Assessment of Suicide Ideation Competencies in Academic Health Science Center Students Following a Blended Learning Communication Course: A Retrospective Review

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Background

- Suicide is the 10th leading cause of death in the United States, with an increased age-adjusted rate of 24% in the US from 1999-2014.1
- Lack of mental health education has been identified as a primary barrier to pharmacists’ ability to care for patients with depression, noting they monitor mental health less frequently than cardiovascular health. In an Australian study, 92% of pharmacists were able to identify depression; 76.3% thought their profession could help a depression patient. Alarmingly 51% felt that patients being treated for depression were less likely to attempt suicide.2
- Among physicians, greater self-perceived competence and commitment to suicide ideation has been seen among psychiatrists, general practitioners, and internists, in that order.3
- Patient contact with primary care providers is higher than contact with mental health providers in the month before attempting suicide, averaging 45%.4
- Research has shown that suicidal patients rarely offer thoughts of suicide ideation; however, they acknowledge it if asked directly.5
- Standardized patient learning within interprofessional groups has allowed student pharmacists to develop confidence and experience in challenging situations, such as suicide ideation, but more research is needed to show suicide ideation assessment competency.6
- Use of standardized patients has improved confidence in performing suicide ideation assessment in student nurses, but did not improve knowledge regarding suicide, such as risk behaviors.7

Objectives

1. Determine the frequency of suicide ideation assessment during an Objective Structured Clinical Evaluation (OSCE)
2. Compare frequencies across student disciplines (medicine, nursing, and pharmacy)
3. Determine whether faculty facilitator discipline influences student willingness to perform a suicide assessment

Course Design and Methods

- During the small group session, students interacted with a SP with clinical depression and suicide ideation. All faculty were encouraged to allow each student to perform the suicide ideation assessment during the case.
- For the course final, students completed a final OSCE interview involving a SP with clinical depression, but without suicide ideation.
- The interview was recorded for grading and archived for curricular assessment.
- Following completion of the course, 4 faculty members representing all disciplines conducted a retrospective review of all recordings.
- Assessment for suicide ideation was defined as the student asking the SP about any thoughts of harming him/herself at anytime during the 8-minute interview.
- Nonparametric tests were used to compare the frequencies across disciplines and logistic regression was used to compare whether faculty discipline influenced assessment performance.
- Data analysis was performed using SPSS version 22 (SPSS/IBM, Armonk, NY)

Results

- Statistical significance was found for likelihood of medical students to assess for suicide ideation over nursing and pharmacy students (p=0.001)
- No statistical significance was found comparing likelihood of assessment for suicide ideation between nursing and pharmacy students, despite higher assessment by nursing students (p=0.393)
- Faculty discipline did not influence whether students performed the assessment (p=0.177)

Conclusions

- Medical students were significantly more likely to perform suicide ideation assessment compared to pharmacy and nursing students, regardless of the faculty discipline of the small group facilitator.
- Previously, pharmacists have demonstrated the ability to correctly identify depression, but communication with patients and lack of education about how to identify and handle suicide ideation have been identified as barriers. 2
- Future research should be directed towards identifying reasons for differences in suicide ideation frequency amongst different healthcare professions, and efforts should be made to have all healthcare professionals view this as a professional responsibility.
- Development of interprofessional exercises to reinforce shared professional responsibility should be evaluated.
- In conjunction with those factors, efforts should be made to enhance students’ ability to identify patients at risk for suicide ideation and confidence in assessing for suicide ideation.
- Students were not evaluated for their self-perceived competency in performing suicide ideation, which may limit the validity or impact of their assessment in practice.

Limitations

Limitations of the study include the following:
- Lack of determining inter-rater reliability for assessment of suicidal ideation between faculty reviewers
- Limited sample population from one Academic Health Sciences Center
- Retrospective nature does not control for variance in faculty emphasis of suicide ideation within small groups

References