Program/	Brief Description	Evidence/Support	Implementation Notes	Additional information
Strategy				
American Association of Suicidology (AAS) College & University Accreditation Program	Many counselors have not received training to sufficiently prepare them to adequately intervene with a suicidal student, manage an unfolding crisis or contribute to school suicide postvention activities. The program teaches: Best and evidence-based suicide prevention practices; Risk factors and warning signs for college and university students; How to assess young adults at risk; Confidentiality; Prevention and postvention principles; Self-injury; How to reintegrate a student after a suicide attempt; Dealing with traumatic loss; Contagion and cluster; Litigation outcomes, and more.	AAS is approved by the American Psychological Association to sponsor continuing education for psychologists. The program is approved by the National Association of Social Workers.	\$360 for professionals; \$260 for graduate students with proof of student status. Accreditation is valid for 3 years. At the end of the accreditation period, renewal without reexamination can be obtained for a fee of \$200 and evidence of continuing education in suicidology, suicide prevention, and/or crisis intervention at a minimum of 9 credits over the 3-year period. Reaccreditation is valid for 4 years with the same ongoing continuing education requirement. If requirements are not	suicidology.org/training- accreditation/college- university-accreditation- program
			met, the requirements for initial accreditation (fee and examination) must be completed.	
Campus Connect: A Suicide Prevention Training for Gatekeepers	2.5 hour highly interactive gatekeeper training program for college and university faculty, staff, and students. The experientially based training is designed to enhance participant's knowledge, awareness, and skills concerning college student suicide. Aims to increase participant's knowledge about suicide statistics, risk and protective factors, warning signs, and referral resources; to increase empathic listening skills, communication skills, and the ability to ask individuals if they are thinking about suicide; and to increase self- awareness concerning the potential emotional reactions gatekeepers may experience when interacting with students in crisis. Culminates with a role play, in which gatekeepers are given the opportunity to practice the skills they are taught.		Completion of the Campus Connect readiness checklist to ensure that the campus is adequately prepared for program implementation. (Although not essential, a Framework for Developing Institutional Protocols for the Acutely Distressed or Suicidal College Student, developed by the Jed Foundation, may be useful.) Training conducted by qualified Campus Connect trainer. Train- the-trainer workshop =\$4,500. Fee includes: six-hour train-the-trainer session, training manual for each participant, consultation prior to and following the training, and travel costs.	sprc.org/resources- programs/campus- connect-suicide- prevention-training- gatekeepers
Connect Suicide Postvention Training	Developed by <u>National Alliance on Mental Illness</u> (NAMI) New Hampshire. Increases the capacity of a community or organization to respond effectively to a suicide death in order to prevent	Protocols were created through statewide stakeholder groups and reviewed by national	Training can be provided in the following formats:	theconnectprogram.org sprc.org/resources- programs/connect-



Program/	Brief Description	Evidence/Support	Implementation Notes	Additional information
Strategy				
	additional suicides and promote healing for survivors of suicide loss. Uses a holistic, socio- ecological model that examines suicide in the context of the individual, family, tribe, community and society. Training includes interactive case scenarios, facilitated discussion, activities, written materials, PowerPoint presentation, and consultation. Connect staff encourage and facilitate dialogue between service providers to build a comprehensive and consistent response to suicide based on best practices.	suicide prevention experts. Training activities and materials are based on these protocols and were created in consultation with experts in training and suicide prevention, and then tested and evaluated.	<ul> <li>Training - 1 day (6 hours or customized), 30 participants, \$3,000 plus travel.</li> <li>Training and Planning - 2 days, 30 participants, \$6,000 plus travel. Day One is the 6-hour curriculum. Day Two applies Day One's training to develop a postvention response plan.</li> <li>Train-the-trainer - 3 days, can be provided for two sizes: small (5-8 participants) \$7,500 plus travel, or standard (9-16 participants) \$10,200 plus travel. Up to 30 people may attend the first day in which the curriculum is presented.</li> <li>Combination: Prevention Planning and Train-the-Trainer - 4 days, \$10,500 plus travel for 5-8 to become trainers; \$13,200 plus travel for 9-16 to become trainers. Includes training, developing a response plan, and creating a team of local certified trainers. 30 participants can attend the two-day training/planning component in either sized group.</li> </ul>	suicide-postvention- training
