


# Mental Health Triage Tool

| Triage category   | Description  | Typical presentation  | General management principles*  |
|---|--|---|---|
| <p><b>1</b></p>  <p><b>Immediate</b></p> | <p><b>Definite danger to life (self or others)</b></p> <p>ATS<sup>†</sup> states:</p> <p>Severe behavioural disorder with immediate threat of dangerous violence</p> | <p><b>Observed</b></p> <ul style="list-style-type: none"> <li>■ Violent behaviour</li> <li>■ Possession of a weapon</li> <li>■ Major self-harm in the ED</li> <li>■ Extreme agitation or restlessness</li> <li>■ Bizarre/disoriented behaviour</li> </ul> <p><b>Reported</b></p> <ul style="list-style-type: none"> <li>■ Verbal commands to do harm to self or others, that the person is unable to resist (command hallucinations)</li> <li>■ Recent violent behaviour</li> </ul> | <p><b>Supervision</b></p> <ul style="list-style-type: none"> <li>■ Continuous visual surveillance‡ 1:1 ratio</li> </ul> <p><b>Action</b></p> <ul style="list-style-type: none"> <li>■ Alert ED medical staff immediately</li> <li>■ Alert mental health triage or equivalent</li> <li>■ Provide a safe environment for patient and others</li> <li>■ Ensure adequate personnel to provide restraint/detention based on local legislation</li> </ul> <p><b>Consider</b></p> <ul style="list-style-type: none"> <li>■ Calling security +/- police if staff or patient safety compromised, may require several staff to contain patient</li> <li>■ 1:1 observation</li> <li>■ Intoxication by drugs and alcohol may cause an escalation in behaviour that requires management</li> </ul> |


*Continued over...*

\* Management principles may differ according to individual health service protocols and facilities

† Australasian Triage Scale

‡ Observation definition: Continuous visual surveillance – person is under direct visual observation at all times

Mental Health Triage Tool (continued)


| Triage category   | Description   | Typical presentation   | General management principles*   |
|---|---|--|--|
| <b>2</b><br><br><b>Emergency</b> | <p><b>Probable risk of danger to self or others, and/or</b></p> <ul style="list-style-type: none"> <li>Client is physically restrained in ED, and/or</li> <li>Severe behavioural disturbance</li> </ul> <p>ATS states:<br/>Violent or aggressive (if):</p> <ul style="list-style-type: none"> <li>Immediate threat to self or others</li> <li>Requires or has required restraint</li> <li>Severe agitation or aggression</li> </ul> | <p><b>Observed</b></p> <ul style="list-style-type: none"> <li>Extreme agitation/restlessness</li> <li>Physically/verbally aggressive</li> <li>Confused/unable to cooperate</li> <li>Hallucinations/delusions/paranoia</li> <li>Requires restraint/containment</li> <li>High risk of absconding and not waiting for treatment</li> <li>Unable to wait safely</li> </ul> <p><b>Reported</b></p> <ul style="list-style-type: none"> <li>Attempt at self-harm/threat of self-harm</li> <li>Threat of harm to others</li> </ul> | <p><b>Supervision</b></p> <ul style="list-style-type: none"> <li>Continuous visual surveillance†</li> </ul> <p><b>Action</b></p> <ul style="list-style-type: none"> <li>Alert ED medical staff immediately</li> <li>Alert mental health triage</li> <li>Provide safe environment for patient and others</li> <li>Use defusing techniques (oral medication, time in quieter area)</li> <li>Ensure adequate personnel to provide restraint/detention based on local legislation</li> <li>Prompt assessment for patient recommended under Section 9 or apprehended under Section 10 of the <i>Mental Health Act 2000</i></li> </ul> <p><b>Consider</b></p> <ul style="list-style-type: none"> <li>If defusing techniques ineffective, re-triage to category 1 (see above)</li> <li>Security in attendance until patient sedated, if necessary</li> <li>Intoxication by drugs and alcohol may cause an escalation in behaviour that requires management</li> </ul> |

Continued over...

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Mental Health Triage Tool (continued)

