



## Care Transitions

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### About This Module

A suicide death can have a devastating, lasting impact on the loved ones of the person who died. Staff in hospital settings can also be greatly affected by the suicide of one of their patients. In addition to feeling grief, they may wonder what they could have done differently to help save their patient's life.

Inpatient hospitalization can help patients get through a suicidal crisis, begin mental health care, and prepare for ongoing support after hospitalization. These individuals, however, remain at high risk of suicide for three months or more after discharge or transition from an inpatient hospital. In fact their suicide death rate is *300 times higher* than the general population in the first week after they are discharged.

Professionals in psychiatric hospitals play a pivotal role in the recovery of people at risk of suicide by making sure a support system, appropriate hand-off communication, and safety plans are solidly in place when they transition from the inpatient facility.

The guidance in this module is primarily for staff who work in psychiatric hospitals, such as social workers, clinical nurses, therapists, and discharge planners. Much of the information is also applicable to staff in other settings who work with people at risk of suicide who will eventually be discharged or transition to another treatment setting or level of care.

A downloadable [text version \(PDF\)](#) [2] of all module content is available.

### References

Chung, D. T., Hadzi-Pavlovic, D., Wang, M., Swaraj, S., Olfson, M., & Large, M. (2019). Meta-analysis of suicide rates in the first week and the first month after psychiatric hospitalisation. *BMJ Open*, 9(3), e023883. Retrieved from <http://dx.doi.org/10.1136/bmjopen-2018-023883> [3]

Dotinga, R. (2017, July 21). Coping when a patient commits suicide. MD Edge: Psychiatry. Retrieved from <https://www.mdedge.com/psychiatry/article/142975/depression/coping-when-patient-commits-suicide> [4]

French, L. (2015). Staff perspective: Suicide postvention - Don't forget clinician survivors. Retrieved

from <https://deploymentpsych.org/blog/staff-perspective-suicide-postvention-don-t-forget-clinician-survivors> [5]

Olfson, M., Wall, M., Wang, S., Crystal, S., Liu, S., Gerhard, T., & Blanco, C., (2016). Short-term suicide risk after psychiatric hospital discharge. *Journal of the American Medical Association Psychiatry*, 73(11), 1119–1126. Retrieved from <https://jamanetwork.com/journals/jamapsychiatry/fullarticle/2551516> [6]

Walter, F., Carr, M. J., Mok, P. L. H., Antonsen, S., Pedersen, C. B., Appleby, L., . . . Webb, R. T. (2019). Multiple adverse outcomes following first discharge from inpatient psychiatric care: A national cohort study. *Lancet Psychiatry*, 6(7), 582–589. Retrieved from [https://doi.org/10.1016/S2215-0366\(19\)30180-4](https://doi.org/10.1016/S2215-0366(19)30180-4) [7]

### Recommended Resources



## [Best Practices in Care Transitions for Individuals with Suicide Risk: Inpatient Care to Outpatient Care \[8\]](#)

This report presents feasible, evidence-based practices to improve patient engagement and safety during the transition from inpatient to outpatient care.

## [Zero Suicide Toolkit: Safe Care Transitions \[9\]](#)

This section of the toolkit provides information and resources addressing safe transitions in care.

## [Care Transitions at New Hampshire Hospital \[10\]](#)

This success story details how the National Alliance on Mental Illness New Hampshire and New Hampshire Hospital established a care transitions program for the hospital's youth inpatients.



## [Aftercare That Makes a Difference \[11\]](#)

In this brief video Diana Cortez Yañez shares the value of aftercare and what hospitals can do to help patients safely navigate transitions in care.

## [Speak Up: Planning Your Follow-Up Care \[12\]](#)

This brochure lists questions to help patients being discharged from a hospital obtain the information they need for their follow-up care.

## [Re-engineered Discharge \(RED\) Toolkit \[13\]](#)

This toolkit describes 12 mutually reinforcing actions that hospitals undertake during and after a hospital stay to ensure safe transitions in care.

### **Links within this resource**

[1] <https://sprc.org/file/6674/download?token=1UVQb4lk>

[2] <https://sprc.org/sites/default/files/storyline-files/Care-Transitions-Virtual-Learning-Lab-Text.pdf>

[3] <http://dx.doi.org/10.1136/bmjopen-2018-023883>

[4] <https://www.mdedge.com/psychiatry/article/142975/depression/coping-when-patient-commits-suicide>

[5] <https://deploymentpsych.org/blog/staff-perspective-suicidepostvention-don't-forget-clinician-survivors>

[6] <https://jamanetwork.com/journals/jamapsychiatry/fullarticle/2551516>



[7] [https://doi.org/10.1016/S2215-0366\(19\)30180-4](https://doi.org/10.1016/S2215-0366(19)30180-4)

[8] <https://sprc.org/resources-programs/best-practices-care-transitions-individuals-suicide-risk-inpatient-care>

[9] <https://sprc.org/resources-programs/zero-suicide-toolkit-safe-care-transitions>

[10] <https://sprc.org/news/care-transitions-new-hampshire-hospital>

[11] <https://sprc.org/resources-programs/aftercare-makes-difference>

[12] <https://sprc.org/resources-programs/speak-planning-your-follow-care>

[13] <https://sprc.org/resources-programs/re-engineered-discharge-red-toolkit>

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