

Researchers reveal new tool to help prevent suicide

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A rainbow emerging from behind mountains. Credit: Evgeny Tchebotarev from Pexels

A team of Welsh academics has developed a new method of supporting health professionals to make clinical decisions about people who may be

at risk of taking their own lives.

While the UK may have one of the lowest rates of suicide in the world, it is still the biggest cause of death in men under 45, so being able to make a structured professional judgment about who might attempt suicide and knowing how to intervene is vitally important.

Researchers at Swansea and Cardiff universities have put together the Risk of Suicide Protocol (RoSP), which guides a professional to look at 20 aspects of a person's life known to be related to suicide. They can then formulate what the person's problems are and how they can be helped.

In two studies the team first examined if the RoSP could identify suicides from accidental deaths in people known to [mental health services](#) living in the community who had died unexpectedly, and secondly, if it could determine who would be likely to attempt suicide in a hospital caring for people at very high clinical risk.

The research, which has just been published by leading international journal *Frontiers in Psychiatry*, showed just how effective the RoSP is in both settings.

Professor Nicola Gray, from Swansea University, was working therapeutically with patients at very high clinical risk at the time of the study.

She said, "The RoSP came about as we were training [healthcare professionals](#) on how to identify and manage violence to others in the people they were caring for. The clinicians said their most significant clinical difficulty was in spotting and managing people's risk of harming themselves.

"We were asked to develop something to identify and improve safety planning in those at-risk people. Looking carefully at best practice guidelines we were able to put together a list of known risk indicators that were reasonably easy to identify for clinicians, and importantly, could be the focus of intervention."

However, Professor Robert Snowden, of Cardiff University, said there is still need for caution: "We are never going to detect all cases or prevent all suicides. Many people die by suicide without ever seeing a professional. However, we hope the use of RoSP will help those that do see a [mental health](#) professional by providing a systematic review of the person's situation and clinical presentation.

"We need to look at settings such as A&E departments, prisons, GP surgeries, and other places where there may be people who are at risk of suicide."

Swansea University's Professor Ann John, who is Chair of the Welsh Government's national advisory group on suicide and self-harm prevention, was also involved in the research.

She added, "Prediction of suicidal behaviors is notoriously difficult and the use of clinical risk assessment tools to 'predict' future [suicide](#) risk is not recommended by NICE.

"The RoSP is a structured clinical assessment that supports clinicians in the identification of modifiable risk factors which can then be addressed. This is consistent with 'needs-based approaches' and helps focus the assessment on a person's situation, how best to manage risk factors and develop a safety plan for any future crises."

More information: Nicola S. Gray et al, Structured Professional Judgment to Assist the Evaluation and Safety Planning of Suicide Risk:

The Risk of Suicide Protocol (RoSP), *Frontiers in Psychiatry* (2021).
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