

Caring Letters

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BACKGROUND

- Suicide is a serious public health risk, with 1.3M adults attempting suicide each year (1).
- It is consistently a leading cause of death in the US; 2nd only to accidents for ages 10-34(1).
- Caring Letters are an evidence based intervention shown to reduce suicide risk.
- Among patients hospitalized for a depressive or suicidal state and refusing ongoing care, a significant reduction in suicide rates was achieved by sending caring letters post discharge (2).
- Among patients hospitalized for deliberate self-poisoning, those that received caring postcards after discharge experienced nearly half as many repeat attempts (3).

AIMS STATEMENT

- By March 31st, 2020, 75% of patients admitted to the PRS inpatient service for suicide attempt will be mailed a caring letter within 4 weeks of discharge.

METHOD

- Resident(s) on the PRS inpatient service recorded the name and discharge date of any patient admitted for suicide attempt.
- Within 4 weeks of discharge, the resident wrote a caring letter, addressed the envelope to the mailing address on file, then placed it in the residency work room to be mailed.



Measures

Outcome	Measures
Outcome	• % of patients admitted for suicide attempt that are mailed a Caring Letter within 4 weeks
Process	• % of letters that were signed by >1 team member
Balancing	• % of letters returned due to undeliverable address • Post-QI survey for residents

RESULTS

10 patients were identified for inclusion



Post-QI Resident Survey (N=4)

Has your overall experience with Caring Letters been positive or negative?	3 Positive 1 Neutral
Has the extra time spent on Caring Letters negatively affected patient care?	4 No
Do you consider the additional work of writing a caring letter to be overly burdensome?	4 No

Survey Feedback

- "I think this is a great concept and I wish it were standard of care"
- "It's hard to remember to do it"
- "I really like the concept and felt like I was potentially helping my patients when I was doing their letter"

DISCUSSION

- Implementation of this Caring Letters pilot project was successful, in that within a well circumscribed population, 80% of patients received a caring letter signed by multiple members of the care team in a timely manner.
- Accuracy of data is limited by each resident's ability to identify and include qualifying patients.
- Limitations include: small sample size, exclusion of patients with suicidal ideation (no attempt) and patients on other services, limited number of resident participants, survey sent to residents only.

Next Steps

- Track roles of interdisciplinary team members signing Caring Letters and consider providing education as indicated to encourage a team based approach.
- Include interdisciplinary team members in future surveys.
- Expand inclusion criteria for patients to include those with suicidal ideation or those seen by the PRS consult-liaison or Psych ED services.

REFERENCES

1. Preventing Suicide. (2019, September). Retrieved from <https://www.cdc.gov/violenceprevention/suicide/fastfact.html>
2. Motto, J. A., & Bostrom, A. G. (2001, June). A Randomized Controlled Trial of Postcrisis Suicide Prevention. *Psychiatric Services*, 52(6).
3. BMJ, doi:10.1136/bmj.38579.455266E0 (published 23 September 2005)

To see an example of how to write a Caring Letter, Scan Here →



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