

# THRESHOLD ASSESSMENT GRID (TAG)

## SCORE SHEET

TAG ASSESSES THE SEVERITY OF A PERSON'S MENTAL HEALTH PROBLEMS

For each domain (numbered 1 to 7), tick ONE statement that best applies to the person being assessed. There should be a total of 7 ticks on the completed grid (one for each domain). Then for each level of severity (e.g. 'None', 'Very Severe') add the number of ticks and record in the box at the bottom of the column. 'Very Severe' is only available for domains where life-saving emergency action by specialist mental health teams may be required. The checklists overleaf provide some guidance on the issues to consider when assessing each domain - they are not intended to be prescriptive. Further information on the TAG is available from [researchintorecovery.com/tag](http://researchintorecovery.com/tag)

	NONE	MILD	MODERATE	SEVERE	VERY SEVERE	
<b>SAFETY</b>	<b>Domain 1</b> Intentional self harm	No concerns about risk of deliberate self-harm or suicide attempt <input type="radio"/>	Minor concerns about risk of deliberate self-harm or suicide attempt <input type="radio"/>	Definite indicators of risk of deliberate self-harm or suicide attempt <input type="radio"/>	High risk to physical safety as a result of deliberate self-harm or suicide attempt <input type="radio"/>	Immediate risk to physical safety as a result of deliberate self-harm or suicide attempt <input type="radio"/>
	<b>Domain 2</b> Unintentional self harm	No concerns about unintentional risk to physical safety <input type="radio"/>	Minor concerns about unintentional risk to physical safety <input type="radio"/>	Definite indicators of unintentional risk to physical safety <input type="radio"/>	High risk to physical safety as a result of self-neglect, unsafe behaviour or inability to maintain a safe environment <input type="radio"/>	<input type="radio"/>
<b>RISK</b>	<b>Domain 3</b> Risk from others	No concerns about risk of abuse or exploitation from other individuals or society <input type="radio"/>	Minor concerns about risk of abuse or exploitation from other individuals or society <input type="radio"/>	Definite risk of abuse or exploitation from other individuals or society <input type="radio"/>	Positive evidence of abuse or exploitation from other individuals or society <input type="radio"/>	<input type="radio"/>
	<b>Domain 4</b> Risk to others	No concerns about risk to physical safety or property of others <input type="radio"/>	Antisocial behaviour <input type="radio"/>	Risk to property and/or minor risk to physical safety of others <input type="radio"/>	High risk to physical safety of others as a result of dangerous behaviour <input type="radio"/>	Immediate risk to physical safety of others as a result of dangerous behaviour <input type="radio"/>
<b>NEEDS AND DISABILITIES</b>	<b>Domain 5</b> Survival	No concerns about basic amenities, resources or living skills <input type="radio"/>	Minor concerns about basic amenities, resources or living skills <input type="radio"/>	Marked lack of basic amenities, resources or living skills <input type="radio"/>	Serious lack of basic amenities, resources or living skills <input type="radio"/>	Life-threatening lack of basic amenities, resources or living skills <input type="radio"/>
	<b>Domain 6</b> Psychological	No disabling or distressing problems with thinking, feeling or behaviour <input type="radio"/>	Minor disabling or distressing problems with thinking, feeling or behaviour <input type="radio"/>	Disabling or distressing problems with thinking, feeling or behaviour <input type="radio"/>	Very disabling or distressing problems with thinking, feeling or behaviour <input type="radio"/>	<input type="radio"/>
	<b>Domain 7</b> Social	No disabling problems with activities or in relationships with other people <input type="radio"/>	Minor disabling problems with activities or in relationships with other people <input type="radio"/>	Disabling problems with activities or in relationships with other people <input type="radio"/>	Very disabling problems with activities or in relationships with other people <input type="radio"/>	<input type="radio"/>

No. of ticks

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TAG score

0 points for each None rating: <b>0</b>	1 point for each Mild rating:	2 points for each Moderate:	3 points for each Severe:	4 points for each V. Severe:	
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TAG score

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C H E C K L I S T S F O R G U I D A N C E

Also consider any other aspects which are relevant. The tick-boxes are provided for optional use to identify concerns, but the TAG rating is made on the score sheet.

## 1. Intentional Self-Harm

### *Individual factors:*

- expressing suicidal intent
- clear plan
- available means
- preparations
- hopelessness
- no confidant, e.g. partner, friends, professionals
- poor coping resources
- lack of blocks to self-harm

### *Consider risk factors:*

- past history of deliberate self-harm
- (i) alcohol/drug abuse *OR* (ii) diagnosis (e.g. depression, schizophrenia, personality disorder)
- (i) AND (ii) = increased risk
- physical illness/disability
- recent GP contact
- recent psychiatric hospitalisation
- recent loss
- no friends/family
- living alone
- unskilled worker
- unemployment
- older people
- male (especially young males)

## 2. Unintentional Self-Harm

### *Consider self-neglect:*

- lack of self-care
- not eating or drinking appropriately

### *Consider unsafe behaviour:*

- not seeking help for problems posing risk
- refusing appropriate help e.g. not taking medication
- not claiming benefits
- lack of awareness of own safety in home e.g. fire risk
- risky sexual behaviour
- substance misuse
- wandering

### *Consider the inability to maintain a safe environment:*

- unable to manage accommodation
- not paying rent
- running up debts

## 3. Risk From Others

### *Consider different types of abuse or exploitation:*

- physical
- sexual
- emotional
- racial
- financial
- neglect

### *Consider risk from:*

- staff
- relatives
- friends
- neighbours
- strangers
- treatments

### *Consider risk of abuse by carer:*

- severe stress
- mental illness/alcohol /drug abuse in carer
- carer refusing help
- history of abuse by or to carer