Connect Suicide Prevention/ Intervention Training	Developed by NAMI New Hampshire. Provides training in suicide prevention across the lifespan for professionals and laypersons. Using a unique socio-ecological model, examines suicide prevention in the context of the individual, family, tribe, community and society. Participants learn to recognize early warning signs of suicide and how to connect with individuals at risk and get them help. Also addresses "systems" issues	Protocols were created through statewide stakeholder groups and reviewed by national suicide prevention experts. Training activities and materials are based on these protocols and were	<ul> <li>Training can be provided in the following formats:</li> <li>Training - 1 day (6 hours or customized), 30 participants, \$3,000 plus travel.</li> <li>Training and Planning - 2 days, 30 participants, \$6,000 plus travel. Day One is the curriculum. Day Two applies Day One's training to</li> </ul>	theconnectprogram.org sprc.org/resources- programs/connect- suicide- preventionintervention- training



Program/	Brief Description	Evidence/Support	Implementation Notes	Additional information
Strategy				
	including the need for community-wide	developed in	develop a plan that builds or	
	collaboration, safe messaging, restricting access	consultation with	strengthens a community safety net	
	to lethal means, and the impact of social media.	experts in training and	around suicide prevention.	
	Training includes interactive case scenarios,	suicide prevention, and		
	facilitated discussion, activities, written materials,	then tested and		
	PowerPoint, and consultation.	evaluated.		
Garrett Lee	Provided by the federal Substance Abuse and		Up to 3 years. Anticipated Award	samhsa.gov/grants/grant-
Smith (GLS)	Mental Health Services Administration (SAMHSA).		Amount: Up to \$102,000 per year	announcements/sm-18-
Campus	Authorized under the Garrett Lee Smith Memorial			<u>003</u>
Suicide	Act. The purpose of this program is to develop a			
Prevention	comprehensive, collaborative, well-coordinated,			samhsa.gov/sites/default
Grant	and evidence-based approach to: (1) enhance			/files/grants/pdf/sm-18-
Program	services for all college students, including those at			<u>003.pdf</u>
	risk for suicide, depression, serious mental illness,			
	and/or substance use disorders that can lead to			
	school failure; (2) prevent mental and substance			
	use disorders; (3) promote help-seeking behavior			
	and reduce stigma; and (4) improve the			
	identification and treatment of at-risk college			
	students so they can successfully complete their			
	studies. It is expected that this program will			
	reduce the adverse consequences of serious			
	mental illness and substance use disorders,			
	including suicidal behavior, substance-related			
	injuries, and school failure.			
Interactive	Provides a mechanism to reach out to students at		The program counselor should be	afsp.org/isp
Screening	risk for depression, suicide, and related problems,		comfortable interacting with those at	
Program (ISP)	and encourages them to get help. By proactively		risk for depression and suicide, and able	sprc.org/resources-
	engaging those in need, supports student mental		to use basic technology (email, web	programs/interactive-
	health and helps create a campus culture that		forms). School or community-based	screening-program
	recognizes that stress and depression are		mental health professionals need to be	
	common and treatable problems. Students		available for referrals from the program	
	complete a 35-item questionnaire, which normally		counselor. Costs include an initial start-	
	takes less than 10 minutes to complete, that		up fee of \$2,500 for website	
	contains the PHQ-9 (a 9-item standardized		customization and an annual program	
	depression screening scale) and questions about		fee of \$2,500. The college or university	



Program/	Brief Description	Evidence/Support	Implementation Notes	Additional information
Strategy				
	suicidal ideation and attempts, problems related to depression such as anger and anxiety, alcohol and drug abuse, and eating disorder symptoms. Students receive a personal written response from a campus counselor that offers options for follow-up evaluation and treatment and can "dialogue" with the counselor online while maintaining anonymity, schedule a telephone or in-person meeting, or request a referral for treatment or support services.		provides the counselors and clinical personnel for the ISP.	
