

The Zero Suicide Initiative for Behavioral Health Care

"It is critically important to design for zero even when it may not be possible. It is about purposefully aiming for a higher level of performance."

- Thomas Priselac, CEO, Cedars Sinai Medical Center

What is the Zero Suicide Initiative?

People who die by suicide are touching the health care system: 83% of those who die by suicide have seen a behavioral health care provider in the year before their death (Ahmedani et al., 2014). Across health and behavioral health care settings, there are many opportunities to identify and provide care to those at risk for suicide.

The Zero Suicide framework is a system-wide, organizational commitment to safer suicide care in health and behavioral health care systems and is based on the realization that suicidal individuals often fall through the cracks in a sometimes fragmented health care system. A systematic approach to quality improvement in these settings is both available and necessary.

Background of the Initiative

Inspired by health care systems that had seen dramatic reductions in patient suicide, Zero Suicide began as a key concept of the 2012 National Strategy for Suicide Prevention, and quickly became a priority of National Action Alliance for Suicide Prevention (Action Alliance), and a project of Education Development Center's Suicide Prevention Resource Center (SPRC), supported by the Substance Abuse and Mental Health Services Administration (SAMHSA).

A Commitment to Quality Care and Safety

For health care systems, this approach represents a commitment to both patient safety, the most fundamental responsibility of health care, and to the safety and support of clinical staff, who do the demanding work of treating and supporting suicidal patients.

Zero Suicide implementation requires transformative change that cannot be borne solely by the practitioners providing clinical care. Zero Suicide requires a system-wide approach to improve outcomes and close gaps.

Essential Elements of Suicide Care

After researching successful approaches to suicide reduction, the Action Alliance's Clinical Care and Intervention Task Force identified seven essential elements of suicide care for health and behavioral health care systems to adopt:

- ❖ **Lead** system-wide culture change committed to reducing suicides
- ❖ **Train** a competent, confident, and caring workforce
- ❖ **Identify** individuals with suicide risk via comprehensive screening and assessment
- ❖ **Engage** all individuals at-risk of suicide using a suicide care management plan
- ❖ **Treat** suicidal thoughts and behaviors using evidence-based treatments
- ❖ **Transition** individuals through care with warm hand-offs and supportive contacts
- ❖ **Improve** policies and procedures through continuous quality improvement

Zero Suicide Results in Behavioral Health Settings

The Zero Suicide approach builds on successes supported by data in health care organizations, including Henry Ford Health System and Centerstone. With a focus on suicide care using such rigorous quality improvement processes, Henry Ford Health System demonstrated stunning results—a 75% reduction in the suicide rate among their health plan members (Coffey 2007). Centerstone, one of the nation's largest not-for-profit CMHCs, saw a reduction in suicide deaths from a baseline of 35 per 100,000 to 13 per 100,000 after implementing Zero Suicide for 3 years.