

State of Idaho DIVISION OF VETERANS SERVICES

SUICIDE PREVENTION POLICY & PROCEDURE IDVS-PO-17-02

From the Office of the Deputy Administrator 2017



Idaho Division of Veterans Services

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The Division of Veterans Services is committed to promoting the health and safety of its residents, clients, employees, and any other person in the workplace. Consequently, this suicide prevention and reporting policy is intended to raise awareness and provide guidance to employees, supervisors, and managers in carrying out an appropriate response to suicidal behavior in the workplace.

Suicide is often preventable, especially in situations where agencies support intervention and provide the knowledge which allows an individual to intervene with a person at risk. The Division of Veterans Services will ensure that all persons in the workplace, and all clients of the Division, are aware of the resources available to appropriately respond when concerned about the suicide risk of oneself or a that of a resident, client, coworker, or any other person in the workplace, and that those experiencing suicidal behaviors understand that seeking help is encouraged and that help is available. It is essential that each Division Program establish a culture of seeking and obtaining help for suicidal behaviors among residents, clients, employees, and all others in the workplace.

It is important to recognize any threat as a request for help. A threat to harm oneself is a real and imminent emergency. Because there is no way to know if the threat is serious or simply a cry for help, should a coworker, client, resident, intern, contract employee, volunteer or visitor threaten to harm themselves, employees must respond quickly and decisively to prevent a tragic outcome.

Even if the person does not actually intend to harm themselves, threatening suicide can be a way of voicing hopeless feelings and the desire on the part of the person to end the pain they are feeling. Therefore, should a resident, client, coworker, or any other person in the workplace express suicidal intentions, or discuss suicidal thoughts and feeling, these threats shall be taken seriously and must be reported immediately to the appropriate personnel and/or authorities to keep the person safe and get them the help they need.

SECTION 1 - INTERVENTION PROCEDURES

The Division seeks to offer support and guidance should an employee express suicide ideation, show suicidal behavior, or encounters a resident, client, coworker, or other person in the workplace expressing suicide ideation or showing suicidal behavior. While it is impossible to anticipate every scenario, it is the Division's intent to strongly encourage employees to act in their best interest, and the best interest of their fellow workers, residents, and clients. The following actions are guides to that end:

1 A If You Are Considering Suicide

Thoughts of suicide are very frightening for both you and your family. If you have thoughts of suicide, please seek help from experts or colleagues.

Immediate Warning Signs (for example):	Seek immediate help: (if calling from a state-owned landline phone, always dial "9" for an outside line)
 Thinking or talking about wanting to harm yourself. Looking for ways to commit suicide. Talking or writing about death. Feeling overwhelming emotions like rage, anger, or shame. Experiencing a serious triggering event like a death or other life-altering issue. 	 Go to the emergency room. Call 911. Call or Text 1-208-398-4357 (Idaho Suicide Prevention Hotline-available 24 hours a day staffed by people trained to assess suicide risk). If a Veteran, call the Veterans Crisis Line and Military Crisis Line (1-800-273-8255 Press 1). Call the Employee Assistance Program (24/7) 1-877-427-2327
Other Warning Signs (for example): Acting recklessly or taking risks. Increasing your alcohol or drug use. Seeing no reason to live. Feeling hopeless or trapped. Having dramatic mood changes. Withdrawing from family, friends, and others. Feeling anxious or agitated. Retreating to bed to sleep most of the time.	 You should consider: (if calling from a state-owned landline phone, always dial "9" for an outside line) Confiding in someone you trust (i.e., doctor, clergy, counselor, colleague, or mental health professional). Contact the Human Resource Office. Calling the Employee Assistance Program (24/7) 1-877-427-2327. Calling 211 (Can help find resources and referrals in Idaho). Calling or Texting 1-208-398-4357 (Idaho Suicide Prevention Hotline-available 24 hours a day staffed by people trained to assess suicide risk). If a Veteran, calling the Veterans Crisis Line and Military Crisis Line (1-800-273-8255 Press 1).

1 B Helping a Coworker, Contract Employee, Intern, Volunteer, or Visitor Who May Be Suicidal

As employees, you spend a great deal of time at work and have day-to-day contact with your coworkers and all others who are in the workplace. You may observe changes in others behavior and may see them at critical times in their life. Coworkers are often the first to notice that a fellow employee or peer is experiencing a crisis, suicidal behavior and/or suicide ideation.

