

Optimization of Suicide Risk Screening on the Consultation-Liaison Psychiatry Service: A Performance Improvement Project.

Omar Mirza, D.O.¹ Yekaterina Angelova, M.D.¹ Armando Zanker²

1) Department of Psychiatry, NYC Health + Hospitals | Harlem 2) Roaring Sun Studios, New York

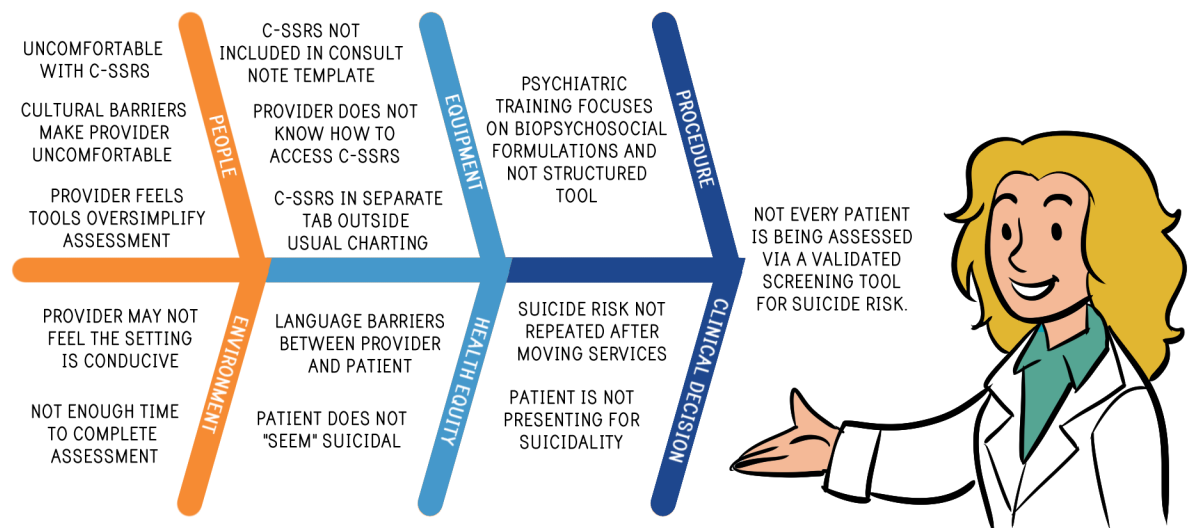
INTRODUCTION

IT HAS BEEN SHOWN THAT PATIENTS WHO DIE BY SUICIDE OFTEN PRESENT TO HEALTHCARE SETTINGS PRIOR TO DEATH.¹



METHODS

SUICIDE RISK ASSESSMENT IN CONSULTATION-LIASON PSYCHIATRY



OUR AIM IS TO INCREASE THE COMPLETION OF THE SUICIDE RISK ASSESSMENT VIA THE C-SSRS SAFE-T PROTOCOL FROM 71% TO GREATER THAN 90% BY JULY OF 2023.

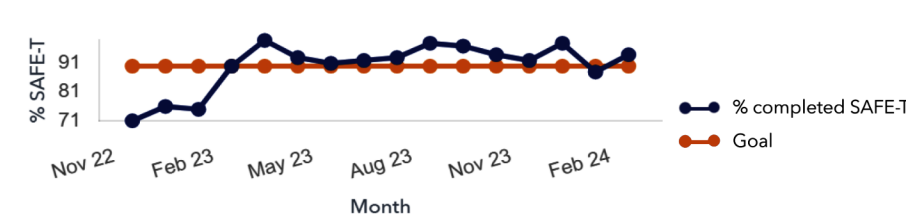
THROUGH IMPLEMENTING STRUCTURED TEMPLATES, WE SAW SIGNIFICANT IMPROVEMENTS!

