

CALM Quick Reference Guide

NOTE: This guide is not intended to replace formal training in suicide risk assessment procedures. It is simply provided as an example of basic questions that a clinician might ask when using CALM.

• **Basic risk assessment:**

- Nihilistic thinking (content, recency, frequency, duration, intensity, history)
- Suicidal ideation (content, recency, frequency, duration, intensity, history)
- Past attempts (number, index, most recent, means used, disposition afterwards)
- Plan (timing, means, access, preparation, rehearsal; ask about backup/secondary plans)
- Intent (current, variability over time, urgency, most intense point)
- Reasons for living/reasons for dying
- Coping strategies (frequency of use, effectiveness)
 - Safety plan (see <https://www.sprc.org/resources-programs/safety-planning-guide-quick-guide-clinicians>)

• **CALM elements:**

- Starting the conversation:
 - Language should reflect the patient's safety as the primary theme
 - Collaborative conversation, not constricting confiscation!
 - E.g., "Let's discuss ways to help keep you safe until you are feeling better."
 - E.g., "Putting time and distance between you and a method that could do serious harm—especially a firearm—is a good way to protect yourself while you're struggling."
- Ask about access to lethal means related to any plans
- Ask about access to medications and firearms REGARDLESS of plan.
 - E.g., "If a child attempts suicide, it's usually at home and it's often a quick decision. Pills are the most frequent method of attempt and guns are the most lethal, so let's start with those."
 - Ask about self-defense guns separately and specifically.
- Options for means reduction:
 - Firearms: temporary off-site storage is the most desirable outcome
 - Friend or relative, gun store/range, self-storage space, pawn shop, police/sheriff's office
 - Others: Locking, locking ammo separately, removing key components (NOT hiding!)
 - Medications: disposing of outdated/unneeded meds, reducing quantities, locking up and monitoring needed meds
 - Other: Be creative (e.g., reduce access to car keys, create emotional safeguards by placing pictures of loved ones near possible means)
- Document and follow-up:
 - Document all steps taken to reduce means access
 - Agree on a plan for follow-up (when, where, etc.) and document