If an employee has reason to believe a coworker is *in danger of suicide*, take him/her seriously until it is determined that there is no danger.

When approaching a person who you think may be at *imminent* risk for suicide, speak to him/her directly and compassionately. Show you care. Depending on your relationship with him or her, you might say:

- You seem to be in great pain; I know where we can get some help.
- I'm frightened/concerned about you based on (state what you saw or heard).
- Are you considering harming yourself? Are you thinking about suicide?
- Do you have access to weapons or things that can be used as weapons to harm yourself?
- What can I do for you; I want to get you the help you need.
- I want to help.
- You are not alone!

Take immediate and prompt action if the person is	Seek immediate help:
(for example):	(if calling from a state-owned landline phone, always dial "9" for an outside line)
 Expressing a desire to harm him/herself. Talking or writing about death or suicide. Looking for ways to commit suicide. Seeing no reason to live. Feeling hopeless. Displaying unusual anger, anxiety or agitation. Complaining about not sleeping or sleeping all the time. 	 Stay calm and stay with the person (or make sure the person is in a private, secure place with another caring person) until you can find help. If it can be done safely, remove any objects that could be used in a suicide attempt. Call 911 (if coworker or other person has the means at hand to do self-harm or is out of control). Immediately report threat of self-harm, whether written or oral and from any source, to your supervisor. Supervisors shall immediately report such incidents to the Program Executive or Home Administrator, and to the Human Resource Office. The Program Executive and/or Human Resource staff will then determine the best course of action to include: Assisting the employee/person with calling 1-208-398-4357 (Idaho Suicide Prevention Hotline-available 24 hours a day staffed by people trained to assess suicide risk). The Idaho Suicide Prevention Hotline Professional will then advise and provide guidance. Should the employee/person deny assistance with calling the Hotline, and instead choose to leave or attempt self-harm, call 911. Explain the situation, requesting for an officer to make a wellness check. Be prepared to furnish the person's full name, location and the person's contact number, if possible. Provide employee (for state employees Assistance Program information - (24/7) 1-877-427-2327. The Program Executive shall report the incident to the Deputy Administrator and Division Administrator.

If you are concerned about the recent alarming behavior changes listed in the <u>left box below</u>, it is appropriate to have a private conversation with him/her. Again, depending on your relationship with this person, you might say:

- There seems to be something weighing you down; I'm willing to talk about it with you.
- You haven't been yourself lately; do you want to talk about it?
- I'm worried; you seem anxious/desperate/detached recently.
- Is there anything wrong that talking with a professional might help?

If you observe that a coworker/person may be (for example):	Encourage the coworker/person to: (if calling from a state-owned landline phone, always dial "9"
 Feeling hopeless. Acting recklessly or taking risks. 	 Confide in a professional person of trust (i.e., doctor, clergy,
 Having dramatic mood changes. Withdrawing from family, friends, and others. Expressing rage or uncontrolled anger. Stating he/she feels like a burden to others or feels trapped. Displaying unusual anxiety or agitation. 	 counselor, or mental health professional). Contact the Human Resource Office. Call the Employee Assistance Program (24/7) 1-877-427-2327 (benefit for state employees only). Call 211 (provides assistance in finding resources and referrals in Idaho). Call or Text 1-208-398-4357 (Idaho Suicide Prevention Hotline-
 Complaining about not sleeping or sleeping all the time. 	available 24 hours a day staffed by people trained to assess suicide risk.
	 Report all reasonable concerns to your supervisor. Supervisors shall report such incidents to the <u>Program Executive</u> or <u>Home Administrator</u>, <u>and</u> to the <u>Human Resource Office</u>.

1 C Helping a Resident of the Veterans Homes Who May Attempt Suicide

Suicide in long-term care patients is most often associated with depression. The level of depression that a long-term care patient can experience ranges from minor depression to major depression. Depression can also develop in patients who were previously happy individuals due to the changes associated with going into a nursing home setting, changes in medical conditions, or other environmental changes. Although all residents are properly assessed upon admission, monitored and regularly reassessed per regulations thereafter, and care plans are developed for at-risk-patients, it is essential for employees to recognize the signs of depression and immediately report any change in condition to the appropriate personnel per the nursing procedure manual.

