

## Mental Health Screening and Referral Protocol

### I. Purpose:

To provide clinical guidelines for mental health screening and referrals utilized in the inpatient and clinic settings as the standard of care.

### II. Process:

Mental health screenings will be provided to all trauma patients deemed high-risk for depression or PTSD, whose Glasgow Coma Scale (GCS) is  $\geq 14$  and a Rancho score (if available) of seven or greater. Screens will be offered in the patient's native language, or a hospital-approved interpreter will be utilized. All survey screen fields must be complete to allow for scoring.

### MENTAL HEALTH SCREENING FOR INPATIENT USE:

#### **Injured Trauma Survivor Screen (ITSS) (Appendix A):**

The ITSS is a 9-question, self-reporting survey that simultaneously assesses the risk of developing depression and PTSD. This tool is to be used for inpatient use only. Patients should be educated regarding the purpose of the survey.

#### **A. High-Risk Population:**

1. History of drug or alcohol abuse
2. Victim of violent crime
3. Death involved incident
4. Suicide attempt
5. New spinal cord injury or amputee
6. Provider discretion

#### **B. Procedure:**

Patient must have a GCS of  $\geq 14$  to conduct the ITSS screening tool. High risk patients will be identified daily by the PI Team, Charge Nurse and or bedside nurse. They will notify the APP on for the day, and they will enter an order for a social work consult. The Trauma Social Workers who will then complete the ITSS tool in Epic.

#### **C. Scoring the ITSS:**

Scores will be automatically calculated in Epic. Scores  $\geq 2$  for questions 1,2,3,5, and 6 will be considered positive risk for PTSD. Scores  $\geq 2$  for questions 3,4,7,8, and 9 will be considered positive risk for depression. Best Practice Alerts (BPAs) will alert providers of all positive screens.

#### **D. Clinical Guidelines for positive ITSS screens:**

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Patients will be notified of all positive screen(s) when screening is completed. The social work team will provide mental health education and or referral. The importance of follow-up should be encouraged for any positive screen(s) or if the patient reports feeling symptomatic.

It will be at the discretion of the social work team if an additional consult to the Psychiatric Team is warranted.

Mental health education and referrals will be provided if the patient screens positive. The Behavioral Health Safety Net of Tennessee and the Crisis Prevention number will be provided for those with positive scores. All efforts will be made to connect the patient to local mental health clinics for a continuum of care.

#### **E. Documentation:**

The clinician/SW will document their findings along with resources provided in their clinical note.

### **MENTAL HEALTH SCREENING FOR OUTPATIENT USE:**

#### **I. Purpose:**

To provide clinical guidelines for electronic surveys PCL-5 and PHQ-9 to be utilized in the ambulatory clinic setting as the standard of care.

#### **II. Process:**

Patient-driven surveys will be offered to all trauma patients whose Glasgow Coma Scale (GCS) is 15. Screens will be offered in the patient's native language, or a hospital-approved interpreter will be utilized. Surveys will be taken with an approved electronic device. If patients are unable to utilize the electronic device or one is not available, an approved printable version will be completed by the patient and scanned to the patient's medical record. All survey screen fields must be complete to allow for scoring.

#### **III. Definitions, Scope & Responsibility**

##### **PCL-5, DSM-5 criteria (Appendix B):**

The PCL-5 is a 20 question, self-reporting survey that assesses the five symptoms of PTSD. Interpretation can only be made by a clinician. Patients will be given the opportunity to take the survey at any trauma follow-up appointment. According to the National Center for PTSD, the PCL-5 is used to:

1. Monitor symptom change during/after treatment.
2. Screen for PTSD
3. Make a provisional diagnosis.

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**A. Scoring the PCL-5:**

The PCL-5 will be automatically calculated, and scores will be made available to the clinician in the medical record. All scores will be recorded in the patient's electronic medical record. Scores  $\geq 33$  will be considered positive. Best Practice Alerts (BPAs) will alert providers of all positive screens (scores  $>32$ ).

