Mental health Nurses Experiences Of Patient Suicide

1. Production of rapid review protocol
The following individuals were involved in the production of this protocol:

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2. Background/context

The prevalence of suicides registered in England and Wales was last reported as 5642 or 10.7 per 100000. Approximately 26% of suicides are carried out by people who are accessing mental health services. This means that at least 1477 people accessed mental health services and would have had contact with a minimum of the same number of mental health workers. Therefore at least 1477 mental health workers will encounter a patient suicide each year (ONS 2023). A meta-synthesis focused on doctors and nurses themes included a marked emotional impact and a sense of failure (Malik 2021). Health personnel exposed to a patient suicide who experiences psychological distress as they try to understand and make sense of what happened may do so for an extended period. (Fairman et al. 2014; Rytterstrom et al. 2020). Suicide exposure has been associated with symptoms of depression and anxiety among health personnel (Aldrich and Cerel 2022). Typical emotions may include sadness, guilt, and anger (Wurst et al. 2011; Croft et al. 2023). Factors that may be associated with psychological distress are having contact with the patient within the week before the suicide, gender, and being less than five years qualified (Draper et al. 2014). Health workers may need help to process the experience, such as debriefing or counselling (Fairman et al. 2014; Rytterstrom et al. 2020). Higher levels of distress are also associated with an inability to work as usual (Wurst et al. 2011). This has been reported as high as 17% in a UK health personnel population (Croft et al. 2023). However, support may not be readily available (Malik 2021). When it is available, it is through the organisation or from colleagues, and the perceived value of the available support is mixed (Croft et al. 2023).

3. Rapid questions
The overarching aim of this review is to provide a rapid appraisal of published, international, peer-reviewed academic papers About mental health nurses' experiences of helping people who go on to die by suicide.

> Question 1: What are mental health nurses' experiences of caring for patients who go on to die by suicide?

4. Eligibility criteria
The Population Concept Context (PPC) framework will be used to inform the eligibility criteria of the initial rapid evidence summary (Peters et al. 2015).

Table 1: Eligibility Criteria

PCC	Inclusion criteria	Exclusion criteria
Population	Mental health nurses	Other health personnel; research where mental health nurse data cannot be disaggregated from other health personnel
Concept	Nursing patients who go on to die by suicide	Nursing patients who self-harm; nursing patients who attempt suicide
Context	Community or inpatient settings	Nil
Study design	Primary qualitative research; Mixed methods studies where the qualitative component can be disaggregated	Quantitative research; Systematic reviews Non systematic reviews such as literature reviews or comprehensive reviews or narrative reviews
Other Study Considerations		
Nil else noted		

5. Literature search

6.1 Initial Scope of the Literature

An initial scope of MEDLINE and PsycINFO was undertaken in January 2025 to identify existing, published evidence to inform the methods and improve the focus and efficiency of the next stage of the rapid scoping review. The keywords used, to search within the title and abstract of a publication were:

Mental health nurse	suicide	Experiences
Mental health practitioner Psychiatric nurse Mental Health services Community mental health services	Completed suicide	Perceptions Responses Impact understanding

Medline

Search	Keywords
1	Mental health nurse (390)
2	Mental health practitioner (39)
3	Psychiatric nurse (181)
4	Mental health services (22962)
5	Community mental health services (3081)
6	Mental Health Nurs* (2136)
7	Psychiatric nurs* (3104)
8	Suicide (36282)
9	Suicide completed (364)
10	Suicid* (13157)
11	Experience (344922)

