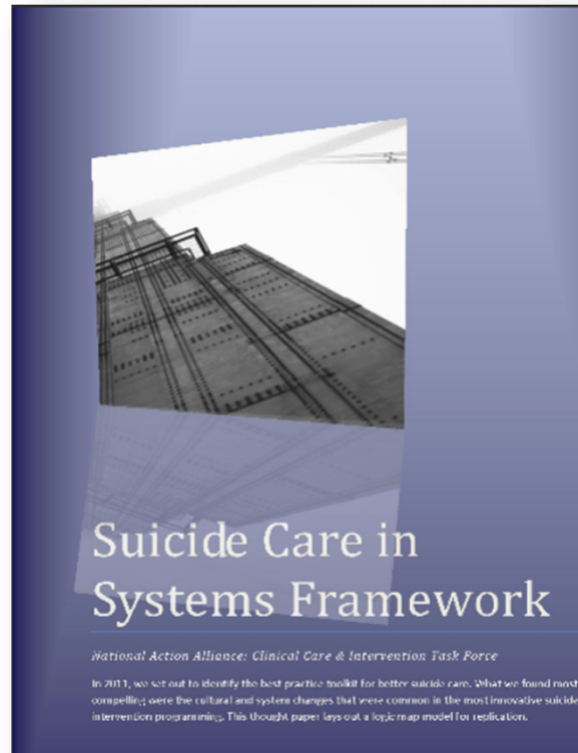


WHAT IS ZERO SUICIDE/ SUICIDE SAFE CARE? WHY NOW?

Texas Suicide Prevention Symposium
August 2015
Mike Hogan, Ph.D.

Where it Began: Action Alliance Clinical Care and Intervention Task Force Report

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Access at: www.zerosuicide.com

Zero Suicide/Suicide Safe Care is...

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- A framework for systematic, clinical suicide prevention in behavioral health and healthcare systems.
- Now embedded in the National Strategy for Suicide Prevention.
- A focus on error reduction and safety in healthcare.
- A set of best practices and tools including www.zerosuicide.com.
- A movement and a mission...**strong** in Texas



2012 National Strategy for Suicide Prevention:

GOALS AND OBJECTIVES FOR ACTION

**A report of the U.S. Surgeon General
and of the National Action Alliance for Suicide
Prevention**

GOAL 8: Promote suicide prevention as a core component of health care services.

GOAL 9: Promote and implement effective clinical and professional practices for assessing and treating those at risk for suicidal behaviors.

Why? Suicide in Health Care Settings is a Problem

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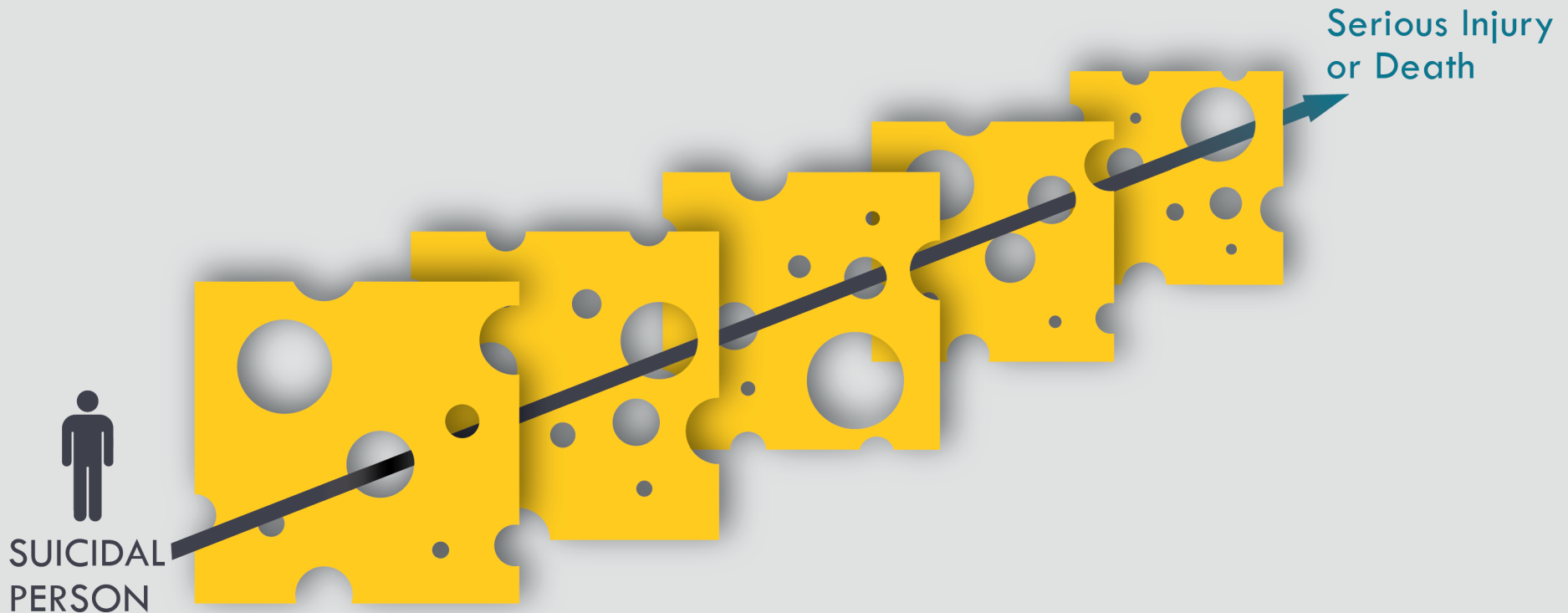
- 45% of people who died by suicide had contact with **primary care** providers in the month before death. Among older adults, it's 78%.
- 19% of people who died by suicide had contact with **mental health** services in the month before death. About 1/3 were receiving mental health care
- South Carolina: 10% of people who died by suicide were seen in an **emergency department** in the two months before death.

