LEAD

ZERO Suicide IN HEALTH AND BEHAVIORAL HEALTH CARE | INSTITUTE EDC Learning transforms lives.

Make an explicit commitment to reduce suicide deaths.

System change occurs with sustained and committed leaders who learn and improve practices following adverse events.

Overview: Critical Elements for Effective Leadership

There are several key components to effective leadership for organizations implementing Zero Suicide: (1) utilizing lessons learned from high-reliability organizations, (2) fostering a just culture, (3) maintaining focus on a comprehensive approach to preventing suicide deaths in their systems, and (4) focusing on continuous quality improvement and fidelity to the Zero Suicide model.

High-reliability organizations (HROs), like airlines, rely on leadership to foster a culture of safety. Weick and Sutcliff describe a key element of this culture as "collective mindfulness."[1,2] In this type of organizational culture, all levels of workers are attentive to and report errors, failures, and weak signals.[1,2] Workers in HROs know to be always on alert and are incentivized to speak up about even small issues, creating a responsive culture poised to correct unsafe conditions before safety is compromised.[1,2]

In these organizations, leadership supports a just culture where experience and patient safety—not rank or title—are at the center of patient care and decision-making. Chassin and Loeb argue that leadership must make a commitment to achieving zero patient harm, promoting a culture of safety, and emphasizing evidence-based approaches[1]—all critical elements of Zero Suicide.

Leadership must also maintain a focus on a comprehensive and accountability-centered approach. Findings from organizations implementing a comprehensive approach to reducing rates of suicide and other related measures highlight the importance of this style of leadership.

From 1990 to 2002, the U.S. Air Force implemented a comprehensive suicide prevention program at the community level.[4] This program used 11 interventions across 15 functional areas including community-based social service providers, health care delivery, and operational supervision of the occupational community. Interventions included policy changes, senior leadership development, improvements in training, and social network enhancements. This initiative was associated with a 33 percent risk reduction for completed suicide.[4]

A comprehensive approach in health care that reduced suicide rates was developed by the Henry Ford Health System (HFHS) and informs the Zero Suicide approach. HFHS's "Perfect Depression Care" used suicide deaths as the measure of effective depression care in their system. Their goal was "zero defect" mental health care that included 100 percent patient satisfaction and 100 percent accuracy. To achieve this goal, they emphasized a comprehensive approach and strong leadership focus on patient safety and continuous quality improvement. This program reduced the suicide rate among patients receiving behavioral health care from an average of 96 per 100,000 in 1999–2000 to an average of 24 per 100,000 in 2001–2010, a reduction of approximately 75 percent.[5]

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Recommendation: Learn from Organizations Implementing Zero Suicide

The Zero Suicide approach was refined, implemented, and tested over the past several years by behavioral health and integrated primary care programs. These organizations demonstrate that Zero Suicide can be feasibly implemented in ordinary care settings with significant reductions in suicide deaths and other related measures. For example:

> At Centerstone, a large, multistate behavioral health nonprofit headquartered in Tennessee, the baseline rate for suicide before Zero Suicide implementation was 31 per 100,000; the suicide rate two years into implementation dropped to 11 per 100,000, a reduction of about 65 percent.
>
> — Becky Stoll, personal communication, Feb. 22, 2016

Conclusion: Invest in Multifaceted Strategies

Current research suggests that no single approach will reduce suicide among individuals who are in care. Comprehensive, multi-component, system-wide approaches to suicide prevention have been shown to be effective in broad and diverse settings and likely are the keys to reducing suicide.[4,5,6,7] The Zero Suicide approach offers a **Toolkit** that guides implementers in the process of embedding interconnecting evidence-based practices for suicide prevention into health care systems. One way to assess what components of the comprehensive Zero Suicide approach are currently in place and the degree to which the components are embedded within key clinical areas is to administer the **Zero Suicide Organizational Self-Study**. It helps to assess organizational and clinical area-specific strengths and opportunities for development across each of the seven elements of Zero Suicide. The Zero Suicide Organizational Self-Study should be retaken on an annual basis as a fidelity check for your organization.

Citations

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Visit www.zerosuicide.sprc.org/toolkit for additional tools, resources, & more.