12	Perceptions (76591)
13	Responses (425879)
14	Impact (793447)
15	Understanding (595942)
16	1 AND 9 Mental Health nurse and suicide completed (0)
17	1 AND 8 Mental health nurse and suicide (8)
18	2 AND 8 Mental Health practitioner and suicide (5)
19	4 AND 9 Mental health services and suicide completed (13)
20	4 AND 8 Mental Health services and suicide (1412)
21	3 AND 9 Psychiatric nurse and suicide completed (0)
22	3 AND 8 Psychiatric nurse and suicide (11)
23	5 AND 9 Community mental health services and suicide completed (1)
24	5 AND 8 Community mental health services and suicide (107)
25	(1 OR 2 OR 3 OR 4 OR 5) AND (8 OR 9) = 1429
26	(1 OR 2 OR 3 OR 4 OR 5 OR 6 OR 7) AND (8 OR 9 OR 10) = 1557
27	(1 OR 2 OR 3 OR 4 OR 5) AND (8 OR 9) AND (11 OR 12 OR 13 OR 14 OR 15) = 423
28	(1 OR 2 OR 3 OR 4 OR 5 OR 6 OR 7) AND (8 OR 9 OR 10) AND (11 OR 12 OR 13 OR 14 OR 15) = 476

PsycINFO

Search	Keywords
1	Mental Health nurse (352)
2	Mental Health Practitioner (120)
3	Psychiatric nurse (246)
4	Mental Health services (28069)
5	Community Mental Health Services (3006)
6	Mental Health Nurs* (2014)
7	Psychiatric nurs* (2829)
8	Suicide (31744)
9	Suicide completed (60)
10	Suicid* (40130)
11	Experience (237356)
12	Perceptions (144794)
13	Responses (126394)
14	Impact (255599)
15	Understanding (250651)
16	1 AND 9 Mental Health nurse and suicide completed (0)
17	1 AND 8 Mental health nurse and suicide (12)
18	2 AND 8 Mental Health practitioner and suicide (7)
19	4 AND 9 Mental health services and suicide completed (5)

20	4 AND 8 Mental Health services and suicide (1672)
21	3 AND 9 Psychiatric nurse and Suicide completed (0)
22	3 AND 8 Psychiatric nurse and suicide (13)
23	5 AND 9 Community Mental health services and suicide completed (0)
24	5 AND 8 Community Mental Health Services and Suicide (121)
25	(1 OR 2 OR 3 OR 4 OR 5) AND (8 OR 9) =1698
26	(1 OR 2 OR 3 OR 4 OR 5 OR 6 OR 7) AND (8 OR 9 OR 10) =2311
27	(1 OR 2 OR 3 OR 4 OR 5) AND (8 OR 9) AND (11 OR 12 OR 13 OR 14 OR 15) = 597
28	(1 OR 2 OR 3 OR 4 OR 5 OR 6 OR 7) AND (8 OR 9 OR 10) AND (11 OR 12 OR 13 OR 14 OR 15) = 866

The initial searches were limited to English language publications from 2014 to the present day (Oct 2024). A search of Prospero identified no other similar studies in progress or completed. A search of the Cochrane Library identified no published systematic reviews related to this rapid review research question.

5.2 Search strategy
The initial searches detailed in 6.1 and their subsequent search results will be used to inform the development of a comprehensive search strategy which will be tailored for each information source, for each question.

Comprehensive searches will be conducted across seven databases for English language publications. In order to ensure this is aligned to current healthcare service delivery and mental health nursing practice, we will limit the search to the last 10 years; from 2015 to 2025:
- On the Ovid Platform: Medline, PsycINFO, OVID Emcare, HMIC
- On the EBSCO Platform: CINAHL

The reference lists of all included publications will be screened and forward citation tracking will be conducted for additional studies.

7.3 Reference management
All citations retrieved from the database searches will be imported or entered manually into EndNote™ (Thomson Reuters, CA, USA) and duplicates removed. At the end of this process the citations that remain will be imported to Rayyan™ and any further duplicates removed.

8. Study selection process
All the citations will be screened by a reviewer from the team, using the information provided in the title and abstract using collaborative software such as Rayyan™. A second reviewer from the team will screen 10% of screened citations; any disagreements will be resolved by discussion. For citations that meet the inclusion criteria, or in cases in which a definite decision cannot be made based on the title

and/or abstract alone, the full texts of all citations will be retrieved. Each of the full texts will be further screened for inclusion by a reviewer from the team, using a purposefully developed screening tool, and all decisions will be verified by a second reviewer. Any disagreements will be resolved through discussion to reach a consensus. The flow of citations through each stage of the review process will be presented in a PRISMA-ScR flow diagram (Tricco et al. 2018).