And...Suicide in Mental Health Care is a Problem

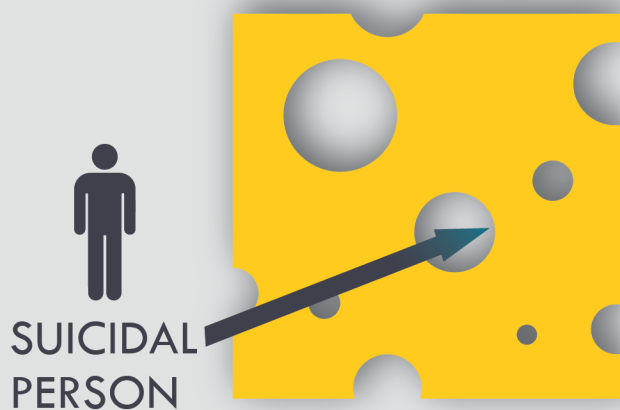
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- **Ohio:** Between 2007-2011, 20.2% of people who died from suicide were seen in the public behavioral health system within 2 years of death.
- **New York:** In 2012 there were 226 suicide deaths reported among consumers of public mental health services, accounting for 13% of all suicide deaths in the state.
- **Vermont:** In 2013, 20.4% of the people who died from suicide received care from state-funded mental health or substance abuse treatment agencies within 1 year of death.

WITHOUT IMPROVED SUICIDE CARE, PEOPLE SLIP THROUGH GAPS

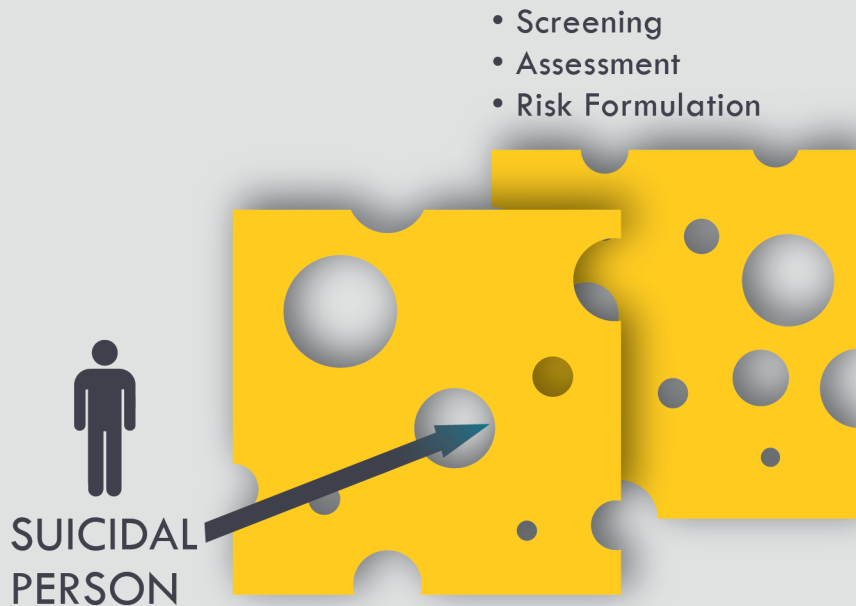


Adapted from James Reason's "Swiss Cheese" Model Of Accidents



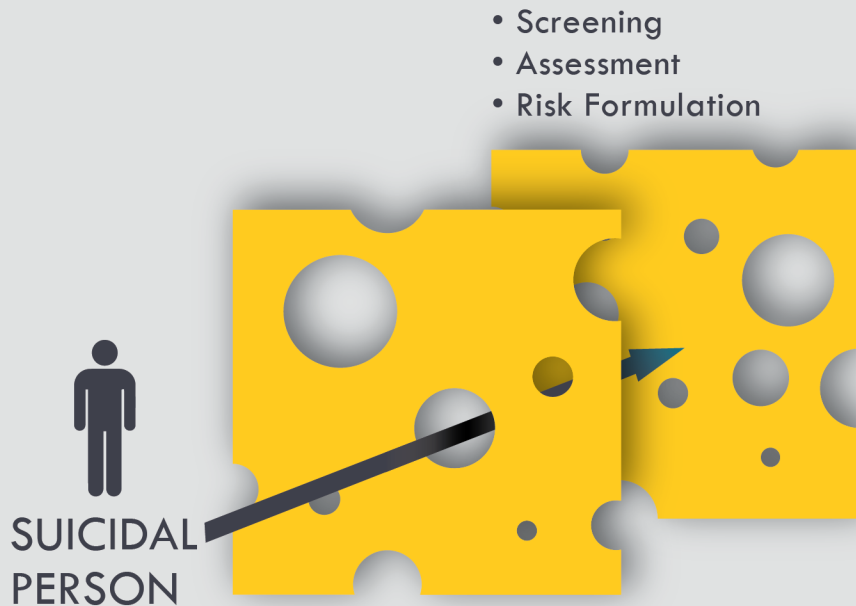
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THE TOOLS OF ZERO SUICIDE FILL THE GAPS



