Increasing the Compliance of Suicidal and Homicidal Ideation Assessment in the Emergency Center

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ABSTRACT

PURPOSE: The purpose of this project was to improve initial screening rates and to meet standards of practice for more detailed assessment of patients identified at risk for suicide or homicide.

DESIGN: A quality improvement project was conducted.

SETTING: The project was implemented at the Adult Emergency Center of a large county hospital system in the Southwest. The county hospital is a level one trauma center located in the Texas Medical Center of Houston, Texas.

PARTICIPANTS: Documentation by registered nurses in medical records of all patients seen in emergency center triage was reviewed.

RESULTS: The compliance rate increased from 84% to 94% for the initial risk assessment at triage. In-depth assessment of suicide risk were performed by primary nurses at a 95% depth assessment of suicide risk.

REFERENCES

1. Suicide Risk
   - Patient at risk for suicide
   - Open medical record
   - Evaluation
   - Initial risk of suicide

2. Homicide Risk
   - Patient at risk for homicide
   - Open medical record
   - Evaluation
   - Initial risk of homicide

3. National Patient Safety Goal 15 A:
   - Focuses on identification of individuals at risk for suicide.
   - Aims to increase use of a screening assessment tool to identify risks of suicide and/or homicide.

Regulatory standards require:
- Compliance rates of 90% or more for initial risk assessment.
- In-depth assessment of patients who screen positive for risks.

PURPOSE

The purpose of this project was to:
- Improve initial screening rates.
- Meet standards of practice for more detailed assessment of patients identified at risk for suicide or homicide.

METHODS

- Daily medical record reviews were performed on all charts of patients seen in EC triage.
- Data were gathered from the electronic medical record.
- Open record reviews were conducted for all patients who screened positive on initial assessment of suicidal and homicidal ideation to evaluate compliance with in-depth assessment of suicide risk.
- Coaching was provided for registered nurses who were non-compliant.

RESULTS

- Education was provided for the emergency center staff with emphasis on:
  - The National Patient Safety Goal standard 15A.
  - The hospital policy for Suicide Risk Assessment.
  - The instrument used for Assessment of Risk Factors.

- Continuous chart reviews were performed to evaluate nurses’ compliance with the safety standard.
- Open medical records review provided opportunities for just-in-time education for registered nurses who were not meeting the practice standard.

SIGNIFICANCE

- Using the quality improvement process to evaluate compliance with regulatory standards supports:
  - Identification of educational needs.
  - Intervention with process barriers.
  - Implementation of appropriate measures to assure patient safety.