

Suicide Prevention and Health Care Accreditation: A Panel Discussion with the Joint Commission

August 4, 2022

Gina Malfeo-Martin, MSN, PMH-BC

Brian Ahmedani, PhD, LMSW

Edwin Boudreaux, PhD

Julie Goldstein Grumet, PhD



@SPRCTweets

Funding and Disclaimer



The Suicide Prevention Resource Center at the University of Oklahoma Health Sciences Center is supported by a grant from the U.S. Department of Health and Human Services (HHS), Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Mental Health Services (CMHS), under Grant No. 1H79SM083028-01.

The views, opinions, and content expressed in this product do not necessarily reflect the views, opinions, or policies of CMHS, SAMHSA, or HHS.

Disclosures

No financial relationships or conflicts of interest to report.

About SPRC

The Suicide Prevention Resource Center (SPRC) is the only federally funded resource center devoted to advancing the implementation of the *National Strategy for Suicide Prevention*. SPRC is supported through a grant from the U.S. Department of Health and Human Services' Substance Abuse and Mental Health Services Administration (SAMHSA).

SPRC builds capacity and infrastructure for effective suicide prevention through consultation, training, and resources for state, tribal, health/behavioral health, and community systems; professionals and professional education programs; and national public and private partners and stakeholders.

Land Acknowledgement

We acknowledge that the land that now makes up the United States of America was the traditional home, hunting ground, trade exchange point, and migration route of more than 574 American Indian and Alaska Native federally recognized tribes and many more tribal nations that are not federally recognized or no longer exist.

We recognize the cruel legacy of slavery and colonialism in our nation and acknowledge the people whose labor was exploited for generations to help establish the economy of the United States.

We honor indigenous, enslaved, and immigrant peoples' resilience, labor, and stewardship of the land and commit to creating a future founded on respect, justice, and inclusion for all people as we work to heal the deepest generational wounds.



CME Credit

This activity is being accredited and implemented by the American Psychiatric Association (APA) as part of a subaward from the Suicide Prevention Resource Center (SPRC).

This activity has been planned and implemented in accordance with the accreditation requirements and policies of the Accreditation Council for Continuing Medical Education. The APA is accredited by the ACCME to provide continuing medical education for physicians.

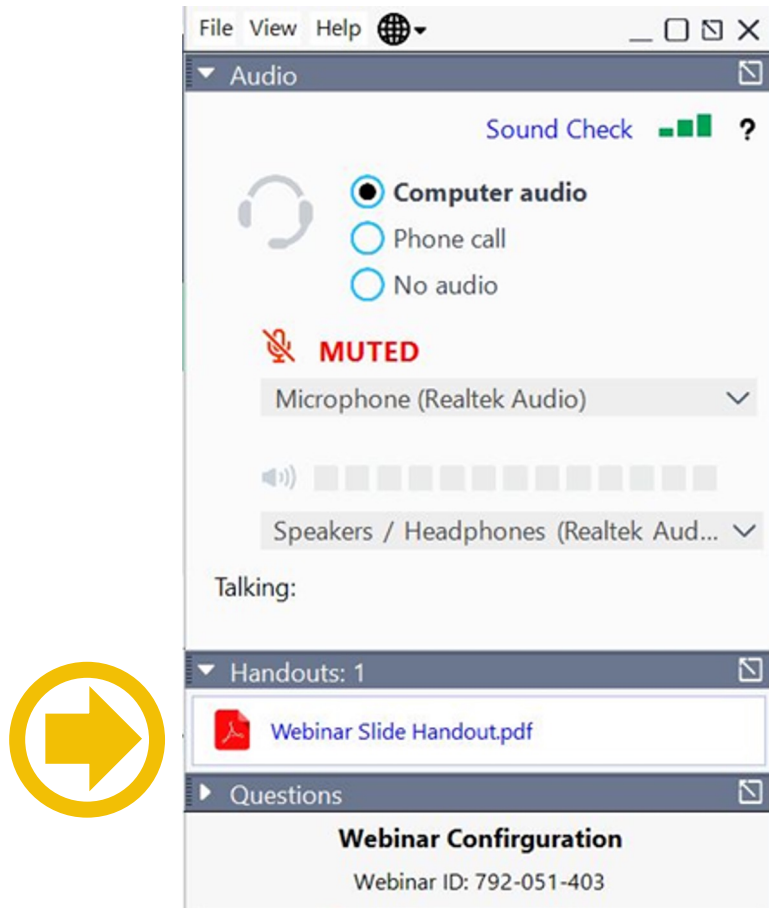
The American Psychiatric Association designates this live activity for a maximum of 1.5 *AMA PRA Category 1 Credits™*. Physicians should only claim credit commensurate with the extent of their participation in the activity.

The Suicide Prevention Resource Center is the sole owner of the activity content, including views expressed in written materials and by the speakers.

How to Download Handouts

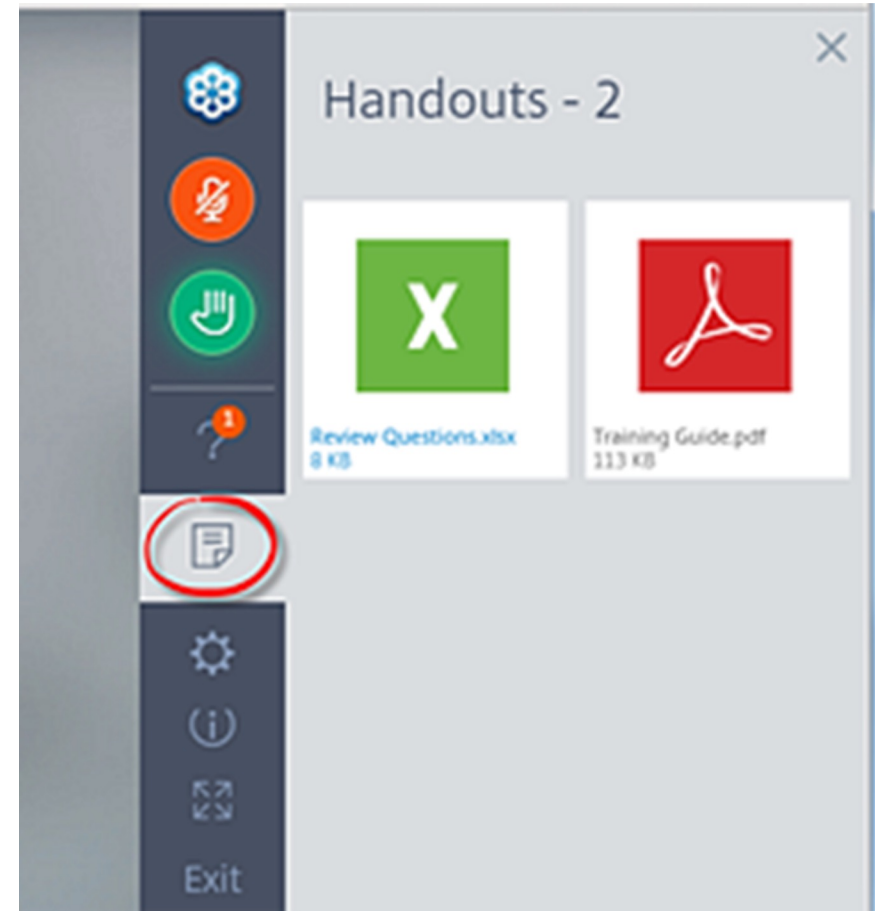
Desktop

Use the “Handouts” area of the attendee control panel.



Instant Join Viewer

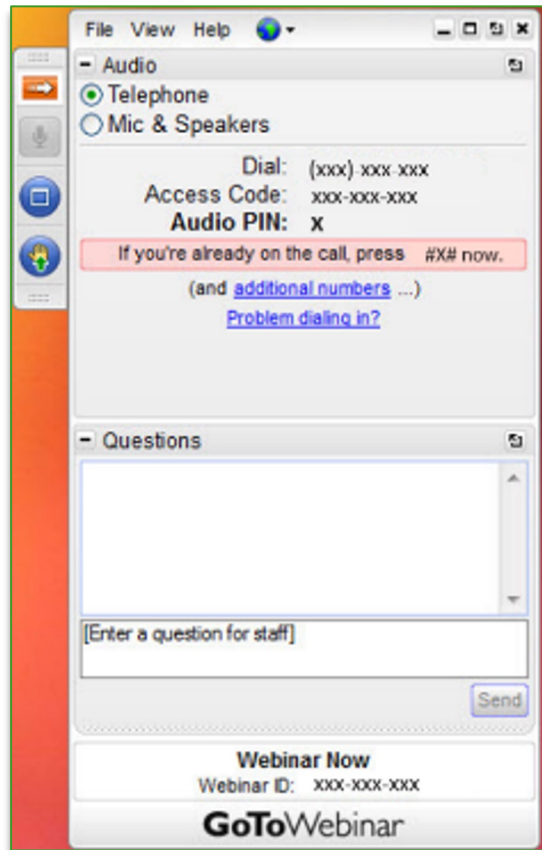
Click the “Page” symbol to display the “Handouts” area.



How to Participate in Q&A

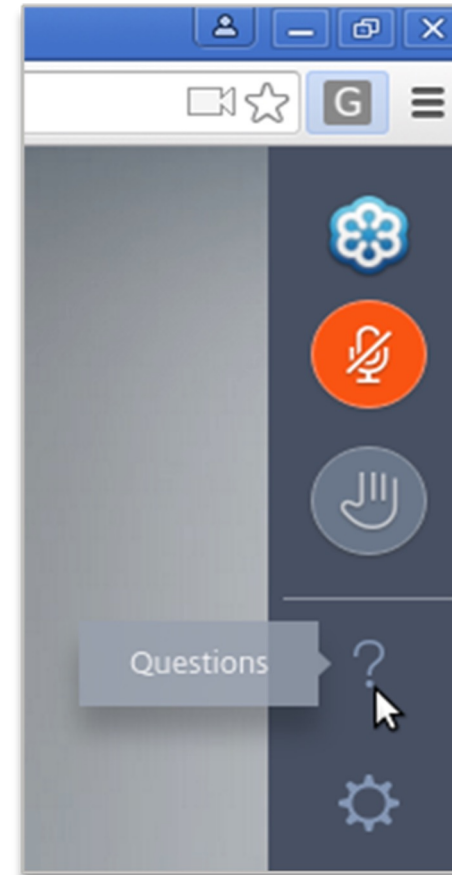
Desktop

Use the “Questions” area of the attendee control panel.



Instant Join Viewer

Click the “?” symbol to display the “Questions” area.



Moderator



Julie Goldstein Grumet, PhD

Learning Objectives

- » Understand which suicide care and intervention practices are required to meet the Joint Commission's National Patient Safety Goal (NPSG) 15.01.01.
- » Discuss frequently encountered challenges in implementing NPSG 15.01.01.
- » Describe suicide prevention as a quality improvement initiative.

Panelists



Gina Malfeo-Martin, MSN, PMH-BC
The Joint Commission



Edwin Boudreaux, PhD
University of Massachusetts
Medical School



Brian Ahmedani, PhD, LMSW
Henry Ford Health

NPSG.15.01.01 – Reduce the Risk for Suicide

EP1 - Environmental Safety

EP2 - Screening

EP3 - Assessment

EP4 – Risk Level & Mitigation

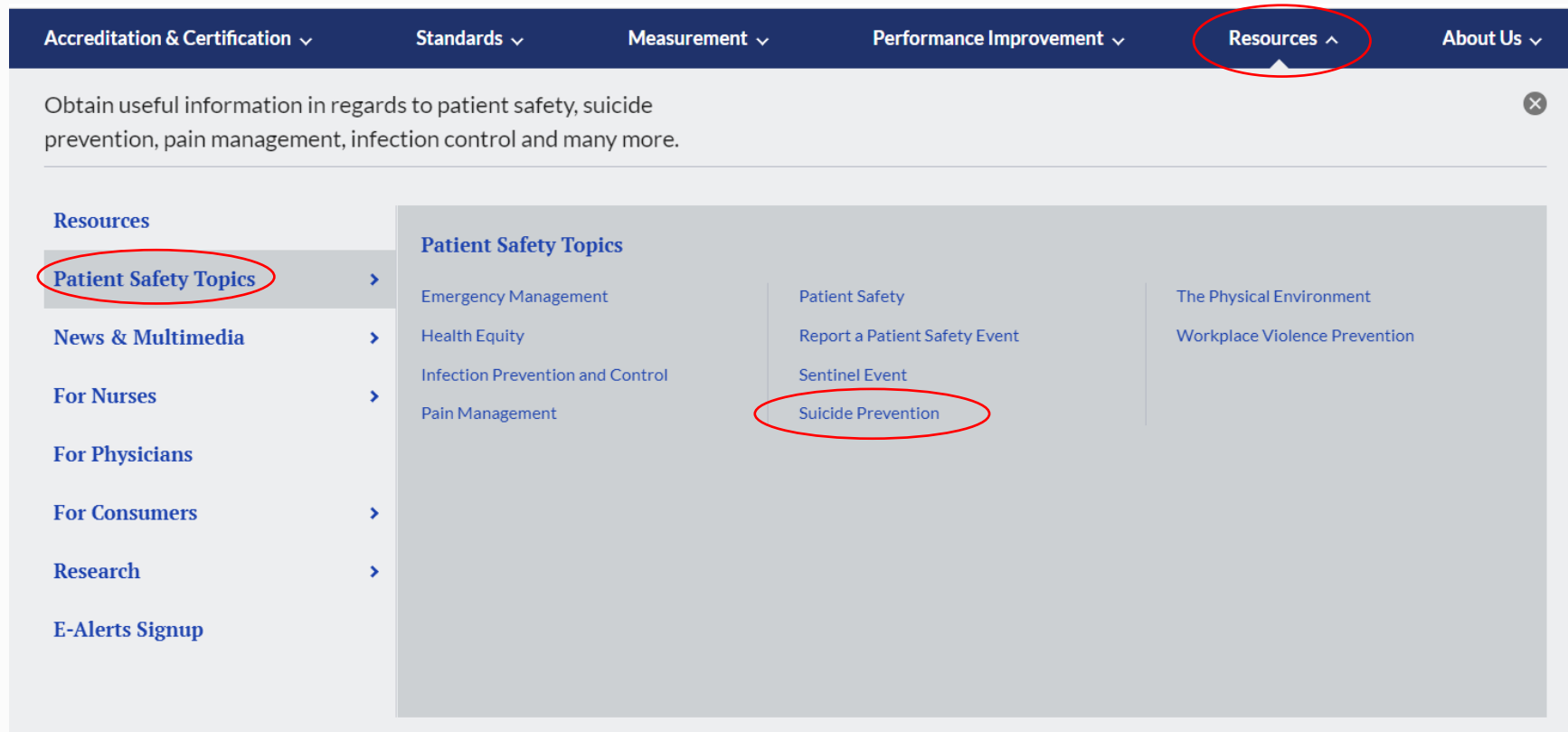
EP5 – Policies & Procedures

EP6 – Discharge Counseling & Follow-Up Care

EP7 – Monitoring Suicide Risk Reduction Strategies

- Joint Commission Suicide Prevention Portal

- www.jointcommission.org → Resources → Patient Safety Topics → Suicide Prevention



<https://www.jointcommission.org/resources/patient-safety-topics/suicide-prevention/>

R³ Report | Requirement, Rationale, Reference

A complimentary publication of The Joint Commission

Issue 18, Nov. 27, 2018
UPDATED Nov. 20, 2019

Published for Joint Commission-accredited organizations and interested health care professionals, *R3 Report* provides the rationale and references that The Joint Commission employs in the development of new requirements. While the standards manuals also may provide a rationale, *R3 Report* goes into more depth, providing a rationale statement for each element of performance (EP). The references provide the evidence that supports the requirement. *R3 Report* may be reproduced if credited to The Joint Commission. Sign up for [small delivery](#).

