

Information for making contact with Mental Health Triage

1300 721 927

* Provide detail regarding **name, current address, phone, D.O.B.**
* Be clear about **your observations** of client and/or specific information gathered about the situation from carers.
* Use **mental state assessment** terminology when you can
* Why do you require the assistance of mental health services at this time? (**Why now?)**
* Describe the **safety Issues**:

SLAP…

* + **Specificity.**
	+ **Lethality.**
	+ **Availability.**
	+ **Proximity.**
* What are the person’s **current** **supports**?
	+ i.e. family, friends, services, networks.
* Consider whether **Emergency Services** (Police, Ambulance) are a more appropriate point of contact
* Be prepared to pursue support if the client is assessed as high-risk by your service’s Risk Assessment method and does not have any other source of adequate support to maintain their safety or the safety of others.
* **Document** your conversations and plans