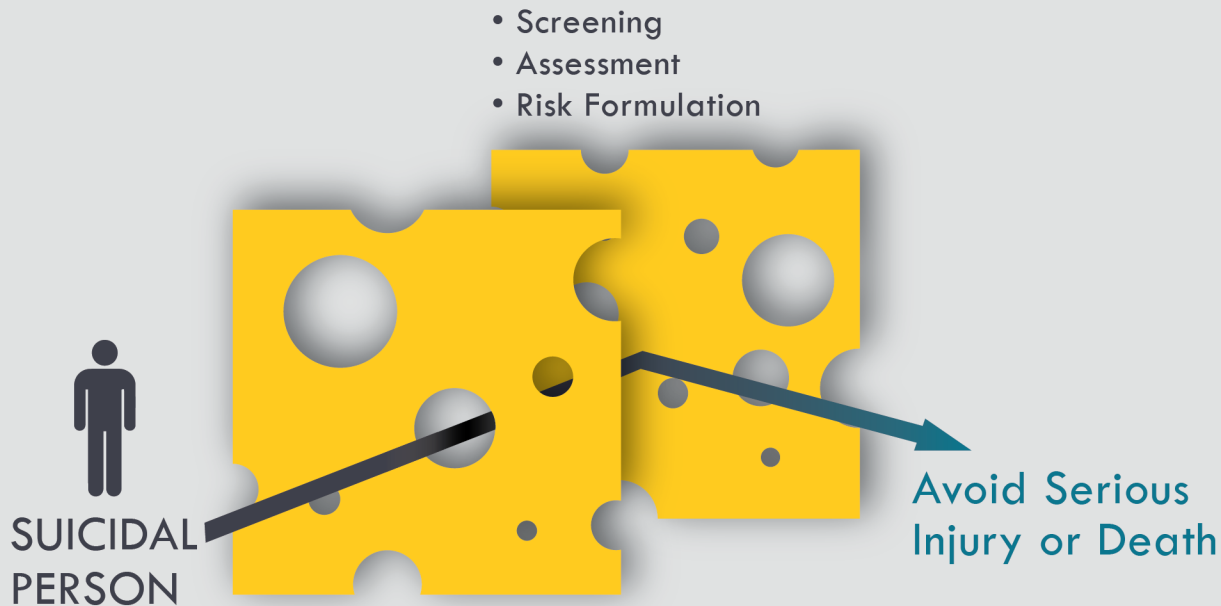
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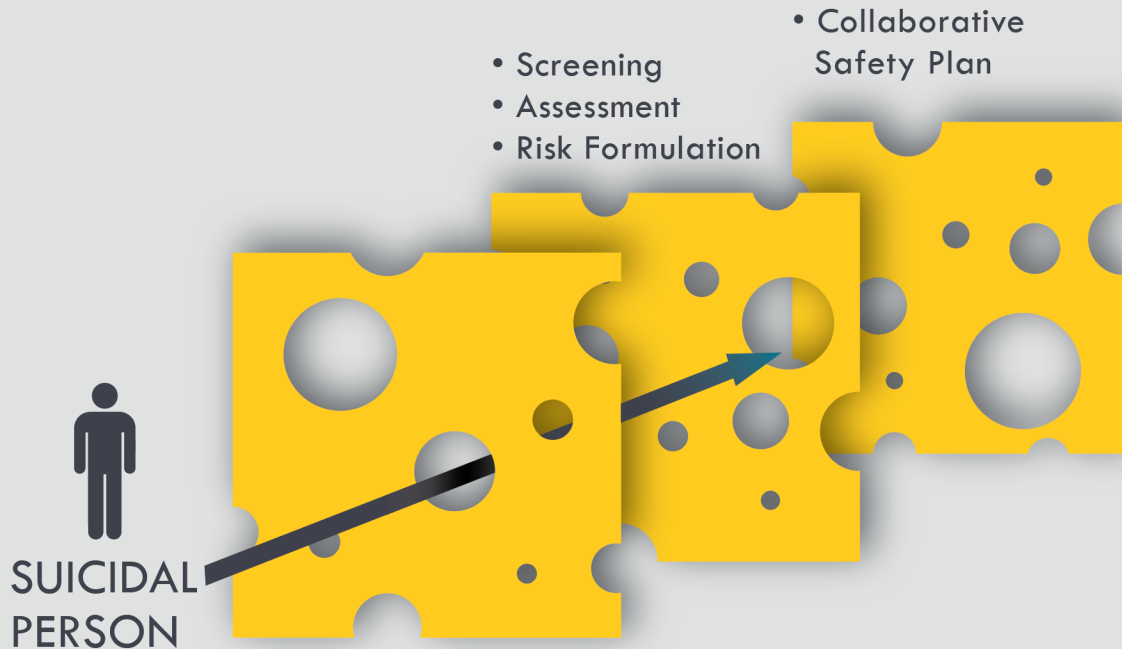
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