

COLUMBIA SUICIDE SCREENER

Since last visit (or past 30 days if never previously asked)

- 1. Have you wished you were dead or wished you could go to sleep and not wake up?
2. Have you actually had any thoughts of killing yourself?

If Yes to #2, ask questions 3, 4, 5 and 6
If No to 2, go directly to question 6

- 3. Have you been thinking about how you might kill yourself?
4. Have you had these thoughts and had some intention of acting on them?
5. Have you started to work out or worked out the details of how to kill yourself and do you intend to carry out this plan?

Since last visit (or lifetime if never previously asked)

- 6. Have you done anything, started to do anything, or prepared to do anything to end your life?

SUICIDE PROTECTIVE FACTORS

- Feeling of responsibility toward family, Family harmony and cohesion, Moral/religious objections or unacceptability of suicide, Self-esteem, Reason for living & future-related beliefs, Skills in problem-solving, conflict resolution, or coping, Perceived social support, Other protective factors:

Any other factors, issues, history, or dynamics relevant to this client's suicide risk:

VIOLENCE RISK FACTORS

- 1. Thoughts of hurting someone in the past or present:

- a. Thoughts of hurting someone during the past week:

- i. Frequency of homicidal ideations:
ii. Have a specific target victim(s) in mind:
iii. Have a specific method in mind:
iv. Have a specific site/setting in mind:

- b. Current thoughts of hurting someone:

- i. Frequency of homicidal ideation:
ii. Have a specific target victim(s) in mind:
iii. Have a specific method in mind:
iv. Have a specific setting in mind:

- c. Motives/Motivations: (check all that apply)
achieve notoriety or fame, for own safety/protection, avenge or retaliate for a perceived injury/grievance, end personal pain, obtain help/"a cry for help", develop a special relationship with the target, unable to assess, other

- 2. Made an explicit threat:

> If Yes, specifics of the threat:

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3. Communicated intent/ideas/threats to someone:..... Yes No Unable to Assess

- >If Yes: (please check all that apply) target victim(s) peers/friends family/relatives teacher/staff
- counselor/mental health professional written in a diary, journal, essay or drawing text message e-mail
- social media (e.g., Facebook, Twitter, Tumblr, Instagram)
- other: _____

4. Engaged in behavior consistent with threat:..... Yes No Unable to Assess

- >If yes:
- Evidence of planning (e.g., floor plan, hit list, researching weapons/explosives):..... Yes No Unable to Assess
- >If Yes, specify: _____
- Actions taken toward plan: Yes No Unable to Assess
- >If yes, (check all that apply) locate/follow/approach target secure a weapon
- thwart security measures in place assault target other: _____

5. Access to guns/weapons/lethal means:..... Yes No Unable to Assess
if yes, specify: _____

6. Possessed, carried, or used weapons in the past..... Yes No Unable to Assess

- >If yes:
- Carried weapon to school or in public places:..... Yes No Unable to Assess
- Provide details: _____

7. History of violence (e.g., hit, slapped, kicked, pushed, shoved, grabbed):..... Yes No Unable to Assess

- >If Yes:
- # of physical fights/aggressive acts in the past 3 months: _____ # of aggressive acts in past 12 months: _____
- # of prior arrests (life-time): _____ Age at first violent act: _____
- Aggressive acts have resulted in injury to others:..... Yes No Unable to Assess
- Ever threatened or assaulted with a weapon:..... Yes No Unable to Assess
- Target of past violent act(s): (check all that apply) family member intimate partner teacher/school/professional staff
- peer random stranger other: _____
- Setting(s) of past violent act(s): (check all that apply)
- home school clinic public places UTA other: _____
- Similarity between present & past conditions of violence:..... Yes No Unable to Assess

8. Additional Violence Risk Factors:

- Preoccupation with violence or weapons:..... Yes No Unable to Assess
- Violence seen as justified, acceptable, or only way to achieve goal..... Yes No Unable to Assess
- Wish to kill..... Yes No Unable to Assess
- Wish to be killed..... Yes No Unable to Assess
- Gang affiliation..... Yes No Unable to Assess
- Paranoid delusions..... Yes No Unable to Assess
- Need to act preemptively toward perceived aggressor for own safety:..... Yes No Unable to Assess
- Respond with heightened hostility/anger to frustration/confrontation:..... Yes No Unable to Assess
- Increase in baseline communications/behaviors of concern:..... Yes No Unable to Assess
- Others concerned about the potential for serious violence:..... Yes No Unable to Assess

