

# RPMS Suicide Reporting Form



# RPMS SRF Background

- Supports Public Health Initiatives
  - DHHS National Strategy for Suicide Prevention
  - American Indian/Alaska Native National Suicide Prevention Strategic Plan
  - Director's Health Initiatives: Behavioral Health
  - Clinical Quality Performance (GPRA measure)
  - White House Council on Native American Affairs Generation Indigenous Initiative
- Developed by:
  - Office of Information Technology
  - I/T/U BH providers and subject matter experts
- Business Owners
  - Division of Behavioral Health (DBH)
  - Suicide Care Committees



## Suicide Surveillance GPRA Measure

The focus of the measure is the use of the form, not the number of suicide events. Performance is measured by the number of forms in the aggregate national RPMS database.

#### **RPMS Suicide Reporting Forms Submitted by Year**

Year	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
Target	Baseline	1603	1758	1678	1700	1784	1807	1668	1668	1419	1798	2536
Result	1603	1674	1598 (not met)	1687	1908	1930	1709 (not met)	1438	1766	2346	1975	



# Purpose of the SRF

- Improve data collection
- Inform suicide prevention activities
  - Standardized and systematic method for documenting incidents of suicide
  - Accurate suicide data at the point of care
  - Timely data
  - Capture specificity of location and associated risk factors



# What data does the SRF capture?

- Provider who completed the SRF
- Patient demographics
- Type of suicide incident
  - Ideation with intent and plan
  - Attempt
  - Completion
  - Combination Suicide/Homicide
- Standard suicide epidemiological data
  - Method
  - Substances involved
  - Contributing factors



# Paper-based Form

 Data can be captured on paper form for entry into RPMS later by Data Entry staff.

#### **RPMS Suicide Reporting Form**

Local Case Number:	Health Record Number:	
Date Form Completed:	DOB/Age:	
Provider Name:	Sex (MIF):	
Date of Act:	Community Where Act Occurred:	

	Employment Status	0	Relationship Status		Education			
	Part-time		Single		High School Graduate/GED			
	Full-time		Married	Less than High School, highest grade complete				
	Self-employed		Divorced/Separated	Some College/Lechnical College Graduate Post Graduate				
	Unemployed		Widowed					
	Student		Cohabitating/Common-Law					
	Student and employed Retired		Same Sex Partnership		Unknown			
			Unknown					
	Unknown							
	Suicidal Behavior		Location of Act		Previous Attempts			
	Ideation with Plan and Intent		Harne or Vicinity		0			
	Attempt		School		1			
	Completed Suicide		Work		2			
	Att'd Suicide w/ Att'd Homicide		Jail/Prison/Detention		3 or more			
	Att'd Suicide w/ Compl Homicide	1	Treatment Facility	Unknown				
	Compl Suicide w/ Att'd Homicide		Medical Facility					
	Compl Suicide w/ Compl Hamicide		Unknown					
			Other (specify):					
7			Method ( ✓ all: that apply)					
	Gunshot		Overdose list:	ļ.	Non-prescribed op ates (e.g. Heroin)			
	Hanging		Aspirin/Aspirin-like medication	١.	Sedatives/Benzodiazeoines/Barbiturates			
	Motor Vehicle		Acetaminophen (e.g. Tylenol)		Alcohol			
	Jumping		Tricyclic Antidepressant (TCA)		Other Prescription Medication (specify):			
	Stabbing/Laceration		Other Antidepressant (specify):		Other Over-the-counter Medication (specify):			
	Carbon Monoxide		Amphetamine/Stimulant		Other (specify).			
	Overdosed Jsing (select from ist)		Prescribed Oplates (eg. Narcotics)					
	Unknown							
	Other (specify)							
8.3		Su	bstances involved ( / all that apply	}				
	None		Alcohol	-10-	Inhalants			
	Alconol & Other Drugs (select from list)		Amphetamine/Slimulant		Non-Prescribed Opiates (e.g. Heroin)			
	Unknown		Cannabis (Marijuana)		Prescribed Opiates (e.g. Narcotics)			
	STREET STREET		Cocaine	_	Sedatives/Benzodiazepines/Barbiturates			
			Hallucinogens		Other (specify)			
	ne el ne ane ane ane el e		ap ap ap - ap -	100	The management of the manageme			
			Contributing Factors ( 🗸 all that apply)	100				
	Suic de of Friend or Relative		History of Substance Abuse/Dependency		Divorce/Separation/Break-up			
	Death of Friend or Relative		Financial Stress		Legal			
	Victim of Abuse (Current)		History of Merital Illness		Unknown			
	Victim of Abuse (Past)		History of Physical Illness		Other (specify)			
	Occupational/Educational Problem							
] -	Disposition		7 A	arrat	ive			
	Mental Health Follow-up	- :::		1111	11 10 17 11 117 111 10			
	Alconol/Substance Abuse Follow-up	1						
	Inpatient MH Treatment Voluntary							
_	Inpatient MH Treatment Involuntary	$\vdash$						
	Medical Treatment (ED or In-patient)							
	Outreach to Family/School/Community							
	Unknown							
	<b>.</b>							
	Other (specify):							

