

Managing Suicide Risk in Behavioral Health Competency

Staff Member:	Job Title:	
Start Date of		
Competency:	Unit:	

This competency has been assigned to the staff member indicated above and must be completed as part of their assigned role. This competency may need to be renewed at a designated future date to ensure the staff member maintains their skill.

The **Staff Member** will discuss with their Preceptor on their previous experiences and skills in establishing a plan and goals for successfully demonstrating their ability to meet the performance elements of the competency.

The **Preceptor** will discuss with the Staff Member the best approach to ensure their success in meeting the performance requirements for this competency. The **Preceptor** will date and initial each performance element when they validate that the Staff Member **has met the requirement of the element and can deliver this aspect of care without direct supervision.** The Preceptor should indicate in the Notes column any areas that the Staff Members should focus on to gain greater proficiency as they continue to develop. If the **Preceptor** has any concerns regarding the Staff Member's ability to meet the performance elements and successfully complete this policy, they should document their concerns on the Notes column and contact their **Supervisor** for direction.

Applicable References & Policies:	•	Organization Policy and Procedure
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Performance Elements		Validation Method (Circle) D – Demonstrated S – Simulated T – Test V - Verbalized				Date Performance Element Met	Preceptor Initials	Notes
Knowledge								
Staff member demonstrates knowledge of the phenomenon of suicide:	D	S	т	١				
Defines basic terms related to suicidality.								
Describes risk and protective factors related to suicide.		S	Т	١	,			
Discusses nursing and best practice/evidence-based literature related to inpatient suicide prevention	D	S	Т	١	,			
 Staff member locates and reviews the resources available for suicide assessment and precautionary interventions, including: Organizational Policy Suicide Assessment Tools Intervention Tools 	D	S	Т	V				
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Performance Elements	Validation Method (Circle) D – Demonstrated S – Simulated T – Test V - Verbalized		Date Performance Element Met	Preceptor Initials	Notes		
 Treatment Planning Process for Suicide Risk Patients Staff member demonstrates knowledge of organizational policy 	D	6	т	v			
and expectations on prevention of Suicide.	U	3					
 Staff member demonstrates knowledge of the role of the Multi- Disciplinary team in addressing risk of suicide 	D	S	т	V			
Managing Personal Beliefs							
Staff member demonstrates self-awareness of emotional reactions, attitudes, and beliefs related to previous experiences with suicide.	D	S	Т	V			
Staff member examines the impact on the patient of staff's emotional reactions, attitudes, and beliefs.	D	S	Т	V			
Staff member participates in a root cause analysis (RCA) or failure mode and effect analysis (FMEA) when a suicide attempt or suicide death occurs on an inpatient unit.	D	S	Т	V			
• Staff member participates in staff debriefing following a suicide attempt or suicide death.		S	Т	v			
Assessing for Suicide							
(For new admissions or consumers returning from off-site evaluation) The staff member determines that consumers are identified at risk for suicide by reviewing the precaution order written by the Physician and/or during hand-off by the Admissions Tech	D	S	Т	V			
• The staff member is assessing the consumer daily for suicide risk as per policy	D	S	Т	V			
• When a consumer verbalizes or demonstrates self-harm behaviors, the staff member implements suicide precautions per policy.	D	S	Т	V			
Staff member demonstrates proper use of the suicide risk screening tool.	D	S	Т	V			

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Performance Elements Staff member communicates to health care team regarding concerns with consumer suicide. Staff member demonstrates the process when a patient attempts suicide		(Cir Dem – Sin T – - Ver S	onsti nulat Test baliz	rated ed ed V	Date Performance Element Met	Preceptor Initials	Notes
Developing and Maintaining a Collaborative, Therapeutic Relation	onship v	vith	the	Patient	•		
• Maintains a nonjudgmental and supportive stance in relating to the patient and family.	D	S	Т	V			
Provides a therapeutic milieu in which the patient feels emotionally safe and supported	D	S	Т	v			
Voices authentic intent to help.	D	S	Т	V			
• Uses evidence to educate the patient about the suicidal mind, symptoms of illness, and effectiveness of intervention.	D	S	Т	V			
• Conveys hope and connection while recognizing the patient's state of mind and need for hopefulness.	D	S	Т	V			
Reconciles the difference and potential conflict between the staff's goal to prevent suicide and the patient's goal to eliminate psychological pain via suicidal behavior.	D	S	Т	V			
Explains factors and motivation for suicidal thoughts and behaviors	D	S	Т	V			
Recognizes the importance of validating psychological pain	D	S	Т	V			
 Views each consumer as an individual with his or her own unique set of issues, circumstances, and mini culture, rather than as a stereotypic "suicidal consumer." 	D	S	Т	V			
• Provides a thorough and concise handoff to other healthcare team members.		S	Т	V			
Developing an ongoing Treatment Plan Based on Continuous As	ssessm	ent					
Provides the least restrictive form of care to address the patient's variable need for safety.	D	S	Т	v			

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Performance Elements	Validation Method (Circle) D – Demonstrated S – Simulated T – Test V - Verbalized				Date Performance Element Met	Preceptor Initials	Notes
Develops a written treatment plan collaboratively with the interprofessional team, patient, family members, and/or significant others with a focus on maintaining safety.	D	S	Т	V			
• Addresses a wide range of individualized interventions that consider the patient and the levels of care related to immediate, acute and continuing suicidal thoughts and behaviors in the plan. Interventions are based upon the patient's identified strengths	D	S	Т	V			
 Develops a collaborative safety plan with the patient/family if possible. 	D	S	т	V			
Managing Environmental Risk Assessment					•		
• Assesses, manages, and maintains patient safety as a focus in the milieu.	D	S	Т	V			
Is able to state situations where continuous patient observation is needed	D	S	Т	v			
Obtains resources needed to provide patient observation when needed	D	S	Т	V			
Demonstrates active rescue processes and related tools.	D	S	Т	V			
Staff member identifies ligature risks demonstrates how to address them including mitigation strategies and communication of risk to the healthcare team.	D	S	т	v			
Staff member identifies precautions taken in the environment to prevent suicide risk.	D	S	Т	v			
Staff member demonstrates the process of conducting contraband rounding to identify ligature and self-harm risks	D	S	Т	V			

I hereby attest that I have completed this assigned competency and feel confident in my ability to perform the listed performance elements. I understand that if I have any questions regarding my abilities to perform in my role that I am to contact my supervisor immediately.

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Signature of Staff Member:	Date:
Signature of Preceptor:	Date:
Signature of Supervisor:	Date:

Notes:

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