Jed Foundation Jed Campus program	Comprehensive public health approach to suicide prevention. Seven-point framework includes: provide behavioral health services, follow crisis management procedures, restrict access to lethal means, develop life skills and student wellness, promote social networks, identify students at risk and increase help seeking behavior. Uses proprietary assessments to understand each school's programs, systems and challenges. After completing the initial assessment, a JED Campus receives feedback and recommendations based on their responses and informed by student data gathered on their campus by the Healthy Minds Study. JED Campus team then works with the school to develop a strategic plan for implementation over their four years in the program. JED Campuses are provided with ongoing support and technical assistance from a dedicated JED Campus Advisor. JED Campuses can share information and resources with other schools in the program through the Learning Community, which includes webinars, newsletters, an online resource center, and a discussion forum.	Based on the Air Force suicide prevention program, which has been shown to decrease rates of suicide, homicide and accidental deaths. Based upon the Comprehensive Approach to Mental Health Promotion and Suicide Prevention on College and University Campuses, which was developed and reviewed by multiple experts in mental health and higher education.	Over the course of four years, campuses are provided in-person and remote technical assistance to make strategic improvements in the areas covered by the Jed Campus template, as well as policy and strategic planning; substance use disorder services; student skills that support academic performance; and student wellness. The first two semesters are the most time intensive and team members should expect to meet at least monthly. The first semester is used to build the team and complete both the JC and HMS assessments. The second semester continues with the campus visit and strategic planning activities. Once implementation begins towards the end of the first year, teams typically split into focused work groups and the whole steering committee need only meet 1-2 times per semester. The four-year registration fee is \$22,000. Financial aid is available.	jedcampus.org
Kognito At-	30-minute, online, interactive gatekeeper training	Listed designated as a	The program's implementation manual	kognito.com/products/at-
Risk for	program that teaches students how to (1) identify	"Program with	should be thoroughly reviewed prior to	risk-for-college-students



Program/	Brief Description	Evidence/Support	Implementation Notes	Additional information
Strategy				
College	students exhibiting signs of psychological distress,	Evidence of	program implementation. The	
Students	including depression and thoughts of suicide; (2)	Effectiveness" by the	institution's Counseling Center staff	sprc.org/resources-
	approach students to discuss their concern; and	Suicide Prevention	should have the ability to assess and	programs/kognito-risk-
	(3) make referrals to university counseling	Resource Center (SPRC)	manage students who may be at risk for	college-students
	centers. Students also learn about support	based on its inclusion in	suicide prior to program	
	services and resources at their campus, including	SAMHSA's National	implementation. This course is most	
	counseling centers.	Registry of Evidence-	effective when used as part of a college	
		Based Programs and	or university's larger strategic plan to	
		Practices (NREPP).	identify and help at-risk students.	
Kognito At-	45-minute interactive, web-based training		The implementation manual should be	kognito.com/products/at-
Risk for	simulation that gives higher education faculty and		thoroughly reviewed prior to	risk-for-university-faculty-
University	staff the knowledge necessary to identify and		implementation. Several customizable	and-staff
and College	refer students exhibiting symptoms of mental		features should be modified to inform	
Faculty:	distress, including depression, anxiety, and		faculty and staff of the unique resources	sprc.org/resources-
Identifying	thoughts of suicide. Users analyze profiles of		of each campus. Most effective when	programs/risk-university-
and Referring	virtual students – including information about		used as part of a campus' larger	and-college-faculty-
Students in	their academic performance, behaviors, and		strategic plan to identify and help at-risk	identifying-and-referring-
Mental	appearance – to identify those who are at-risk and		students. Sold as a yearly, institution-	students-mental
Distress	then engage in simulated conversations with		wide license which allows schools to	
	them to determine whether and how to refer		make the training available to all	
	them to the counseling center. If users decide to		faculty, adjunct, administrators, and	
	refer a student, they must respond to the		staff in their institution. Annual license	
	student's hesitations and help the student		pricing begins at \$3,250 and includes	
	understand how counseling could benefit them.		technical support, training assessment	
	The training is completed once the user		tools, user tracking system, and	
	successfully identifies and refers the at-risk		materials for on-campus promotion.	
	students.			
