

Policy Title: Suicide Risk Screening, Assessment, and Mitigation Policy Number: 302.13 Policy Category: Clinical Distribution Level: Directly-Operated Programs Responsible Party: Clinical Operations

I. POLICY STATEMENT

This policy establishes the use of a standardized suicide risk screening (Columbia Suicide Severity Rating Scale [C-SSRS]) as a component of suicide assessment.

The purpose of this policy is to review and mitigate suicide risk.

II. DEFINITIONS

Suicide Screening and Assessment Descriptors:

Columbia-Suicide Severity Rating Scales (C-SSRS): A standardized suicide risk screen that assesses the full range of ideation and behavior items with recommendations for next steps (e.g., referral to mental health professionals).

C-SSRS (Lifetime/Recent Full Version): A standardized suicide risk screen that assesses lifetime history of suicidality as well as any recent suicidal ideation and/or behavior in the last three (3) months.

C-SSRS (Recent/Screen Version): A standardized suicide risk screen that provides a truncated form of the Full Version. Screens for suicidality in a potential client.

C-SSRS (Since Last Visit/Full Version): A standardized suicide risk screen that assesses for suicidality since the client's last visit. Designed to assess clients who have completed at least one Lifetime/Recent C-SSRS assessment.

C-SSRS (Since Last Visit/Screen Version): A standardized suicide risk screen that provides a truncated form of the Full Version. Screens for suicidality since the client's last visit during which the C-SSRS was administered. Designed to assess clients who have completed at least one Lifetime/Recent C-SSRS assessment. The 'Since Last Visit' version of the C-SSRS asks about any suicidal thoughts or behaviors the patient/participant may have had since the last time the C-SSRS was administered.

C-SSRS Pediatric/Cognitively Impaired (Lifetime/Recent Full Version): A standardized suicide risk screen that assesses lifetime history of suicidality in children and cognitively impaired clients as well as any recent suicidal ideation and/or behavior in the past three months.

• Note: This version is included for use in children in the age range of 6-11 or individuals with impaired cognition depending upon their level of understanding (i.e., if the



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individual is unable to understand the questions on the adult Lifetime/Recent Screen). It has been used in clients as young as five and can be asked of the parent or caregiver.

C-SSRS Pediatric/Cognitively Impaired (Since Last Visit/Full Version): A standardized suicide risk screen that assesses for suicidality since the child's last visit. Designed to assess children who have completed at least one Pediatric/Cognitively Impaired Lifetime/Recent C-SSRS assessment. See also the Note in C-SSRS Pediatric/Cognitively Impaired (Lifetime/Recent Full Version).

High Suicide Risk: A client who, in the clinician's judgment after a suicide assessment, responds as stated below to the following C-SSRS items:

- Suicidal intention with or without a specific plan occurring in the past month ("Yes" to Item 4 and/or 5 in the C-SSRS Ideation Section); and/or
- Actual, interrupted, or aborted suicide attempt(s) or preparatory behavior occurring within the past three months ("Yes" to the Behavior Question(s) on the C-SSRS or Item 6 on the C-SSRS screen versions).

Moderate Suicide Risk: A client who, in the clinician's judgement after a suicide assessment, responds as stated below to the following C-SSRS items:

- Suicidal ideation with method occurring in the past month ("Yes" to Item 3 in the C-SSRS Ideation Section); and/or
- Suicidal intention with or without a specific plan, but not occurring within the past one month ("Yes" to Item 4 and/or 5 in the C-SSRS Ideation Section); and/or
- Actual, interrupted, or aborted suicide attempt(s) or preparatory behavior, but not occurring within the past three months ("Yes" to the Behavior Question(s) on the C-SSRS or to Item 6 on the C-SSRS screen versions).

Suicide Assessment: An assessment that includes an evaluation of a client's:

- Past and current suicide ideation/attempts/intent and/or plan identified through the completion of the C-SSRS Risk Screens or other documented assessment of its components;
- Current mental status exam;
- Active psychiatric symptoms;
- Acute, chronic and protective risk factors; and
- Clinician judgment.

Standardized Suicide Risk Screening: The use of the C-SSRS Risk Screens or components thereof.



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Common Terminology of Suicide Behaviors:

Aborted Attempt: An act committed by an individual in an effort to cause his or her own death that was deliberately not completed.

Interrupted Attempt: Steps taken by an individual to injure self that is stopped by something or someone before the potential for harm has begun.

Preparatory Behavior: Any act of preparation for an imminent suicide attempt occurring before potential for harm has begun. This can include anything that goes beyond the verbalization or thought of self-harm, such as obtaining the elements of the intended method (e.g., buying a gun, collecting pills) or preparing for one's death by suicide (e.g., writing a suicide note, giving away belongings).

Suicide: The death of an individual by a deliberate self-inflicted injury.

Suicide Attempt: An act committed by an individual in an effort to cause his or her own death.

<u>Client Status Descriptors in the Los Angeles County Department of Mental Health</u> (DMH) System of Care:

Active DMH Client: A client, in the DMH System of Care with a clinical record, who is actively receiving services within the past 180 days.

Inactive DMH Client: A client, in the DMH System of Care with a clinical record, who has had no activity for 180+ days or service(s) terminated per DMH Policy 312.01.

Newly Active DMH Client: A new client requiring the opening of a new clinical record or an existing client returning for services after the termination of services per DMH Policy 312.01, or an existing client returning for services after 180+ days of inactivity requiring the resumption of documentation in an existing clinical record.

Potential DMH Client: An individual or his/her representative who is seeking mental health services.

III. POLICY

A suicide risk screening shall be completed for all potential, active, and newly active clients six (6) years of age or older.

In the absence of a positive initial suicide risk screening, repeated screening of active clients should be based upon past history, emergent risk factors, and clinical assessment.



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Clinicians shall take specific actions to report and mitigate moderate or high suicide risk.

IV. PROCEDURES

Click here to view procedures.

V. AUTHORITIES

California Welfare and Institutions Code Sections 5150 and 5585; DMH 4.16 Parameters of Family Engagement and Inclusion for Adults; DMH 4.17 Parameters for the Determination of Insufficient Client Engagement of Adults at Risk for Suicide; DMH Policy 312.01, Mutual and Unilateral Termination of Mental Health Services;

VI. ATTACHMENTS

Please note: **C-SSRS Suicide Risk Screening Forms** have been incorporated into the Integrated Behavioral Health Information System (IBHIS). While the format and structure may be slightly different, the nature of the questions and content has been maintained.

<u>C-SSRS</u> (Lifetime/Recent Full Version); <u>C-SSRS</u> (Recent/Screen Version); <u>C-SSRS</u> (Since Last Visit/Full Version); <u>C-SSRS</u> (Since Last Visit/Screen Version); <u>C-SSRS</u> Pediatric/Cognitively Impaired (Lifetime/Recent Full Version); <u>C-SSRS</u> Pediatric/Cognitively Impaired (Since Last Visit/Full Version); <u>Safety Planning:</u> Introduction, Sample, and DMH Template and Considerations

VII. EFFECTIVE DATES

Effective Date: July 11, 2016

Review Date: October 10, 2018 Reviewed with Revisions

VIII. SIGNATURE, TITLE, and DATE OF APPROVAL

Required for initial approvals and all subsequent reviews and updates.

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Name/Title