

Partial Hospital and Intensive Outpatient Programs - Unit Practice Manuals  
 John Dempsey Hospital - Department of Nursing  
 The University of Connecticut Health Center

**GUIDELINE FOR: Safety Assessment**

**POLICY:** To have guidelines to assist clinicians in the PHP/IOP with safety assessment of patients in crisis. These are the risk factors to be considered during the assessment.

**PROCEDURE:**

**RESPONSIBILITY**

All PHP/IOP  
 Clinicians

**ASSESS RISK PARAMETERS:**

1. Suicidal:

- Sex - Women attempt suicide 3 times more often than men, but men succeed 3 times as often.
- High Risk Groups - Adolescents under 19, the elderly and men over 45
- Persons with Depression (10-20%) commit suicide;
- Persons who have attempted suicide present a lifelong risk 64 times greater than the general population to complete a suicide;
- Persons with a specific fatal plan and an available method present a greater risk;
- Divorced and widowed persons over 45 years present a greater risk;
- The most common method is use of a firearm.
- A past history of violence is the most common predictor of a future violence.
- Feelings of hopelessness and/or despair, as well as frank suicidal thoughts.
- Any specific plan(s)?
- Intent and means to act on his/her plan?

2. Self-harming Behavior:

- Current self-harming behavior? (e.g.: burning, cutting, picking at skin lesions, head banging, etc.)

3. Homicidal/Aggressive Behavior:

- Homicidal thoughts with intent to harm another person, animal
- Aggressive behavior toward another person, animal (including firesetting)

4. Impulsive Behavior:

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- Poor impulse control, increased urges to act on thoughts in order to alleviate anxiety.
5. Current Physical/Sexual Abuse: (Patient presents an increased risk for suicide if being victimized by abuse.)
    - Is the patient currently being abused physically and/or sexually?
  6. Current Psychotic Symptoms: (Patient is an increased risk for suicide with any mental impairment that severely affects rational thought and judgement.)
    - Current disorganized thoughts, hallucinations, delusions, or cognitive changes?
  7. Recent Life Stressor:
    - Has the patient experienced any life stressor (e.g. a death, a serious relationship issue, summons to court, auto accident, etc.) since last visit to PHP/IOP?
  8. Increasing Symptoms of Depression:
    - Self or family report increasing symptoms of depression (e.g. social isolation, refusing food and/or fluids and/or medications, other vegetative symptoms of depression, etc.)
  9. Current Alcohol/Drug Use: (Alcohol dependence increases the risk of suicide by 15%)
  10. Illness: (Often, severe or chronic illness intensifies suicidal intent.)
    - Currently, does the patient have a chronic or severe illness?
  11. Social Supports: (Social isolation contributes to motivation for suicide.)
    - Recent withdrawal from family, friends and socially isolating.
  12. History:

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- Any prior suicide attempt?
- History of family suicide?
- Victim of physical/sexual abuse?
- History of violence?
- Other relevant history?

**APPROVAL:**

**EFFECTIVE DATE:** 4/08

**REVISION DATES:**