

Reducing the Risk for Suicide

Suicide is a significant public health issue that impacts many patient populations. Many people experiencing suicidal thoughts or behaviors first seek help in healthcare settings, making these environments critical for early identification and intervention. By requiring evidence-based and compassionate care, Joint Commission guides hospitals to play a vital role in early identification of suicide risk and interventions to reduce harm.

Background

In response to a persistent lack of improvement in suicide rates, and since suicide is the 11th leading cause of death in the United States,ⁱ Joint Commission held five technical expert panel meetings between June 2017 and March 2018 to explore and reevaluate current hospital practices related to suicide prevention.ⁱⁱ In 2019, Joint Commission implemented new safety goal requirements designed to improve the quality and safety of care for patients who are being treated for behavioral health conditions and those who are identified as high risk for suicide.



Standards

The new 2025 National Performance Goals™ align with Centers for Medicare & Medicaid Services (CMS) Conditions of Participation (CoPs). These standards and the CoPs together provide the framework for reducing patients' risk of suicide during their hospitalization and transition back to the community. Hospitals must:

- (For psychiatric units in hospitals) Assess features in the physical environment that could be used to attempt suicide and take necessary action to minimize the risks
- Screen all patients being treated primarily for a behavioral health condition for suicide ideation using a validated screening tool
- Use an evidence-based process to assess patients who screen positive
- Document patients' overall level of risk for suicide and the plan to mitigate, and follow written policies and procedures addressing the care of patients identified as at risk (training for staff, guidelines for reassessment, monitoring)
- Plan counselling and follow up care at discharge
- Monitor implementation and effectiveness of policies and procedures for screening, assessment, and management of patients at risk and take action to mitigate

Rationale

Suicide is a significant public health issue that affects individuals across all demographics, regardless of age, gender, ethnicity, or background.ⁱⁱⁱ Since people experiencing suicidal thoughts or behaviors often first seek help in healthcare settings, it is essential healthcare providers follow current guidelines and provide compassionate care. In doing so, healthcare organizations can prevent suicide deaths and promote recovery and resilience among individuals and their families. To further assist healthcare organizations, Joint Commission maintains a comprehensive [Suicide Risk Reduction](#) information center. This resource center is publicly available and offers collections of curated resources with actionable strategies and tools to support organizations' suicide risk prevention initiatives.



ⁱ Center for Disease Control and Prevention (CDC). SAVE retrieves national suicide statistics from the Web-based Injury Statistics Query and Reporting System (WISQARS). <https://save.org/about-suicide/suicide-statistics>
ⁱⁱ Joint Commission R3 Report | Requirement, Rationale, Reference. Issue 18, November 27, 2018, updated November 20, 2019. https://www.jointcommission.org/-/media/jtc/documents/standards/r3-reports/r3_18_suicide_prevention_hap_bhc_cah_11_4_19_final.pdf
ⁱⁱⁱ National Institute of Mental Health: Transforming the understanding and treatment of mental illnesses. Suicide. <https://www.nimh.nih.gov/health/statistics/suicide>. Accessed June 6, 2025



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*National Patient Safety Goals are now a part of the National Performance Goals.



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