Suicide Risk Module (5)

Question to Consider for this Module: What are the issues that increase the child's risk of suicide? Please rate the highest level from the past 30 days.

Note: It is critical to probe these areas using direct and specific questions to ensure a thorough risk assessment has been completed. If you have concerns about your ability to ask these types of questions directly, please consult with your supervisor for coaching.

HISTORY OF ATTEMPTS - This rating refers to suicidal ideation or/and behaviors that a child engages in. Please rate the highest level experienced.

Questions to Consider

- Has the child ever attempted suicide?
- If so, how did s/he make that attempt? Was it a method that is typically lethal?

Ratings & Definitions

- No lifetime history of suicidal ideation or attempt.
- Lifetime history of significant suicidal ideation but no potentially lethal
- **2** Lifetime history of a potentially lethal suicide attempt.
- Lifetime history of multiple potentially lethal suicide attempts.

SUICIDE IDEATION - This item rates whether the child has recently thought about hurting him/herself.

Questions to Consider

- Has the child ever considered suicide as an option?
- → If so, when do these thoughts happen and what is the content?

Ratings & Definitions

- No evidence.
- 1 History but no recent ideation.
- Recent ideation, but not in past 24 hours.
- Current ideation OR command hallucinations that involve self-harm.

SUICIDE INTENT - This item rates the level of intent the child has of harming him/herself.

Questions to Consider

- Has the child ever intended to commit suicide?
- If so, how recently?
- If so, what stopped them from following through on their intent?

Ratings & Definitions

- No evidence.
- History, but no recent intent to commit suicide.
- Recent intention to commit suicide.
- Current intention.

SUICIDE PLANNING - This item rates whether the child has recently had a plan to commit suicide.

Questions to Consider

- Does their suicidal ideation include details of planning?
- If so, how realistic is that plan?
- → If so, how lethal is that plan?

Ratings & Definitions

- **0** No evidence of a concrete plan.
- A vague notion of a plan, but the plan is not realistic.
- Child has a plan to commit suicide that is feasible.
- Child has a plan that is immediately accessible and feasible.

SUBSTANCE USE - These symptoms include use of alcohol and illegal drugs, the misuse of prescription medications and the inhalation of any substance for recreational purposes. This rating is consistent with DSM Substance-related Disorders. This item includes the use of tobacco or caffeine.

Questions to Consider

- → Is the Child using substances?
- If so, do these substances typically result in impaired judgment and/or impulsive behavior?

Ratings & Definitions

This rating is for a child who has no notable substance use history or difficulties at the present time.

This rating is for a child with mild substance use problems that might occasionally present problems of living for the person (intoxication, loss of money, reduced work/school performance, parental concern). This rating is also used to reflect a significant history of substance use problems without evidence of current problems related to use.

This rating is for a child with a moderate substance use problem that consistently interferes with the ability to function optimally, but does not completely preclude functioning in an unstructured setting.

This rating is for a child with a **severe** substance use problem that represents complications to functional issues that may result in danger to self, public safety issues, or the need for detoxification of the child. Immediate and/or intensive interventions are indicated.

DEPRESSION - This item rates displayed symptoms of a change in emotional state and can include sadness, irritability and diminished interest in previously enjoyed activities.

Questions to Consider

- Is child concerned about possible depression or chronic low mood and irritability?
- Has s/he withdrawn from normal activities?
- Does the child seem lonely or not interested in others?

Ratings & Definitions

- No evidence of problems with depression.
- History, suspicion, or mild depression associated with a recent negative life event with minimal impact on life domain functioning.

Clear evidence of depression associated with either depressed mood or significant irritability. Depression has interfered with the child's ability to

- function in at least one life domain.
- Clear evidence of depression that is disabling for the child in multiple life domains.

CONDUCT - This item rates symptoms that include antisocial behaviors like shoplifting, lying, vandalism, and cruelty to animals, assault. This dimension would include the symptoms of Conduct Disorder as specified in DSM.

Questions to Consider

- Is the child seen as dishonest?
- How does the child handle telling the truth/lies?
- Has the child been part of any criminal behavior?
- Has the child ever shown violent or threatening behavior towards others?
- Has the child ever tortured animals or set fires?

Ratings & Definitions

- This rating indicates a child with no evidence of behavior disorder.
- This rating indicates a child with a mild level of conduct problems. The child may have some difficulties in school and home behavior. Problems are 1 recognizable but not notably deviant for age, sex, and community. This might include occasional truancy, repeated severe lying, or petty theft from family.
- This rating indicates a child with a moderate level of conduct disorder. This could include episodes of planned aggressive or other anti-social behavior. A child rated at this level should meet the criteria for a diagnosis of Conduct
- This rating indicates a child with a severe Conduct Disorder. This could include frequent episodes of unprovoked, planned aggressive or other anti-social behavior.

CAREGIVER MENTAL HEALTH - This item refers to any serious mental health issues (not including substance abuse) among caregivers that might limit their capacity for parenting/caregiving to child.

Questions to Consider

- Do caregivers have any mental health needs that make parenting difficult?
- Does anyone else in the family have serious mental health needs that the caregiver is taking care of?

Ratings & Definitions

- No evidence of caregiver mental health difficulties.
- There is a history or suspicion of mental health difficulties, and/or caregiver is in recovery from mental health difficulties.
- Caregiver has some mental health difficulties that interfere with his or her capacity to parent.
- Caregiver has mental health difficulties that make it impossible for him/her to parent at this time.

ACCESSIBLE FIREARM/MEDICATION - This item refers to the child's ability to access potentially lethal objects / substances.

Questions to Consider

Are there guns, firearms or lethal medication kept in the home or accessible to the child in some other location?

Ratings & Definitions

- No evidence that the child has access to firearms, lethal medication, or similarly lethal device/substance.
- Some evidence that a lethal weapon /substance is accessible with substantial effort. Examples include a gun in a locked cabinet to which the child cannot access the key, or a vague plan to obtain potentially lethal substances.
- Evidence that a lethal means is available with modest effort (i.e. deception, some planning). SAFETY PLAN MUST BE CREATED.
- Evidence that the child has immediate access to lethal means. Child/child should not be allowed to re-enter said environment until means has been removed. SAFETY PLAN MUST BE CREATED.