



Topic Exploration Report

Topic explorations are designed to provide a high-level briefing on new topics submitted for consideration by Health Technology Wales. The main objectives of this report are to:

1. Inform discussions on new topics received by HTW.
2. Determine the quantity and type of evidence available on a topic.
3. Assess the topic against HTW selection criteria.

Topic:	Mental Health Triage
Topic exploration report number:	TER062

Aim of Search

HTW researchers searched for evidence on the use of a referral algorithm to determine the urgency of each mental health referral at triage to determine whether this results in more efficient and accurate patient referrals to mental health services.

Summary of Findings

NICE guidelines discuss and make recommendations on access to mental health services but this does not include use of a referral algorithm. The Health Service Executive (Ireland) has a webpage that includes reference to mental health referral criteria for children and adolescents (video), but does not refer to an algorithm.

The Australian department of health has published a mental health triage tool for use by clinicians, with many states/regions in Australia publishing guidelines on the use of the tool.

The UK mental health triage scale is freely available online.

Rapid review suggests there are no systematic reviews or meta-analysis available of the use of a mental health triage tool and there is little published evidence for the use of a referral algorithm in mental health services.

Much of the evidence is from Australia with limited UK specific evidence available.

Smart (1999) reported that the introduction of a mental health triage scale reduced waiting times, transit times, and provided effective and consistent integration of mental health patients into a general emergency department.

Happell (2003) reported that when using the mental health triage scale, triage nurses rated clients experiencing mental health problems as in more urgent need of care than their psychiatric nursing counterparts. This suggests that the introduction of the guidelines alone is insufficient, and that education is required for more effective use of the tool.

Sands (2016) reported that the UK Mental Health Triage Scale shows substantial levels of interrater reliability and may offer the possibility for improved patient outcomes and more efficient use of mental health services.

Conclusions

It is possible that use of a mental health triage algorithm/scale would improve patient outcomes and care experience while making more efficient and effective use of limited mental health services. However, there is currently limited published evidence for the use of a referral algorithm for mental health patients.

Areas of Uncertainty

The referral algorithm/scale is currently being used consistently in Bridgend, but it is unknown whether or not it is being used elsewhere within Wales.

If there were data available for audit, this may provide evidence of effectiveness.

Feasibility of Technology Assessment

Use of the referral algorithm/scale has the potential to make more efficient use of limited NHS resources and more appropriately refer patients in need of mental health services. However, there is lack of rigorous evidence to demonstrate this.

The referral algorithm has been introduced in Bridgend, but it is unclear if it is currently being used elsewhere in Wales and whether using it more widely would have a major impact on NHS Wales.

The topic referrer states that introduction of the algorithm in Bridgend allowed 20% of the most urgent referrals into unscheduled care (crisis team) to be safely reallocated to a more scheduled response (such as urgent outpatient or community mental health team) suggesting a clear benefit of the algorithm. Published evidence is currently limited in this area, but there may be clinical data available for audit in centres currently using the referral algorithm.

HTW's Assessment Group concluded not to progress this topic further. This topic may be revisited in future and its suitability for fuller assessment reconsidered.

Brief literature search results

Resource	Results
HTA organisations	
Healthcare Improvement Scotland:	No results relevant to mental health triage
Health Technology Assessment Group	Child and Adolescent Mental Health Services (CAMHS) referral criteria: https://www2.hse.ie/wellbeing/mental-health/child-and-adolescent-mental-health-services/accessing.html does not refer to an algorithm
Health Information and Quality Authority	No results relevant to mental health triage
UK guidelines and guidance	
SIGN	No results relevant to mental health triage
NICE	No results relevant to mental health triage
Secondary literature and economic evaluations	
EUnetHTA	No results relevant to mental health triage
ECRI	No results relevant to mental health triage
Cochrane library	N=1 (abstract only. Fast mental health triage tool in disaster survivors) https://www.cochranelibrary.com/central/doi/10.1002/central/CN-01022284/full?highlightAbstract=withdrawn%7Chealth%7Cscale%7Ctriage%7Cmental%7Ctriage%7Cscal
Medline	No results relevant to mental health triage
Primary studies	
Medline	<ul style="list-style-type: none"> • Sands N; Elsom S; Colgate R; Haylor H; Prematunga R. Development and interrater reliability of the UK Mental Health Triage Scale. <i>International Journal of Mental Health Nursing</i>. 25(4):330-6, 2016 • Downey LV; Zun LS; Burke T. Comparison of Canadian triage acuity scale to Australian Emergency Mental Health Scale triage system for psychiatric patients. <i>International emergency nursing</i>. 23(2):138-43, 2015 Apr. • Broadbent M; Creaton A; Moxham L; Dwyer T. Review of triage reform: the case for national consensus on a single triage scale for clients with a mental illness in Australian emergency departments. [Review] [26 refs] <i>Journal of Clinical Nursing</i>. 19(5-6):712-5, 2010 Mar. • Broadbent M; Moxham L; Dwyer T. The development and use of mental health triage scales in Australia. [Review] [30 refs] <i>International Journal of Mental Health Nursing</i>. 16(6):413-21, 2007 Dec. • Happell B; Summers M; Pinikahana J. Measuring the effectiveness of the national Mental Health Triage Scale in an emergency department. <i>International Journal of Mental Health Nursing</i>. 12(4):288-92, 2003 • Broadbent M; Jarman H; Berk M. Improving competence in emergency mental health triage. <i>Accident & Emergency Nursing</i>. 10(3):155-62, 2002 Jul. • Kevin J. An examination of telephone triage in a mental health context. <i>Issues in Mental Health Nursing</i>. 23(8):757-69, 2002 Dec. • Smart D; Pollard C; Walpole B. Mental health triage in emergency medicine. <i>Australian & New Zealand Journal of Psychiatry</i>. 33(1):57-66; discussion 67-9, 1999 Feb

Ongoing secondary research	
PROSPERO database	<ul style="list-style-type: none"> A systematic review of clinical effects of psychiatric telephone assessment [CRD42018088455] Review Ongoing
Ongoing primary research	
Clinicaltrials.gov	<ul style="list-style-type: none"> Optimizing Clinical Screening and Management of Maternal Mental Health: Predicting Women at Risk for Perinatal Depression. Actual study completion date May 2019.
Other	
Evidence identified by topic proposer	<ul style="list-style-type: none"> UK Mental Health Triage Scale: https://ukmentalhealthtragescale.org/ Mental Health Triage Tool: http://www.health.gov.au/internet/publications/publishing.nsf/Content/triageqrg~triageqrg-mh

Date of search:	March 2019 (updated January 2020)
Concepts used:	mental health, referral, mental health triage scale, mental health triage, emergency triage, emergency referral