

SUICIDE RISK ASSESSMENT

Suicide is the leading cause of death in those aged 15-44.



3 x more likely to attempt suicide.



4 x more likely to have completed suicide.

1 SET THE SCENE

"Have you ever felt that life was not worth living?"

2 IDENTIFY RISK OF SUICIDE

Thoughts

- Have you had thoughts about ending your life?
- What led up to these thoughts?
- How long have you had these thoughts?
- How often do you have these thoughts?

Plans

- Have you made a plan to harm/kill yourself?
- What does this plan include?
- Have you made any preparations?
- Have you spoken to anyone about your plans?

Actions

- Do you intend to act on these plans?
- How close have you come to acting on these plans/thoughts?
- Have you begun to set your affairs in order? (e.g. writing a will, giving away pets)
- How likely are you to act on these plans in the future?

3 ASSESS FUTURE RISK

"If you begin to have thoughts of harming or killing yourself again, what would you do?"

4 IDENTIFY RISK FACTORS

- Past history of self-harm
- Past history suicidal thoughts, plans, actions
- Mental illness (especially depression)
- Substance use/abuse
- Recent stressors (e.g. losing job, break-up)
- Family history of suicide
- Age, gender, marital status

5 IDENTIFY PROTECTIVE FACT.

- Family responsibilities (e.g. children)
- Religion
- Social supports (e.g. friends, neighbours)
- Formal supports (e.g. GP, psychologist, psychiatrist, social worker)

6 SCREENING

- Harm to others, risk of violence, neglect
- Symptoms of anxiety, depression, mania and psychosis, as well as personality traits (e.g. BPD)

7 OVERALL CLINICAL JUDGEMENT

- **Low risk:** No suicidal thoughts/plans/actions and not preoccupied with death.
- **Mild risk:** Passive suicidal ideation (preoccupied with death, but no plans/actions)
- **Moderate risk:** Active suicidal ideation (thoughts of suicide but no specific plan; has identified reasons that motivate them to continue living)
- **High risk:** Suicide plan and/or intention