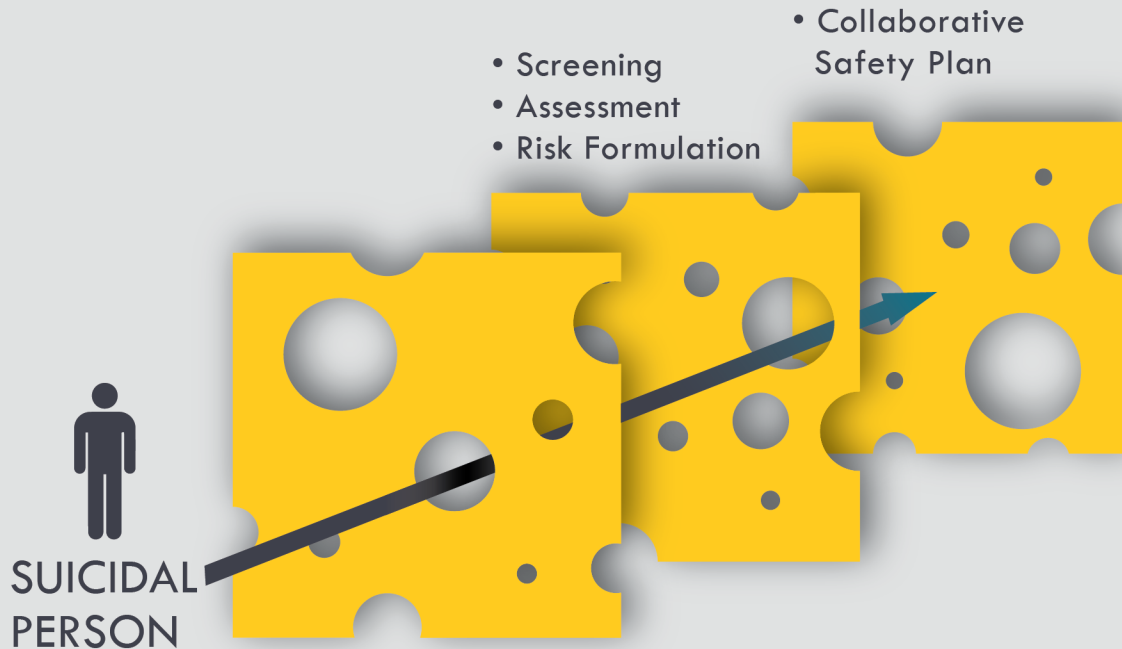
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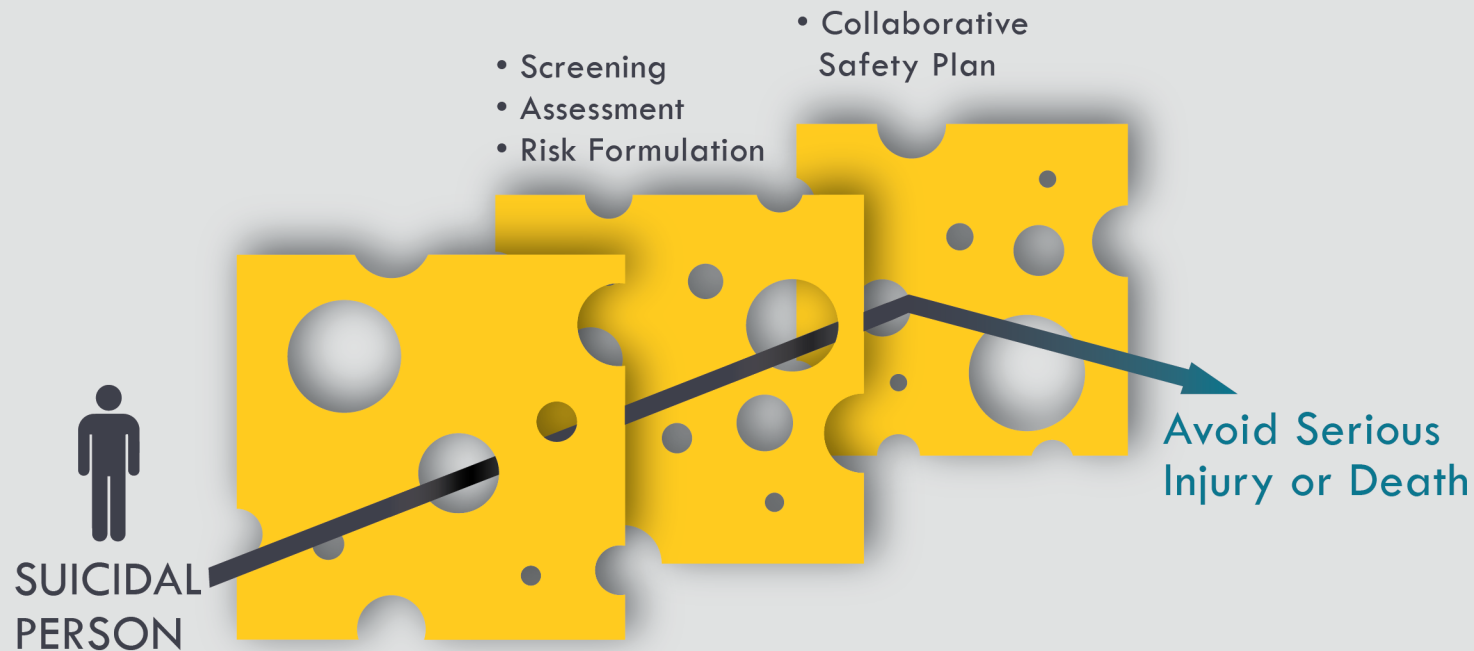
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