If an employee has reason to believe a resident is in danger of suicide, take him/her seriously until it is determined that there is no danger.

When approaching a resident who you think may be at *imminent* risk for suicide, speak to him/her directly and compassionately. Show you care. You might say:

- You seem to be in great pain; I know where we can get some help.
- I'm frightened/concerned about you based on (state what you saw or heard).
- Are you considering harming yourself? Are you thinking about suicide?
- What can I do for you; I want to get you the help you need.
- I want to help.
- You are not alone!

Take immediate and prompt action if the resident is (for example):	Seek immediate help: (if calling from a state-owned landline phone, always dial "9" for
	an outside line)
 Expressing a desire to harm him/herself. Talking or writing about death or suicide. Looking for ways to commit suicide. 	 Stay calm and stay with the resident until help arrives. Pull the call-light for assistance. If it can be done safely, remove any objects that could be used in a suicide attempt. If the resident is in imminent danger, shout for assistance. Call 911 (if the resident has the means at hand to do self-harm or is out of control and you are unable to calm the resident down to transfer safely to the emergency room for proper evaluation if the resident was never in any imminent danger for self-harm and it can be done safely. Abide by the Nursing Procedures for such incidents. Immediately report threats/attempts of self-harm to the <u>unit RN Manager</u>, <u>Director of Nursing</u>, and the <u>designated Social Worker</u>. The Director of Nursing shall report such matters to <u>Home Administrator</u>. The Home Administrator shall report the incident to the Bureau of Facility Standards per state regulations (Informational Letter 2014-4 Resident Abuse Reporting) and to the <u>Deputy Administrator</u> and <u>Division Administrator</u>.

1 D Helping a Veteran Client or Veterans Family Member In-Person or Via Telephone Who May Be Suicidal

According to the U.S. Department of Veterans Affairs, some studies have found that combat trauma is related to suicide. In this research, combat trauma survivors who were wounded more than once or put in the hospital for a wound had the highest suicide risk. This suggests suicide risk in Veterans may be affected by how intense and how often the combat trauma was. Suicide risk may be higher in trauma survivors because of the symptoms of post-traumatic stress (PTSD) or it may be due to other problems, like depression.

Research suggests that for Veterans with PTSD, the strongest link to both suicide attempts and thinking about suicide is guilt related to combat. Many Veterans have very disturbing thoughts and extreme guilt about actions taken during times of war. These thoughts can often overwhelm the Veteran and make it hard for him or her to deal with the intense feelings.

Veterans and Veteran family members may also enter into a state of depression and have suicidal thoughts following changes in life and financial status, such as receiving an unfavorable decision towards their Veterans Benefit Claim or the loss of a loved one.

If an employee has reason to believe a Veteran is in danger of suicide, take him/her seriously until it is determined that there is no danger.

When speaking to a Veteran/family who you think may be at *imminent* risk for suicide, speak to him/her directly and compassionately. Show you care. Depending on your relationship with him or her, you might say:

- You seem to be in great pain; I know where we can get some help.
- I'm frightened/concerned about you based on (state what you saw or heard).
- Are you considering harming yourself? Are you thinking about suicide?
- Do you have access to weapons or things that can be used as weapons to harm yourself?
- What can I do for you; I want to get you the help you need.
- I want to help.
- You are not alone!

