
Staff Workshop 2

**Implementing Strategies to
Prevent Suicide in Senior Living
Communities**

What we will learn:

- Warning signs of suicide
- Understanding suicide risk
- What to do after a suicide crisis
- How “whole population activities” can reduce suicide risk and promote mental health and general well-being for all residents

Coping with the issue of suicide

National Suicide Prevention Lifeline at 1-800-273-TALK (8255). 24 hours a day, seven days a week.

- Employee Assistance Program
- Clergy
- Social Worker
- Community Mental Health Center

Some important things to remember:

- Suicidal behavior includes suicide deaths, suicide attempts, and passive/indirect suicide.
- Suicide rates increase with age.
- Older adults die more often in a suicide attempt.

Warning signs of immediate risk of suicide

Someone:

- Threatening or talking of wanting to hurt or kill him/herself
- Looking for ways to kill him/herself
- Talking or writing about death, dying, or suicide when these actions are out of the ordinary for the person

Responding to the warning signs of immediate risk of suicide:

- Make sure someone stays with the resident until help arrives.
- Immediately contact [mental health contact] or call 911 if a mental health professional is not available.

Other warning signs:

- Hopelessness
- Rage, uncontrolled anger, seeking revenge
- Acting reckless or engaging in risky activities, seemingly without thinking
- Feeling trapped - like there's no way out
- Increased alcohol or drug use

Other warning signs (cont.):

- Withdrawing from friends, family, or society
- Anxiety, agitation, unable to sleep or sleeping all the time
- Dramatic changes in mood
- No reason for living; no sense of purpose in life

Understanding other warning signs

- The behavior change is sudden
- The person has physical, emotional, or life circumstances placing them at risk for suicide
- The person is actively talking about or looking for means of suicide

Talking with residents:

- Will not cause a resident to attempt suicide
- May help you understand that a resident is at immediate risk of suicide or
- May help you understand that a resident is not at immediate risk, but has problems and needs some help

How to talk with residents

- Let them know their problems are important
- Use a friendly but matter-of-fact tone
- Do not appear either unconcerned or over-emotional

How *not* to talk to residents

- Things aren't so bad.
- Our problems are never as serious as we think they are.
- Don't talk like that. It's foolish.
- I know you're probably not, but I wanted to check—are you thinking about suicide?
- You're not thinking about suicide are you?



Questions you *can* ask a resident:

- How are you doing?
- Would you mind talking about how you feel?
- Tell me more about how you feel.
- Are you thinking about hurting yourself?

Questions you *can* ask a resident (cont.):

- Do you have thoughts about suicide?
- Are you thinking about ending your life?
- Have you thought about methods you might use to take your life?

Risk factors for suicide

- Depression and other mental illnesses
- Substance abuse
- Physical illness, disability, or pain
- Personal and family history of suicide

Two major risk factors for suicide:

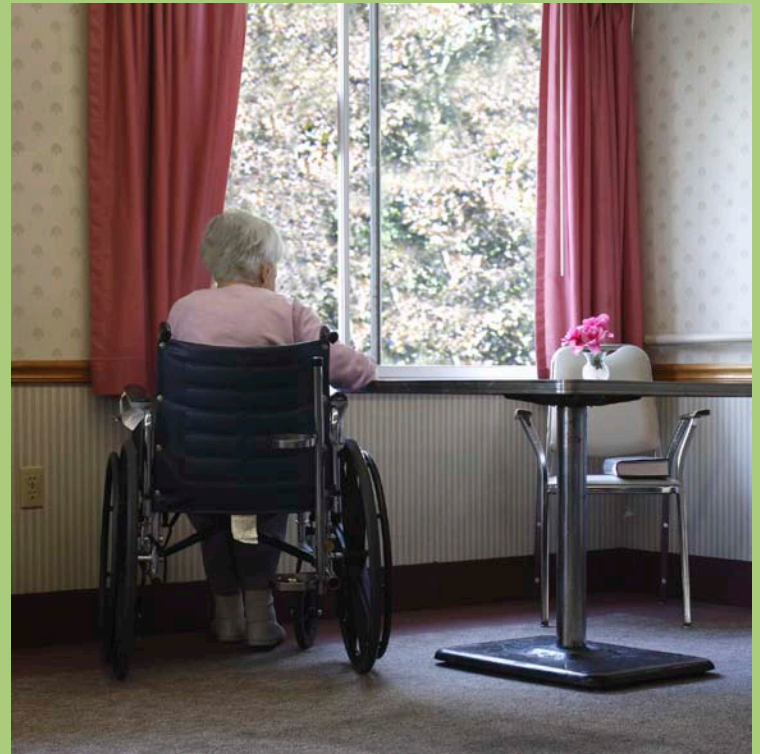
Depression, other mood disorders, and psychotic disorders