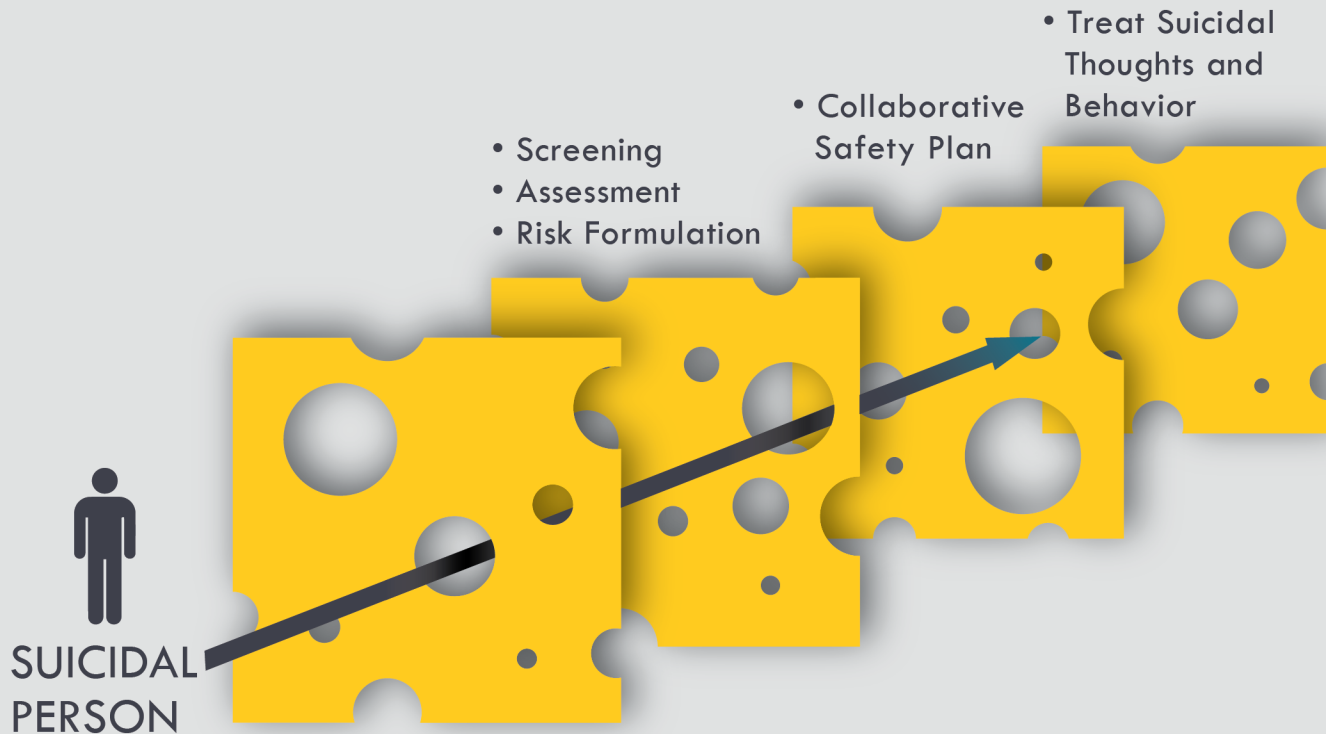
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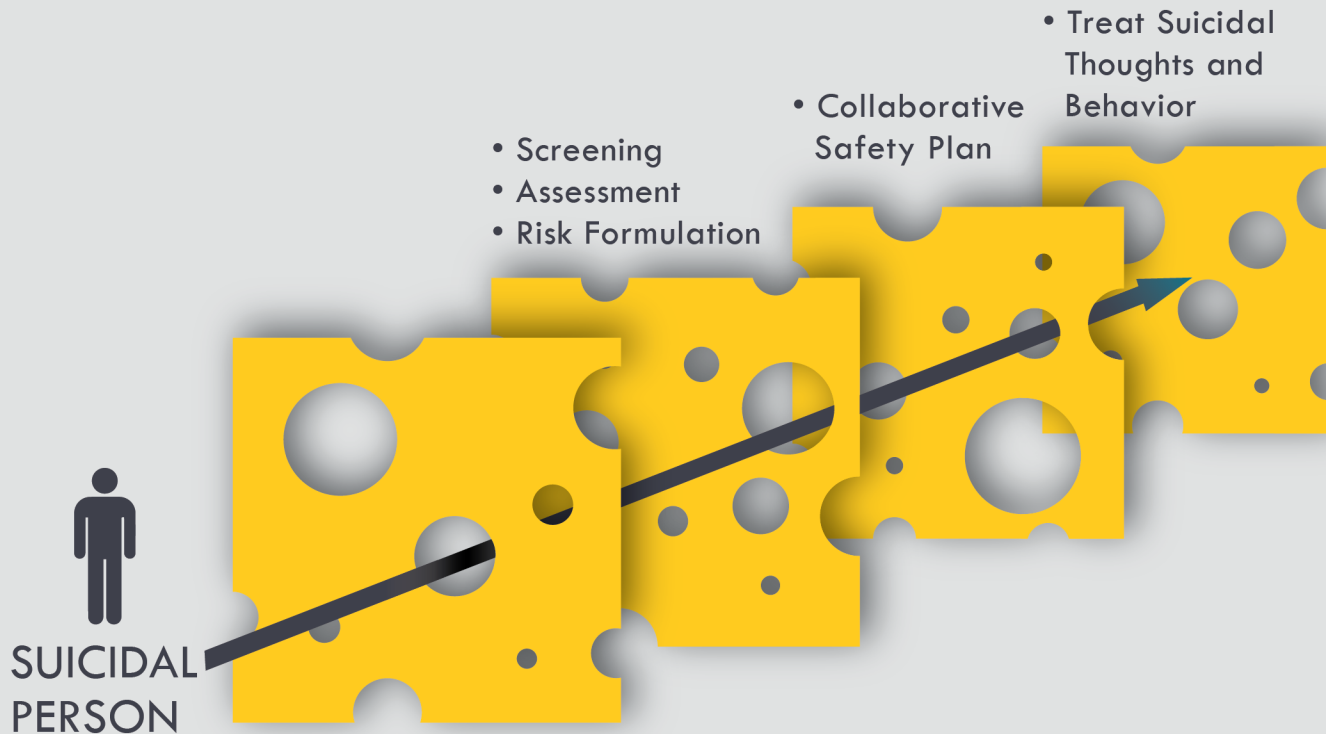
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