



QUALITY IMPROVEMENT FOR SUICIDE CARE

REGIONAL HEALTH AUTHORITY STRATEGIES AND ACTIVITIES

The Province of BC has invested \$2 million to support a **quality improvement initiative for suicide care** which will facilitate a system-wide transformation of adult suicide care in the health care system. Led by the Canadian Mental Health Association, BC Division, engaging with health authorities in quality improvement activities and the development of a provincial framework. This initiative will be based on evidence-based best practices, local clinical knowledge and expertise as well as the perspectives of people with lived and living experience.

This document highlights each of the regional authorities' areas of focus as a part of the quality improvement initiative for suicide care.

Fraser Health Authority

- Fraser Health priorities include conducting a comprehensive needs assessment to identify priorities based on gaps in care and where the greatest impact to clients can be realized.
- Fraser Health are in the early stages of developing various protocols for use in acute care and community settings supporting safe practices, as well as the development of appropriate staff training to support implementation of these practices. Throughout the planning process, Fraser Health are conducting engagement with clients and families to include lived experience input and are also working closely with Fraser Health's Aboriginal Health program.

Interior Health Authority

- Standardize suicide risk management protocol that involves screening for all patients presenting as suicidal and/or at risk for suicide in 31 emergency departments, of which the majority of which are rural hospitals.
- Physicians, Triage Nurses and Secondary Nurses will be trained in use of the *Columbia Suicide Severity Rating Scale (C-SSRS)* as the standardized screening process for suicide and/or risk for suicide.
- The new protocol will be implemented in the Spring 2023.
- Three primary metrics are being included in the patient health record:
 - CSSRS use and completion
 - Risk Status at triage
 - Disposition for those at risk
- Return to hospital within 72 hours if at all.
- New staff supported with this funding.



Island Health Authority

- Update the Regional Suicide Risk Management practice guidelines for Island Health MHSU adult services in alignment with emerging practice guidance.
- Provide education and practice supports for interdisciplinary team members based on their roles in care delivery (e.g. administration, support worker, or nurse).
- Update electronic health record systems and tools to support adoption of updated clinical practice guidelines, individualize care, and involvement of client's identified family/support system.

Northern Health Authority

- Complete a systematic needs assessment based on existing clinical practice in MHSU and highlighting care gaps.
- Establish a mechanism for meaningful engagement of clients and families and cultural safety advisory.
- Increase in the use of the *Columbia Suicide Rating Scale and Screening (C-SSRS) tool* in all settings.
- Create a sustainable quality improvement plan that identifies appropriate strategies and resource to address needs and obtain organizational endorsement.

Vancouver Coastal Health Authority

- Develop and implement a comprehensive suicide prevention, intervention, and postvention strategy. The strategy will include dedicated data analysis to ensure the collection and validation of reliable and predictive data for the purposes of monitoring and ongoing quality improvement.
- Specific measures will be implemented, including *the Columbia Suicide Severity Rate Scale (C-SSRS)* across CERNER systems; suicide-risk training delivery for acute care staff; and follow-up within 48 hours for all patients discharged into the community from acute inpatient units.
- Vancouver Coastal Health will work in collaboration and partnership with the 14 First Nations and our indigenous-led community-based organizations to ensure a comprehensive strategy that meets the needs of First Nations, Métis, and Inuit children, youth, families, and communities.