Kognito	30-minute, online, interactive gatekeeper and		Colleges and universities should identify	kognito.com/products/lgt
LGBTQ on	cultural competency training simulation that		on- and off-campus resources for	bq-on-campus-for-
Campus for	teaches faculty and staff at institutions of higher		LGBTQ students, and make program	faculty-staff
Faculty and	education how to contribute to a safer and more		participants aware of these resources.	
Staff	supportive campus environment for lesbian, gay,		Cost depends on the size of the	sprc.org/resources-
	bisexual, transgender, and queer/questioning		purchasing institution and the length of	programs/lgbtq-campus-
	(LGBTQ) students. Users gain practice in (1)		the license. Training for course	faculty-and-staff
	addressing discriminatory language, (2)		administrators included in institutional	
	respectfully handling LGBTQ-related issues, and		licensing package.	



Program/	Brief Description	Evidence/Support	Implementation Notes	Additional information
Strategy				
	(3) talking with students who are exhibiting signs of psychological distress, including suicidal ideation, and making effective referrals to appropriate support services.			
Kognito LGBTQ on Campus for Students	30-minute, online, interactive gatekeeper and cultural competence training simulation that teaches students and student leaders at institutions of higher education how to contribute to a safer and more supportive campus environment for lesbian, gay, bisexual, transgender, and queer/questioning (LGBTQ) students.		Colleges and universities should identify on- and off-campus resources for LGBTQ students and ensure that all program participants are aware of these resources. Cost depends on the size of the purchasing institution and the length of the license. Training for course administrators included in institutional licensing package.	kognito.com/products/lgt bq-on-campus-for- students
Kognito Veterans on Campus for Faculty and Staff	30-minute, online, interactive training simulation in which users learn how to (1) refer student veterans to appropriate on- and off-campus resources, (2) manage a classroom discussion concerning a veteran-sensitive issue, and (3) speak with a student veteran struggling with psychological distress and academic work and connect them with support services, including mental health services, on and off campus.		Colleges and universities should identify on- and off-campus local resources for veterans and ensure that all program participants are aware of these resources.	kognito.com/products/at- risk-for-university-faculty- and-staff sprc.org/resources- programs/veterans- campus-faculty-and-staff
Kognito Veterans on Campus: Peer Program	30-minute, online, interactive gatekeeper and re- integration training simulation that prepares active duty military and veteran students to provide support to one another when confronting challenges such as adjusting to campus life or struggling with psychological distress, including suicidal ideation.		The course is hosted on Kognito's learning management system. The client's part of implementing the program is to announce its availability to end users via email, the media, their website, and other marketing outlets. Kognito created an implementation manual that can help clients plan their roll-out. Cost depends on the size of the purchasing institution and the length of the license. Training for course administrators included in institutional licensing package.	kognito.com/products/ve terans-on-campus-peer- program sprc.org/resources- programs/veterans- campus-peer-program



Program/	Brief Description	Evidence/Support	Implementation Notes	Additional information
Strategy				
LifeSavers Training	3-day suicide and crisis prevention program that trains high school and college-aged young people to listen to peers compassionately and confidentially using specialized techniques designed to help them make healthier decisions. Trained LifeSavers intervene, often quietly and behind the scenes, to help prevent difficult situations from developing into crises, and provide non-judgmental and confidential support to help troubled peers and friends find their own solutions to their problems. LifeSavers also acquire the ability to discern when problems are more serious and then ensure that the troubled student connects with a responsible adult.		A school-based crisis management plan should be adopted prior to implementing the program. The training costs approximately \$230 per participant with a minimum of 45 student trainees. Schools are responsible for transportation.	lifesaverstrainingcorp.org sprc.org/resources- programs/lifesavers- training