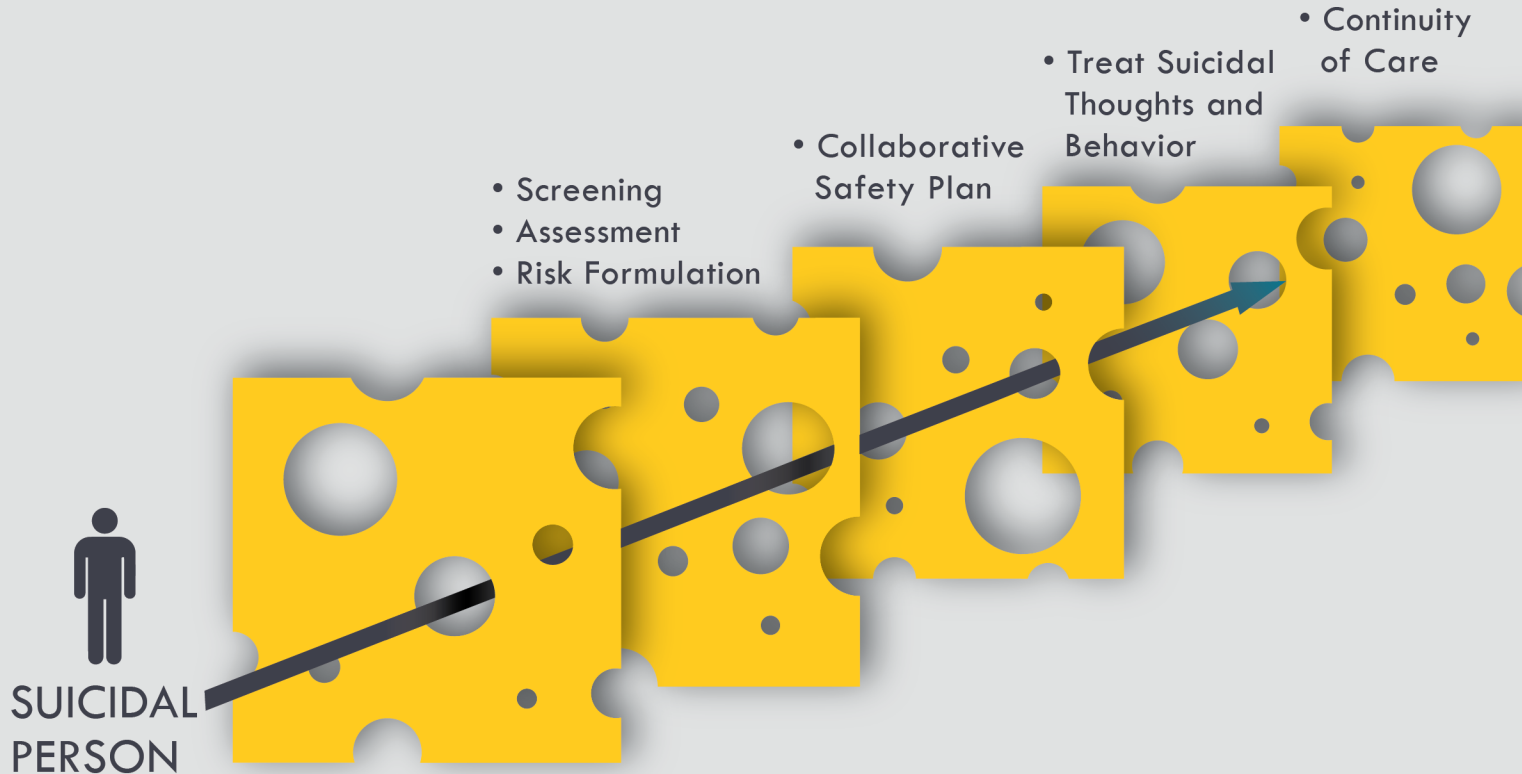
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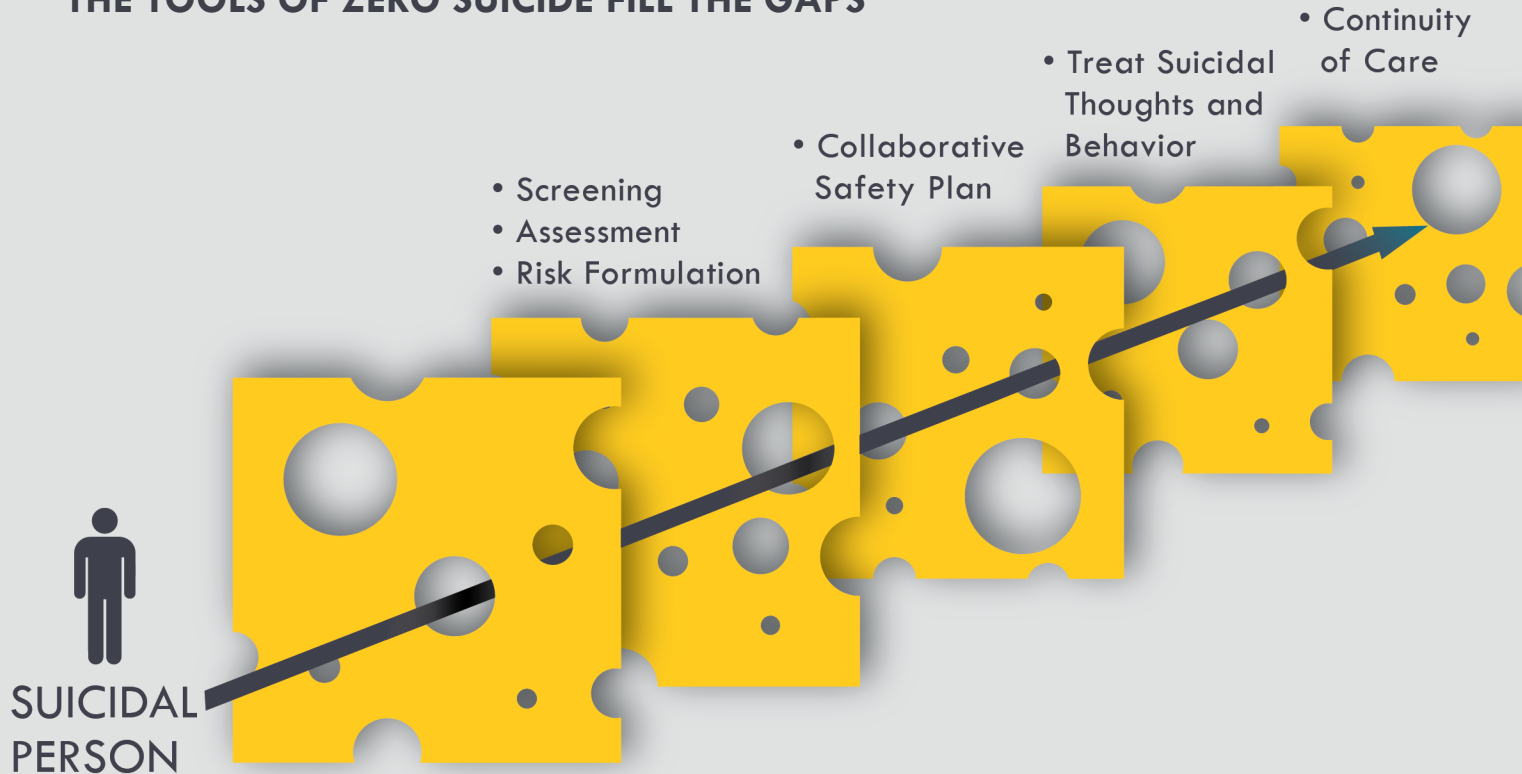
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