**Sample Emergency Department Behavioral Health Risk Assessment Tool**

[Insert Practice Name]

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| ***Risk*** | ***Yes*** | ***No*** | ***Action Plan*** |
| Triage process is adequate to safely care for  behavioral patients. |  |  |  |
| Staff is trained in how to triage/screen  behavioral patients. |  |  |  |
| Behavioral patients are immediately placed in a safe setting if assessed as being dangerous or “at risk.” |  |  |  |
| Behavioral patients are placed in a gown and their belongings checked to ensure they are safe. |  |  |  |
| There is a “safe” room/area to treat  behavioral patients. |  |  |  |
| Doors or windows near the room/area are assessed or identified for elopement risk. |  |  |  |
| There is a seclusion room for patients that are dangerous. |  |  |  |
| Staff is trained in de-escalating  angry/aggressive patients. |  |  |  |
| Staff is trained in non-violent physical crisis intervention. |  |  |  |
| Sitters are trained in their roles/responsibilities. |  |  |  |
| Elopement-deterring mechanisms are in place. |  |  |  |
| Procedures are in place should patients attempt to or are discovered to have eloped. |  |  |  |
| Detoxification protocols are in place. |  |  |  |
| Restraint-use protocols are in place. |  |  |  |
| Staff is compliant with restraint-use protocols and appropriate documentation. |  |  |  |
| Security personnel make rounds or are stationed in the ED. |  |  |  |
| Behavioral clinicians are available for assessment  as needed. |  |  |  |
| Appropriate observation/monitoring procedures for behavioral patients are in place. |  |  |  |
| Observations are documented in the medical records. |  |  |  |
| There is regular communication between caregivers regarding behavioral patients. |  |  |  |
| There are established community resources to transfer/refer behavioral patients. |  |  |  |