Model Adolescent Suicide Prevention Program (MASPP)	Public health-oriented suicide prevention and intervention program originally developed for a small American Indian tribe in rural New Mexico to target high rates of suicide among its adolescents and young adults. As a community- wide initiative, the MASPP incorporates universal, selective, and indicated interventions and emphasizes community involvement, ownership, and culturally framed public health approaches appropriate for an American Indian population. Central features of the program include formalized surveillance of suicide-related behaviors; a school-based suicide prevention curriculum; community education; enhanced screening and clinical services; and extensive outreach provided through health clinics, social services programs, schools, and community gatherings and events. In addition, neighborhood volunteers of various ages are recruited to serve as "natural helpers." These individuals engage in personal and program advocacy, provide referrals to community mental health services, and offer	Listed in NREPP	Thoroughly review the program manual prior to implementation. Establish a planning group to adapt the model to fit the local community and guide the process of program implementation. Identify qualified staff and informal community supports. Program manual is free. Optional trainings provided by the program developer are available. Off-site 2-day training: \$1,200 per person for up to 25 participants, On-site 2-day consultation: \$1,500 plus travel expenses.	sprc.org/resources- programs/model- adolescent-suicide- prevention-program- maspp



Program/	Brief Description	Evidence/Support	Implementation Notes	Additional information
Strategy				
	peer counseling (with guidance from professional mental health staff) to youth who may prefer to seek assistance from trusted laypersons in a less formal setting.			
National Alliance on Mental Illness (NAMI) On Campus	NAMI knows that some of the best support a student can receive is from peers. When students connect with one another, they can share common experiences and support each other through the transitions. NAMI on Campus helps make those connections happen. NAMI on Campus clubs work to end the stigma that makes it hard for students to talk about mental health and get the help they need. Clubs hold creative meetings, hold innovative awareness events, and offer signature NAMI programs through partnerships with NAMI State Organizations and Affiliates across the nation.		Currently working to make NAMI On Campus better for students and are not accepting new applications at this time.	<u>nami.org/Get-</u> <u>Involved/NAMI-on-</u> <u>Campus</u>
Patient centered medical home model	Moving a psychologist from the counseling center into the campus primary care clinic, allows for brief interventions to take place in the medical clinic. The medical home model holds promise as a way to improve health by transforming how primary care is organized and delivered. Building on the work of a large and growing community, the <u>Agency for Healthcare Research and Quality</u> (AHRQ) defines a medical home not simply as a place but as a model of the organization of primary care that delivers the core functions of primary health care. The medical home encompasses five functions and attributes: 1) Comprehensive Care; 2) Patient-Centered; 3) Coordinated Care; 4) Accessible Services; 5) Quality and Safety.	Every year the Patient- Centered Primary Care Collaborative (PCPCC) releases an <u>Annual</u> <u>Evidence Report</u> evaluating the impact of the PCMH model on cost and utilization measures	The Primary Care Practice Facilitation (PCPF) Curriculum is designed to support the development of a PCPF workforce prepared to help transform and revitalize primary care by supporting widespread adoption of new models of care delivery and the use of continuous quality improvement to improve health care outcomes. This PCPF curriculum can serve to train both new and experienced practice facilitators in the knowledge and skills needed to support meaningful improvement in primary care practices	pcmh.ahrq.gov acponline.org/practice- resources/business- resources/payment/mod els/patient-centered- medical- home/understanding-the- patient-centered- medical-home/what-is- the-patient-centered- medical-home



Program/	Brief Description	Evidence/Support	Implementation Notes	Additional information