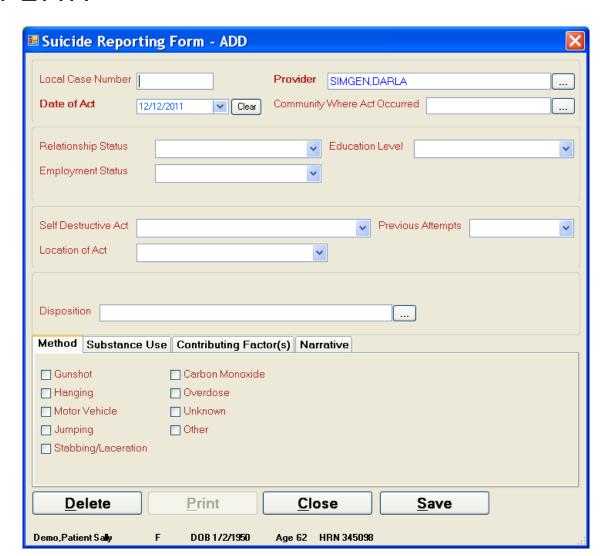


# Suicide Reporting Form in BHS v4.0

🔛 Suicide Form (	Data Entry - Add Suicide F	orm			×					
Local Case Number			Provider	GARCIA,RYAN						
Date of Act	Friday , November 12, 201	0	Community Where Act Occurred	TAHLEQUAH						
Relationship Status	DIVORCED/SEPARATED	▼	Education	HIGH SCHOOL GRADUAT	TE/GED					
Employment Status	FULL-TIME	•	If less than 12 years, highest grade completed							
Suicidal Behavior	IDEATION W/ PLAN AND INTE	NT 🔻	Location of Act	WORK	•					
Previous Attempts		_		if other						
Disposition										
Method   Substance Use   Contributing Factors   Narrative										
Method										
☐ Gunshot	Carbon Monoxide	Jubati	nce R OVER-THE-COUNTER MED	Substance If Other iron vitamins	工					
☐ Hanging	✓ Overdose									
Motor Vehicle	☐ Other				<u></u> Edit					
Jumping					➤ Delete					
☐ Stabbing/Lac	eration Unknown									
DEMO,BOBBIE 176224 F 06/03/1970 40										



## SRF in EHR





# Dependencies for Use and Exporting

## RPMS Prerequisite

 BHS v4.0 (namespace AMH) must be loaded in order to utilize the Suicide Reporting Form in any of the RPMS applications (EHR, PCC, BHS v4.0)

#### Data

- SRF data resides in the AMH application not the PCC application
- SRF data is exported to IHS Headquarters via the monthly AMH export
  - This is a separate export from the NDW (PCC) export



# SRF Exports and Data

- Export process
  - Currently requires monthly AMH export either done manually or set-up in Taskman. You can see AMH export files received at the IHPES website.
  - https://www.ihs.gov/NonMedicalPrograms/ihpes/index.cfm?module=ihpes& option=bhindex
- Local SRF reports
  - Immediate access to SRF data
    - Inform prevention and intervention efforts
    - Data to support MSPI reporting
- Aggregate national data
  - GPRA measure
  - Web-based BH data mart
    - Provides access to aggregate data to DBH leadership and Area BH Consultants



### Access

- Access to SRF data is restricted to providers (BH, Medical and Nursing) and data entry staff
  - EHR
    - Suicide Form component must be installed by EHR CAC
    - Location in EHR can vary with site specific EHR desktop templates/tabs
    - Standard component available immediately upon installation of application

#### • PCC

- Entry into RPMS by data entry staff (from paper forms)
- Entry into RPMS by providers with "SF" menu option



# Security Keys

- PCC (for PCC and Electronic Health Record)
  - APCDZ SUICIDE FORMS
  - APCDZ SUICIDE FORM DELETE
    - Delete key should only be given to HIM Chief and BH Director
  - APCLZ SUICIDE REPORTS
- AMH/ BHS v4.0 GUI (Behavioral Health System)\*
  - AMHZ SUICIDE FORM ENTRY
  - AMHZ SUICIDE FORM REPORTS
- \*AMH keys are to be allocated to BH providers only.



## SRF and the Medical Record

- The form is often completed in the context of a visit but SRF data is not visit-related (i.e., does not populate the RPMS Visit file)
- Data collection tool not a clinical intervention tool
  - Services provided in response to a suicide event must be appropriately documented in the patient's medical record using appropriate Purpose of Visit (POV) and CPT codes.