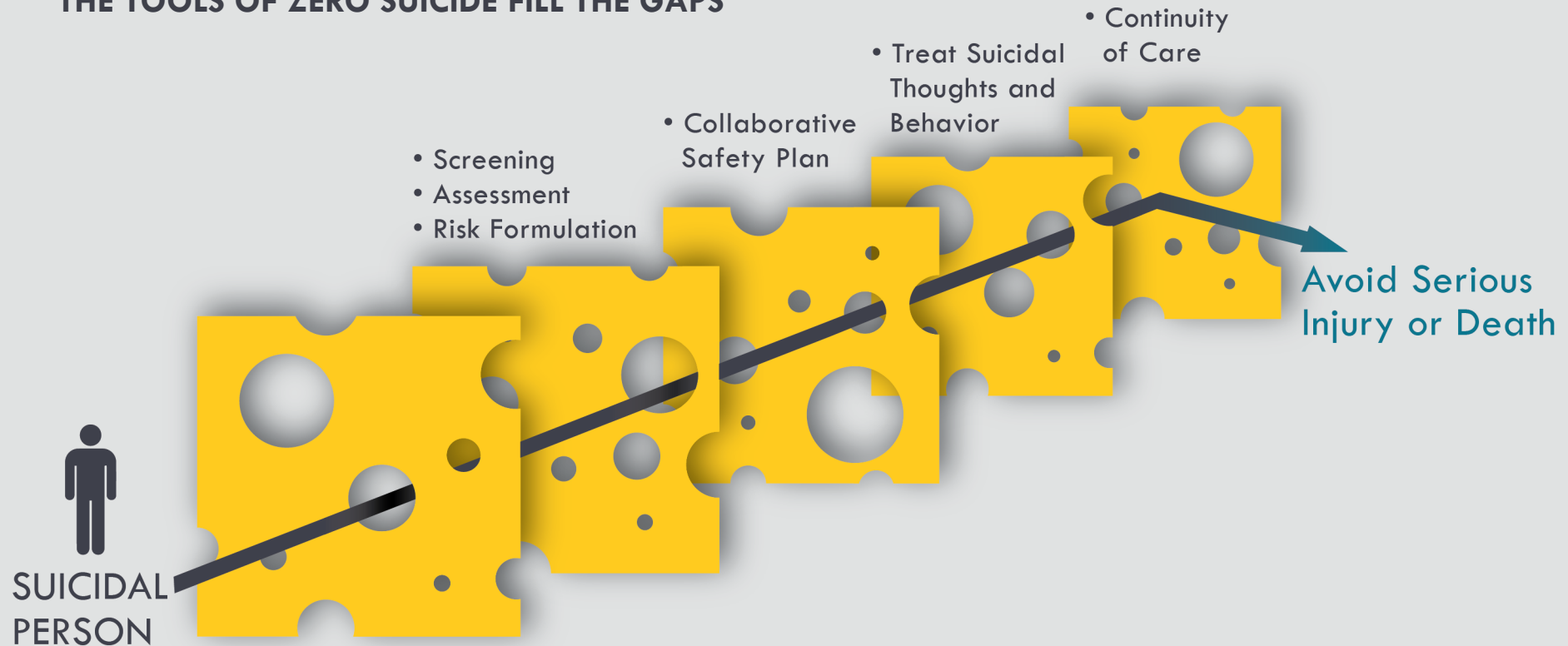
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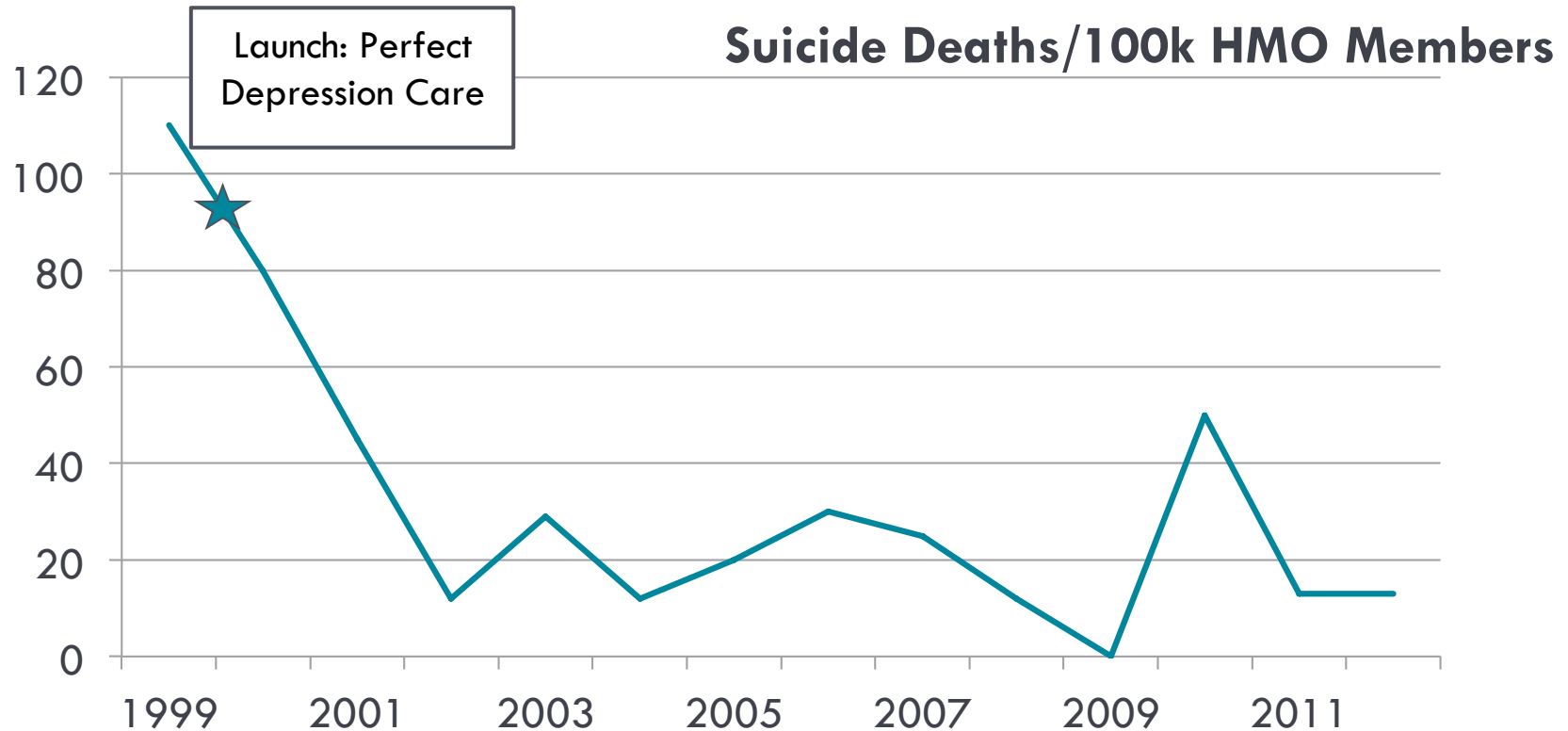
What is Different in Suicide Safe Care?

