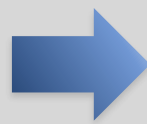


ASSESS



INTERVENE



MONITOR

Suicide Care Management Plan – Substance Use Disorder Treatment

All patients receive **Universal Screening** with the Modified Mini

If yes to question 4, or based on clinical judgment:

Administer C-SSRS screening version

If “Yes” to C-SSRS Questions 4, 5, 6 and/or 7:

Consult with supervisor; refer to licensed clinician trained to complete a risk assessment

Comprehensive Suicide Risk Assessment by licensed clinician

Includes risk & protective factors and access to lethal means

Action Plan

If imminent risk present, refer to psychiatric ED/crisis unit. Otherwise, refer to:
1) Trained mental health clinician in-house, or
2) Outside mental health agency

All receive **Universal Precautions**, which include psychoeducation regarding increased risk with SUD and the fluidity of suicide risk, and Lifeline & Got5 Crisis Text Line numbers

INPATIENT

Re-screen with C-SSRS prior to discharge

OUTPATIENT

Screen for suicide risk at treatment plan review or by clinical judgment

Ideation with intent in past 90 days, or suicidal behavior in the past year
(“Yes” To C-SSRS Questions 4,5,6 and/or 7 OR according to Clinical judgment):

Interventions

1. Complete Stanley-Brown Safety Plan with patient and provide lethal means reduction counseling
2. Develop plan for two foreseeable changes/planning ahead

Treatment Plan

Work with mental health provider (in-house or outside agency) to implement treatment plan

These interventions must be completed by licensed or credentialed clinicians working within their scope of practice, such as RNs, LMHCs, LCSWs, CASACs, psychologists, and psychiatrists who have received suicide-specific training

Warm Hand-off of Records

Forward suicide risk assessment, Safety Plan, and plan for 2 foreseeable changes

Structured Phone Follow-up within 24-72 hours of discharge

Non-demand Caring Contacts sent within 2 weeks and at 3 months after discharge

Screen for suicide risk at every visit

Determine whether patient has connected with MH referral

Review and update safety plan with patient

Call patient after missed appointments

WHEN APPROPRIATE AND WITH CONSENT, **ENGAGE FAMILY THROUGHOUT**

Note: **BLUE** boxes = done with all patients; **PINK** boxes = required for patients at high risk and recommended for those at moderate risk