



Assessment date(s)
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Assessor(s) signature
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Patient signature
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Patient Name & CHI or label

Assessment Work Sheet

Suicidal Intent

Wishes to be dead
Fleeting / fixed / Frequency
Hopelessness / View of the future
Current perception

Plan

Is it a detailed plan?
How / When / Where / Means
Immediate intention
Measures to prevent detection

Background

Events leading up to crisis
Events in last 48 hrs if after an attempt
Past history of self harm/suicide

Factors which make suicide more or less likely

Protective factors
Gender / Ethnicity
Drugs / Alcohol
Mental illness

Coping Mechanisms

What worked to ease crisis/problems in the past?
What stopped suicide being completed - now & in the past?

Crisis Management

Before going on to manage the crisis:
Have all the elements in assessment been covered sufficiently?