

Suicide Risk Assessment: Risk factors, Warning Signs and Protective Factors – Page 1

Predisposing and Historical Risk Factors

- | | | |
|--------------------------|--------------------------|--|
| Yes | No | |
| <input type="checkbox"/> | <input type="checkbox"/> | Psychiatric disorder |
| | | <input type="checkbox"/> Major depression |
| | | <input type="checkbox"/> Bipolar disorder |
| | | <input type="checkbox"/> Schizophrenia |
| | | <input type="checkbox"/> Anorexia nervosa |
| | | <input type="checkbox"/> Substance use disorder: _____ |
| | | <input type="checkbox"/> Personality disorder: _____ |
| | | <input type="checkbox"/> Other: _____ |

- | | | |
|--------------------------|--------------------------|---|
| Yes | No | |
| <input type="checkbox"/> | <input type="checkbox"/> | Previous suicide attempt |
| | | <input type="checkbox"/> High lethality |
| | | <input type="checkbox"/> High intent to die |
| | | <input type="checkbox"/> Similar circumstances |
| | | <input type="checkbox"/> Intent to deceive/conceal |
| | | <input type="checkbox"/> Absence of help-seeking |
| | | <input type="checkbox"/> Multiple attempts (2 or more) |

- | | | |
|--------------------------|--------------------------|--|
| Yes | No | |
| <input type="checkbox"/> | <input type="checkbox"/> | Medical illness |
| | | <input type="checkbox"/> Cancer (esp. head and neck) |
| | | <input type="checkbox"/> Chronic pain |
| | | <input type="checkbox"/> HIV/AIDS |
| | | <input type="checkbox"/> Nervous system disease |
| | | <input type="checkbox"/> Seizure disorder |
| | | <input type="checkbox"/> Other: _____ |

- | | | |
|--------------------------|--------------------------|--|
| Yes | No | |
| <input type="checkbox"/> | <input type="checkbox"/> | Previous self-harm (without intent to die) |
| <input type="checkbox"/> | <input type="checkbox"/> | Male |
| <input type="checkbox"/> | <input type="checkbox"/> | Male with age >60yo |
| <input type="checkbox"/> | <input type="checkbox"/> | History of physical or sexual abuse |
| <input type="checkbox"/> | <input type="checkbox"/> | Family member committed suicide |
| <input type="checkbox"/> | <input type="checkbox"/> | Sexual minority (LGBT) |
| <input type="checkbox"/> | <input type="checkbox"/> | Native American |

Current Situational Risk Factors

- | | | |
|--------------------------|--------------------------|-----------------------------------|
| Yes | No | |
| <input type="checkbox"/> | <input type="checkbox"/> | Family or marital conflict |
| <input type="checkbox"/> | <input type="checkbox"/> | Social withdrawal |
| <input type="checkbox"/> | <input type="checkbox"/> | Unemployment |

- | | | |
|--------------------------|--------------------------|---|
| Yes | No | |
| <input type="checkbox"/> | <input type="checkbox"/> | Medical problems |
| <input type="checkbox"/> | <input type="checkbox"/> | Loss (financial, interpersonal, professional) |
| <input type="checkbox"/> | <input type="checkbox"/> | Recent discharge from inpatient unit |

Current Symptomatic and Psychological Risk Factors

- | | | |
|--------------------------|--------------------------|---|
| Yes | No | Warning signs: IS PATH WARM? (AAS, 2003) |
| <input type="checkbox"/> | <input type="checkbox"/> | SUICIDAL IDEATION |
| <input type="checkbox"/> | <input type="checkbox"/> | SUBSTANCE USE |
| <input type="checkbox"/> | <input type="checkbox"/> | PURPOSELESSNESS |
| <input type="checkbox"/> | <input type="checkbox"/> | ANXIETY: PANIC, SEVERE INSOMNIA or AGITATION |
| <input type="checkbox"/> | <input type="checkbox"/> | FEELING TRAPPED |
| <input type="checkbox"/> | <input type="checkbox"/> | HOPELESSNESS |
| <input type="checkbox"/> | <input type="checkbox"/> | SOCIAL WITHDRAWAL |
| <input type="checkbox"/> | <input type="checkbox"/> | ANGER, SEEKING REVENGE |
| <input type="checkbox"/> | <input type="checkbox"/> | RECKLESSNES/IMPULSIVITY |
| <input type="checkbox"/> | <input type="checkbox"/> | MOOD CHANGES |

- | | | |
|--------------------------|--------------------------|--|
| Yes | No | |
| <input type="checkbox"/> | <input type="checkbox"/> | Depressed mood |
| <input type="checkbox"/> | <input type="checkbox"/> | Anhedonia |
| <input type="checkbox"/> | <input type="checkbox"/> | Impaired concentration |
| <input type="checkbox"/> | <input type="checkbox"/> | Sleep disturbance (esp. severe insomnia) |
| <input type="checkbox"/> | <input type="checkbox"/> | Guilt |
| <input type="checkbox"/> | <input type="checkbox"/> | Loneliness |
| <input type="checkbox"/> | <input type="checkbox"/> | Desperation |
| <input type="checkbox"/> | <input type="checkbox"/> | Psychotic symptoms (esp. command AH) |