**B. Clinical Guidelines for positive PCL-5 screens:**

Patients will be notified of all positive screen(s) when screening is completed. The provider will recommend further treatment. Printed education will be provided via the discharge AVS and web-based resources. The Behavioral Health Safety Net of Tennessee and the Crisis Prevention number will be provided for those with positive scores. All efforts will be made to connect the patient to local mental health clinics for a continuum of care.

The patient will be offered evidence-based interventions including but not limited to mental health education, medication management, behavioral health therapy referral, and neuropsychology referrals.

Clinical staff will add PTSD discharge education to the AVS and encourage mental health follow-up as applicable.

When a social worker is not available in the outpatient setting, a nurse or provider will offer a list of mental health therapy providers and locations.

**Patient Health Questionnaire (PHQ-9) (Appendix C):**

The PHQ-9 is a nine-question, self-reporting survey that screens for depression. The severity of depression allows for monitoring depression. Patients will be given the opportunity to take the survey at any trauma follow-up appointment. Interpretation can only be made by a clinician.

**A. Scoring the PHQ-9:**

A total symptom severity score is obtained by adding the sum of each question. The clinician will use the total score to associate the severity of depression and determine the treatment course. For all clinical purposes, scores  $>3$  that correlate with signs and reported symptoms of depression would be considered positive, and a mental health referral will be offered by the provider.

**B. Total Score Depression Severity**

- 1-4 Minimal depression
- 5-9 Mild depression
- 10-14 Moderate depression
- 15-19 Moderately severe depression
- 20-27 Severe depression

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**C. Clinical Guidelines for positive PHQ-9 screens:**

Patients will be notified of all positive screen(s) when screening is completed. The provider will recommend further treatment. Printed education will be provided via the discharge AVS and web-based resources. The Behavioral Health Safety Net of Tennessee and the Crisis Prevention number will be provided. All efforts will be made to connect the patient to local mental health clinics for a continuum of care.

For patients who score  $\geq 20$ , the provider will place a mental health referral. For any patient with a positive response to PHQ-9 question nine, "Thoughts that you would be better off dead or of hurting yourself," staff will administer the Columbia Suicide Severity Rating Scale and scan results to patient's chart. Risks will be stratified per hospital policy number CL 30-08.25 found in Policy Tech.

**D. For the actively suicidal ambulatory clinic patient:**

1:1 supervision will be provided per hospital protocol, and the patient will be transported to VPH or VUMC ED by VUMC staff for further evaluation and treatment. For emergency involuntary admissions, please follow hospital policy number CL 30-08.25 found in Policy Tech. A Certificate of Need (6404) will be completed, and the patient will be transported by VUMC staff and VUPD to VPH.

**E. Patient/Family Education:**

The patient will be instructed on using the electronic device and educated on the purpose of each survey. Mental health education and referrals will be provided if the patient screens positive. The importance of follow-up should be encouraged for any positive screen(s) or if the patient reports feeling symptomatic.

**F. Documentation:**

Self-guided patient surveys will be electronically uploaded to the medical record. The clinician will document their findings along with the survey scores in their clinical note.

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**Endorsement:**

Division of Acute Care Surgery

September 2023

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APPENDIX A

**Injured Trauma Survivor Screen (ITSS)**

1 = Yes 0 = No

<b>Before this injury</b>	PTSD	DEP
1. Have you ever taken medication for, or been given a mental health diagnosis?		1 0
2. Has there ever been a time in your life you have been bothered by feeling down or hopeless or lost all interest in things you usually enjoyed for more than 2 weeks?		1 0
<b>When you were injured or right afterward</b>		
3. Did you think you were going to die?	1 0	1 0
4. Do you think this was done to you intentionally?	1 0	
<b>Since your injury</b>		
5. Have you felt emotionally detached from your loved ones?		1 0
6. Do you find yourself crying and are unsure why?		1 0
7. Have you felt more restless, tense or jumpy than usual?	1 0	
8. Have you found yourself unable to stop worrying?	1 0	
9. Do you find yourself thinking that the world is unsafe and that people are not to be trusted?	1 0	
≥ 2 is positive for PTSD risk ≥ 2 is positive for Depression risk	SUM =	

## APPENDIX B

### PCL-5

**Instructions:** Below is a list of problems that people sometimes have in response to a very stressful experience. Please read each problem carefully and then circle one of the numbers to the right to indicate how much you have been bothered by that problem in the past month.

