

# SQUARE Program (Suicide, Questions, Answers and Resources)

Risk Assessment Handout Questions to Assess Suicide Risk

Questions should be asked in the order given until the patient is no longer exhibiting the increasing risk factors.

Risk level is likely to increase for suicide with the more positive and detailed responses to these questions.

# **Spectrum of Suicidality**

# Suicidal ideation (thoughts)

### Passive suicidal thoughts

Do you wish you didn't have to go on living? Do you have thoughts of wanting to die? Active suicidal thoughts Do you have thoughts of wanting to take your own life? Do you have suicidal thoughts?

### **Suicidal threats**

Did you talk about killing yourself with others? Have you told anyone that you were going to kill yourself?

### **Suicide Plans**

Have you thought about methods to kill yourself?

# Suicidal plans – the details

# Decision Have you decided on a method to kill yourself? Details Did you make a plan of exactly what you might do to kill yourself? Resistance Have you been able to resist carrying this out? What stopped you putting the plan into action? Preparations Have you started preparations to suicide? Time Profile For how long have you had the plan? Have you set a date to kill yourself? Affairs Have you put your affairs in order? Have you made arrangements for after you die?

Have you written a note?



### Suicide attempt

Circumstances

What were the circumstances of this attempt?

Method

What did you do?

### Intent

What did you want to achieve (to die/to sleep/euphoria)?

# Lethality

Did you think it would kill you?

#### **Reattempting suicide**

Have you ever tried to take your own life before?

### Willingness for help

Desire for help

Do you want help to avoid killing yourself? Acceptance of care Will you accept my help to avoid suiciding? Will you accept specialist mental health care?

### **Current Safety**

### Immediate harm

Do you have thoughts of wanting to suicide immediately? Harm in hospital or clinic Do you have thoughts of wanting to suicide here in this office/clinic?

Are you thinking of actively wanting to hurt yourself here?

#### **Help eliciting**

If you feel like hurting yourself here while you are waiting for me to make some arrangements could you come back to me and indicate this before doing anything?

### Dangerous items

Do you have anything you can use to harm yourself? Are you thinking of using something in the immediate vicinity to harm yourself with?

### Homicidal thoughts

#### **Homicidal ideation**

Do you want to take anyone with you? Do you have thoughts of harming or killing others? Homicidal Plan Do you have a plan to do this? Weapons Do you have access to guns or other weapons?

These questions are an educational reference to assist Medical Practitioners perform a history in regards to suicidality. This may assist Risk Assessment decision. This is not a validated risk assessment tool. This is not a replacement for an individual clinician's judgement, responsibility and duty of care towards patients. The author takes no responsibility for the use of this guide. © 2004 Randall Long All Rights Reserved

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