Current Suicide-Specific Risk Factors

- | | | |
|--------------------------|--------------------------|--|
| Yes | No | |
| <input type="checkbox"/> | <input type="checkbox"/> | SUICIDAL IDEATION: note active or passive, frequency, intensity, duration |
| <input type="checkbox"/> | <input type="checkbox"/> | CURRENT SUICIDE PLAN |
| <input type="checkbox"/> | <input type="checkbox"/> | SUICIDAL INTENT (note subjective or objective) |
| <input type="checkbox"/> | <input type="checkbox"/> | Access to lethal means – note any firearms |

- | | | |
|--------------------------|--------------------------|---------------------------------|
| Yes | No | |
| <input type="checkbox"/> | <input type="checkbox"/> | SUICIDE PREPARATION |
| <input type="checkbox"/> | <input type="checkbox"/> | Researching or assembling means |
| <input type="checkbox"/> | <input type="checkbox"/> | Rehearsing suicide |
| <input type="checkbox"/> | <input type="checkbox"/> | Giving away possessions |
| <input type="checkbox"/> | <input type="checkbox"/> | Writing suicide note |

Protective Factors

- Positive and available social support
- Positive therapeutic relationship
- Responsibility to others (family, children)
- Fear of suicide
- Positive problem-solving or coping skills

- Hope for the future
- Intact reality testing
- Pregnancy
- Religious beliefs against suicide
- Life satisfaction

Suicide Risk Assessment: Level of Risk, Conceptualization and Management – Page 2

Overall Level of Risk: Estimate the current level of chronic and acute risk based on your knowledge, experience and relationship with the patient. Which risk factors, protective factors and warning signs are the *most meaningful and relevant for this patient at this time?*

<p>Long-term, chronic risk of suicide:</p> <ul style="list-style-type: none"> ▫ Multiple attempter status (2+ attempts) <ul style="list-style-type: none"> • Multiple attempter with any other notable acute factor – at least moderate risk. • Multiple attempter with any 2 notable acute factors – likely severe risk. <p>Acute risk of suicide (based on all risk factors, protective factors and warning signs). Risk of suicide is judged to be:</p> <ul style="list-style-type: none"> ▫ Minimal ▫ Mild ▫ Moderate ▫ Severe ▫ Extreme 	Acute risk of suicide (Rudd, 2006)	
	Minimal: No identifiable suicidal ideation; may still have chronic risk.	
	Mild: Suicidal ideation of limited frequency and <i>without specific plans</i> or intent; few other risk factors and some protective factors.	
	Moderate: Suicidal ideation of greater frequency and <i>with specific plans</i> ; no suicidal intent; good self-control (limited impulsivity); some protective factors.	
	Severe: Suicidal ideation that is frequent and intense; specific plans; <i>no subjective intent but some objective intent</i> .	
Extreme: Suicidal ideation that is frequent, intense and <i>accompanied by subjective and objective intent</i> .		

Conceptualization of Suicide

<ul style="list-style-type: none"> • Interpersonal theory of suicide (Joiner, 2005): Thwarted belongingness, perceived burdensomeness, acquired capability • Cognitive theory of suicide (Wenzel & Beck, 2008): Hopelessness, selective attention, attentional fixation on suicide 	<ul style="list-style-type: none"> • Emotion dysregulation (Linehan, 1983): Use of impulsive behavior to regulate overwhelming emotion • Shneidman’s cubic model (Shneidman, 1987): Stress, pain (psychache), perturbation
--	--

Interventions for Suicide

<p>Crisis plan – Suicide Prevention Resource Center: Safety Planning Guide</p> <ul style="list-style-type: none"> • Warning signs • Internal coping strategies • Distracting social contacts • Helpful friends or relatives • Professional agencies and crisis line • Securing the environment – secure firearms and other lethal means <p>Highest level of intervention</p> <ul style="list-style-type: none"> ▫ Initiate environmental intervention (eg. call police, CD-MHP, family to intervene) ▫ Direct the patient to seek environmental intervention (eg. go to ED, call authorities, crisis line or therapist) ▫ Explicitly target suicidal behavior and precipitants during contact (eg. coping skills to manage crisis) ▫ Target problems less directly related to but maintaining suicidal risk (psychiatric or medical illness, substance use) <p>Lowest level of intervention</p>
--

Justification for Level of Intervention

<ul style="list-style-type: none"> ▫ Suicidal risk currently mild ▫ Treatment history indicates higher intensity treatment under these circumstances is likely to be ineffective or detrimental to patient’s clinical status. ▫ Treatment history indicates higher intensity treatment under these circumstances is likely to be detrimental to patient’s current treatment. ▫ Treatment history indicates current risk likely to decrease substantially based on imminent future events (eg. impending visit from relative, see therapist). ▫ Threat of suicide best viewed as escape behavior and clinical history suggests targeting life problems is likely to be effective in reducing risk. ▫ Threat of suicide best viewed as operant behavior; higher intensity intervention likely to reinforce suicidal risk. ▫ Other:

Consultants:



HOW DO I FEEL?

WHAT DO I WANT TO CHANGE AND HOW

Crisis Planning

Mini-Book

Things I can do to prevent crisis:

Happy memories and peaceful thoughts:

Things I enjoy:

Name



UNDERSTANDING ME!

Sensory Tools for Wellness

CALMING:

ALERTING:

TRIGGERS:

TRIGGERS I CAN AVOID:

Things that can make the situation worse

CRISIS PLAN

I know I'm in crisis when:

Others can support me by:

Sensory tools I can use:

Things that can make the situation better:
