New Sentinel Event Alert on Preventing Suicide in Health Care Settings
Alert to help health care providers identify and treat suicide ideation

(OAKBROOK TERRACE, Illinois – February 24, 2016) – The Joint Commission today issued Sentinel Event Alert: Issue 56 on preventing suicide in health care settings. The new alert aims to assist health care providers, including primary, emergency and behavioral health clinicians, in better identifying and treating individuals with suicide ideation. The alert also provides screening, risk assessment, safety, treatment, discharge and follow-up care recommendations for at-risk individuals.

The Joint Commission is bringing attention to this issue because its Sentinel Event Database* received 1,089 reports of suicides occurring from 2010 to 2014. The most common root causes documented were shortcomings in assessment, most commonly psychiatric assessment. In addition, 21.4 percent of Joint Commission-accredited behavioral health care organizations and 5.14 percent of Joint Commission-accredited hospitals, for which a related National Patient Safety Goal was applicable, were non-compliant in 2014 with conducting a risk assessment that identifies specific patient characteristics and environmental features related to suicide risk.

“We are shining a light on this issue because the tragic reality is that many health care providers do not detect suicidal thoughts of individuals who eventually die by suicide, even though most victims of suicide received health care services in the year prior to death,” said Ana Pujols McKee, MD, executive vice president and chief medical officer, The Joint Commission. “As a result, it is crucial for at-risk patients to receive timely and supportive care. Health care organizations are encouraged to develop
clinical environment readiness by identifying, developing and integrating comprehensive behavioral health, primary and community care resources to assure the continuity of care for at-risk individuals.”

Health care providers across all settings play an important role in detecting suicide ideation, according to the alert. First, they should review each patient’s personal and family medical history for suicide risk factors, screen all patients for suicide ideation and review screening questionnaires before patients leave or are discharged. Next, they should take immediate action for patients in acute suicidal crisis, as well as conduct safety planning for all patients with suicide ideation. Finally, they should manage evidence-based treatments and discharge plans that directly target suicidality, as well as participate in education on how to identify and respond to at-risk patients and document decisions regarding care and referral.

To access the full alert, as well as an infographic and chart of related Joint Commission standards to help health care organizations take appropriate actions in accordance with Joint Commission requirements, visit http://www.jointcommission.org/sentinel_event.aspx.

About Sentinel Event Alert

*Sentinel Event Alert* is published periodically by The Joint Commission for health care professionals. It identifies specific types of sentinel and adverse events and high risk conditions, describes their common underlying causes, and recommends steps to reduce risk and prevent future occurrences. *Sentinel Event Alert* topics are determined by The Joint Commission’s Patient Safety Advisory Group comprised of external members with significant expertise in health care and patient safety, presided over by Dr. McKee. Sentinel event statistics and previous issues of *Sentinel Event Alert* are available on [The Joint Commission website](http://www.jointcommission.org).

*The reporting of most sentinel events to The Joint Commission is voluntary and represents only a small proportion of actual events. Therefore, these data are not an epidemiologic data set and no conclusions should be drawn about the actual relative frequency of events or trends in events over time.*

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**The Joint Commission**

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