Strategy Problem- Solving Therapy (PST)	Brief psychosocial treatment for patients experiencing depression and distress related to inefficient problem-solving skills. Designed to be provided by mental health professionals (e.g., psychologists, psychiatrists, social workers, mental health counselors) and primary care physicians and nurses.	Listed in NREPP	Requires the appropriate therapy manual, its applicable curriculum, and introduction training. The training is a 1- day workshop that can be delivered on site and is available online at no cost through the University of Washington's <u>AIMS Center</u> . The online training is a 13- module program with 17.5 hours of content. Implementing the intervention may take from 1–6 months.	pstnetwork.ucsf.edu aims.uw.edu/impact- improving-mood- promoting-access- collaborative-treatment sprc.org/resources- programs/problem- solving-therapy-pst
Student Support Network (SSN)	Trains selected students to identify, support, and refer peers who may be struggling with significant mental and behavioral health concerns. Students are actively recruited to participate based on their high level of involvement/leadership on campus and their desire to help others. The program gives local mental health staff the opportunity to form connections with a significant number of individuals within the existing peer support network on campus.		SSN trainers should have a good knowledge of campus and community resources that they can impart to trainees. Allows for multiple six-week trainings. The training manual is available free of charge from the Worchester Polytechnic Institute (WPI) Counseling Center. One- to two-day "train the trainers" consultation is available for \$1,000 to \$3,000, plus travel.	wpi.edu/offices/student- development-counseling- center/support-network sprc.org/resources- programs/student- support-network
Suicide Prevention Multicultural Competence Kit	Geared toward developing multicultural competence among mental health professionals who work with diverse college students and among community members of a college or university. Helps people understand the mental health needs of diverse students in order to prevent suicide. An interactive one-hour PowerPoint presentation teaches how discrimination of all kinds leads to negative mental health outcomes, how stigma prevents help-seeking, and how an understanding of diversity can help people connect a depressed or suicidal student with the help they need. Ancillary	Materials are based on a literature review of topic areas, a search of suicide education and prevention websites, and focus groups with faculty, staff, administrators, students, mental health professionals, and suicide prevention experts	Trainers should be aware of available resources for subgroups of students who may be at risk for suicide and relevant institutional protocols and guidelines regarding the identification, referral, and care of students who are at risk for suicide, and make these part of their training. Materials are available at no charge	pace.edu/counseling- center sprc.org/resources- programs/suicide- prevention-multicultural- competence-kit



Program/	Brief Description	Evidence/Support	Implementation Notes	Additional information
Strategy				
	training resources include fact sheets (with self-			
	study quizzes), training vignettes, bibliographies,			
	student and parent brochures, resource lists,			
	public service announcement suggestions, and a			
	poster.			
The DORA	1-hour peer-based mental health wellness and	Based on the nationally	Those implementing should work	mentalhealthscreening.or
College	suicide prevention program developed to increase	recognized and	closely with their college's counseling	g
Program	the health and well-being of college students by	evidence-based SOS	center to ensure that available	
(Depression	reducing their isolation and enhancing social	Signs of Suicide®	counseling resources are accurately	sprc.org/resources-
OutReach	support. The primary teaching tool is an	Program	described and adequate to meet	programs/dora-college-
Alliance)	educational DVD that profiles college students		demand. The Program Kit costs \$125,	program-depression-
	who struggled with depression and suicidal		which includes one educational DVD,	outreach-alliance
	ideation and are now in recovery thanks to the		one implementation guide, and fifteen	
	support of peers and mental health professionals.		student workbooks. Additional student	
	The DVD also features an acted scenario modeling		workbooks are available for purchase at	
	a successful intervention as well as input from		the price of \$30 per pack of fifteen.	
	college counselors. This program is meant to be			
	administered to small groups of students by peer			
	leaders working in conjunction with clinical			
	professionals on campus. The program also			
	includes individual student workbooks with			
	several activities designed to teach students the			
	importance of early intervention and professional			
-	help-seeking when it comes to suicide prevention.			