National Patient Safety Goal for suicide prevention

Effective July 1, 2019, seven new and revised elements of performance (EPs) were applicable to all Joint Commission-accredited hospitals and behavioral health care organizations. **Effective July 1, 2020, these requirements also will be applicable to Joint Commission-accredited critical access hospitals.** These new requirements are at National Patient Safety Goal (NPSG) 15.01.01 and are designed to improve the quality and safety of care for those who are being treated for behavioral health conditions and those who are identified as high risk for suicide. Because there has been no improvement in suicide rates in the U.S., and since suicide is the 10th leading cause of death in the country, The Joint Commission re-evaluated the NPSG in light of current practices relative to suicide prevention.

Engagement with stakeholders, customers, and experts

In addition to an extensive literature review and public field review, The Joint Commission held five [technical expert panel](#) meetings between June 2017 and March 2018. The results of the first four meetings were published in the November 2017, January 2018, and February 2018 editions of *The Joint Commission Perspectives*.

The revisions for the **critical access hospital (CAH) accreditation program only** have been posted on the Prepublication Standards page of The Joint Commission website and will be available online until the end of June 2020. The new and revised EPs also will be published online in the spring 2020 E-dition update of the CAH accreditation program, and in print in the 2020 Update 1 to the *Comprehensive Accreditation Manual* for the CAH accreditation program. After July 1, 2020, please access the new requirement in the E-dition or standards manual.

National Patient Safety Goal

NPSG.15.01.01: Reduce the risk for suicide.

HAP Note: EPs 2-7 apply to patients in psychiatric hospitals and patients being evaluated or treated for behavioral health conditions as their primary reason for care. In addition, EPs 3-7 apply to all patients who express suicidal ideation during the course of care.

CAH Note: EPs 2-7 apply to patients in psychiatric distinct part units in critical access hospitals or patients being evaluated or treated for behavioral health conditions as their primary reason for care in critical access hospitals. In addition, EPs 3-7 apply to all patients who express suicidal ideation during the course of care.

© 2019 The Joint Commission



Suicide Prevention Resources to support Joint Commission Accredited organizations implementation of NPSG 15.01.01, revised July, 2020



SELECTION OF RESOURCES



Questions?

Zero Suicide Toolkit

Your practical guide to systemic change.

The online Zero Suicide toolkit offers free and publicly available tools, strategies, and resources.



RESOURCES

- » Information
- » Materials
- » Outcomes
- » Innovations
- » Research
- » Tools
- » Readings
- » Videos
- » Webinars
- » Podcasts

The screenshot shows the Zero Suicide website homepage. At the top, there is a navigation bar with the Zero Suicide logo, a search bar, and links for 'OUR TEAM', 'WHAT'S NEW', 'CONTACT US', 'LOG IN', and 'ZERO SUICIDE INSTITUTE'. Below the navigation bar, there is a main content area with a large yellow banner. The banner features the title 'Study: Zero Suicide Practices Reduce Suicides' and a sub-headline 'New study shows patients at outpatient clinics using Zero Suicide practices significantly less likely to attempt suicide.' A 'Learn More' button is positioned below the text. To the right of the text is a large, faint circular arrow graphic. Below the banner, there is a section titled 'SAFER CARE FOR THOSE AT RISK OF SUICIDE' with the text 'Zero Suicide is a Transformational Framework for Health and Behavioral Health Care Systems'. To the right of this text is an image of two healthcare professionals in white coats and blue scrubs, with their hands clasped together. Below the text and image, there is a paragraph of text explaining the foundational belief of Zero Suicide. At the bottom of the page, there is a dark grey footer containing logos for the National Alliance for Suicide Prevention, UHS, Zero Suicide Institute, SPRC, and SAMHSA. Below the footer is a large yellow banner with the website URL 'zerosuicide.edc.org' in white text.



FOR MORE INFO

Visit zerosuicide.edc.org to learn more about Zero Suicide.

