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To: Emergency Department Staff, Allied Health and Providers

From: Injury and Violence Prevention Branch, Division of Public Health

Date: February 6, 2025

Subject: New resource: Best Practices: care Transition for Individuals at

Risk of Suicide

The National Action Alliance for Suicide Prevention reports that in the month after individuals leave inpatient psychiatric care, their suicide rate is **200 times higher** than that of the general population. Similarly, **nearly 70%** of patients discharged from an emergency department after a suicide attempt never begin outpatient mental health treatment.

The North Carolina Department of Health and Human Services, Injury and Violence Prevention Branch, Comprehensive Suicide Prevention (CSP) Program is pleased to share a new resource for providers, created by the National Action Alliance for Suicide Prevention, to address the care gap during this time of increased risk. The Emergency Department Best Practices: Care Transitions for Individuals with Suicide guide provides clear, evidence-based recommendations specifically for care transitions from emergency departments to outpatient care to:

- Reduce the risk of repeat emergency department visits
- Ensure timely follow-care
- Connect individuals with resources and support

Additional Best Practices of Care Transition resources can be found here.

The CSP program is happy to discuss these resources or assist in implementation. Please contact CSP Program Manager Anne Geissinger (Anne.Geissinger@dhhs.nc.gov) for more information.