

2011 National Patient Safety Goals: FAQ's

Goal #15: Suicide Risk Assessment

1. Which patients does this goal apply to?

This goal only applies patients in psychiatric hospitals and to patients in general hospitals who have a *primary diagnosis* of an emotional or behavioral disorder. At this time, suicide risk assessment of patients with secondary diagnosis or secondary complaints of emotional or behavioral disorders is encouraged but not required by the Joint Commission.

2. What is the rationale for this goal?

Suicide of hospitalized patients with emotional or behavior disorders are frequently reported to Joint Commission. While patients admitted with known suicidal ideations are placed on suicide precautions while in hospitals, patients with other emotional or behavioral disorders are not always assessed for suicide risk. The rationale of the goal is to be proactive in identifying patients at risk for suicide.

3. How do we meet this goal at MGH?

No matter what unit the patient is admitted to, he or she are followed by psychiatry if they have a primary emotional or behavioral disorder. This occurs in one of two ways: the psychiatrist may be the attending (if the patient is admitted to the inpatient psychiatric unit), or the patient may be followed by the psychiatric consult service if admitted to general medical or surgical services.

4. I work on a medical unit and we frequently get patients admitted who go into alcohol withdrawal. Does this goal apply to them?

Managing alcohol withdrawal is a medical treatment. At the time of admission, the primary diagnosis is medical. However, as the patient recovers, if the primary diagnosis shifts to an underlying psychiatric disorder or substance abuse problem, a suicide risk assessment would be part of the psychiatric assessment of patients who are identified as having a psychiatric and/or substance abuse problem. At MGH, these patients are followed by the Psychiatric Consult MDs and the Psychiatric Nurse Consult team and attention is given to making appropriate referrals to the next level of care which would include inpatient or outpatient psychiatric or substance abuse services.

5. Does the goal require anything else?

The goal also requires that the hospital provide information such as crisis hotline to identified patients at risk for suicide and their family members.