Substance abuse, including the abuse of alcohol and prescription and over-the-counter medication



Other risk factors: Physical conditions

- Poor physical health
- Physical impairments that limit the activities of daily living
- Chronic pain

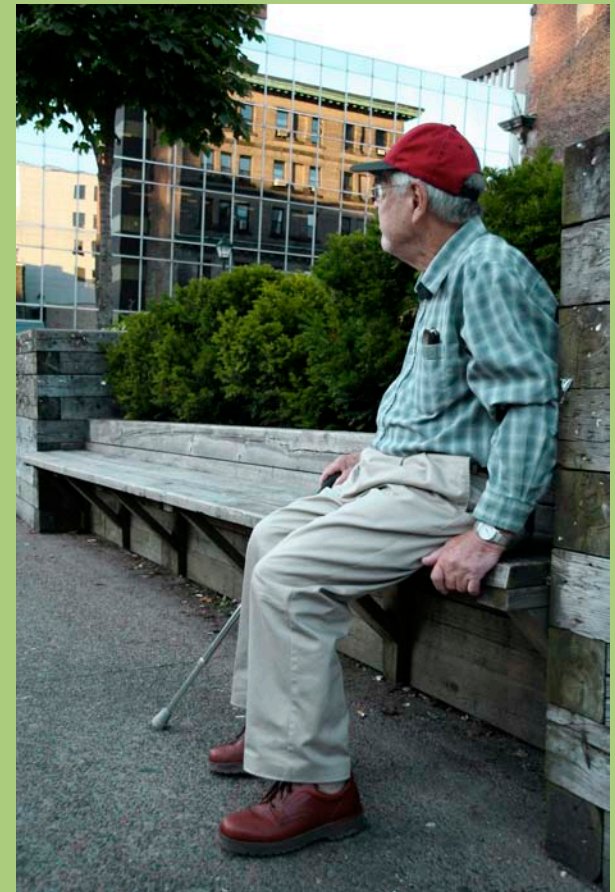


Other risk factors: Personal and family history

- Previous suicide attempt
- A family member who has died by suicide

Understanding Suicide Risk

- Warning signs: Immediate and others
- Asking questions is helpful
- Certain factors increase suicide risk



Responding to a suicide death or attempt:

- Call 911
- Do not leave resident alone
- Help EMTs
- Begin or seek medical care
- Call _____ [*staff member*]

Immediately after a suicide death

Have procedures describing who will:

- Call 911
- Notify family
- Go to the residence
- Notify regulatory authorities
- Provide support to survivors
- Serve as contact for the media

Postvention

Postvention:

Activities implemented after a suicide crisis to comfort and protect suicide survivors

Suicide survivors:

Anyone emotionally affected by the suicide



Postvention activities:

- Support to survivors at the scene
- Support to survivors in the near-term and long-term future
- Vigilance in recognizing and responding to people who may be at risk

Whole population approaches:



- Enhance the well-being of all residents
- Reduce risk of suicide among vulnerable residents

Whole Population Approach: Promoting health

- Promoting physical activity
- Helping residents reduce or cope with pain
- Encouraging residents to seek help for health problems



Whole Population Approach: Promoting connections



- Family
- Friends
- Other residents
- Staff
- The community

Whole Population Approach: Promoting hopefulness

- Enhance self-esteem
- Promote a sense of competence
- Help residents find meaning in life



Whole Population Approach: Activities that will appeal to men



Whole Population Approach: Improving the Physical Environment

- Create a pleasant, homelike physical environment
- Promote social connections

Whole Population Approach: A planning activity

1. Categories of activities in which we could do more
2. Additional activities we could consider
3. Activities which could be expanded





Thank-you!