Take immediate and exempt action if the	Cook immodiate hole.
Take immediate and prompt action if the Veteran/family is	Seek immediate help: (if calling from a state-owned landline phone, always dial "9" for
(for example):	an outside line)
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 Expressing a desire to harm him/herself. 	In-Person:
 Talking or writing about death or suicide. 	• Stay calm and stay with the person (or make sure the person is in a private, secure place with another caring person) until you can find help.
 Looking for ways to commit suicide. Seeing no reason to live. 	 If it can be done safely, remove any objects that could be used in a suicide attempt. Call 911 (if Veteran or other person has the means at hand to do self-harm or is out of control). Immediately report threat of self-harm, whether written or oral and from any source, to the Veterans Service Officer or your supervisor. Supervisors shall immediately report such incidents to the Program Executive or Deputy Administrator. The Veterans Service Officer, Program Executive or Deputy Administrator, will then determine the best course of action to include: Assisting the Veteran/family with calling the Veterans Crisis Line and Military Crisis Line (1-800-273-8255 Press 1). Assisting the Veteran/family with calling 1-208-398-4357 (Idaho Suicide Prevention Hotline-available 24 hours a day staffed by people trained to assess suicide risk). The Veterans Crisis Line or Idaho Suicide Prevention Hotline Professional will then advise and provide guidance. Should the Veterans/family deny assistance with calling the Crisis Line of Hotline, and instead choose to leave or attempt self-harm, call 911. Explain the situation, requesting for an officer to make a wellness check. Be prepared to furnish the person's full name, location and the person's contact number, if possible. The Program Executive shall report the incident to the Deputy Administrator.
Take immediate and prompt action if the Veteran/family is (for example):	Seek immediate help: (if calling from a state-owned landline phone, always dial "9" for an outside line)
 Expressing a desire to harm him/herself. Talking or writing about death or suicide. Looking for ways to commit suicide. Seeing no reason to live. 	 Via Telephone: Stay calm and try to stay connected with the Veteran/family until you know help has arrived. Try to get the attention of a coworker and have them call 911 (if Veteran or other person has the means at hand to do self-harm or is out of control). Be prepared to furnish the person's full name, location and the person's contact number, if possible. Provide Veteran/family with the number for the Veterans Crisis Line and Military Crisis Line (1-800-273-8255 Press 1). Provide Veteran/family with the number for Idaho Suicide Prevention Hotline-available 24 hours a day staffed by people trained to assess suicide risk). 1-208-398-4357. Recommend that the Veterans make an appointment immediately with the VAMC. Each VA Medical Center has a Suicide Prevention Coordinator or team to offer Veterans the services they need. If unable to find a coworker to help or if the Veterans/family disconnect, call 911. Explain the situation, requesting for an officer to make a wellness check. Be prepared to furnish the person's full name, location and the person's contact number, if possible. After calling 911, call the VA Crisis Hotline or VAMC Suicide Prevention Coordinator and report the event. Immediately report incident to your Program Executive. Program Executive shall report such incidents to the Deputy Administrator and Division Administrator.

SECTION 2 - DO'S AND DON'TS OF SUICIDE PREVENTION

There are certain "do" and "don't" behaviors that experts recommend using when either approaching someone who appears imminently suicidal or someone who may be considering suicide, or is in a crisis. These "do" and "don't" actions include:

Do's	Don'ts	
 Take him/her seriously and offer your full attention. Stay calm and in control of your own emotions, fears, or anger. Listen, Listen, Listen. Show compassion and concern. Speak carefully and slowly. Be direct. Be positive and reassuring. Remove the means of committing suicide (pills, knife, gun) <u>ONLY</u> if safe to do so. Build hope. 	 Don't judge. Don't offer advice. Don't say you know how they feel. Don't interrupt. Don't agree to keep a secret. 	

SECTION 3 – SURVIVORS OF SUICIDE

For those who have lost a loved one or coworker to suicide getting back into a normal work routine can be a positive experience. Depending on the relationship with the deceased and the personality/vulnerability of the coworker, the person's workspace may also be a constant reminder. Some coworkers may feel a sense of responsibility or question if they could have/should have been able to intervene. The Employee Assistance Program (EAP) is available for state employees to work out these emotional responses to suicide. If a suicide occurs in the workplace or you are affected by someone who committed/attempted suicide, addressing the grief that follows is important. Often people will feel confused about how they can find support for themselves or provide support to a person who is touched by suicide. If several staff members are affected, consider a debriefing guided by an EAP counselor or consider encouraging individuals to seek personal help through the EAP.

Call the Employee Assistance Program (24/7) 1-877-427-2327.

SECTION 4 - EDUCATION AND OUTREACH

This policy and procedures will be distributed to all employees. Information on this policy and suicide awareness and intervention services will be part of the New Employee Orientation and included in the new employee orientation package.

All employees are expected to become familiar with this policy and procedures.