Vancouver Coastal Health **Quality & Safety**

ROP Fact Sheet: Suicide Prevention

Accreditation Canada defines a Required Organizational Practice (ROP) as an essential practice that organizations must have in place to enhance patient/client/resident safety and reduce risk.

ROP Definition:
Clients are assessed and monitored for risk of suicide.

Tests for Compliance:

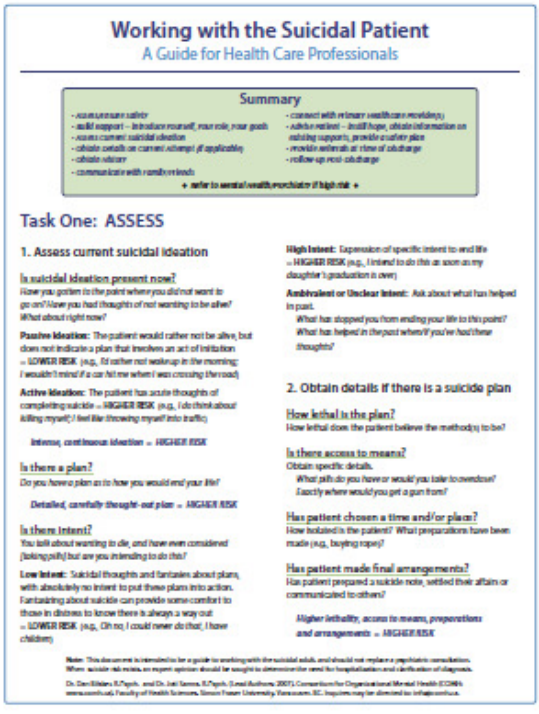
1. Clients at risk of suicide are identified.
2. The risk of suicide for each client is assessed at regular intervals or as needs change.
3. The immediate safety needs of clients identified as being at risk of suicide are addressed.
4. Treatment and monitoring strategies are identified for clients assessed as being at risk of suicide.
5. Implementation of the treatment and monitoring strategies is documented in the client record.

This ROP is a requirement in all mental health & addictions settings throughout the continuum.

Meeting this ROP: what compliance looks like:

1. We do a comprehensive assessment with all our patients at admission.

- ☑ Suicide risk is always assessed as part of the mental health assessment
- ☑ Screening for risk follows 5 standard themes:
  - Is the patient feeling unsafe?
  - Do they have a plan to commit suicide or harm themselves?
  - Do they have the means to carry it out?
  - Have they attempted in past?
  - Is there a family history of suicide?
- ☑ Includes assessment of triggers and protective factors to inform a safety plan
- ☑ Examples of team processes, guidelines and procedures


Working with the Suicidal Patient
A Guide for Health Care Professionals

Summary

Task One: ASSESS

1. Assess current suicidal ideation

2. Obtain details if there is a suicide plan

2. We reassess our patients regularly and as their status changes.

- ☑ We document suicide risk reassessment in PARIS at each shift change
- ☑ The assessment is discussed as part of shift handover

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3. **We address immediate safety needs with evidence-based interventions and care plans.**
   - ☑ We refer to standard levels of observations based on risk level
   - ☑ Goal is to stabilize the client so that a safety plan can be developed to address all the risk factors

4. **We partner with our patients and their families to develop a comprehensive safety plan.**
   - ☑ We collaboratively develop mutually agreed-upon safety plans that address the risk and triggers, and build on protective factors (find the Safety Plan template here)
   - ☑ We encourage patients to involve family and other support people, and communicate clearly the responsibilities that come with accepting their role in the safety plan

5. **We continuously monitor the patients, review their safety plan and document changes.**
   - ☑ We review the safety plan with patients before each pass and to prepare for discharge/transition

What You May Be Working On:

- ☑ **Improving consistency of practice** – making sure your team processes are used consistently to assess and communicate patients' suicide risk. You may also be participating in the development of regional suicide prevention tools and guidelines, i.e. CST: a common screener between ED and Inpatient Psychiatry.
- ☑ **Partnering with patients/families** – documented, up-to-date safety plans are an effective, evidence-based intervention for addressing risk in an empowering, collaborative way.
- ☑ **Knowing how we're doing** – random spot-audits of documentation, such as how consistently charts contain reassessment checklists completed every shift. You may also track other safety metrics such as use of seclusion, and episodes of violence, as well as functional outcome measures of patient progress.

Surveyors could ask:

- ☑ Tell me about how you assess suicide risk in your patients
- ☑ How do you communicate suicide risk with the Emergency Department when receiving a patient?
- ☑ How do you keep the patient safe from immediate harm?
- ☑ How do you work with the interdisciplinary care team, patient and family to develop a plan of care that addresses all the risks identified?
- ☑ Where are the assessment and the plan of care documented?
- ☑ How do you engage patients and their support people to develop a mutually agreed-upon safety plan/contract?
- ☑ How do you monitor the patient for changes and/or progress and share that information with the rest of the care team?
- ☑ How do you communicate suicide risk information to the next provider of care at transitions?

Accreditation on VCH Connect: http://vch-connect/programs/qps/accreditation/Pages/default.aspx

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