## **Documentation Standards**

- Policies and procedures for completing a SRF are determined at the local level.
- Recommend documenting a suicide event within the last calendar year.
- Once the provider/staff is made aware of the suicide event, the SRF should be completed within 24-48 hours.
- The IHS Suicide Care Committees have been working on the following policies, which they hope to release nationally in 2017.
  - Suicide Crisis Policy
  - Community Suicide Crisis Response Guidelines
  - Suicide Committee Care Policy



# Functionality

- Required fields
  - All fields are required except for Local Case Number and Narrative
  - Forms can be saved as "Incomplete" to be completed at a later time
- Each field has an option of "Other" or "Unknown" if the desired response is not available in the drop-down menu



# Prompts and Notifications

- AMH (no set-up required)
  - Providers are prompted to complete a form when they enter a POV of 39, 40 or 41 (suicide)
- EHR (requires set-up by EHR CAC)
  - Crisis note TIU note title created by the provider with a CWADF icon visible when patient is in focus
- AMH and PCC Management Reports
- Community Alerts
  - Suicide Community Alerts include SRFs and visits with a Suicide Diagnosis/Purpose of Visit



## Local SRF Reports

- Access
  - Controlled by security keys
    - Not all providers have access to RPMS Reports
  - SRF reports available in both AMH and PCC

### AMH

- SGR: Listing of Suicide Forms by Selected Variables
  - Can select the variables that you would like to see in the report
  - Can be used to create a de-duplicated list of forms

### AMH and PCC

- SSR: Aggregate Suicide Form Data Standard
  - Can parse SRF data for a date range by any SRF variable including age, gender, community, etc.
  - The path in either AMH or PCC Management:
    - In AMH: RPTS → PROB → SUIC → SSR
    - In PCC: PLST → SUIC → SSR



# Local SRF Reports BHS SRF Reports Menu:

```
IHS Behavioral Health System
                          Suicide Reports
             Version 4.0
                             2010 DEMO HOSPITAL
      SSR
             AGGREGATE SUICIDE FORM DATA - STANDARD
       SAV
             AGGREGATE SUICIDE DATA REPORT - Selected Variables
             Output Suicide Data in Delimited Format
       SDEL
             Listing of Suicide forms by Selected Variables
       SGR
             Suicide Report (Age&Sex)
       SUIC
             Suicide Purpose of Visit Report
       SPOV
Select Suicide Related Reports Option:
```



# Local SRF Reports PCC SRF Reports Menu:

```
PCC Management Reports
                Suicide Form Data Reports Menu
           IHS PCC Suite Version 2.0
                       DEMO INDIAN HOSPITAL
     SDEL
           Output Suicide Form Data in Delimited Format
     SSR
           Aggregated Data From Suicide Reporting Forms
You have 4 PENDING ALERTS
        Enter "VA to jump to VIEW ALERTS option
You've got PRIORITY mail!
Select Suicide Form Data Report Option:
```



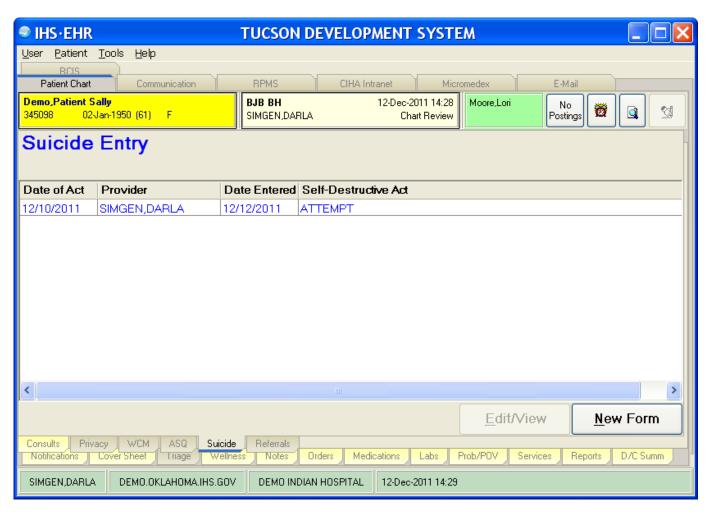
# Accessing the SRF in EHR

- You would find your patient, create a "Chart Review" visit type.
- Go to the Suicide Reporting Tab in your EHR desktop template.
- Click on the "New Form" button in the bottom right hand corner



# SRF Component in the EHR

Options: Tab format





# Contingency Plan for SRF Data Entry

- SRF paper forms can be used as an alternative to direct-computer provider entry.
  - These forms should be securely stored but readily accessible during down times.
  - Download forms at: <a href="https://www.ihs.gov/bh">www.ihs.gov/bh</a>.
- If RPMS is down consider provider documentation on paper forms for later entry into RPMS by Data Entry.
- The paper form should then be shredded (HIM Consultants approved, recommended process) after data entry is complete.



## **Useful Links**

#### Websites:

- RPMS Behavioral Health Website
  - www.ihs.gov/rpmsbh
- EHR Website
  - www.ihs.gov/EHR
- EHR FTP Site
  - <a href="ftp://ftp.ihs.gov/pubs/EHR">ftp://ftp.ihs.gov/pubs/EHR</a>

#### Listservs:

- RPMS BHS:
  - https://www.ihs.gov/listserv/topics/signup/?list\_id=172
- RPMS EHR:
  - https://www.ihs.gov/listserv/topics/signup/?list\_id=73
- Zero Suicide:
  - https://www.ihs.gov/listserv/topics/signup/?list\_id=345

#### Helpdesk:

support@ihs.gov