

RESPONSE CHECKLIST

(ADVANCED)

RECOGNIZE THE SIGNALS OF SUICIDE:

- (1) **alterations** (changes for the worse—sudden or negative trend);
- (2) **alarm** (references to suicide or to being dead);
- (3) **attempt** or act of self-harm (in recent past or just disclosed);
- (4) **arrangements** (saying goodbye, writing a will, funeral planning, etc.).

ASK: (to discover if they are suicidal and to find their current level of risk)

ask directly (*“I’m worried about you and I want to know, have you been thinking about suicide?”*)

assess their current suicide risk (use chart below as a guide)

	LOW RISK	MEDIUM RISK	HIGH RISK
PAIN <i>“On a scale of 1 to 10...”</i> Suicide thoughts... Current emotional state?	level of pain or hopelessness is 1-5 out of 10 occasional, not too intense (1-5), short-lived emotional state stabilizes as they talk to you	level of pain or hopelessness is 6-8 out of 10 common, intense (6-8), hard to ignore (but can) it is some time before they are able to calm down	level of pain or hopelessness is 9-10 out of 10 constant, intense (9-10), can’t ignore high agitation/anxiety; elated or numb
PLAN <i>“What is your plan?”</i> <i>“What will happen to you when you die?”</i>	no specific plan or immediate date/time in mind; no available means; aren’t certain that they want to die scared of dying	planned their suicide but not an immediate risk; plan has possibility of intervention; aren’t sure they want to die unsure of what happens after death	has immediate date/time planned and prepared; lethal method with no chance of intervention; certain dying is only way believes death will reunite them with loved one
PROVOKING PROBLEMS <i>“Have you attempted suicide before?”</i> <i>“Has someone important to you suicided before?”</i> <i>“What is your current drug and alcohol use?”</i> ...Mental illness?	no previous attempts no family history of suicide no substance abuse no mental illness	no attempts since therapy no family history of suicide substance abuse in past no mental illness	previous attempt family history of suicide current substance abuse history of mental illness
PROTECTION <i>“What are reasons you have to live?”</i> <i>“Who can you talk to?”</i>	has “reasons to live” (empowerment and hope for the future/upcoming positives) has social connection (someone to talk to)	some “reason to live” (empowerment or hope for the future/upcoming positives) can talk to you only	no sense of empowerment or hope for the future no social connection (no one to talk to)

Note: no assessment will perfectly predict a person’s actions, always err on the side of caution and consult!

LISTEN (to their pain, their perspective, their options)

- **match them** (one step closer to calm/neutral)
- **reflection** (“You notice...feel...think...need...”)
 - *show them that you are listening to their pain/situation so they can grow stronger*
- **open questions** (what, who, which, where, when, how...)
 - *help them to explore which choices work for them*

HELP (assist them to identify and connect to the resources they need and to stay safe)

- **validate**
 - *instill hope by focussing on their strengths and personal resources*
- **“safety and wellness plan” and risk-specific responses:**

LOW RISK <i>(OPPORTUNITY)</i>	MEDIUM RISK <i>(CRISIS)</i>	HIGH RISK <i>(EMERGENCY)</i>
<ul style="list-style-type: none"> ○ action plan <ol style="list-style-type: none"> 1. specific goal 2. resource 3. another meeting 	<ul style="list-style-type: none"> ○ life pact <ol style="list-style-type: none"> 1. promise to stay alive 2. suicide specific resource 3. another meeting 	<ul style="list-style-type: none"> ○ 24-hour supervision/hospitalization ○ emergency referral and escort to suicide specific resource <i>or</i> escort to hospital <i>or</i> call ambulance/police for assistance if needed (and available) ○ action plan <ol style="list-style-type: none"> 1. specific goal 2. resource 3. another meeting
<p><u>SAFETY AND WELLNESS PLAN</u></p> <p>Safety:</p> <ol style="list-style-type: none"> (1) Remove methods (2) Keep safe. As needed: <ul style="list-style-type: none"> • go to family/friends, or • to hospital/24 watch (depending on suicide risk) (3) Meet with clinician (to assess mental health/suicide risk) (4) Stay sober (if risk of alcohol/drug use) <p>Wellness:</p> <p><i>Meet with counsellor to:</i></p> <ol style="list-style-type: none"> (5) Talk out feelings (6) Learn to fight suicide self-talk (7) Spend positive time with family and/or friends (8) Pursue reasons to live and positive/soothing activities 		

- **Consult with Supervisor and Document**
- **Inform Appropriate Family Members**
 - *offer information and discuss resources*
- **Follow-up with Longer Term Resources**
 - *build their self esteem--develop their connections and sense of empowerment –and support their search for a positive identity and transformation*
- **Care for Yourself!**

Remember: *it is not your task to fix their life, only to offer them a caring connection and respectful opportunities for empowerment, so that they can build their self esteem.*