

# **Managing Suicide Risk via Telehealth**

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#### **Establish a Protocol for Telehealth**

Prior to initiating telehealth with any client, develop a crisis or suicide risk protocol within your organization for telehealth. The protocol should include the following:

- Obtain client's local EMS information and verify the closest paramedic location with the county EMS agency (using a non-emergency line or through the county website).
- Identify a family member, community member, or other social support (client support person) who can be called to support the client's safety during crisis (someone in the home or nearby). In the case of an emergency, the professional may contact the client support person to request assistance in evaluating the nature of the emergency and/or initiating 911 from the client's home address.
- Ensure Emergency Contact information is up to date for every session.
- Obtain necessary authorizations to release information.
  - For the emergency contact
  - Other professional service providers (if appropriate)
- Providers should ensure a plan has been established detailing how to maintain phone contact with the client while arranging emergency rescue. Discuss technical troubleshooting with the client and have an agreed upon method for re-establishing contact during service disruption (e.g., via telephone).
- If unable to contact the patient or the patient's emergency contact, a welfare check should be initiated if there are concerns about safety. Police can be contacted through 911 or the local non-emergency number, depending on the level of safety concern.

### **Conducting a Comprehensive Suicide Risk Assessment**

- Use an evidence-based assessment to ask directly about recent suicidal ideation and behaviors. Examples include:
  - o Columbia Suicide Severity Scale
  - o SAMHSA's SAFE-T
- Assess for any emotional impact of COVID-19:
  - o Increased social isolation and decreased social support
  - Social conflict for those sheltering together
  - Increased financial concerns
- Identify protective factors that can be strengthened.
- Ask about increased access to lethal means (stockpiling medication, firearms in the home, etc.).
- Monitor psychiatric symptom levels.
- Continue to assess for presence and/or change in suicidal ideation, intent or behaviors.
- Monitor relevant changes in client's home environment:
  - o Changes in personal appearance

- Changes in room cleanliness
- New individuals in the home

## Clinical Management of Suicide Risk

- The safety planning process is very similar compare to the in-person process. The <u>Brown-Stanley Safety Plan</u> template is evidence-based and available in the public domain. <u>MY3</u> is a social media app that can be used to keep your safety plan on hand and is available to download in the Apple and Google Play stores.
  - Emphasize the importance of developing a safety plan and its usefulness to remain safe and try to avoid needing to go to the emergency department or a medical facility.
- Ensure the client has a copy of the safety plan. Email or text the safety plan to the client.
- During times of social distancing and quarantine, consider the use of virtual activities:
  - O Virtual meet-ups: concerts, museum tours, etc.
  - Online support groups
  - Provide crisis line and text information (211, press 1 or text 898-211 in Maryland, 800-273-TALK for National Suicide Prevention Lifeline)
  - Make sure updated contact information is identified for social supports and professional contacts
  - Adapt and increase contact with the client as needed. Consider having two sessions a week if appropriate.
- Conduct ongoing follow-up and monitoring with the client.
  - Conducting suicide screen and follow-up assessment at every contact for clients at elevated risk
  - Review any changes to risk and protective factors
  - Review and update the safety plan
  - Obtain permission to continue providing follow-up contact. Discuss how follow-up contact will be conducted (via email, phone, text, telehealth, etc.)

### Additional Resources for Suicide Risk Assessment and Management

- Suicide Prevention for Clinicians online module
- American Psychological Association:
  - o <u>Crisis Response Planning for Prevention of Suicidal Behaviors</u>
  - Hope as a Skill: A New Approach to Understanding and Managing Suicide Risk
- American Association for Marriage and Family Therapy:
  - o Relational Suicide Assessment: Risks, Resources, Safety
  - Working with Suicidal Adolescents
- University of Maryland School of Social Work:
  - Suicide Prevention and Post-vention in Work and Professional Organizations