Join the Zero Suicide listserv at go.edc.org/ZSListserv



How To Claim Credit

Simply follow the instructions below. Email LearningCenter@psych.org with any questions.

1. Attend the virtual event.
2. Submit the evaluation.
3. Select the CLAIM CREDITS tab.
4. Choose the number of credits from the dropdown menu.
5. Click the CLAIM button.



Claimed certificates are accessible in My Courses > My Completed Activities

References

- Ahmedani, B. K., Simon, G. E., Stewart, C., Beck, A., Waitzfelder, B. E., Rossom, R., Lynch, F., Owen-Smith, A., Hunkeler, E. M., Whiteside, U., Operskalski, B. H., Coffey, J. M., & Solberg, L. I. (2014). Health care contacts in the year before suicide death. *Journal of General Internal Medicine*, 29(6), 870–877.
- Chung, D. T., Hadzi-Pavlovic, D., Wang, M., Swaraj, S., Olfson, M., & Large, M. (2019). Meta-analysis of suicide rates in the first week and the first month after psychiatric hospitalisation. *BMJ Open*, 9(3), e023883.
- Haselden, M., Corbeil, T., Tang, F., Olfson, M., Dixon, L. B., Essock, S. M., Wall, M. M., Radigan, M., Frimpong, E., Wang, R., Lamberti, S., Schneider, M., & Smith, T. E. (2019). Family involvement in psychiatric hospitalizations: Associations with discharge planning and prompt follow-up care. *Psychiatric Services*, 70(10), 860–866.
- Grant CL and Lusk JL. A Multidisciplinary Approach to Therapeutic Risk Management of the Suicidal Patient. *Journal of Multidisciplinary Healthcare*, 2015;(8):291-298.
- Knesper DJ, American Association of Suicidology, and Suicide Prevention Resource Center. Continuity of care for suicide prevention and research: Suicide attempts and suicide deaths subsequent to discharge from the emergency department or psychiatry inpatient unit. Newton, MA: Education Development Center, Inc. 2010.
- National Action Alliance for Suicide Prevention. Washington, DC: National Action Alliance for Suicide Prevention, 2012, <https://theactionalliance.org/sites/default/files/clinicalcareinterventionreport.pdf>

References

- Olsson, M., Mechanic, D., Hansell, S., Boyer, C. A., Walkup, J., & Weiden, P. J. (2000). Predicting medication noncompliance after hospital discharge among patients with schizophrenia. *Psychiatric Services, 51*, 216–222.
- Roaten K, et al. Development and Implementation of a Universal Suicide Risk Screening Program in a Safety-Net Hospital System. *Joint Commission Journal of Quality and Patient Safety*, 2018 Jan;44(1):4-11.
- Stanley B, et al. “Comparison of the safety planning intervention with follow-up vs usual care of suicidal patients treated in the emergency department.” *JAMA Psychiatry*, 2018;75(9):894-900.
- Substance Abuse and Mental Health Services Administration. “Suicide Care in Systems Framework.” Waltham, MA: SAMHSA, Suicide Prevention Resource Center, Clinical Care and Intervention Task Force, 2011.
- The Joint Commission. (2019, November 20). R3 Report: Requirement, rationale, reference: National patient safety goal for suicide prevention. Retrieved from www.jointcommission.org/resources/patient-safety-topics/suicide-prevention/
- The Joint Commission. (2018, November 15). Suicide prevention resources to support Joint Commission accredited organizations implementation of NPSG 15.01.01, revised November 2018. Retrieved from www.jointcommission.org/resources/patient-safety-topics/suicide-prevention/

Thank you!

Gina Malfeo-Martin, MSN, PMH-BC
GMalfeo-Martin@jointcommission.org

Brian Ahmedani, PhD, LMSW
BAhmeda1@hfhs.org

Edwin Boudreaux, PhD
Edwin.Boudreaux@umassmed.edu

Julie Goldstein Grumet, PhD
jgoldstein@edc.org

Suicide Prevention Resource Center

1000 N.E. 13th Street
Nicholson Tower, Suite 5900
Oklahoma City, OK 73104

sprc.org