Continuity of Care is maintained when one care provider links to another care provider, the transition of care is smooth and uninterrupted for the patient, and the essential clinical information is provided.

**Identification**

Settings in which at risk youth are identified

- Emergency Department
- School
- Juvenile Justice
- Primary Care
- Inpatient Psychiatric Hospitalization
- Community Program
- Community Behavioral Health

**Enhancing Linkages**

Strategies or services* to enhance linkages with the Aftercare/Ongoing Care provider

- Organizational MOUs, MOAs
- Crisis center follow-up
- Follow-up appointments made within 24 – 72 hours
- Caring contacts
- Warm handoffs
- Community resource listings for Referring Providers
- Continuity of care flow-sheets
- Communications between referring (identification) and referral orgs
- Patient consent protocols
- Informal caregiver involvement in aftercare planning
- Case management

* Can be provided by the Identification organization, Crisis Center organizations, and/or Ongoing Care organizations

**Aftercare/Ongoing Care**

Settings in which at risk youth receive ongoing care/suicide risk management services

- School
- Primary Care
- Community Behavioral Health
- Community Program

State

SPRC, 2014
Continuity of Care is maintained when one care provider links to another care provider, the transition of care is smooth and uninterrupted for the patient, and the essential clinical information is provided.

Identification
Settings in which at risk youth are identified

- Emergency Department
- School
- Culture / Community-Based Intervention
- Juvenile Justice
- Primary Care
- Inpatient Psychiatric Hospitalization
- Community Behavioral Health

Enhancing Linkages
Strategies or services* to enhance linkages with the Aftercare/Ongoing Care provider

- Organizational MOUs, MOAs
- Crisis center follow-up
- Follow-up appointments made within 24 – 72 hours
- Caring contacts
- Warm handoffs
- Community resource listings for use by referring providers
- Continuity of care flow-sheets
- Communications between referring (identification) and referral orgs
- Patient consent protocols
- Informal caregiver involvement in aftercare planning

* Can be provided by the Identification organization, Crisis Center organizations, and/or Ongoing Care organizations

Aftercare/Ongoing Care
Settings in which at risk youth receive ongoing care/suicide risk management services

- School
- Culture / Community-Based Intervention
- Primary Care
- Community Behavioral Health

SPRC, 2014
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**Identification**

*Settings in which at risk youth are identified*

- Emergency Department
- Campus Counseling
- Campus Health Clinic
- Campus Teams (e.g. BIT)
- Inpatient Psychiatric Hospitalization
- Informal Sources (faculty/friends)

**Enhancing Linkages**

*Strategies or services* to enhance linkages with the Aftercare/Ongoing Care provider

- MOUs – on campus
- MOUs – off campus
- Crisis center follow-up
- Follow-up appointments made within 24 – 72 hours
- Caring contacts (e.g., postcards)
- Warm handoffs
- Community resource listings for use by referring providers
- Continuity of care flow-sheets
- Communications between identification and aftercare providers
- Patient consent protocols
- Informal caregiver involvement in aftercare planning
- Case management

* Can be provided by the Identification organization, Crisis Center organizations, and/or Ongoing Care organizations

**Aftercare/Ongoing Care**

*Settings in which at risk youth receive ongoing care/suicide risk management services*

- Campus Counseling
- Campus Health Clinic
- Community Behavioral Health
- Disability Services

Campus SPRC, 2014