



# Suicidal Ideation Across Long Term Care

Colorado Crisis Line dial 988

Risk assessment tool – Columbia suicide Severity Rating Scale (C-SSRS)

- Plan
- Means
- Intent
- Plan to act? When? Already started?
- Create a safety plan as though the person already has a plan.

Make sure to use the words “thinking of killing yourself” when you assess the patient.

Do not argue with a suicidal person and DO NOT try to convince them that they are fine.

- Lethality assessment
  - Low Risk – Passive SI without plan and no intent
    - q15 min checks, safety plan, regularly reassess risk, id coping skills
  - Medium Risk – active SI with a plan but NO intent or past attempts with current passive SI.
    - q15min checks,
    - remove access to the means of committing suicide,
    - 1:1 companion,
    - safety plan,
    - coping techniques,
  - High Risk – active SI with a plan AND intent or past attempt with active SI with or without plan/intent.
    - consider M1 Hold
      - Usually 72 hrs but the evaluating doctor can cut that short if clinically justified
      - Not to be used as a “just to be safe” measure

[Suicide -C-SSRS-1-14-09-SinceLastVisit\\_AU5.1\\_eng-USori-1 \(1\)Download](#)

[C-SSRS Screen Version](#)



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