In the past month, how much were you bothered by:	Not at all	A little bit	Moderately	Quite a bit	Extremely
1. Repeated, disturbing, and unwanted memories of the stressful experience?	0	1	2	3	4
2. Repeated, disturbing dreams of the stressful experience?	0	1	2	3	4
3. Suddenly feeling or acting as if the stressful experience were actually happening again (as if you were actually back there reliving it)?	0	1	2	3	4
4. Feeling very upset when something reminded you of the stressful experience?	0	1	2	3	4
5. Having strong physical reactions when something reminded you of the stressful experience (for example, heart pounding, trouble breathing, sweating)?	0	1	2	3	4
6. Avoiding memories, thoughts, or feelings related to the stressful experience?	0	1	2	3	4
7. Avoiding external reminders of the stressful experience (for example, people, places, conversations, activities, objects, or situations)?	0	1	2	3	4
8. Trouble remembering important parts of the stressful experience?	0	1	2	3	4
9. Having strong negative beliefs about yourself, other people, or the world (for example, having thoughts such as: I am bad, there is something seriously wrong with me, no one can be trusted, the world is completely dangerous)?	0	1	2	3	4
10. Blaming yourself or someone else for the stressful experience or what happened after it?	0	1	2	3	4
11. Having strong negative feelings such as fear, horror, anger, guilt, or shame?	0	1	2	3	4
12. Loss of interest in activities that you used to enjoy?	0	1	2	3	4
13. Feeling distant or cut off from other people?	0	1	2	3	4
14. Trouble experiencing positive feelings (for example, being unable to feel happiness or have loving feelings for people close to you)?	0	1	2	3	4
15. Irritable behavior, angry outbursts, or acting aggressively?	0	1	2	3	4
16. Taking too many risks or doing things that could cause you harm?	0	1	2	3	4
17. Being "superalert" or watchful or on guard?	0	1	2	3	4
18. Feeling jumpy or easily startled?	0	1	2	3	4
19. Having difficulty concentrating?	0	1	2	3	4
20. Trouble falling or staying asleep?	0	1	2	3	4



## APPENDIX C

### The Patient Health Questionnaire (PHQ-9)

Patient Name \_\_\_\_\_ Date of Visit \_\_\_\_\_

Over the past 2 weeks, how often have you been bothered by any of the following problems?	Not At all	Several Days	More Than Half the Days	Nearly Every Day
1. Little interest or pleasure in doing things	0	1	2	3
2. Feeling down, depressed or hopeless	0	1	2	3
3. Trouble falling asleep, staying asleep, or sleeping too much	0	1	2	3
4. Feeling tired or having little energy	0	1	2	3
5. Poor appetite or overeating	0	1	2	3
6. Feeling bad about yourself - or that you're a failure or have let yourself or your family down	0	1	2	3
7. Trouble concentrating on things, such as reading the newspaper or watching television	0	1	2	3
8. Moving or speaking so slowly that other people could have noticed. Or, the opposite - being so fidgety or restless that you have been moving around a lot more than usual	0	1	2	3
9. Thoughts that you would be better off dead or of hurting yourself in some way	0	1	2	3

