



## RAPID ACCESS ASSESSMENT (RAA) — FRONT OFFICE SCRIPT + INTAKE FORM

Date: //\_\_\_\_ Time: \_\_\_\_\_ Staff: \_\_\_\_\_

Caller is:  Patient  Parent/Guardian  Spouse/Partner  Other: \_\_\_\_\_

Patient Name: \_\_\_\_\_ DOB: //\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Patient Location Today (City/State): \_\_\_\_\_

### 1) OPENING (READ VERBATIM)

“Thank you for calling **Atlanta Specialized Care**, this is \_\_\_\_\_. I’m glad you called.  
I’m going to ask a few quick questions so we can get you the **fastest and safest next step.**”

**Brief reason for calling today:**

### 2) RAPID ACCESS EXPLANATION (READ VERBATIM)

“Rapid Access is for people in **crisis** who need urgent support and a clear plan.  
It’s a **one-time urgent clinical assessment**. We aim to schedule within **1 business day**.  
We offer **in-person or telehealth.**”

**Crisis/Urgency (check all that apply):**

- Symptoms escalating quickly
- Can’t function at school/work/home
- Panic/high anxiety or feeling out of control
- Severe depression/hopelessness
- Recent trauma, loss, or major life event
- Substance use relapse/risky use concerns
- Recent ER/urgent care visit or considering ER
- Family crisis / conflict / separation / custody stress
- Other: \_\_\_\_\_



### 3) SAFETY SCREEN (REQUIRED — READ VERBATIM)

“I need to ask a safety question: **Are you or the patient in immediate danger right now, or having thoughts of suicide or harming someone else — with intent or a plan — right now?**”

Answer:  Yes  No  Unsure

#### IF YES or UNSURE → STOP & DO THIS:

“Thank you for telling me. Because this may be an emergency, Rapid Access is **not** the safest next step. Please call **911**, go to the nearest ER, or call/text **988** right now.”

Actions:  Advised 911/ER  Provided 988  Notified supervisor/clinical lead

Notes: \_\_\_\_\_

#### IF NO → CONTINUE:

“Thank you. Rapid Access sounds appropriate and we’ll get you scheduled quickly.”

### 5) FORMS + CLOSING (READ VERBATIM)

“We’ll send forms right away to schedule our triage call. Please complete them as soon as possible so the clinician can contact you.

If anything becomes urgent or unsafe before the appointment, call **911** or **988**.”

Forms sent by:  Portal Time sent: \_\_\_\_\_

### 6) SCHEDULE 10 Minute Triage Call according to clinical professional’s availability as soon as documentation is received and as possible.

Forms received by:  Portal Time received \_\_\_\_\_

“The first step is a 10-minute triage call so we can schedule the right level of care safely and quickly.”

Who will complete the triage call?

Patient  Parent/Guardian  Other: \_\_\_\_\_

Best phone number for triage call: \_\_\_\_\_

Best email: \_\_\_\_\_

Triage Call Scheduled:  YES  NO

Triage Call Completed:  YES  NO

Date/Time: \_\_\_\_\_ Clinician: \_\_\_\_\_



## 7) SCHEDULE RAA

**Preferred RAA:**  RAMA  RACA

**Preferred format:**  Telehealth\*  In-person  Either

**Preferred time:**  Morning  Afternoon  First available

**Appointment Scheduled:**  Yes  No

**Appointment Scheduled:**

**Date/Time:** \_\_\_\_\_ **Clinician:** \_\_\_\_\_

\* **Telehealth is not the preferred modality for Rapid Access Assessments (RAA).** Telehealth RAA sessions are only offered after all other options have been exhausted and must be pre-approved by the clinical professional accepting the referral. In some cases, telehealth RAA visits may require a mental health advocate to be present with the individual completing the assessment.

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## 8) FORMS + CLOSING (READ VERBATIM)

“We’ll send all additional forms right away. Please complete them as soon as possible so the clinician can use your time well.

If anything becomes urgent or unsafe before the appointment, call **911** or **988.**”

**Forms sent by:**  Email  Text Link  Portal **Time sent:** \_\_\_\_\_

**Key details for clinician:**

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