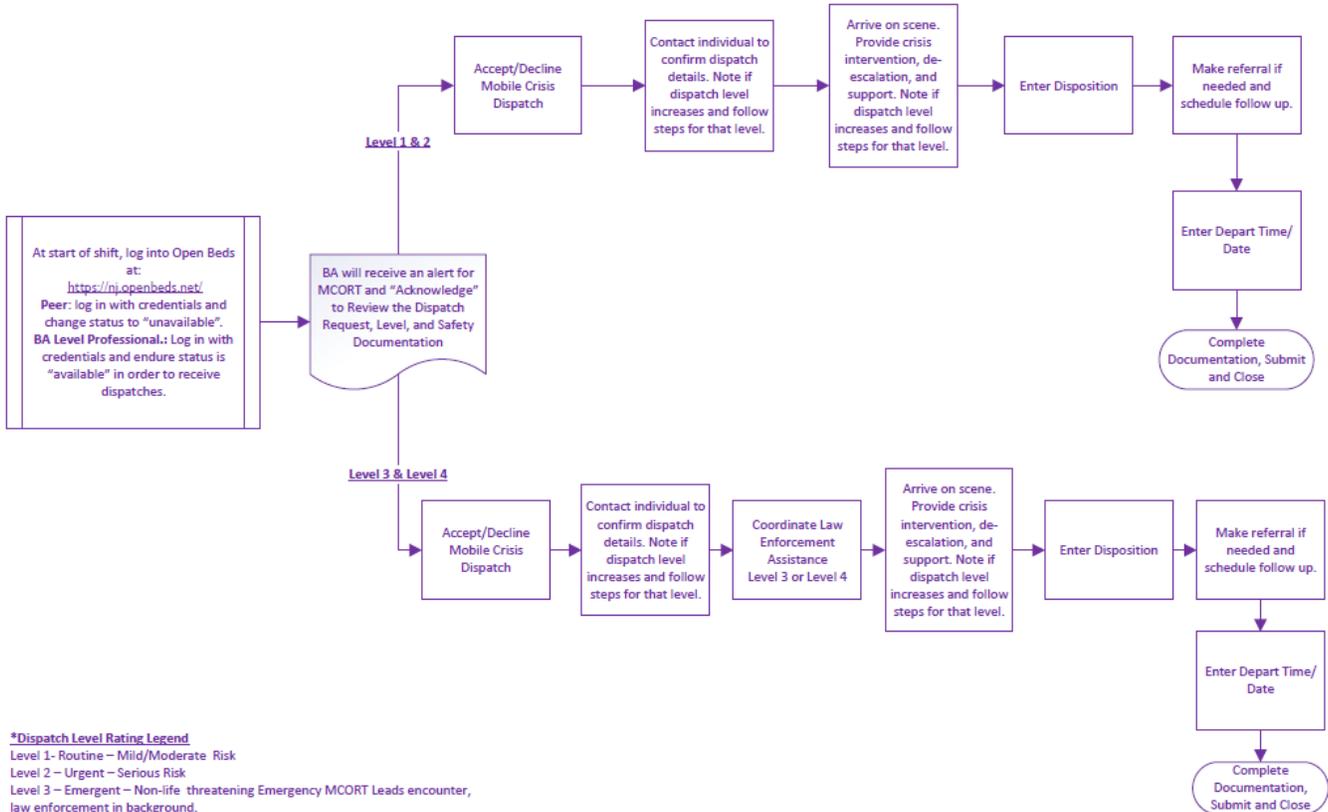
Addendum A: OpenBeds Cross-Functional Workflow



Addendum B: NJ 988 MCORT Dispatch Workflow

carelon DETAILED NJ MCORT (MOBILE CRISIS RESPONSE TEAM)
Version created 2/18/2025

Safety is of utmost importance. The dispatch level sent to MCORT is based on information previously supplied. The level can be changed to include support from law enforcement at any point during the process flow.



Addendum C: Carelon Community Dispatch Safety Assessment



Community Dispatch Safety Checklist (created by M. Fenton 11/22/24)

The following checklist must be addressed 1.) during the 988 Lifeline assessment, 2.) at the request for MCORT dispatch, and 3.) when MCORT is enroute. Response to these questions will be used to support the overall mobile crisis experience. The following language is a guide, however, these points can be adapted to fit the specific circumstance of the individual in crisis, as long as the core intent of the points are covered.

988 Lifeline – gathered during engagement & assessment

Setting

1. Are community providers being dispatched to a non-secure setting (i.e., typical community settings [home, public place] outside of professional control)? [Secure setting](#)
2. Are animals in the home (Must be secured prior to Mobile dispatch)? [No pets](#)
3. Are there any other adults on site?
4. Are there children in the home (can they be safely separated from the intervention)? [no](#)

Weapons

5. Are there any weapons in the home/on the property/concealed carry permit for the person (Must be secured prior to Mobile dispatch)? [no](#)
6. Is an individual in crisis able to access those weapons?

Behavior

7. Is individual in crisis paranoid or behaving bizarrely, having command hallucinations?
8. Does individual have history of aggression / violence/sexual assault (within past 6-18 months)?
9. Has the individual had any aggression in the past 48 hours (if yes, police may need to be included)?

Substance Use

10. Does the individual appear intoxicated, or have they used a substance within the past 24/48 hours that could cause dangerous withdrawal (if yes, speak with staff supervisor before dispatching)?

