



Don't Ignore the Flashing Red Lights: Using Data to Drive Safety Plan Compliance

Andrew Ahles, LMFT-S, Director of Clinical Training, Metrocare Services

Purpose and Background

Metrocare Clinical Staff complete upwards of 5000 ANSA/CANS assessments and PHQ-9 screenings along with hundreds of Safety Plans with individuals in crisis each month. Prior to summer 2025, Metrocare possessed limited visibility into the connection between identified risk factors on assessments and the completion of a safety plan. To address this issue, Metrocare developed data reporting, a KPI, and additional initiatives to identify and address any gaps between risk identification and safety plan completion.

Project Contributors

Director of Clinical Training	Project lead and clinical oversight
MH Operations Directors	Project oversight and communication throughout programs
IT and Data Analytics	Report Building and EHR Projects
Quality Management	Compliance guidance and quality assurance
Clinician Workgroup	Clinician led project development and feedback

Indicators

ANSA/CANS Suicide Risk
ANSA/CANS Harm to Others
PHQ9- Question #9

Score of 2 or 3
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"more than half days" or
"nearly everyday"

*The CSSRS is also administered but was not included in this measure for technical reasons.



Targets

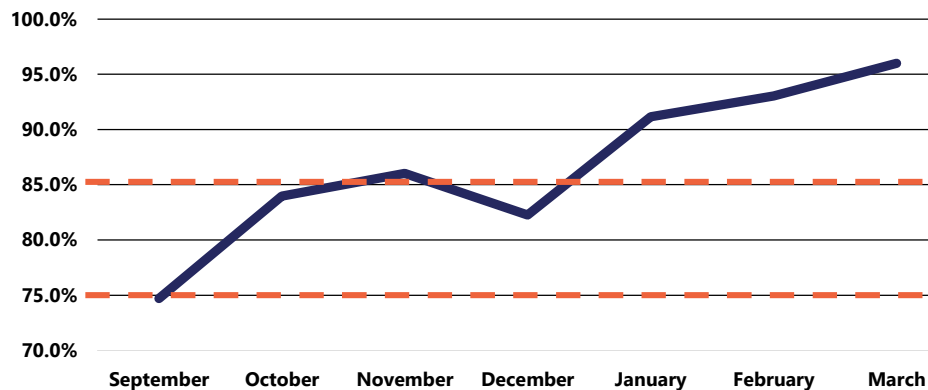
Baseline: In August 2025, ~75% of charts with positive screens were compliant with established criteria.

KPI: Reach 85% compliance in FY 2026

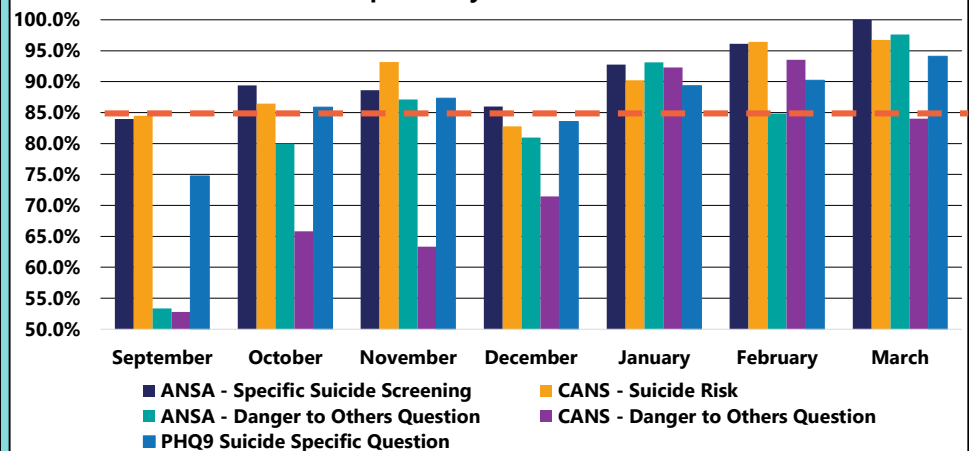
Criteria and Reporting

This measure checks for a positive screen for the identified indicators and a safety plan in the client's chart. A positive screen is considered compliant if there is a safety plan completed in the 30 days before or after the date of the positive screening. A data report allows leadership to assess compliance over any designated time period.

Overall Safety Plan Compliance, FY 26



Compliance by Indicator, FY 26



Initiatives

- Safety Planning Workgroup with Experienced Staff
- Safety Plan form edits based on staff feedback
- EHR alerts when a Safety Plan is Required
- Written guide for Safety Plan prompts

Outcomes

Risk Factor	September 2025	March 2026	Monthly High
ANSA Suicide Specific Screening	84.0%	100%	100%
CANS Suicide Risk	84.5%	97%	98%
ANSA Danger to Others	53.3%	98%	98%
CANS Danger to Others	65.8%	84%	93.5%
PHQ-9 Suicide Specific Question	74.7%	96%	96%

Goals for Future Improvement

- Additional Training for Harm to Others Safety Plans
- Safety Plan Quality Improvement through QA audits
- Address additional risk indicators

Bottom Line

- Percent completion of a Safety Plan in the 30 days before or after a positive risk screen increased from baseline of 75% in September 2025 to over 95% in March 2026.
- Staff Feedback drove substantive improvements in wording and clarity on the safety plan form and reduction of inefficiencies or duplicate fields.