NORTHERN NEVADA ADULT MENTAL HEALTH
POLICY AND PROCEDURE

SUBJECT: SUICIDE RISK ASSESSMENT

NUMBER: NN-PC-AS-10

ORIGINAL DATE: 4/21/11

REVIEW/REVISE DATE:

APPROVAL: ____________Rosalyne Reynolds {s}__________, Agency Director

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I. PURPOSE:

The purpose of this policy is to provide for the safety of all suicidal consumers by consistently assessing their individual risk for suicide and planning their care accordingly.

II. POLICY:

It is the policy of Northern Nevada Adult Mental Health Services (NNAMHS) to have trained clinicians assess all consumers for risk of suicide by using an assessment tool designed specifically for this purpose.

III. REFERENCES:

A. MHDS Policy 4.029 Suicidality Assessment Procedure

B. NNAMHS Policy NN-PC-AS-02 LOCUS Assessment

C. Joint Commission Standard: PC.01.02.03 and PC.01.02.13 and Behavioral Health: PC.2.10.
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D. MR 271 Form: Suicide Assessment Five-Step Evaluation and Triage (SAFE-T)

IV. PROCEDURE:

1. Each direct care employee shall review MHDS policy 4.029 Suicidality Assessment Procedure within ten (10) days of hire and receive annual training on suicide risk assessment.

2. All licensed clinical staff will be trained on the use of Suicide Assessment Five-step Evaluation and Triage (Safe-T) tool and procedure for administering the assessment.

   A. All training will be documented in the employees personnel file.

3. NNAMHS will ensure that a Suicide Risk Assessment is completed by licensed clinical staff trained to utilize the Safe-T assessment tool as directed in the agency policy.

4. If the consumer was seen in PAS and Safe-T is not in current paperwork, the nurse will notify PAS of this lapse in procedure and complete the Safe-T assessment.

5. After the review of the Safe-T risk assessment, the nurse will place a color dot on the top right corner front of the chart indicating risk level. Risk colors are as follows: Green – Low Risk; Yellow – Moderate Risk; Red – High Risk.

6. The date of the Safe-T assessment will be written on the dot.

7. Consumers assessed as high risk (red dot) whether currently or previously admitted, will have the red dot remain on the chart and subsequent dots placed alongside with new dates.

8. On annual updates, a new dot dated will replace the previous dot only if the previous dot was green. Yellow and red dots will be maintained from year to year.

ADMISSIONS

1. Psychiatric Observation Unit (POU) and Inpatient Unit admissions:

   A. All POU and inpatient hospital admissions will be assessed for self-danger utilizing the SAFE-T assessment tool within 24-hours of admission or prior to discharge.

   B. Consumers discharged from the POU in less than 24-hours do not require a SAFE-T assessment.

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      i. Those consumers assessed with high risk shall have that factor recorded in their treatment plan.

      ii. Such consumers will be reassessed prior to discharge. The results of the reassessment shall be reflected in the multidisciplinary evaluation and LOCUS.

      iii. A consumer who is deemed a high suicide risk will not be discharged from POU/inpatient care unless the discharge is in response to:

         a. An admission to a medical hospital

         b. An inter-hospital transfer; or

         c. A court order

2. Out-patient Services:

   A. Licensed clinical staff shall administer the Safe-T on all consumers in their program, updating annually or as circumstances indicate.

B. When a consumer is open to multiple services i.e., medication clinic, counseling, service coordination, the PAS, POU/inpatient units will initiate the Safe-T at the time of the intake assessment. Outpatient will then update annually placing a copy in the chart.

C. For existing consumers an initial Safe-T assessment will be done by the prescriber or registered nurse and reviewed with the prescriber. The copy will then be placed in the chart.

D. If the consumer is receiving only individual counseling then psychology will complete the Safe-T on consumers being seen for individual therapy at the initial session; updating annually or as indicated.

i. Existing consumers will have the Safe-T assessment completed within one month of the implementation of this policy.

E. When a consumer is identified as having a suicide attempt in the last 30-days or is reporting current suicidal ideation with a plan, a new Safe-T assessment will be completed and placed in chart.

F. In the event that a recent suicide attempt resulted in the consumer being admitted to NNAMHS, a copy of the inpatient/POU discharge Safe-T will be placed in the outpatient chart.

G. It is the responsibility of each affected agency program to have procedures and monitoring processes in place to implement and manage this policy.