988 Lifeline or MCORT Questions

11. Are there known medical issues that impact overall functioning (dementia, ambulation issues, hearing impaired, etc.)?

MCORT - Logistics/Access-gathered in phone call enroute

12. Have any other crisis outreach services ever been dispatched to the residence (if yes, when and for what reason)?
13. Are there any specific instructions to follow for the approach (description of home/building, where to park, door to use, name of person to ask for, etc.)?

Addendum D: NJ MCORT Safety Ratings and Dispatch Levels

New Jersey MCORT Safety Ratings			STEP 1
Guidance for Identifying Proper Outcomes			
Safety Rating	Description	Criteria	Possible Interventions
1	Routine – Mild/Moderate Risk	When the identified person in crisis: <ul style="list-style-type: none"> Demonstrates some distress, but the precipitants of the distress and associated stressors can be easily identified and/or Manifests an adequate to good pre-morbid level of functioning with continuing adequate social/family supports and resources and/or Demonstrates mild impairment in judgment, functioning and/or impulse control and/or Has symptoms that may be addressed safely within 10 business days rather than a more urgent timeline 	<ul style="list-style-type: none"> Referral to a scheduled Outpatient Appointment within 10 days of contact Individualized planning, including development of a safety plan Additional referrals as requested or indicated by identified person
2	Urgent – Serious Risk	The identified person in crisis indicates: <ul style="list-style-type: none"> Distress and multiple risk factors are present, but there is no evidence for imminent risk of harm to self or others, and/or Plan and ideation to harm self or others, but no apparent means or intent are present, and protective factors are sufficient to not warrant a higher risk rating and/ or Intoxication or mild withdrawal symptoms and/or An urgent clinical need to be seen rather than one of convenience (such as preferred day or time). 	<ul style="list-style-type: none"> Referral to EISS Appointment If appointment is not practical, Mobile crisis dispatch – level based on safety questionnaire and other clinical criteria Potential referral for detoxification services
3	Emergent – Non-life threatening Emergency	<ul style="list-style-type: none"> Risk of danger to self or others exists as indicated by ideation with plan and means, but no intent or The identified person in crisis is labile or unstable and demonstrates significant impairment in judgment, impulse control and/or functioning, or There exist moderate medical complications concurrent with or as a consequence of psychiatric or substance abuse illness and its treatment, or The identified person in crisis indicates moderate to significant withdrawal symptoms. 	<ul style="list-style-type: none"> Mobile crisis dispatch – level based on safety questionnaire and other clinical criteria Potential referral for detoxification services
4	Emergent – Life-Threatening Emergency	<ul style="list-style-type: none"> Failure to obtain immediate care would place the life of the identified person in crisis, another's life, or property in jeopardy, or cause serious impairment of bodily functions, or The identified person in crisis indicates that failure to obtain immediate care would place the life of the identified person in crisis, another's life, or property in jeopardy, or cause serious impairment of bodily functions. <p>988 LifeLine Center initiates rescue protocol and does not dispatch MCORT as sole responder if identified person in crisis is in imminent danger to self and/or others as evidenced by any of the following:</p> <ul style="list-style-type: none"> Evidence for imminent risk of suicide (more than desire/ideations and capability alone) Evidence for imminent risk of serious harm to others Attempt in progress Threat to staff Possession of weapon 	<ul style="list-style-type: none"> Medical Emergency 911 SI/Hi immediate threat 911 Active Substance Withdrawal- 911 or referral to emergency department

New Jersey MCORT Dispatch Levels			STEP 2
Safety Recommendation from Carelon BH to MCORTs			
Level	Description	Criteria	MCORT
1	Secure location (Hospital, Jail, School, Clinic, etc. OR other scene where Law Enforcement is in control of location and will remain for Mobile intervention)	Location where environment is under professional control and has professionals on scene who may support safety	Clinician may respond alone to scene.
2	Mobile Crisis Team Alone	Most typical community settings (home, public place). No significant safety concerns have been identified, but environment is outside professional control, and therefore an element of caution is advised in responding.	MCORT may respond as a team without law enforcement, using typical safety measures.
3	Mobile Crisis Team Leads with Law Enforcement <i>* Mobile crisis notifies law enforcement of dispatch and coordinates response.</i>	Safety-screening identifies any of the following: <ul style="list-style-type: none"> History of aggression Recent acts of aggression Non-lethal self-injury 	It is recommended that MCORT responds with law enforcement. At this level, MCORT team leads the encounter with law enforcement in the background or following behind but on scene, immediately available to intervene if needed. <i>MCORT team coordinates with law enforcement directly. Carelon BH Mobile Dispatch does not notify law enforcement.</i>
4	Emergency Services/ Law Enforcement Leads <i>* Mobile crisis notifies law enforcement of dispatch and coordinates response.</i>	Situations that would likely benefit from MCORT involvement but are too dangerous to deploy without the environment first being secured by law enforcement. <i>It is also key in these situations to have a response within the shortest time possible.</i>	It is recommended that MCORT responds with law enforcement. At this level, law enforcement leads the encounter, and MCORT defers to law enforcement's lead and direction related to scene safety, engaging when law enforcement advise that it is appropriate for them to do so. <i>MCORT team coordinates with law enforcement directly. Carelon BHH Mobile Dispatch does not notify law enforcement.</i>
<i>*MCORT teams are responsible for making the determination whether law enforcement is involved or not and engaging with them if indicated.*</i>			