| Triage category  | Description  | Typical presentation  | General management principles*   |
|--|--|---|--|
| <b>3</b><br><br><b>Urgent</b> | <p><b>Possible danger to self or others</b></p> <ul style="list-style-type: none"> <li>■ Moderate behaviour disturbance</li> <li>■ Severe distress</li> </ul> <p>ATS states:</p> <ul style="list-style-type: none"> <li>■ Very distressed, risk of self-harm</li> <li>■ Acutely psychotic or thought-disordered</li> <li>■ Situational crisis, deliberate self-harm</li> <li>■ Agitated/withdrawn</li> <li>■ Potentially aggressive</li> </ul> | <p><b>Observed</b></p> <ul style="list-style-type: none"> <li>■ Agitation/restlessness</li> <li>■ Intrusive behaviour</li> <li>■ Confusion</li> <li>■ Ambivalence about treatment</li> <li>■ Not likely to wait for treatment</li> <li>■ Hallucinations/delusions/paranoia</li> <li>■ Thought disorder</li> <li>■ Bizarre/agitated behaviour</li> <li>■ Severe symptoms of depression</li> <li>■ Withdrawn/uncommunicative and/or anxiety</li> <li>■ Elevated or irritable mood</li> </ul> <p><b>Reported</b></p> <ul style="list-style-type: none"> <li>■ Suicidal ideation</li> <li>■ Situational crisis</li> </ul> | <p><b>Supervision</b></p> <ul style="list-style-type: none"> <li>■ Close observation<sup>†</sup></li> <li>■ Do not leave patient in waiting room without support person</li> </ul> <p><b>Action</b></p> <ul style="list-style-type: none"> <li>■ Alert mental health triage</li> <li>■ Ensure safe environment for patient and others</li> </ul> <p><b>Consider</b></p> <ul style="list-style-type: none"> <li>■ Re-triage if evidence of increasing behavioural disturbance, i.e.               <ul style="list-style-type: none"> <li>– Restlessness</li> <li>– Intrusiveness</li> <li>– Agitation</li> <li>– Aggressiveness</li> <li>– Increasing distress</li> </ul> </li> <li>■ Inform security that patient is in department</li> <li>■ Intoxication by drugs and alcohol may cause an escalation in behaviour that requires management</li> </ul> |

*Continued over...*

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† Observation definition: Close observation – regular observation at a maximum of 10-minute intervals

Mental Health Triage Tool (continued)

| Triage category   | Description   | Typical presentation  | General management principles*   |
|---|---|---|--|
| <p style="text-align: center;"><b>4</b></p> <div style="background-color: #003366; width: 40px; height: 20px; margin: 0 auto;"></div> <p style="text-align: center;"><b>Semi-urgent</b></p> | <p><b>Moderate distress</b></p> <p>ATS states:</p> <ul style="list-style-type: none"> <li>■ Semi-urgent mental health problem</li> <li>■ Under observation and/or no immediate risk to self or others</li> </ul>  | <p><b>Observed</b></p> <ul style="list-style-type: none"> <li>■ No agitation/restlessness</li> <li>■ Irritable without aggression</li> <li>■ Cooperative</li> <li>■ Gives coherent history</li> </ul> <p><b>Reported</b></p> <ul style="list-style-type: none"> <li>■ Pre-existing mental health disorder</li> <li>■ Symptoms of anxiety or depression without suicidal ideation</li> <li>■ Willing to wait</li> </ul>  | <p><b>Supervision</b></p> <ul style="list-style-type: none"> <li>■ Intermittent observation<sup>†</sup></li> </ul> <p><b>Action</b></p> <ul style="list-style-type: none"> <li>■ Discuss with mental health triage nurse</li> </ul> <p><b>Consider</b></p> <ul style="list-style-type: none"> <li>■ Re-triage if evidence of increasing behavioural disturbance, i.e.                             <ul style="list-style-type: none"> <li>– Restlessness</li> <li>– Intrusiveness</li> <li>– Agitation</li> <li>– Aggressiveness</li> <li>– Increasing distress</li> </ul> </li> <li>■ Intoxication by drugs and alcohol may cause an escalation in behaviour that requires management</li> </ul> |
| <p style="text-align: center;"><b>5</b></p> <div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div> <p style="text-align: center;"><b>Non-urgent</b></p>    | <p>No danger to self or others</p> <ul style="list-style-type: none"> <li>■ No acute distress</li> <li>■ No behavioural disturbance</li> </ul> <p>ATS states:</p> <ul style="list-style-type: none"> <li>■ Known patient with chronic symptoms</li> <li>■ Social crisis, clinically well patient</li> </ul> | <p><b>Observed</b></p> <ul style="list-style-type: none"> <li>■ Cooperative</li> <li>■ Communicative and able to engage in developing management plan</li> <li>■ Able to discuss concerns</li> </ul> <p><b>Reported</b></p> <ul style="list-style-type: none"> <li>■ Known patient with chronic psychotic symptoms</li> <li>■ Pre-existing non-acute mental health disorder</li> <li>■ Known patient with chronic unexplained somatic symptoms</li> <li>■ Request for medication</li> <li>■ Minor adverse effect of medication</li> <li>■ Financial, social, accommodation, or relationship problems</li> </ul> | <p><b>Supervision</b></p> <ul style="list-style-type: none"> <li>■ General observation<sup>‡</sup></li> </ul> <p><b>Action</b></p> <ul style="list-style-type: none"> <li>■ Discuss with mental health triage</li> <li>■ Refer to treating team if case-managed</li> </ul>   |

\* Management principles may differ according to individual health service protocols and facilities

<sup>†</sup> Observation definition: Intermittent observation – regular observation at a maximum of 30-minute intervals

<sup>‡</sup> Observation definition: General observation – routine waiting room check at a maximum of one-hour intervals