RESULTS

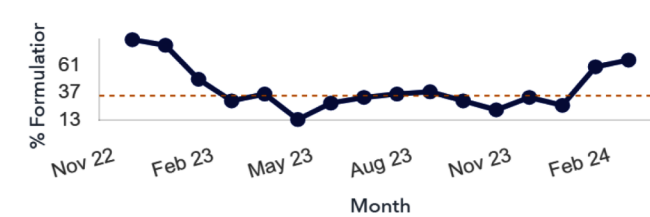
Process Measure: Utilization of template with imbedded SAFE-T



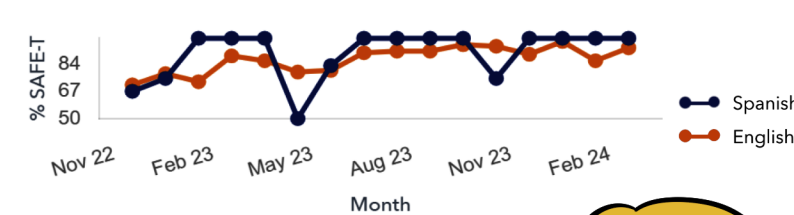
Outcome Measure: SAFE-T completion



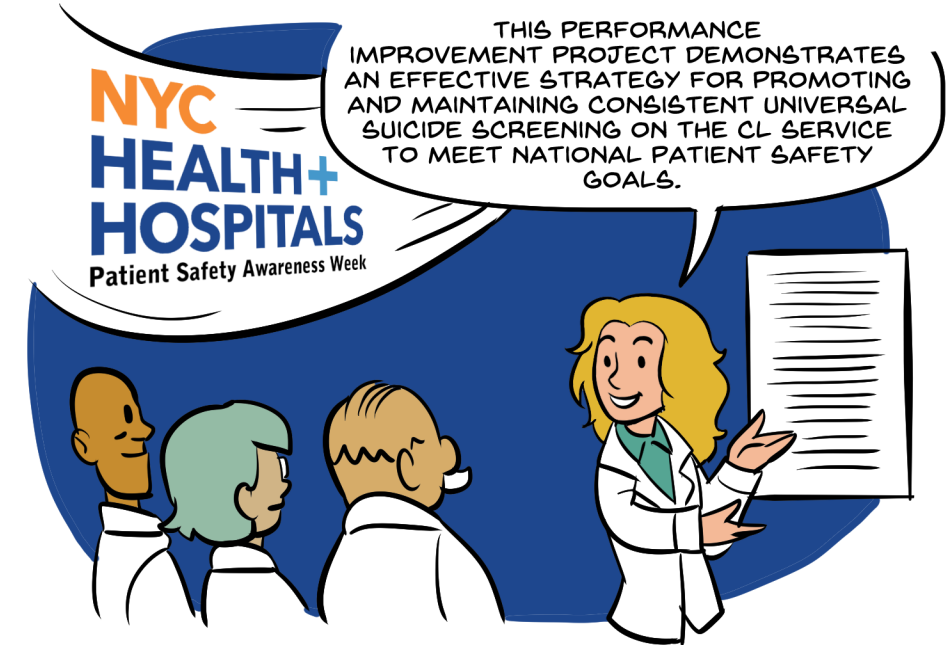
Balancing Measure: Inclusion of Traditional Formulations in Note



Equity Lens: Completion of SAFE-T in Spanish Speakers



DISCUSSION



CONCLUSIONS

BY UTILIZING STRUCTURED METHODOLOGIES TO IDENTIFY BARRIERS AND IMPLEMENTING TARGETED INTERVENTIONS, THE CL SERVICE CAN EFFECTIVELY IMPROVE SUICIDE SCREENING PRACTICES IN SEVERAL MONTHS' TIME, PROMPTLY ENHANCING PATIENT SAFETY AND QUALITY OF PATIENT CARE.



REFERENCES

1) ROATEN K, JOHNSON C, GENZEL R, KHAN F, NORTH CS. DEVELOPMENT AND IMPLEMENTATION OF A UNIVERSAL SUICIDE RISK SCREENING PROGRAM IN A SAFETY-NET HOSPITAL SYSTEM. JT COMM J QUAL PATIENT SAF. 2018;44(1):4-11. DOI:10.1016/J.JCJQ.2017.07.006
 2) THOM R, HOGAN C, HAZEN E. SUICIDE RISK SCREENING IN THE HOSPITAL SETTING: A REVIEW OF BRIEF VALIDATED TOOLS. PSYCHOSOMATICS. 2020 JAN-FEB;61(1):1-7. DOI:10.1016/J.PSYM.2019.08.009. EPUB 2019 SEP 12. PMID: 31629482.