Trevor	1-hour interactive workshop for middle school,		Administered by trained Lifeguard	thetrevorproject.org
Lifeguard	high school and college-age youth that describes		Workshop Facilitators who have	,
Workshop	the mental health, suicide, and self-care resources		completed the 2-day training for	sprc.org/resources-
	provided by The Trevor Project. There are two		trainers. Workshop training and	programs/trevor-
	versions of the workshop: one for lesbian, gay,		materials are provided by The Trevor	lifeguard-workshop
	bisexual, transgender, and questioning (LGBTQ)		Project at no charge. Schools should	
	youth and one for general youth audiences. The		have established protocols for	
	workshop addresses: how to recognize the warning signs of suicide, how to respond in a way		addressing students who may be at risk for suicide. Teachers and staff should be	
	that will keep peers safe, self-care strategies and			
	how to identify personal self-care strategies, how		aware of the protocols.	
	to identify sources of support in their own			
	to identify sources of support in their own			



Program/	Brief Description	Evidence/Support	Implementation Notes	Additional information
Strategy				
	environment, and resources available through The			
	Trevor Project (e.g., The Trevor Lifeline,			
	TrevorSpace, TrevorChat, and Ask Trevor).			
United States	Population-oriented approach to reducing the risk	SPRC designated this	The program manual is available at no	airforcemedicine.af.mil/S
Air Force	of suicide. The USAF implemented 11 initiatives	intervention as a	charge	uicidePrevention/
Suicide	aimed at strengthening social support, promoting	"program with	(dmna.ny.gov/r3sp/suicide/AFPAM44-	
Prevention	development of social skills, and changing policies	evidence of	<u>160.pdf</u> )	wingmanonline.org/Hom
Program	and norms to encourage effective help-seeking	effectiveness" based on		<u>e</u>
(AFSPP)	behaviors: 1) Leadership Involvement, 2)	the World Health		
	Addressing Suicide Prevention in Professional	Organization's 2014		sprc.org/resources-
	Military Education, 3) Guidelines for Commanders	publication Preventing		programs/united-states-
	on Use of Mental Health Services, 4) Community	Suicide: A Global		air-force-suicide-
	Preventive Services, 5) Community Education and	<u>Imperative</u>		prevention-program
	Training, 6) Investigative Interview Policy, 7)			
	Trauma Stress Response, 8) Integrated Delivery			
	System (IDS) and Community Action Information			
	Board (CAIB), 9) Limited Privilege Suicide			
	Prevention Program, 10) IDS Consultation			
	Assessment Tool, and 11) Suicide Event			
	Surveillance System.			
Zero Suicide	Programmatic approach based on the realization	Organizations that have	The Zero Suicide Toolkit provides	zerosuicide.sprc.org
Initiative	that suicidal individuals often fall through the	used this approach	information on the framework and	
	cracks in a sometimes fragmented and distracted	found a 60-80%	available resources: There is a <u>Quick</u>	sprc.org/zero-suicide
	health care system. Thus, a system-wide approach	reduction in suicide	Guide to Getting Started with Zero	
	is needed to improve outcomes and close gaps. It	rates among those in	Suicide. After completing the Zero	
	consists of 7 essential elements- 1) Lead: Create a	care.	Suicide Organizational Self Study, the	
	leadership-driven, safety-oriented culture		Zero Suicide Work Plan Template can be	
	committed to dramatically reducing suicide		completed to outline the tasks that will	
	among people under care. Include survivors of		be completed quarterly during Year 1.	
	suicide attempts and suicide loss in leadership		The Zero Suicide Institute provides	
	and planning roles. 2) Train: Develop a		training and consultation.	
	competent, confident, and caring workforce.			
	3) Identify: Systematically identify and assess			
	suicide risk among people receiving care. 4)			
	Engage: Ensure every individual has a pathway to			
	care that is both timely and adequate to meet his			



Program/	Brief Description	Evidence/Support	Implementation Notes	Additional information
Strategy				
	or her needs. Include collaborative safety			
	planning and restriction of lethal means. 5) Treat:			
	Use effective, evidence-based treatments that			
	directly target suicidal thoughts and behaviors. 6)			
	Transition: Provide continuous contact and			
	support, especially after acute care. 7) Improve:			
	Apply a data-driven quality improvement			
	approach to inform system changes that will lead			
	to improved patient outcomes and better care for			
	those at risk.			