9. Any other information, issues, history, or dynamics relevant to this client's violence risk:

GRAVE DISABILITY RISK INDICATORS

1. This person, as the result of a mental disorder, is unable to provide (or utilize resources provided) for his or her basic personal needs for food, clothing, or shelter, to the point of posing an imminent safety risk (e.g., unable to survive safely)..... Yes No Unable to Assess
2. Food: Evidence of malnutrition/dehydration caused by symptoms or behaviors due to a mental illness, to the point of potential imminent medical or physical harm):..... Yes No Unable to Assess
3. Clothing: Public nudity, inadvertent exhibitionism, or exposure to environment due to a mental illness, to the point of potential imminent medical/physical harm or safety risk:..... Yes No Unable to Assess
4. Shelter: Behaviors and symptoms of a mental illness are preventing the person from utilizing or obtaining adequate shelter, posing an imminent safety risk:..... Yes No Unable to Assess
5. Any other information, issues, or dynamics relevant to this client's Grave Disability risk:

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General Description

- Grooming & Hygiene: Well Groomed, Average, Dirty, Odorous, Disheveled, Bizarre
Eye Contact: Normal for culture, Little, Avoids, Erratic
Motor Activity: Calm, Restless, Agitated, Tremors/Tics, Posturing, Rigid, Retarded, Akathisia, E.P.S.
Speech: Unimpaired, Soft, Slowed, Mute, Pressured, Loud, Excessive, Slurred, Incoherent, Poverty of Content
Interactional Style: Culturally congruent, Cooperative, Sensitive, Guarded/Suspicious, Overly Dramatic, Negative, Silly
Orientation: Oriented, Disoriented to: Time, Place, Person, Situation
Intellectual Functioning: Unimpaired, Impaired
Memory: Unimpaired, Impaired re: Immediate, Remote, Recent, Amnesia
Fund of Knowledge: Average, Below Average, Above Average
Mood and Affect: Mood: Euthymic, Dysphoric, Tearful, Irritable, Lack of Pleasure, Hopeless/Worthless, Anxious, Known Stressor, Unknown Stressor
Affect: Appropriate, Labile, Expansive, Constricted, Blunted, Flat, Sad, Worries

Perceptual Disturbance

- None Apparent
Hallucinations: Visual, Olfactory, Tactile, Auditory, Command, Persecutory, Other
Self-Perceptions: Depersonalizations, Ideas of Reference
Thought Process Disturbances: None Apparent
Associations: Unimpaired, Loose, Tangential, Circumstantial, Confabulation, Flight of Ideas, Word Salad
Concentration: Intact, Impaired by: Rumination, Thought Blocking, Clouding of Consciousness, Fragmented
Abstractions: Intact, Concrete
Judgments: Intact, Impaired re: Minimum, Moderate, Severe
Insight: Adequate, Impaired re: Minimum, Moderate, Severe
Serial 7's: Intact, Poor

Thought Content Disturbance

- None Apparent
Delusions: Persecutory, Paranoid, Grandiose, Somatic, Religious, Nihilistic, Being Controlled
Ideations: Bizarre, Phobic, Suspicious, Obsessive, Blames Others, Persecutory, Assaultive Ideas, Magical Thinking, Irrational/Excessive Worry, Sexual Preoccupation, Excessive/Inappropriate Religiosity, Excessive/Inappropriate Guilt
Behavioral Disturbances: None, Aggressive, Uncooperative, Demanding, Demeaning, Belligerent, Violent, Destructive, Self-Destructive, Poor Impulse Control, Excessive/Inappropriate Display of Anger, Manipulative, Antisocial
Suicidal/Homicidal: Denies, Ideation Only, Threatening, Plan, Past Attempts
Passive: Amotivational, Apathetic, Isolated, Withdrawn, Evasive, Dependent
Other: Disorganized, Bizarre, Obsessive/compulsive, Ritualistic, Excessive/Inappropriate Crying

SCHOOL VIOLENCE RISK INDICATORS

1. Is this client a student/employee (full-time/part-time) of an educational institution?..... Yes No Unable to Assess

>If yes, continue with the following section:

a. School Violence Risk Factors:

- Inordinate knowledge about weapons or targeted violence..... Yes No Unable to Assess
Felt bullied, persecuted, or injured by others..... Yes No Unable to Assess
Bullying/intimidating/harassing others Yes No Unable to Assess
Frequent argument with peers or adults Yes No Unable to Assess
Perceive school culture to perpetuate bullying or unfair treatment..... Yes No Unable to Assess
Tendency to perceive hostile intent Yes No Unable to Assess
Anger management problem/explosive temper Yes No Unable to Assess
Impulsivity/Risk-taking ("daring") Yes No Unable to Assess
Lack of empathy/remorse Yes No Unable to Assess
Severe destruction of property Yes No Unable to Assess
Behavior/disciplinary problems at school Yes No Unable to Assess
Living in high-crime neighborhood Yes No Unable to Assess

b. Protective factors: (check all that apply)

- Having a positive connection to at least one adult
Perceived support from family or friends
Perceived teachers being fair & feeling safe at school
Strong school performance
Association/attachment with pro-social peers
Other protective factors: _____

c. Any other information, issues, history, or dynamics relevant to client's risk for school violence:

Signature & Discipline*

Date

Co-Signature & Discipline* (if applicable)

Date

*Include License/Certification/Registration Number if applicable

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