**Column Totals**    \_\_\_\_\_ + \_\_\_\_\_ + \_\_\_\_\_

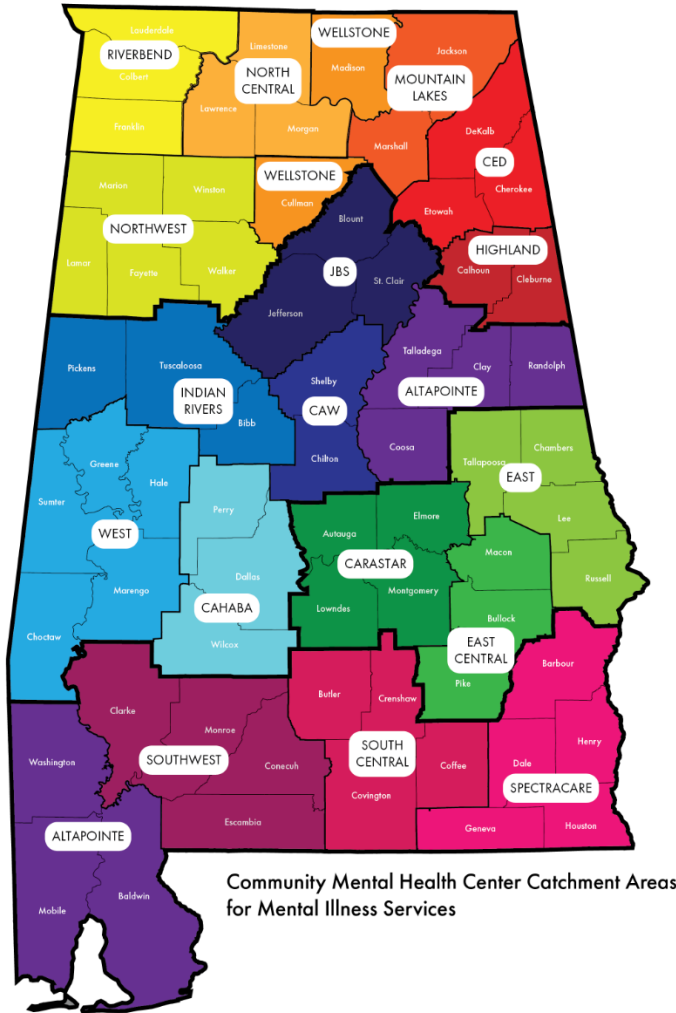
**Add Totals Together**    \_\_\_\_\_

10. If you checked off any problems, how difficult have those problems made it for you to

Do your work, take care of things at home, or get along with other people?

Not difficult at all     Somewhat difficult     Very difficult     Extremely difficult

## Appendix C (Alabama Mental Health Resources)



- AltaPointe** (251) 450-2211 | (888) 335-3044
- CAHABA** (334) 875-2100 | (800) 291-1920
- Carastar** (334) 279-7830
- Central AL Wellness (CAW)** (205) 651-0077
- CED** (256) 492-7800 | (256) 927-3601 | (256) 845-4571
- East** (334) 566-6022
- East Central** (334) 566-6022
- Highland** (256) 236-8003
- Indian Rivers** (205) 391-3131
- JBS Mental Health Authority** (205) 595-4555
- Mountain Lakes** (256) 582-3203 | (256) 259-1774 | (256) 582-4465
- North Central** (256) 355-5904 | (800) 365-6008
- North West** (205) 695-9183 | (205) 302-9000
- RiverBend** (256) 764-3431
- South Central** (334) 222-2523 | (877) 530-0002
- Southwest** (251) 575-4837 | (800) 239-4673
- SpectraCare** (334) 774-3052 | (800) 951-4357
- WellStone** (256) 705-6444, 256-255-1020
- West** (800) 239-2901

## Appendix D (Kentucky Mental Health Resources)

### Kentucky Behavioral Health Helplines

#### Kentucky Medicaid MCO Behavioral Health Hotlines

Aetna Better Health of Kentucky	888-604-6106
Anthem Medicaid	855-661-2025
Humana CareSource/Beacon	877-380-9729
Passport Health Plan	844-231-7946
WellCare of Kentucky	855-661-6973

#### The ADANTA Group: Somerset Area

Counties Served: Adair, Casey, Clinton, Cumberland, Green, McCreery, Pulaski, Russell, Taylor, Wayne

<http://www.adanta.org/>

800-633-5599

#### Seven Counties Services: Louisville Area

Counties Served: Bullitt, Henry, Jefferson, Oldham, Shelby, Spencer, Trimble

<https://sevencounties.org/>

502-589-4313 or 800-221-0446 Adult Crisis Services  
502 589-8070 or 800-432-4510 Children's Crisis Services  
502 589-1100 or 800-264-8799 First Appointment

#### Communicare: Elizabethtown Area

Counties Served: Breckenridge, Grayson, Hardin, Larue, Marion, Meade, Nelson, Washington

