
Steps to Follow After a Patient Commits Suicide on a Psychiatric Inpatient Unit

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The death of a patient by suicide in a psychiatric inpatient unit is a rare event, occurring in about 1 out of 1000 inpatients. The most common cause is by hanging, and unfortunately the standard 15 minute checks can't prevent this event, since it takes about 5 minutes for constriction of the carotid artery to cause lethal hypoxia to the brain. Inpatient suicides not only deeply impact the staff and other patients but also evoke intense scrutiny from external agencies. Here's how you can navigate this difficult situation.

Immediate Response:

- Ensure the safety of other patients and staff. Remove any immediate hazards from the area.
- Ensure that medicine is immediately consulted, even if it seems obvious that the patient has died. Typically nursing will have called a Code Blue (or your hospital's equivalent) before you even learn about the event.

Who Else to Alert:

- Notify the unit supervisor or head of the department about the incident.
- Connect with hospital administration to ensure they're aware and can provide necessary support.
- Bring in law enforcement to initiate their investigation.

Breaking the news to the family:

- Make sure the patient's family or next of kin are informed in a sensitive and timely manner.
- A senior psychiatrist or hospital administrator, accompanied by a member of the therapy team or a social worker, might be the best choice for this difficult task.

Caring for Your Team:

- Schedule a debriefing for your staff, so they can share feelings and concerns.

Supporting Other Patients:

- Host group discussions or therapeutic sessions to help remaining patients process the incident.
- Be mindful of the risk of copy-cat suicides. Keep a close watch on patients, especially those emotionally linked to the deceased or those at heightened risk.

Investigation and Review:

- Conduct an internal review to understand the circumstances leading up to the suicide. This will help identify if any gaps in care or procedure contributed to the event.
- Depending on jurisdiction and hospital policy, an external review might be necessary.

Documentation:

- Make sure all relevant records, notes, and documentation concerning the patient's care are thorough and current.

Legal Considerations:

- Consult with the hospital's legal team or legal counsel regarding potential liability and any necessary disclosures or reports that might be required.

Long-term Responses:

- Review suicide prevention protocols with staff to reinforce education and safety measures; update these as necessary.
- Consider organizing a memorial or tribute for the deceased patient, in alignment with the family's wishes. This can help provide closure for both staff and patients.

