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Comprehensive Emergency Department Guide Provides U.S. Health Care Professionals with Vital Tools in Caring for Adult Patients with Suicide Risk

SPRC releases Emergency Department Guide to enhance suicide-specific care provided in emergency departments and improve patient outcomes after discharge

sprc.org/ed-guide

Waltham, Mass. – In a continued focus to reduce the rate of U.S. suicides, the [Suicide Prevention Resource Center](#) (SPRC) today released [Caring for Adult Patients with Suicide Risk: A Consensus Guide for Emergency Departments](#) to equip health care professionals who provide clinical care in Emergency Departments (ED) with a vital resource in the care of adult patients with suicide risk. ED providers are often the initial, and many times the only, providers administering care to those at risk for suicide.

The ED Guide provides a wealth of evidence-based practices in decision support, initial interventions, and discharge planning for adults who have been identified as having some risk of suicide. ED health care professionals are in a unique position to improve outcomes and facilitate a safer discharge for patients with suicide risk by conducting brief interventions with patients, onsite mental health consultations, and linkages to follow-up care. According to the [National Action Alliance for Suicide Prevention](#) (Action Alliance), ED-based interventions could reduce annual deaths from suicide by as much as 20 percent.

“It is imperative that the care of a patient with suicide risk extend beyond a visit to the emergency room,” said Jerry Reed, Ph.D., MSW, director of SPRC and vice president at [Education Development Center, Inc.](#) “EDs are a first line of defense in the care of adult patients at risk for suicide. The ED Guide provides the tools to facilitate effective linkages from EDs to other more appropriate settings of care, with the potential of saving thousands of lives each year.”

Studies indicate that the risk of a suicide attempt or death is highest within the first 30 days after discharge from an ED or inpatient psychiatric unit. Yet for many reasons, up to 70 percent of patients who leave the ED after a suicide attempt never attend their first outpatient appointment. (Knesper, 2010).

“Emergency departments are prime sites for suicide prevention activities in the U.S., but until now clinicians have not had tools to help them steer patients toward treatment options that best meet their health and safety needs,” said Pamela S. Hyde, administrator of the [Substance Abuse and Mental Health Services Administration](#) (SAMHSA). “This consensus guide is a critical step forward in advancing practice, saving lives, and guiding at-risk patients toward recovery.”

The ED Guide, funded by SAMHSA, was developed with extensive input from a consensus panel of experts from emergency medicine and suicide prevention organizations, including individuals with lived experience (those who have lived through suicide attempts and suicidal thoughts or feelings). Recommendations in the ED Guide were developed using an iterative process that included both a review of the literature and expert panel consensus.

“As an organization committed to safe practice and care, we were pleased to contribute to this ED Guide which will undoubtedly help health care providers administer the best possible care to those at risk for suicide,” said Matthew F. Powers, MS, BSN, RN, MICP, CEN, Emergency Nurses Association president. “We emergency care professionals are well positioned to help lower suicide rates and this ED Guide will serve as a valuable resource in that mission.”

The ED Guide is endorsed by the American Academy of Emergency Medicine, American Association for Emergency Psychiatry, American Association of Suicidology, and the American Foundation for Suicide Prevention.

“This guide is a great resource for emergency departments as they develop their suicide prevention plans,” said [Jill Harkavy-Friedman](#), Ph.D., vice president of research at the [American Foundation for Suicide Prevention](#) (AFSP). “A plan for suicide prevention is an essential component of effective and integrated health care. AFSP was pleased to participate in the development of this guide.”

SAMHSA’s National Survey on Drug Use and Health indicates that 1.3 million adults aged 18 or older (0.6 percent) attempted suicide in the past year. According to the Centers for Disease Control and Prevention, more than 41,000 individuals died by suicide in 2013. Suicides are the 10th leading cause of death in the U.S.

The ED Guide addresses specific objectives articulated by the [2012 National Strategy for Suicide Prevention](#), namely, to promote a continuum of care, safety, and well-being for ED patients treated for suicide risk; to collaborate with other health care providers to provide rapid and appropriate follow-up treatment; and to develop standardized protocols that direct clinical responses based on individual patient risk profiles.

About the Suicide Prevention Resource Center

Suicide Prevention Resource Center (SPRC) is the nation’s only federally-supported resource center devoted to advancing the *National Strategy for Suicide Prevention*. SPRC is funded by SAMHSA, the lead federal agency in promoting health efforts to advance the behavioral health of the nation. SPRC provides technical assistance, training, and materials to increase the knowledge and expertise of suicide prevention practitioners and other professionals serving people at risk for suicide. SPRC promotes collaboration among a variety of organizations that play a role in developing the field of suicide prevention.