



## **6 FOCUS AREAS**

#### **Identification of Suicide Risk**

- □ Screen all patients over 13 annually for behavioral health conditions associated with increased suicide risk using a validated instrument(s), including depression, suicidality (i.e., suicidal ideation, past attempts), alcohol misuse, anxiety, and drug use.
- □ Patient education on purpose and intent of screening, including security of screening results
- ☐ Clearly display crisis line information and suicide prevention materials
- ☐ Train clinicians and staff how to identify and respond to patients who exhibit suicidal ideation

### **Assessment of Suicide Risk**

- Based on previous screening, further systematic screening and identification of additional risk factors including mental illness diagnosis, substance use disorder, stressful life events, and other relevant psychiatric symptoms or warning signs (at clinician's discretion)
- ☐ EHR capability to track and assess screening results

### Suicide Risk Management

- □ Track 'suicide risk as a separate item in a patient's problem list when risk factors are present, even if suicidal ideation has not been expressed
- ☐ Ensure staff are trained in collaborative safety planning and engage patients in collaborative safety planning if risk factors are present, even if suicidal ideation has not been expressed
- □ Clear clinical protocol to timely and adequate care for individuals at risk of suicide (e.g. follow-up contact same day or later as indicated by suicide risk assessment)
- Clear clinical protocol for patients who present in acute suicidal crisis, keeping patient under safe observation
- ☐ Address lethal means safety (e.g. guns, medications), including displayed messaging on safe storage

#### Suicide Risk Treatment

- □ Clear patient pathway to evidence based treatments that target suicidal thoughts and behaviors (rather than focusing on diagnosis) through integrated behavioral health or off-site supported referral
- ☐ Clearly defined roles for all care team members
- □ Document patient information related to suicide care and referrals

## **Follow-Up and Support After a Suicide Attempt**

- ☐ Assess suicide risk at every follow-up visit
- □ Clear protocol to provide contact and support during transition from in patient to out patient setting; refer to peer support specialist if possible

## Follow-Up and Support After a Suicide Death

□ Clear protocol to provide support for friends, family, and providers involved in care of someone who has died by suicide (e.g. screening for depression, suicidality, anxiety, alcohol misuse and drug use; referral to behavioral health services)

## **Screening Tools for Suicide Risk Identification & Assessment**



- Ninth question of PHQ-9
- First and second question of Columbia Suicide Severity Rating Scale (C-SSRS)
- Ask Suicide-Screening Questions (ASQ)
- Behavioral Health Screen (BHS)
- Outcome Questionnaire 45.2® (0Q-45.2)®

- M-3 Checklist™
- Patient Safety Screener (PSS-3)
- Behavioral Health Measure-10®(BHM -10®)
- Brief Symptom Inventory 18® (BSI 18®)
- Suicide Behavior Questionnaire-Revised (SBQ-r)
- Reason for Living (RFL)

# **Evidence Based Treatments for Suicidality**

Least Intensive



Most Intensive

 Non-demanding caring contracts (especially for patients who reject treatment) via postcard, phone call, text message to show patients have not been forgotten

- Collaborative assessment and management of suicidality (CAMS)
- Suicide-specific behavioral health therapy
- Dialectical behavioral therapy (including mindfulness, distress tolerance, interpersonal effectiveness, and emotion regulation)

## **Additional Suicide Care Resources**

## **Washington Suicide Prevention Plan (2016)**

https://www.doh.wa.gov/Portals/1/Documents/Pubs/631-058-SuicidePrevPlan.pdf

### **Required Washington State Suicide Prevention Training for Health Professions**

https://www.doh.wa.gov/ForPublicHealthandHealthcareProviders/HealthcareProfessionsandFacilities/SuicidePrevention

### Bree Collaborative Behavioral Health Integration Report and Recommendations (2017)

http://www.breecollaborative.org/wp-content/uploads/Behavioral-Health-Integration-Final-Recommendations-2017-03.pdf

### **Read the full Suicide Care Report and Recommendations here:**

http://www.breecollaborative.org/wp-content/uploads/Suicide-Care-Report-and-Recommendations-Final.pdf