

The ODMHSAS Zero Suicide Initiative Partnership Request for Information

The Oklahoma Department of Mental Health and Substance Abuse Services (ODMHSAS) is a grantee in the National Strategy for Suicide Prevention Implementation Grant Program. Suicide is the second leading cause of death for Oklahomans ages 25-34 and is among the top 5 leading cause of death for Oklahomans ages 35-64. This project is expected to reduce the rate of non-fatal suicide attempts and deaths in adults ages 25-64. Comprehensive suicide prevention programs, which include intensive follow-up of at-risk patients, have been shown to reduce re-admittance rates to hospitals (Mark et al., 2012). The Oklahoma Department of Mental Health and Substance Abuse Services on behalf of the State of Oklahoma will utilize funding from this Cooperative Agreement to further implementation of the Oklahoma's strategy for Suicide Prevention and the National Action Alliances' Zero Suicide Initiative. Zero Suicide is defined as Goals 8 and 9 of the National Strategy for Suicide Prevention.

- Goal 8: Promote suicide prevention as a core component of healthcare services.
- Goal 9: Promote and implement effective clinical and professional practices for assessing and treating those identified as being at risk for suicidal behaviors.

The ODMHSAS will utilize the funding to provide all hospital related trainings, materials, suicide prevention software licensing, technical assistance and intensive support of ODMHSAS Prevention Field staff. The following strategies will be implemented in the selected hospital setting:

1. These trainings will be offered at no cost to the hospital. The cost of materials and a certified trainer will be provided.
 - **Question, Persuade, Refer (QPR).** QPR is a 60 to 90 minute gatekeeper training. The training will be offered to all nursing and facility's staff. The trainings will take place at a time and location that is convenient to the hospitals work flow.
 - **At Risk in the Primary Care (Kognito).** Kognito is a one-hour, online training simulation for physicians. The trainings will take place online for CEU's. Promotional materials and reminder communications will be sent out to encourage completion.
 - **Counseling Access to Lethal Means (CALM).** CALM provides suicide data and a background on lethal means; an introduction to firearms; a video presentation that

- mode's the counseling strategy; a presentation and discussion on conducting a counseling session; optional role plays; and a course evaluation. CALM will be available in an online format that physicians or nurses can self-administer when they are available.
2. The ODMHSAS is committed to increasing the safety of care transitions from one setting to another. The period following discharge from an emergency room after a suicide attempt is a time of greatly heightened risk for a subsequent suicide attempt. The need for follow-up during this critical period is widely accepted by leading experts (Mark et al., 2012). The selected hospital will receive intensive follow-up services including assistance with safety planning, and follow-up with patients at-risk for suicide who are discharged. These services will be coordinated by the ODMHSAS prevention field representative specializing in hospitals.
 3. ODMHSAS will provide electronic health record technical assistance and training on available enhancements for improvement of workflow. ODMHSAS will also provide a survey of existing screens, assessments, and follow-up prompts within the facility's electronic health record.

To apply for this opportunity, complete the attached form and email attachments to Stephanie Packebush at spackebush@odmhsas.org

Please email Stephanie Packebush, Contract Officer II, with any questions regarding this request for information.

Reference

Mark, T. M., Richardson, J. (2012) Care pays: ROI from better care transitions. National Council Magazine. Issue 2, pg. 99.