Suicide Screening in the Emergency Department

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A team from the Emergency Department Safety Assessment and Follow-up Evaluation (EDSAFE) study found that (1) effective universal suicide screening for adults in emergency departments could be achieved by using a relatively simple instrument and set of protocols and (2) “increased screening led to nearly twice as many patients being identified as having suicide risk.”

Screenings in the emergency departments participating in the study rose from an average of 26 percent (when only patients exhibiting obvious psychiatric symptoms were screened) to an average of 84 percent using a simple instrument which identified patients as being at risk if they reported suicidal ideation within the past two weeks or a suicide attempt in the past six months.

The authors attributed this increase to using (1) “a simple screening instrument [the Patient Safety Screener-3] and clinical protocols designed to be easily integrated into the [emergency department] routine,” (2) a training that “was brief and available through multiple channels, including in-person by a site trainer or online,” and (3) “widely available performance improvement methodologies” (such as “Plan-Do-Check-Act”) to integrate the screening protocols into emergency department routine and to monitor performance.

The authors suggested that “if these findings remain true when scaled, the public health impact could be tremendous, because identification of risk is the first and necessary step for preventing suicide.”