



Comprehensive Care

Think about the link

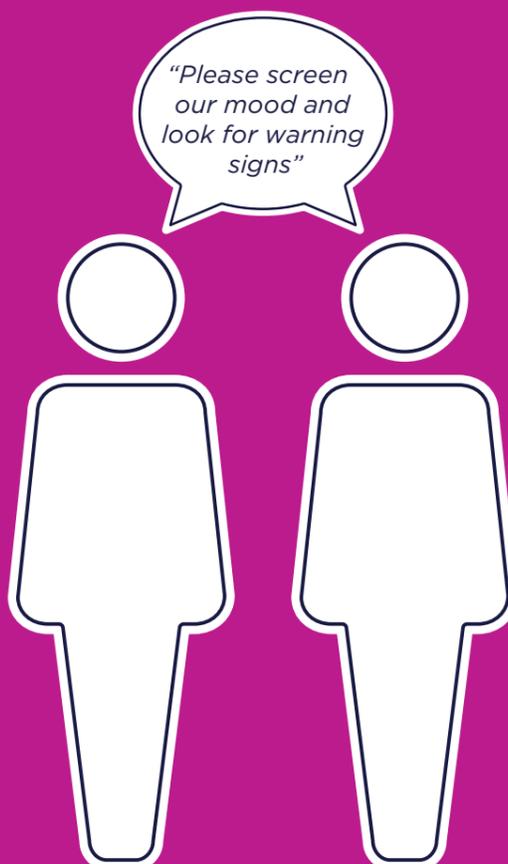
Preventing suicide and self-harm

About suicide and self-harm

- Whilst an uncomfortable topic to discuss, talking about suicide and self-harm can prevent or minimise risk
- People from all different backgrounds, genders, lifestyles and ages may self-harm as a way of coping with problems. Many of these patients experience recurrent episodes
- For every death by suicide, it is estimated that as many as 30 people attempt to end their lives
- Suicide rates amongst Aboriginal and Torres Strait Islander peoples is more than double the national rate
- People who have recently attempted suicide are at increased risk of a subsequent attempts in the days and weeks following discharge from healthcare settings
- A person who is thinking about suicide and self-harm may give clues or signs to people around them
- The best way to prevent suicide is to ask the question, recognise the warning signs, take them seriously and act on them

The risk of self-harm and suicide can be minimised by:

- **Seeing** – the warning signs
- **Asking** – about thoughts, plans, intentions
- **Listening** - supportively
- **Telling or talking** – to the appropriate support



How can I provide Comprehensive Care to prevent suicide and self-harm?

- Screening your patients' mood on admission using the 'Risk Assessment Screening Tool' to determine how often they have been bothered by:
 - Little interest or pleasure in doing things
 - Feeling down, depressed or hopeless
- If your patients' score ≥ 3 it is important to screen for the risk of suicide
- Screening for suicide will ensure the appropriate referrals are made to ensure your patients, carers and their families are provided with the necessary expertise and support
- Collaborate with your patients' medical and multidisciplinary teams, including Psychology and Psychiatry

Where can I learn more about preventing suicide and self-harm?

- Refer to the Clinical Liaison Psychiatry Nurse/Clinical Psychology