

The Devereux Experience

In the past ten years several organizations have implemented some or all of the elements of the QPR Institute's suicide risk reduction and risk management program. Among those choosing to use all the recommended components, the Devereux Foundation has the greatest experience to date. Devereux serves some 15,000 clients with roughly 5,000 staff in multiple settings across the US. They have successfully integrated the program as a routine part of all clinical programming, and the program was recently featured in the November 2006 Joint Commission's *Perspectives on Patient Safety*.

Implementation of the program began in 1999. According to Paul LeBuffe, Director of Devereux Institute of Clinical Training and Research, and as excerpted from the Joint Commission article, "We wanted to create a safety net around each client to catch any suicidal indications and respond to them in an appropriate and standardized manner."

As implemented by Devereux, the program has four key components:

1. *All staff* receives mandatory suicide prevention training. Since suicidal communications by a client or staff member may be received by any volunteer or paid full or part time employee, all staff receive basic *QPR Gatekeeper Training for Suicide Prevention*.
2. *All clinical staff* receives suicide risk assessment and management training in the effective use of the *QPRT Suicide Risk Management Inventory*©. This is a full-day training and at the end of training each clinical staff person must demonstrate his or her assessment and documentation skills in this area of clinical practice.
3. *All Devereux clients* are assessed for suicide risk at admission, at times of transition between programs, where there is evidence of an increase in risk factors, and at discharge. *The QPRT Suicide Risk Management Inventory*© is a stand-alone document and a required part of the official medical record.
4. *All Devereux staff and facilities* are trained in a comprehensive crisis response plan. All staff members understand their roles and responsibilities when responding not only a suicide attempt or potential suicide situation, but other crises as well.

The program also conducts routine outcome measures, annual reviews, and other administrative interventions designed to maintain high program standards.

Not only has Devereux institutionalized their suicide risk management and client safety program, but they have sustained it for more than seven years. According to spokesmen for Devereux, benefits of the program include creating a safer environment for their clients by having clinical staff trained and competent to assess and manage suicide risk, but also creating a safer work environment for Devereux staff. Due to the program's candor and open approach to discussing suicide in various training venues, Devereux reports that the program may have helped avert at least five staff members from suicidal activity.

As an example of how to fully implement an ecological model and systems approach to suicide risk reduction, we see several keys to the success of the Devereux program:

- Leadership support from the very top of the organization, including the Board of Directors
- Establishment of a shared sense of responsibility to create a “culture of safety” for clients and staff alike.
- Development of in-house subject matter expertise to train staff via train-the-trainer programming.
- Mandated training at all levels to achieve collective community competence to deal with suicide throughout the organization.
- Enforcement of permanent policy and procedures to ensure that enhancements in the standards of practice are maintained and supported by middle management and implemented by line staff.
- Measurement of program outcomes with reports to governance
- Commitment to sustainability.

We wish to note that the Devereux Foundation is available to consult with other organizations on its experience and in the areas of program implementation. Please contact Paul LeBuffe, Director of Training and Research for assistance:

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