TITLE: Triage and Acuity Scales for Mental Health and Addictions Patients Presenting to the Emergency Department: Clinical Effectiveness and Guidelines

DATE: 20 April 2012

RESEARCH QUESTIONS

1. What is the clinical effectiveness of the Canadian Triage and Acuity Scale (C-TAS) in triaging mental health and addictions patients presenting to the emergency department?

2. What is the clinical effectiveness of triage and acuity scales in triaging mental health and addictions patients presenting to the emergency department?

3. What are the evidence-based guidelines and recommendations for the use of triage and acuity scales for mental health and addictions patients presenting to the emergency department?

KEY MESSAGE

Two clinical studies were identified regarding the clinical effectiveness of triage and acuity scales in triaging mental health and addictions patients presenting to the emergency department. No relevant literature was identified on the clinical effectiveness of the Canadian Triage and Acuity Scale (C-TAS) in triaging mental health and addictions patients presenting to the emergency department, and no evidence-based guidelines and recommendations for the use of triage and acuity scales for mental health and addictions patients presenting to the emergency department were identified.

METHODS

A limited literature search was conducted on key resources including PubMed, The Cochrane Library (2012, Issue 4), University of York Centre for Reviews and Dissemination (CRD) databases, Canadian and abbreviated lists of major international health technology agencies, as well as a focused Internet search. No filters were applied to limit the retrieval by study type. Where possible, retrieval was limited to the human population. The search was also limited to
English language documents published between January 1, 2007 and April 10, 2012. Internet links were provided, where available.

The summary of findings was prepared from the abstracts of the relevant information. Please note that data contained in abstracts may not always be an accurate reflection of the data contained within the full article.

RESULTS

Rapid Response reports are organized so that the higher quality evidence is presented first. Therefore, health technology assessment reports, systematic reviews, and meta-analyses are presented first. These are followed by randomized controlled trials, non-randomized studies, and evidence-based guidelines. No health technology assessment reports, systematic reviews, meta-analyses, randomized controlled trials or evidence-based guidelines were identified on the clinical effectiveness of the Canadian Triage and Acuity Scale (C-TAS) and other triage and acuity scales in triaging mental health and addictions patients presenting to the emergency department. Two non-randomized studies were identified on the above-mentioned topic. Additional references of potential interest are provided in the appendix.

OVERALL SUMMARY OF FINDINGS

Two non-randomized studies\(^1^,\)\(^2\) suggested the following regarding the clinical effectiveness of triage and acuity scales in triaging mental health and addictions patients presenting to the emergency department:

- The Risk Assessment Matrix (a mental health triage tool) was able to identify potential or actual mental health patients presenting to the emergency department who required additional urgent mental health interventions, demonstrating the effectiveness of this tool.\(^1\)

- Mental health patients presenting to the emergency mental health assessment service who were eventually admitted to the hospital, had a significantly higher mean Health of the Nation Outcome Scale score and a significantly lower mean Crisis Triage Rating Scale score than those not admitted. The authors concluded that the Crisis Triage Rating Scale could be used in place of the more lengthy Health of the Nation Outcome Scale.\(^2\)

No relevant literature was identified on the clinical effectiveness of the Canadian Triage and Acuity Scale (C-TAS) in triaging mental health and addictions patients presenting to the emergency department; and no evidence-based guidelines and recommendations for the use of triage and acuity scales for mental health and addictions patients presenting to the emergency department were identified. Therefore, no summary has been provided on these topics.
REFERENCES SUMMARIZED

**Health Technology Assessments**
No literature identified.

**Systematic Reviews and Meta-analyses**
No literature identified.

**Randomized Controlled Trials**
No literature identified.

**Non-Randomized Studies**


**Guidelines and Recommendations**
No literature identified.

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APPENDIX – FURTHER INFORMATION:

Non-Randomized Studies


Guidelines- No methods section included


Review Articles


Additional References