### *Consider risk from society:*

- history of abusive/exploitative relationships
- harassment from public
- use of home by unwanted others
- inadequate home security
- fear of retaliation for reporting abuse

## 4. Risk To Others

### *Consider risk to:*

- children & other dependents
- partners
- carers
- staff
- neighbours
- strangers

### *Consider risk factors:*

- current threats, especially to a named person
- history of violence to people/property
- carer's concern
- access to weapons
- no blocks to violence e.g. fear of consequences
- history of arson
- unemployment
- drug/alcohol abuse
- stress
- voices telling person to harm someone
- paranoia
- risky sexual behaviour
- anti-social behaviour e.g. unsafe driving
- lack of information about person's history
- no trusting relationship with professionals

## 5. Survival

### *Consider whether the person has problems with:*

- a home
- heating for the home
- essential amenities (e.g. washing facilities, toilet, cooker, bed)
- the ability to look after their home
- the ability to keep adequately clean and tidy
- enough food & fluids
- clothing
- enough money to live on
- mobility
- the ability to use public transport
- the ability to cope with physical health problems

## 6. Psychological

### *Consider:*

- overactive, aggressive, disruptive or agitated behaviour
- problems with hallucinations & delusions
- cognitive problems with memory, orientation & understanding
- mood problems e.g. depressed, manic, anxious
- problems with reading or writing
- a lack of coping strategies
- attitude to problems
- help seeking behaviour
- spiritual problems
- feelings of alienation

## 7. Social

### *Consider problems in relationships with others:*

- lack of ability to make or maintain friendships
- lack of supportive relationships
- lack of intimate relationship
- sexual problems
- communication problems
- unable to handle daily hassles

### *Consider problems in activities:*

- leisure
- unpaid work
- paid work
- education
- travel
- lack of personally meaningful life

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## FURTHER GUIDANCE

### PURPOSE OF TAG

TAG is a brief assessment of the severity of an individual's mental health problems. Instructions for completing it are contained on the score sheet, and this page provides further guidance. TAG is very easy to complete, requiring seven ticks on the Score Sheet. It is rated by staff for people who have (or are believed to have) mental health problems. Information on diagnosis should be recorded separately, if required.

*TAG can be used in different ways, including:*

- by GPs and other agencies (e.g. social services) who think someone has mental health problems and want to refer to a specialist mental health team - by appending a TAG to their referral letter, specialist mental health services will be helped to prioritise those most in need of help.
- to give a means of agreeing between agencies at what point in the care system people should receive help - this might be done by locally agreeing thresholds for referral.
- as a routine outcome measure for patients on the caseload of a mental health team
- to give commissioners a means of specifying the way in which community mental health teams are to focus on the severely mentally ill

### COMPLETING TAG

TAG has seven domains covering the areas of **Safety** (two domains), **Risk** (two domains), and **Needs and Disabilities** (three domains). In each domain on the Score Sheet, you should tick one box, to indicate the rating of severity for that domain (ranging from 'None' to 'Very Severe'). A checklist is provided for each domain, to indicate some of the important aspects to consider. The checklists are based on evidence and current practice, but must be used in conjunction with clinical judgement. If an aspect which is relevant to the person is not on the checklist, it should still inform the ratings made.

The rating chosen should be the one that best applies to the person being assessed. The time frame is not specified, since problems (e.g. violence) may only occasionally occur, but still be ongoing causes of concern. As a general guide, however, consider problems in the last month, but also include current concerns which originate from before this period.

*Example - Domain 1. Intentional Self-Harm*

Looking across the row, if '*High risk to physical safety as a result of deliberate self-harm or suicide attempt*' is the statement that best applies to the person, then tick this box. This rating is classified as 'Severe' (shown at the top of the grid).

When all seven domains have been ticked (once in each domain), the assessment is complete. If desired, the number of ticks for each column can be recorded in the first row at the bottom. (The total should then add up to seven). *Example: if there are three ticks in the 'Severe' column, write '3' in the box at the bottom of the 'Severe' column.* Also, if desired, the TAG score can be calculated, by recording the total weighted score for each domain (e.g. 2 points for each Moderate rating) in the second row at the bottom, and then adding those scores together. The maximum TAG score is 24.

### HOW TO USE A TAG ASSESSMENT

The two rows at the bottom of the Score Sheet indicate the severity of mental health problems. 445 TAG referrals to mental health services across London were analysed to provide *guidance* on referral thresholds. If the goal is to ensure that all referrals are suitable, then a threshold of at least 1 severe or very severe domain will ensure that 95% of referrals are suitable, but 74% of referrals not meeting this criterion will in fact be suitable - a high false negative rate. If the concern is to ensure that all suitable referrals are offered assessment, then using a threshold TAG score of 3 or more will ensure that 91% of suitable referrals are identified. However, 80% of unsuitable referrals will also meet this criterion - a high false positive rate. The best cut-off is found using either a TAG score of 5 or more, or at least 2 moderate domains.

*Example: A team may agree with its referrers that a TAG will be completed for all referrals, and that the team will assess anyone referred with a Very Severe rating within 24 hours, with 2 or more Severe ratings within 72 hours, and anyone else with at least 2 Moderate rating within 2 weeks. For patients with less than 2 Moderate ratings, the referral letter will state why the patient's mental health problems are of a severity to warrant specialist mental health service.*