<http://www.communicare.org/>

270-765-2605 or 800-641-4673

#### Comprehend, Inc.: Maysville Area

Counties Served: Bracken, Fleming, Lewis, Mason, Robertson

<http://www.comprehendinc.org/>

877-852-1523

#### Cumberland River Behavioral Health: Corbin Area

Counties Served: Bell, Clay, Harlan, Jackson, Knox, Laurel, Rockcastle, Whitley

<http://www.crbhky.org/>

888-435-7761

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## Appendix D continued (Kentucky Mental Health Resources)

### **Four Rivers Behavioral Health: Paducah Area**

*Counties Served: Ballard, Calloway, Carlisle, Fulton, Graves, Hickman, Livingston, McCracken, Marshall*

<http://4rbh.org/>

800-273-8255

### **Kentucky River Community Care: Hazard Area**

*Counties Served: Breathitt, Knott, Lee, Leslie, Letcher, Owsley, Perry, Wolfe*

<http://krccnet.com/>

800-262-7491

### **LifeSkills: Bowling Green Area**

*Counties Served: Allen, Barren, Butler, Edmonson, Hart, Logan, Metcalfe, Monroe, Simpson, Warren*

<http://www.lifeskills.com/>

270-843-4357 or 800-223-8913

### **Mountain Community Care Center: Prestonsburg Area**

*Counties Served: Floyd, Johnson, Magoffin, Martin, Pike*

<http://www.mtcomp.org/>

800-422-1060

### **New Vista: Lexington Area**

*Counties Served: Anderson, Bourbon, Boyle, Clark, Estill, Fayette, Franklin, Garrard, Harrison, Jessamine, Lincoln, Madison, Mercer, Nicholas, Powell, Scott, Woodford*

<https://www.newvista.org/>

800-928-8000

### **NorthKey Community Care: Northern Kentucky**

*Counties Served: Boone, Campbell, Carroll, Gallatin, Grant, Kenton, Owen, Pendleton*

<http://www.northkey.org/>

859-331-3292 or 877-331-3292

### **Pathways, Inc: Ashland Area**

*Counties Served: Boyd, Carter, Elliott, Greenup, Lawrence, Bath, Menifee, Montgomery, Morgan, Rowan*

<http://www.pathways-ky.org/>

606-324-1141 or 800-562-8909

Revised 9/3/20

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**Appendix D continued (Kentucky Mental Health Resources)**

**Pennyroyal Center: Hopkinsville Area**

*Counties Served: Caldwell, Christian, Crittenden, Hopkins, Lyon, Muhlenberg, Todd, Trigg*

<http://pennyroyalcenter.org/>

270-881-9551 or 877-473-7766

**RiverValley Behavioral Health: Owensboro Area**

*Counties Served: Daviess, Hancock, Henderson, McLean, Ohio, Union, Webster*

<http://www.rvbh.com/>

270-684-9466 or 800-433-7291

Revised 9/3/20

Appendix E (Tennessee Mental Health Resources)

# BEHAVIORAL HEALTH SAFETY NET



**35,460 PEOPLE SERVED IN FY2022**

The Behavioral Health Safety Net for Adults provides essential mental health services to people who lack behavioral health coverage.

## TOP SERVICES

- Assessment and Evaluation
- Case Management
- Psychiatric Medication Management
- Psychosocial Rehabilitation Services
- Therapeutic Interventions

## CURRENT ELIGIBILITY REQUIREMENTS

- Primary Qualifying Mental Health Diagnosis
- No other behavioral health coverage
- Income at or below 138% FPL
- 18 Years of age or older
- Tennessee Resident

## IMPORTANT FACTS

- Over 130 Locations Statewide
- Outpatient Services Only
- Behavioral health medication provided through CoverRx
- Is not insurance or part of TennCare

