

**Guidance on Suicide Prevention for GP Practices**

**Background:** If you have concerns that a person may be at risk don't be afraid to ask about suicidal ideas/intent. It will not increase risk, it is perfectly reasonable to ask questions such as are you feeling hopeless, have you had thoughts of taking your life, when did you last have these thoughts, do you have a plan, have you ever made a suicide attempt? As the person has presented themselves to surgery they are likely to be expecting these questions.

**Disclosure:** Is the person at risk of suicide – trust your professional judgement

**Ask:** Have you had thoughts of taking your life?  
 When did you last have these thoughts, how often do you have them? Do you have a plan? Are you feeling hopeless?  
 Have you ever made a suicide attempt?

**Consider:** Have there been previous suicide attempts? Family history of suicide? Are they experiencing domestic abuse? Does the person have current intent, plan, access to means (Doctors, Dentists, Vets, Farmers etc)? Is there a history of psychiatric diagnosis and or history of impulsivity/poor self control? Check on hopelessness, presence, duration and severity. Has there been recent loss? Involved in criminal proceedings? Consider physical, financial, personal or discharge from hospital. Co-morbid health problems - particularly recently diagnosed. History of abuse: physical, sexual, emotional. Is the person experiencing bullying or discrimination Is the person using alcohol/drugs - this increases risk. Have they recently received a psychiatric diagnosis? Consider demographics: Elderly or young adult, unmarried male, living alone, unemployed or in temporary work, having financial worries – THESE ARE THE HIGH RISK FACTORS WE ARE CURRENTLY SEEING IN ROTHERHAM

**Warning Signs: Are the following present?**

Looking for means  
 Threatening to hurt or kill self.  
 Having no hope, or seeing no way out  
 Seeking access to pills or other means  
 Talking or writing about death, dying or suicide  
 Making preparations for after their death, for example care of pets

**Protective Factors:** Spirituality and family responsibility

Positive social support from family and friends  
 Having **dependent** children at home, pregnancy  
 Life satisfaction, positive coping and problem-solving skills  
 Engagement in physical activities. Active hobbies

**Immediate Action:** Adults (over 16 years) contact the Crisis Team on **01709 302670** . Children (under 16 years) – working hours contact CAMHS on **01709 304808** . Out of hours contact the Crisis Team on **01709 302670**. Remember take working telephone number from Patient

No

YES

**Concerns: Are the following present?**

Hopelessness. Increased alcohol/drug use  
 Rage, anger, seeking revenge, acting reckless or recent engagement in risky activity.  
 Expressions of feeling trapped or withdrawal from support.  
 Significant anxiety, agitation, unable to sleep or sleeping all the time  
 Dramatic mood changes and/or no reason for living, no sense of purpose. Hearing voices telling them to harm themselves  
 Significant changes in appearance, personal hygiene, weight loss etc

**Non urgent** – Consider a routine referral for mental health treatment to the Access Team on **01709 302670** (Adults) or CAMHS **01709 304808** (under 16 years)

Yes

No

Consider routine follow up by Practice

Always explain your plan and reasons with the patient and what happens next

**Useful telephone numbers:** Samaritans – 116123 (Freephone)  
 Women's Aid 0808 2000247 <http://www.womensaid.org.uk>