

QC18 Suicide Prevention Skills: Core

Instructional video transcript: Lethal means counselling

Video link:	https://youtu.be/lcAre162IU0?si=MKpGwYro0F_YOTkt
Speaker (Mel):	<p>Hi, I'm Mel, and welcome to this introduction to lethal means counselling, where I'm going to explain what it is and how you can use it as part of safety planning. In this video, you will learn a simple four-step process that you can use straight away to work with someone to reduce their access to lethal means.</p> <p>So what do we mean by lethal means counselling? Simply put, it's a strategy that aims to reduce a person's access to objects and places they might use to end their life. It involves a conversation where you work out a plan with the person to limit or remove access to those things. These can be medications, knives, rope, alcohol, and even the keys to their car. Lethal means counselling is just one component of a broader safety plan.</p> <p>When someone is in a suicidal crisis, the urgency to act on their thoughts can sometimes be very strong and hard to resist. While some suicide attempts are planned well in advance, we know that many happen impulsively in times of sudden, rapidly escalating crisis. One study of people admitted to hospital after attempting suicide found that the time between first thinking about suicide and then acting on those thoughts was less than 10 minutes.</p> <p>We also know that a suicidal crisis is often short lived. Removing lethal means in advance reduces the opportunity for the person to act impulsively on suicidal thoughts and buys time for the crisis to resolve or pass. It also allows the opportunity for the person to use strategies in their safety plan, reach out for help, or for others to notice something is wrong and step in.</p> <p>So how do we have the conversation? We can break the conversation into four simple steps. Step 1 is where you explain the benefits of removing or reducing access to the objects that someone might use to end their life and explain why this is important to do so. Step 2, together you develop a plan to remove or reduce access to the objects and places the person might use to end their life. Step 3, you document the plan, and step 4 is where you follow up and review to see if the plan was actioned and adjust it if needed.</p> <p>Having the person's support people involved in this conversation really helps to get their cooperation and agreement and is important as they'll often be the ones who will help to action the plan. Here's how it might go.</p> <p>This is Charlie and his brother Leo. Charlie has had a recent suicide attempt and continues to have thoughts of ending his life but has agreed to work with you to keep him safe.</p>
Clinician:	<p>Charlie, thanks for working together to make a safety plan. There is one more thing that I know can help keep you safe that involves working together to remove anything that you've considered using to end your life. When people suddenly find themselves distressed and in a lot of pain, sometimes they feel that suicide is the only way out.</p> <p>These suicidal feelings and thoughts can come on really quickly and feel overwhelming, and that's when people can do things impulsively to try to end their pain.</p>

Clinician cont'd:	They may not always realise that those intense feelings, like feeling suicidal, don't last long. If we can remove anything that you might use to try to end your life, it will give you a chance to use some of the ideas we've just put in your safety plan or reach out to Leo and call 000 when these feelings get too much. Can you see how this might help to keep you safe?
Mel:	It is crucial to explain why reducing or limiting access to means is important so the person and their support people can understand the reason for this approach helping to gain their cooperation. Sometimes getting rid of things can cause some inconvenience, but it's important to at least try to keep these things out of reach of the person while they're experiencing suicidal thoughts. Let's take a look.
Clinician:	Charlie, is it OK with you if we spend a bit of time now figuring out a way to remove things that you've considered using to end your life?
Mel:	For each means the person has described, you need to identify where it is now, how it can be moved, removed, or adapted to be safer, who will make it safer, and when the action will be completed.
Clinician:	OK. Please let me know if I've got this right. So you and Leo will go to the family home together this afternoon and collect that medication in your bedroom. Leo, you will take it back to your house and then tomorrow hand it in at the local pharmacy on your way to work. Charlie, you also said there's a belt in your room that you've used during an attempt last year. Could the two of you collect all the belts from your bedroom this afternoon, maybe lock them in the filing cabinet? And, Leo, you will take the key.
Mel:	As you can see, Leo has a big part to play in this, and it will be important that he agrees to the plan and is clear on his role. You may need to talk with him and ask him if there are any parts of the plan he might struggle with. If you are working with someone who has limited support people, you will need to work much more closely and follow up regularly. Once everyone has agreed upon the plan, write it down and include all the details. Try to use the person's own words and language. Write it in a way that makes sense to them and their situation. Make sure everyone involved gets a copy and include a copy in the person's record. Finally, step 4 is about following up and reviewing the plan. Has it been actioned? First, you want to give the person or their supports a call within 24 hours to see if all the things you agree to in the plan have been done. If things haven't gone to plan, work together to figure out other options and solutions. Making contact also lets the person and their supports know that you care and are available to help. Offer your support, keep monitoring their mental state, and encourage their support person to do the same so they know when to pull out the safety plan or reach out. While there are no guarantees that reducing access to means will save someone's life, it has been shown to be effective at preventing suicide. Helping the person to self monitor their suicidal thoughts will support them to know when to start using their safety plan and take steps to reduce their access to means. These are essential brief interventions used in suicide prevention practise.
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