



Provider Tools and Materials

## Reduce Suicide Risk with Caring Cards and Letters

Studies demonstrate that Caring Cards (letters to patients) are an effective strategy in reducing risk of suicide. This simple and low-cost strategy has been replicated in more than 11 well-controlled studies. (Original Study: Motto, J. A., & Bostrom, A. G. A randomized controlled trial of postcrisis suicide prevention. *Psychiatric Services*. 2001;52(6), 828-833.)

### How to use this tool

The four templates on the following pages are designed to make it easy to add your own and your patient's information to the appropriate letter. Fields where you should add your own information are shown in **bold**.

Use the corresponding template to send Caring Cards to:

- **Caring Card 1: Inpatients and residential patients:** On the day of discharge from inpatient and residential units.
- **Outpatients:**
  - Caring Card 2: When a patient is considered an acute risk, exhibits suicidal ideations or high PHQ9
  - Caring Card 3: At time of noncompliance with treatment.
  - Caring Card 4: At time of the first missed appointment.

**Scroll down for fillable Caring Card and Letter Templates**

**For additional MI Mind Tools & Materials, log on to [henryford.com/MIMindtools](http://henryford.com/MIMindtools)**

**Caring Card 1: Inpatient and residential care patient letter. Send on the day of discharge.**

*Print on your practice or health system letterhead*

**[Date]**

Dear **[Patient name]**,

We wanted to check in with you as you continue your journey of wellness. We know wellness can be hard to navigate at times and that change can be hard when leaving the hospital. We want you to know that our team is here for you should you need continued help or support.

Please reach out to us should you find yourself in a moment of crisis or in need of other resources by calling **[insert phone number with area code]** or emailing **[insert email address]**. Our team is always here to support you on this journey we started together.

Be well,

**[Your name or team name, ie: The Team at ...]**

## **Caring Card 2: Outpatient letter for patients at high risk, exhibiting suicidal ideations or high PHQ9**

*Print on your practice or health system letterhead*

**[Date]**

Dear **[Patient name]**,

I am writing this letter to make sure things are getting better for you. I was very concerned about how depressed you were the last time you were here to see me. Please feel free to call our clinic if you need an appointment sooner than your follow up. We are here for you and care for your emotional well-being.

If you are having thoughts about suicide, please call our clinic at **[insert phone number]** and ask to speak to me. On holidays and after office hours, please call **[insert phone number with area code]** and ask to speak to the psychiatrist on call.

Another resource that you can call is: 1-800-273-TALK (8255) or 988. This will connect you with the National Suicide Prevention Lifeline. You will receive emotional support if you are in emotional distress or suicidal crisis. It is free, confidential, and available 24 hours a day, 7 days a week.

Take care. I look forward to seeing you.

Sincerely,

**[Your name]**

### **Caring Card 3: Outpatient letter for patients requesting refills who missed an appointment**

*Print on your practice or health system letterhead*

**[Date]**

Dear **[Patient name]**,

I hope things are going well for you. You requested a refill of your medications. However, upon reviewing your chart, I noticed that the last time you were seen by me was on **[insert date]**. At that last visit, you were encouraged to follow up in **[insert number]** months. In order to refill your prescriptions, I would like to see you. I am very concerned about your well-being and want to make sure that the medications continue to help you and that you are being offered safe, quality care. Please call our office at **[insert phone number with area code]** to make an appointment.

Thank you so much and I hope to hear from you soon. Take care.

Sincerely,

**[Your name]**

#### **Caring Card 4: Outpatient letter for Patients who missed an appointment**

*Print on your practice or health system letterhead*

**[Date]**

Dear **[Patient name]**,

I hope things are going well for you. You had an appointment with me today but did not make it. I am very concerned about your well-being and want to make sure the treatment plan we are working on together is helpful to you and you are making progress. Please call our office at **[insert phone number with area code]** to make a follow-up appointment.

Thank you so much and I hope to hear from you soon. Take care.

Sincerely,

**[Your name]**