Guidance on Suicide Prevention

There are some occasions when nobody will be able to predict that a person will take their own life. However most people contemplating taking their own life do not want to die they just want to end the distress they are experiencing. If the person is given the right help and support and they are willing to accept this, suicides can be prevented.

If you have concerns that a person may be at risk don’t be afraid to ask about suicidal ideas/intent: It will not increase risk. It is perfectly reasonable to ask questions such as are you feeling hopeless, have you had thoughts of taking your life, when did you last have these thoughts, do you have a plan, have you ever made a suicide attempt? As the person has presented themselves to surgery they are likely to be expecting such questions.

Ask:

- Are you feeling hopeless
- Have you had thoughts of taking your life?
- When did you last have these thoughts, do you have a plan, how often do you have them?
- Have you ever made a suicide attempt?

When exploring someone’s problems, consider the following as they are likely to indicate increased risk of completed suicide:

- Does the person have current intent, plan, access to means (Doctors, Dentists, Vets, Farmers etc)
- Have there been previous suicide attempts?
- Is the person using alcohol/drugs? This increases risk
- Is there a history of psychiatric diagnosis and or history of impulsivity/poor self-control?
- Have they recently received a psychiatric diagnosis?
- Recent significant change in behaviour or habits
- Check on hopelessness: Presence, duration and severity
- Has there been recent loss? Consider physical, financial, personal or recent discharge from hospital?
- Family history of suicide?
- Are they experiencing domestic abuse?
- Involvement in criminal proceedings
- History of abuse: physical, sexual, emotional
- Is the person experiencing bullying or discrimination
- Co-morbid health problems. Particularly recently diagnosed
- Consider demographics: Elderly or young adult, unmarried, male, living alone, unemployed or in temporary work, having financial worries

The following aspects are likely to reduce risk:

- Positive social support from family and friends
- Spirituality and Family responsibility
- Having dependent children at home, pregnancy
- Life satisfaction, positive coping and problem-solving skills
- Positive therapeutic relationship(s)
- Engagement in physical activity
- Active hobbies

Warning Signs:

- *Threatening to hurt or kill self*
- *Having no hope, or seeing no way out*
- *Looking for means*
- *Seeking access to pills or other means*
- *Talking or writing about death, dying or suicide*
- *Making preparations for after their death, for example care of pets*
A change in the usual presentation

Presence of the above should indicate an immediate referral to the Crisis Team on 01709 302670

PLEASE REMEMBER TO RECORD AND COMMUNICATE THE PATIENT’S TELEPHONE NUMBER

If any of the following are present then consider a non-urgent referral for mental health treatment on 01709 302670:

- Hopelessness
- Rage, anger, seeking revenge or acting reckless or recent engagement in risky activity
- Expression of feeling trapped or Withdrawal from support
- Increased alcohol/drug use
- Significant anxiety, agitation, unable to sleep or sleeping all the time
- Dramatic mood changes and/or no reason for living, no sense or purpose
- Significant changes in appearance, personal hygiene, weight loss etc.
- Hearing voices telling them to harm themselves

Useful Additional Telephone Numbers:  Samaritans – 116123 (Freephone)
Women’s Aid 0808 2000247 – http://www.womensaid.org.uk

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