9. Data extraction
All demographic and outcome data will be extracted directly into tables by one reviewer and checked by another. The data extracted will include specific details about the populations, study methods and outcomes of significance to the review questions. A template for the data extraction process will be developed and piloted.

10. Assessment of methodological quality
We will conduct a formal assessment of quality using JBI study-design-specific appraisal checklists (JBI 2017).

11. Synthesis
The data will be reported narratively as a series of thematic summaries across each research question (Thomas et al. 2017).

12. Deliverables

1. Publication
2. Grant application for primary research

13. References

Aldrich, R. S. and Cerel, J. 2022. Occupational suicide exposure and impact on mental health: Examining differences across helping professions. *Omega: Journal of Death and Dying* 85(1), pp. 23-37.

Croft, A., Lascelles, K., Brand, F., Carbonnier, A., Gibbons, R., Wolfart, G. and Hawton, K. 2023. Effects of patient deaths by suicide on clinicians working in mental health: A survey. *International Journal of Mental Health Nursing* 32(1), pp. 245-276. doi: 10.1111/inm.13080

Draper, B., Kolves, K., De Leo, D. and Snowdon, J. 2014. The impact of patient suicide and sudden death on health care professionals. *General Hospital Psychiatry* 36(6), pp. 721-725.

Fairman, N., Thomas, L. P., Whitmore, S., Meier, E. A. and Irwin, S. A. 2014. What did I miss? A qualitative assessment of the impact of patient suicide on hospice clinical staff. *Journal of Palliative Medicine* 17(7), pp. 832-836.

JBI. 2017. *Critical Appraisal Tools*. Adelaide: Available at: http://joannabriggs.org/research/critical-appraisal-tools.html [Accessed.

Malik, Z. K. C. 2021. Reviving resuscitation skills: Non-invasive ventilator training for ward nurses. *Nursing Praxis in Aotearoa New Zealand* 37(3), pp. 22-24. doi: 10.36951/27034542.2021.029

ONS. 2023. *Suicides in England and Wales: 2022 registrations*. London: Office for National Statistics. Available at: https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/deaths/bulletins/suicidesintheunitedkingdom/2022registrations [Accessed: 29/10/2024].

Peters, M. D., Godfrey, C. M., Khalil, H., McInerney, P., Parker, D. and Soares, C. B. 2015. Guidance for conducting systematic scoping reviews. *Int J Evid Based Healthc* 13(3), pp. 141-146. doi: 10.1097/xeb.0000000000000050

Rytterstrom, P., Ovox, S. M., Wardig, R. and Hultsjo, S. 2020. Impact of suicide on health professionals in psychiatric care mental healthcare professionals' perceptions of suicide during ongoing psychiatric care and its impacts on their continued care work. *International Journal of Mental Health Nursing* 29(5), pp. 982-991.

Thomas, J., O'Mara-Eves, A. and Harden, A. 2017. Chapter 8: Synthesis methods for combining and configuring textual or mixed methods data. In: Gough, D., Oliver, S. and Thomas, J. eds. *An introduction to systematic reviews*. London: Sage Publications Limited.

Tricco, A. C. et al. 2018. PRISMA Extension for Scoping Reviews (PRISMA-ScR): Checklist and Explanation. *Annals of Internal Medicine* 169(7), pp. 467-473. doi: 10.7326/M18-0850

Wurst, F. M., Kunz, I., Skipper, G., Wolfersdorf, M., Beine, K. H. and Thon, N. 2011. The therapist's reaction to a patient's suicide: Results of a survey and implications for health care professionals' well-being. *Crisis: The Journal of Crisis Intervention and Suicide Prevention* 32(2), pp. 99-105.