Essential Steps & Assessment for Suicide Prevention in Primary Care & Supporting Clinicians

Suicide is a growing public health crisis in the U.S., affecting both patients and healthcare workers. As essential providers of primary care for 31.5 million patients, health centers have a vital opportunity to identify and treat patients at risk for suicide while simultaneously supporting staff who also may be at risk. This fact sheet and accompanying brief detail key facts and steps in achieving excellence in implementing Suicide Safer Care for patients and staff.

A Preventable Crisis: Suicide in the U.S.

Suicide is a leading cause of death for people in the U.S., and suicide rates reached their highest recorded levels in 2022. Health-care professionals regularly encounter patients at risk for suicide, and nearly half of all individuals who later end their lives by suicide visit a primary care provider in the month before their passing, making these visits crucial opportunities to intervene. Unfortunately, many clinicians and staff lack dedicated training in suicide prevention. There is an acute need and opportunity for health centers to implement simple evidence-based strategies to screen, assess, and intervene with patients at risk.

The Need to Support Clinicians at Risk

The crisis of suicide also affects staff, particularly clinicians, at health centers. Physicians are significantly more likely to die by suicide than the general population, as are PAs, NPs, and nurses. Many do not seek care for fear of stigma or professional repercussions. To help address these risks while strengthening their workforce, health centers can take active steps to help prevent suicide amongst staff and create a culture of wellness.

Key Facts

- 49,449 Lives lost (estimated) to suicide in 2022
- 45% of patients who die by suicide visit a primary care provider in the month before ending their lives
- 37% Increase in suicide rates from 2000-2018
- 51% of physicians know a physician who has considered, attempted, or ended their life by suicide
What Health Centers Can Do: Achieving Excellence in Suicide Prevention

“Health centers face unique challenges to suicide prevention, but they can start with understanding that [prevention] is a clinical priority and not just another initiative. A helpful way to look at it is to think about the population of patients with a behavioral health need in the same way you would your population with diabetes, with the same level of accountability.”

- Dr. Virna Little, PsyD, LCSW-r, ACU Advisory Council Member

As dedicated providers of primary care to medically underserved communities, health centers have a unique opportunity to implement evidence-based best practices to reduce the risk of suicide in both patients and staff. To do so, health centers can implement Suicide Safer Care, a comprehensive approach by which organizations implement systems to identify, assess, and intervene with patients at risk for suicide while simultaneously fostering a culture of wellness and awareness in staff.

**Key Strategy:** Suicide Safer Care

Implement a comprehensive, evidence-based protocol to screen, assess, and care for patients at risk of suicide, provide training in suicide prevention to staff and leadership, and take proactive steps to cultivate staff wellness and awareness of suicide risks in managers.

To maximize effectiveness, CHCs can take a holistic approach to prevention that includes staff at all levels of the organization and awareness of suicide risks in both patients and providers.

**Key Consideration:** A Holistic Approach

**Key Steps:** Assess Your Needs, Develop a Plan, & Implement Best Practices

- Assess your health center’s current suicide prevention initiatives.
- Implement suicide prevention training for clinicians and staff to identify, assess risk, and intervene with patients at risk.
- Train leaders and managers in suicide awareness and cultivate a well-developed system of staff wellness (learn more at ACU’s STAR2 Center).
- Make an organizational commitment to suicide prevention as a clinical priority with integration into electronic health records, development of clinical pathways, population health efforts, and quality improvement.
Assessing Your Health Center: Steps in the Journey to Excellence

Every health center is on its own stage of the journey to excellence in fostering a culture of Suicide Safer Care for patients and staff. The below graphic visualizes four categories of CHC advancement in this area, from beginning to leading. What step of the journey is your health center on?

- **Beginning**
  - Some training for providers to identify and care for individuals at risk during primary care appointments
  - Developing clinical pathways, adding suicide ICD-10 codes to problem lists
  - Some employee assistance and wellness support available for staff at risk

- **Intermediate**
  - Providers and care team members trained in basic suicide prevention
  - PHQ-9, C-SSRS, & ASQ screening incorporated with EHR integration
  - Defined employee assistance programs, wellness support, and some training available for managers and leaders

- **Advanced**
  - Providers, care teams, and leadership staff trained in suicide prevention principles
  - EHR-integrated PHQ-9, C-SSRS, & ASQ screening standardized and safety planning/lethal means restriction incorporated
  - Well-defined EAP, wellness, and manager training programs

- **Leading**
  - Providers, care teams, leadership, and support staff thoroughly trained in suicide prevention
  - Screening tools and interventions incorporated and suicide prevention treated as clinical priority
  - Defined employee support programs, managerial training, and postvention plans in place
"Because they offer multiple service lines and because of their large numbers of uninsured patients, health centers have a unique opportunity of being the only system that many people interface with, particularly in rural areas. And given the increased suicide rates in youth of color and other populations that FQHCs serve, they’re in a unique position to ask their patients about suicide."

- Dr. Virna Little, PsyD, LCSW-r, ACU Advisory Council Member

**Organizational Approaches to Address Suicide Risk in Healthcare Professionals:** this brief provides simple organizational strategies to reduce risk and support wellness.

**Zero Suicide:** providing the framework upon which Suicide Safer Care is based, this institute provides toolkits, resources, and more to implement suicide prevention for patients and staff.

**References**