## PROVIDER NETWORK

### WEST

Alliance Healthcare Services  
901-369-1400

Carey Counseling  
800-611-7757

Case Management, Inc.  
901-821-5600

Cherokee Health Systems  
866-231-4477

Pathways Behavioral Health  
731-541-8200

Professional Care Services  
877-727-2778

Quinco Community MHC  
800-532-6339

TN Voices  
800-670-9882

### MIDDLE

Centerstone of TN  
877-467-3123

Mental Health Cooperative  
615-726-3340

TN Voices  
800-670-9882

Volunteer Behavioral Health  
877-567-6051

### EAST

Centerstone of TN  
877-467-3123

Cherokee Health  
866-231-4477

Frontier Health  
855-336-9327

McNabb Center  
865-637-9711  
423-266-6751

Mental Health Cooperative  
423-697-5950

Peninsula  
865-970-9800

Ridgeview  
800-834-4178

TN Voices  
800-670-9882

Volunteer Behavioral Health  
877-567-6051

Link for more information: [tn.gov/behavioral-health/bhsn](https://tn.gov/behavioral-health/bhsn)

# BEHAVIORAL HEALTH SAFETY NET FOR CHILDREN



**NEW SERVICE FOR FY2021**

Behavioral Health Safety Net for Children provides essential outpatient mental health services to uninsured and underinsured Tennessee children ages 3-17 and helps connect clients to long-term coverage.

## AVAILABLE SERVICES

- Assessment and Evaluation
- Individual, Group, and Family Therapy
- Case Management
- Family Support Services
- Medication Management
- Pharmacy Assistance and coordination
- Transportation

## ELIGIBILITY REQUIREMENTS

- Primary Qualifying Mental Health Diagnosis
- Age 3 to 17 years
- Tennessee Resident
- Not in a long-term inpatient or residential facility or in state custody

## IMPORTANT FACTS

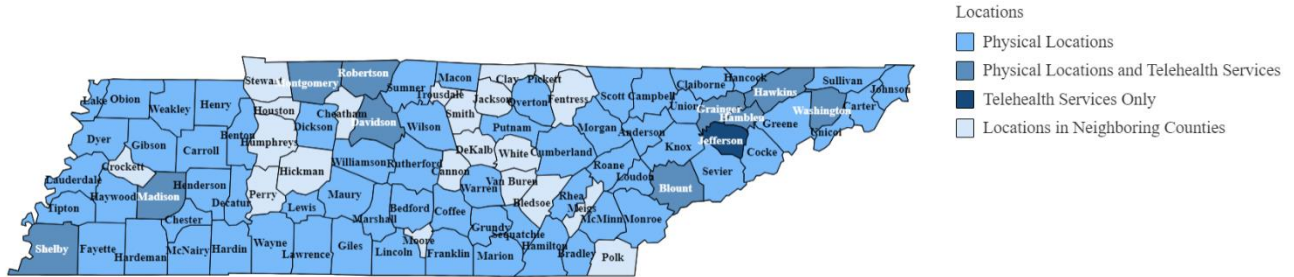
- 136 Office Locations Statewide
- Outpatient Services Only
- Is not insurance or part of TennCare
- Outreach Coordinator at each agency

## PROVIDER NETWORK

WEST		MIDDLE	EAST	
Alliance Healthcare Services 901-369-1400	Pathways Behavioral Health 731-541-8200	Centerstone of TN 877-467-3123	Centerstone of TN 877-467-3123	Mental Health Cooperative 423-697-5950
Carey Counseling 800-611-7757	Professional Care Services 877-727-2778	Mental Health Cooperative 615-726-3340	Cherokee Health 866-231-4477	Ridgeview 800-834-4178
Case Management, Inc. 901-821-5600	Quinco Community MHC 800-532-6339	TN Voices 800-670-9882	Frontier Health 855-336-9327	TN Voices 800-670-9882
Cherokee Health Systems 866-231-4477	TN Voices 800-670-9882	Volunteer Behavioral Health 877-567-6051	McNabb Center 865-637-9711 423-266-6751	Volunteer Behavioral Health 877-567-6051
			Peninsula 865-970-9800	

Link for more information: [tn.gov/behavioral-health/bhsn](https://tn.gov/behavioral-health/bhsn)

**Behavioral Health Safety Net Locations for Adults**



**STATEWIDE**

# CRISIS LINE

**HELP IN A MENTAL HEALTH CRISIS**

**855-CRISIS-1  
855-274-7471**

[TN.gov/CrisisLine](http://TN.gov/CrisisLine)

