

COMPREHENSIVE SUICIDE RISK ASSESSMENT: IMPROVING ASSESSMENT AND DECREASING RISK

A completed suicide is one of the most dreaded outcomes of the psychiatric illnesses treated in behavioral health and has become an ever-increasing focus in the military population. ValueOptions recognizes the safety of beneficiaries and quality of care and services, particularly for high risk behaviors such as suicide attempts, is an area in which additional materials, training and communication may positively impact outcomes. ValueOptions believes that improving the quality of suicide risk assessments can impact the rate of completed suicides in beneficiaries in treatment.

Research on this topic provides us with a number of both predictive and associated factors that are commonly present in cases where there is a completed suicide. Predictive factors, if present, suggest that a completed suicide may occur. Associated factors may be present, but do not necessarily correlate with prediction of a potential completed suicide. **There is no algorithm or scoring tool which in and of itself can identify level of suicide risk in any consistent manner.**

Determination of suicide risk is directly dependent on the clinical judgment of the clinician assessing the factors in the context of the person's current biopsychosocial climate and thoughtfully formulating a summary that identifies the potential risk of suicide.

In today's environment, with time pressures, it may be a challenge to evaluate all of the predictive and associated risk factors for completed suicide in the course of completing an assessment. The factors are scattered across multiple biopsychosocial planes, and the clinician with the final responsibility frequently is unable to examine all of the data in detail prior to making a decision regarding suicide risk.

Unfortunately, documenting suicide risk has, at times, devolved to shorthand documentation of "no suicidal ideation or intent". Unfortunately, this shorthand does not take into account the many additional predictive and associated factors for completed suicide and does not allow a thoughtful clinical formulation with respect to consideration of all of those factors.

In addition to identifying and formulating risk based on all pertinent information, it is also useful to identify what interventions may modify risk of a completed suicide. Many risk factors are not modifiable, such as age, but many others may potentially be modified. **It is essential to quality clinical practice to ensure that modifiable risk factors are identified and the actions are put in place in the treatment planning process to attempt to decrease the risk of completed suicide.**

ValueOptions has made available for all providers the attached form called the ***Suicide Risk Assessment***. This form includes predictive risk factors for completed suicide in one easy to use assessment tool with space for the clinical documentation of both level of risk and recommended interventions for modifiable risk factors. This tool can be used to assess and reassess suicide risk whenever there is any suspicion that some degree of risk may be present. It is particularly useful for inpatient assessment and reassessments. (There is a higher rate of suicides in hospitalized patients and during the first two weeks post hospitalization.) Providers may access additional copies of this form on the Humana Military website at www.humana-military.com or by calling 800-700-8646.

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