Joint Commission Alert: Suicides a Risk in the ER, Hospital
Greater staff education, action urged to prevent harm

(OAKBROOK TERRACE, Ill. – November 17, 2010) A new Joint Commission Sentinel Event Alert warns that non-psychiatric patients are committing suicide in emergency departments and medical/surgical inpatient units. The Alert urges greater attention to the risk of suicide for these patients and recommends education for caregivers about warning signs that may indicate when patients in general hospital units are contemplating harming themselves.

The Alert cautions that many patients who kill themselves in general hospital units do not have a psychiatric history or a history of suicidal attempts. Some risk factors for these patients include dementia, traumatic brain injury, chronic pain or intense acute pain, poor prognosis or terminal diagnosis, and substance abuse. Suicide is one of the five serious events most frequently reported to The Joint Commission. Nearly 25 percent of the reported cases occurred in non-psychiatric settings. The Centers for Disease Control and Prevention (CDC) ranks suicide as the 11th leading cause of death in the nation.

“It is evident from the number of incidents reported that general hospitals must take action to prevent patient suicides. The mental as well as physical needs of patients must be addressed to prevent these tragic occurrences,” says Mark R. Chassin, M.D., M.P.P., M.P.H., president, The Joint Commission. “The recommendations in this Alert give hospitals and caregivers practical strategies to identify patients at risk and to prevent suicides.”

The Joint Commission’s Sentinel Event Alert newsletter suggests that hospitals take a series of specific steps, including the following:
• Educate staff about suicide risks factors such as family history of suicide, anxiety and use of antidepressants; warning signs that may indicate imminent action; and how to be alert to changes in behaviors or routines.
• Empower staff to call a mental health professional or resource person if changes in a patient are noted.
• Empower staff to take action, such as placing a patient under constant observation if the patient exhibits warning signs.

In addition to the recommendations contained in the Alert, The Joint Commission urges hospitals to follow the accreditation requirements to prevent suicide. A Joint Commission National Patient Safety Goal calls for hospitals and behavioral health care facilities to conduct a risk assessment that identifies specific individual characteristics and environmental features that may increase the risk for suicide and to address safety needs. Furthermore, suicide prevention information, such as a crisis hotline, must be provided to at-risk patients and their families when they leave the facility.

The warning about suicides in hospitals is part of a series of Alerts issued by The Joint Commission. Much of the information and guidance provided in these Alerts is drawn from The Joint Commission’s Sentinel Event Database, one of the nation’s most comprehensive voluntary reporting systems for serious adverse events in health care. The database includes detailed information about both adverse events and their underlying causes. Previous Alerts have addressed violence in health care facilities, maternal deaths, health care technology, anticoagulants, wrong-site surgery, medication mix-ups, and health care-associated infections, among others. The complete list and text of past issues of Sentinel Event Alert can be found on the Joint Commission Web site.

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