# Mental Health Crisis Response Triage Tool

A Collaborative Effort Between





## Mental Health Crisis Response Triage Tool

					O
Code Descriptions	Defined As	Typical Presentations	Mental Health Service Action/Response	Responses and Where To Go	Additional Actions to Consider
A Severe Risk	Imminent Risk of harm:  • Danger to self or others  • Severe behavioral disturbance  • IMMEDIATE REFERRAL and response	<ul> <li>Overdose</li> <li>Possession of a weapon</li> <li>Suicide attempt/serious self-harm in progress</li> <li>Other medical emergency</li> </ul>	Call 911 first, then Crisis Services, 988, or CARES (under 18 yrs. old)	24/7 Response: Ambulance, Crisis Services, CIT Officer or Law Enforcement, CARES (under 18) 24/7 Places: ECMC CPEP or WNY VA (Veterans)	<ul> <li>After calling 911,link to crisis services in your county to ensure additional support is provided as needed</li> <li>Keep caller on line until emergency services arrive or as long as possible</li> </ul>
B High Risk	Urgent mental health response:  • Very high risk of imminent harm to self or others  • Emergency Service Response  • IMMEDIATE REFERRAL to Crisis Team (response within 2-3 hours)	Violent behavior/extreme agitation Weapons readily available Self-destruction Acute suicidal ideations or risk to harm others with clear plan and means and/or history of self-harm or aggression Impaired impulse control intoxicated or under the influence Required restraint	<ul> <li>Triage clinician to notify ambulance and/or police</li> <li>Urgent assessment from mobile outreach program or law enforcement per Mental Hygiene Law Section 9.45/9.41</li> <li>Call crisis hotline/mobile team to consult as incident is occurring</li> <li>If needed mobile outreach team will respond (via phone or face to face), assess situation and conduct a mental health assessment</li> <li>Mobile team member will advise if 911 should be called based on lethality concerns.</li> </ul>	24/7 Response: Ambulance, Crisis Services, CIT Officer or Law Enforcement, CARES (under 18)  24/7 Places: BestResponse Intensive Crisis Center  Not 24/7 Places: ECMC Help Center, Endeavor Health EAST Haven, East Buffalo Rapid Access Center, and MAP Clinic or Renewal Center	Call security or police if staff safety is compromised Provide safe environment for patients Provide or arrange support for consumer and/or caregiver while awaiting face-to-face response from mobile outreach or police
C Moderate Risk	Semi-urgent mental health response:  • Possible danger to self or others  • Moderate behavioral disturbance  • Significant distress, especially in absence of capable supports	Suicidal ideation with no plan and/or history of suicidal ideation Rapidly increasing symptoms of psychosis and/or severe mood disorder High risk behavior associated with perceptual/ thought disturbance, delirium, dementia, or impaired impulse control Unable to care for self or dependents or perform activities of daily living Known consumer requiring intervention to prevent or contain relapse Significant client distress associated with serious mental illness (including mood/anxiety disorder) but not suicidal	If licensed clinician on staff, he/she can assess situation.  Provider devises crisis/safety plan as part of treatment and monitoring client behaviors  If a licensed clinician is not available:  Call crisis hotline to have mobile outreach program assess the situation and determine plan of response (phone/face to face visit, safety planning, monitoring etc.)  Call warm line for peer support	24/7 Response: Crisis Services or CARES (under 18)  Not 24/7 Response: Behavioral Health Teams- Buffalo Police, Cheektowaga Police, Hamburg Police and Niagara Frontier Transportation Authority FTA  24/7/ Places: BestResponse Intensive Crisis Center or ROME-Refreshing Waters  Not 24/7/ Places: Endeavor Health EAST Haven, Renewal Center, ECMC Help Center, Endeavor Health EAST Haven, East Buffalo Rapid Access Center, and MAP Clinic	Refer to existing mental health professional and/or provide after hour peer support Link to clinics with rapid response Obtaining additional information from relevant sources Link to respite services
D Low Risk	Non-urgent mental health response:  • Moderate distress  • No danger to self or others  • No acute distress  • No behavioral disturbances  • Response: continue to monitor	Stable and at low risk of harm in waiting period  No agitation or restlessness Irritable without aggression Cooperative Gives coherent history Symptoms of mild to moderate depression, anxiety, adjustment, behavioral and/or developmental	Develop crisis/safety plan with client.     This plan should include the crisis hotline phone number as a tool for the client to use ifthey need support     Designated mental health provider to monitor lethality at each visit and determine a response plan if the crisis/safety plan is not followed     Provide formal or informal referral to an alternative service provider as needed	Not 24/7 Response: Contact outpatient provider, Family Help Center, Mental Health Advocates, Mental Health Peer Connection, NAMI or ROME  24/7 Places: ROME-Refreshing Waters	<ul> <li>Facilitate appointment with alternative provider</li> <li>Follow-up phone contact as deemed appropriate</li> <li>Referral or advise to contact alternative service provider (e.g., respite and/or peer programs)</li> <li>Call warm line for peer support</li> </ul>

#### **Purpose:**

- Increase efficiency for identifying and connecting individual with the right level of care during their crisis
- · Engage individual with solutions that influence behaviors by providing the information needed to make informed decisions, better understand their mental health status, and know when to seek which level of care. .

Level A: The individual is in need of immediate intervention; police are called to the scene or in route and crisis services assistance has been requested

Level B: The individual is in need of immediate intervention due to significant risk to harm self or others. The individual is verbalizing threatening, suicidal or ho9micidal thoughts and demonstrating furtherance of such thoughts.

**Level C:** The individual is in need of timely intervention due to the inability to cope with current stressors. Risk of harm to self or others is not pressing at the time of contact due to the presence of other reliable supports or due to lack of plan or intent.

Level D: The individual is in need of intervention due to subjective and/or mild level of dysfunction or difficulty in coping with current stressors. The individual would not seem to require hospitalization but may benefit from consideration for additional short-term formal services.

#### **Crisis Hotlines:**

Adults 18+ -

- 988
- 716.834.3131

#### **Youth Under 18**

• 716.882.4357

#### **Addiction Hotline**

• 716.831.7007

#### **Warmlines/Peer Support:**

Warm Line Peer Support

• 1.844.749.3848

Mental Health Advocates

• 1.716.886.1242



**Note:** Response times noted above are guidance and should be left to the responding clinician to appropriately determine need after a clinical assessment is complete. The information provided is not intended to be utilized as a clinical screener, a clinical decision tree, or a diagnostic tool. Rather this tool intends to offer general guidance to be used in conjunction with the clinical supports/tools available to you to assist with connecting individuals in crisis with referrals to the appropriate level of care. You are advised to consult your supervisory or other clinical resources when making any clinical determination.

Provide consultation, advice and/or

brief counseling if required and/or mental health service to collect further information

• Early cognitive changes in older person

### **Disclaimer Statement**

The information provided in this training is not intended to be utilized as a clinical screener, a clinical decision tree, or a diagnostic tool. Rather this training intends to offer general guidance to be used in conjunction with the clinical supports/tools available to you to assist with connecting individuals in crisis with referrals to the appropriate level of care. You are advised to consult your supervisory or other clinical resources when making any clinical determination.