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- Making suicide prevention a core responsibility of health care
- Applying new knowledge about suicide and treating it directly
- A systematic clinical approach in health systems, not “the heroic efforts of crisis staff and individual clinicians.”
- System-wide approaches have worked to prevent suicide:
 - United States Air Force Suicide Prevention Program
 - UK (While et al., 2009)
 - Henry Ford Health System

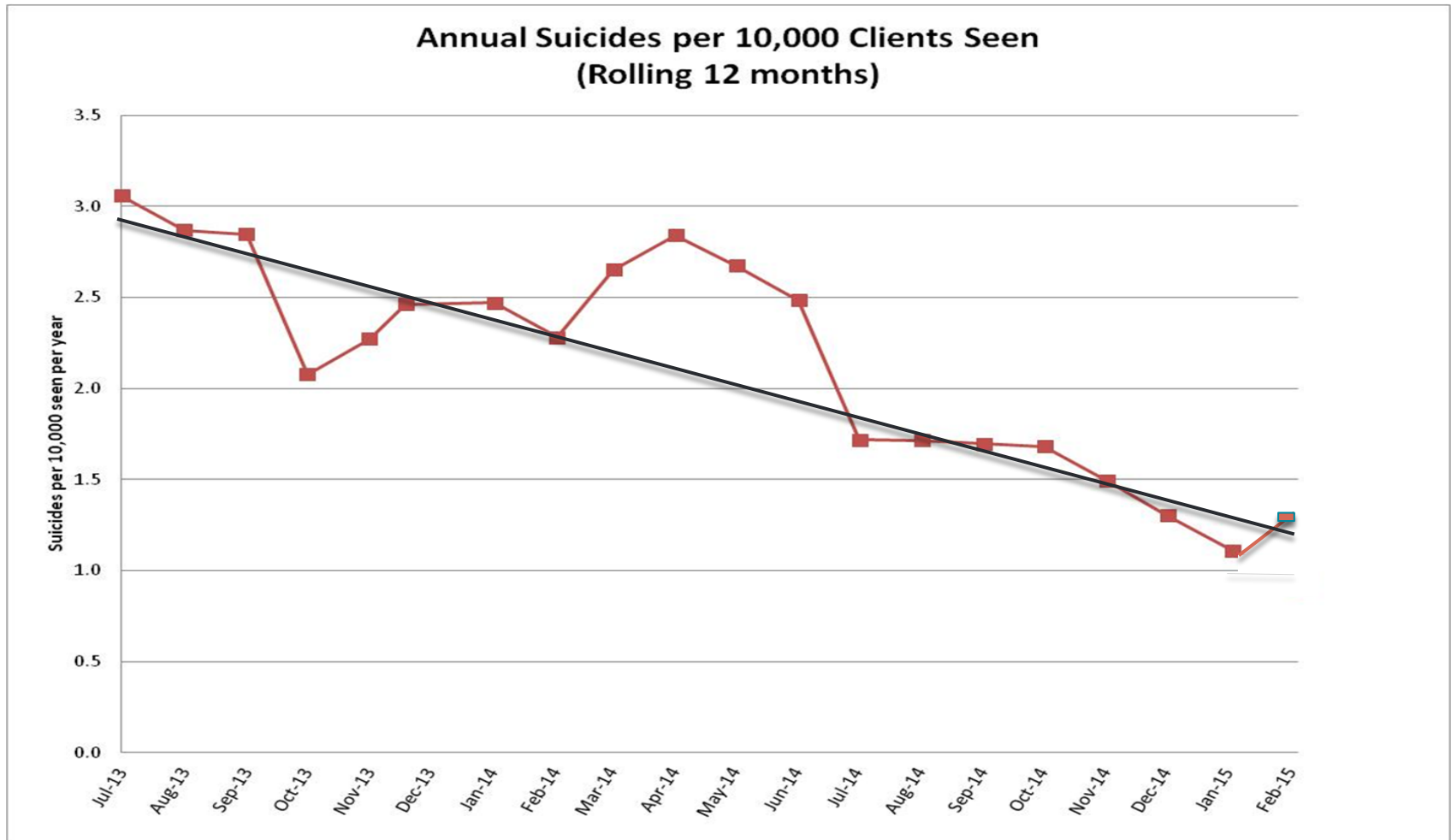
A System-Wide Approach for Health Care: Henry Ford Health System

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Early ZS Innovators are Seeing Results: Centerstone



Zero Suicide: A Movement and a Mission

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