

ZERO SUICIDE METRICS (last updated 3-26-2020)

Source for metrics in items 1-4 : Educational Development Center's Zero Suicide Data Elements Worksheet, available at https://zerosuicide.edc.org/sites/default/files/ZS%20Data%20Elements%20Worksheet.TS_.pdf

Full implementation of Zero Suicide includes the ability to track the suicide metrics. Prior to completing the online OHA Zero Suicide Assessment Scoring Tool, sites may want to calculate these metrics for the most recent reporting period (month or quarter) as a way to confirm that their tracking mechanisms are in place. The OHA/PSU online implementation assessment tracks changes in these data over time for sites that provide them. For more information, contact meghan.crane@state.or.us or cellark@pdx.edu.

Health System: _____ **Reporting Period :** _____
(Example: June 1-30, 2020)

1. SCREENING *(Element #3: Identify)*

- 1a. How many new patients/clients were enrolled during this reporting period? _____
- 1b. Of those, how many received a suicide screening? _____
- 1c. **What percent of new clients received a suicide screening during this reporting period? (=1b/1a)**

2. ASSESSMENT *(Element #3: Identify)*

- 2a. How many new and existing patients/clients screened positive for suicide risk during the reporting period? _____
- 2b. Of those, how many received a comprehensive risk assessment on the same day as the screening?

- 2c. **What percent of clients received a comprehensive risk assessment on the same day as their screening? (=2b/2a)** _____

3. SAFETY PLANNING *(Element #4: Engage)*

- 3a. How many patients/clients were screened and assessed positive for suicide risk during the reporting period? _____
- 3b. Of those, how many had a safety plan developed on the same day as their screening/assessment?

- 3c. **What percent of clients had a safety plan developed on the same day as their screening/assessment? (=3b/3a)** _____

4. RESTRICTION OF ACCESS TO LETHAL MEANS *(Element #4: Engage)*

- 4a. How many patients/clients were screened and assessed positive for suicide risk during the reporting period *(same as 3a)*? _____
- 4b. Of those, how many were counseled about lethal means on the same day as their screening/assessment?

- 4c. **What percent of clients were counseled about lethal means on the same day as their screening/assessment? (=4b/4a)** _____

5. CAUSE ANALYSIS *(Element #7: Improve)*

- 5a. Date of most recent root cause analysis of a suicide death: _____
- 5b. Date of most recent suicide death of someone in care: _____
- 5c. Date of most recent suicide death of someone who had left care less than 6 months before suicide death

- 5d. Date measurement for suicide deaths was established: _____
- 5e. Date of most recent annual crosswalk of enrolled patients against vital statistics data: _____

6. ADHERENCE TO SUICIDE CARE POLICIES *(Element #7: Improve)*

- 6a. Most recent date that data from EHR or chart reviews were examined for adherence to suicide care policies _____