

## CALL FOR APPLICATIONS: EXETER HEALTH RESOURCES ZERO SUICIDE ACADEMY™

**November 29th-30th, 2017  
Portsmouth, NH**

**Application Deadline:** October 22, 2017

**Sponsoring Organization:** The EXETER HEALTH RESOURCES Zero Suicide Academy™ is sponsored by Exeter Health Resources.

**Zero Suicide Academy™ Description:** The Zero Suicide Academy™ is a two-day training for senior leaders of health and behavioral health care organizations that seek to dramatically reduce suicides among patients in their care. Using the Zero Suicide framework, participants learn how to incorporate best and promising practices into their organizations and processes to improve care and safety for individuals at risk. Zero Suicide faculty provide both interactive presentations and small group sessions, and collaborate with participants to develop organization-specific action plans. The objectives of the Zero Suicide Academy™ are to (a) provide organizations interested in adopting a Zero Suicide approach with the skills and information necessary to launch their effort; (b) create collaborative links between the organizations launching these initiatives in order to provide mentorship and support so that the perspectives, knowledge, and skills of each inform the work of the others; and (c) aid in developing implementation plans for the Zero Suicide initiatives at each participating organization. The Zero Suicide Academy™ is presented by the Education Development Center, Inc.

**Zero Suicide is a key concept of the 2012 [National Strategy for Suicide Prevention \(NSSP\)](#).**

The NSSP calls for suicide prevention to be a core component of health care services and for the implementation of effective clinical and professional practices for assessing and treating those at risk for suicide. Objective 8.1 specifically promotes the adoption of “zero suicides” as an aspirational goal by health care and community support systems that provide services and support to defined patient populations.

**Zero Suicide is a priority of the [National Action Alliance for Suicide Prevention \(Action Alliance\)](#).**

The Action Alliance is the public-private partnership advancing the NSSP by championing suicide prevention as a national priority, catalyzing efforts to implement high-priority objectives of the NSSP, and cultivating the resources needed to sustain progress. Zero Suicide builds on the momentum of the 2011 report released by the Action Alliance’s Clinical Care and Intervention Task Force, [Suicide Care in Systems Framework](#).

**Zero Suicide Model:** The Zero Suicide model aims to improve care and outcomes for individuals at risk of suicide seen in health care systems. To assist health and behavioral health care organizations in developing and implementing a Zero Suicide approach, [www.zerosuicide.com](http://www.zerosuicide.com) offers an evolving online toolkit. Zero Suicide is a comprehensive approach, which includes the following dimensions:

1. Create a leadership-driven, safety-oriented culture committed to dramatically reducing suicide among people under care. Include suicide attempt and loss survivors in leadership and planning roles.
2. Develop a competent, confident, and caring workforce.
3. Systematically identify and assess suicide risk among people receiving care.
4. Ensure every person has a suicide care management plan, or pathway to care, that is both timely and adequate to meet his or her needs. Include collaborative safety planning and restriction of lethal means.
5. Use effective, evidence-based treatments that directly target suicidality.
6. Provide continuous contact and support, especially after acute care.
7. 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.

**Application:** The Zero Suicide Academy™ application consists of:

1. A cover sheet, using the template provided on page 4. **The lead applicant will receive all correspondence and must be one of the four team members.**
2. A letter of commitment written by the organization's CEO or Director. The Director should review and approve the submission and agree to the strategy proposed.
3. A narrative that, in two to four pages, responds to the following:
  - a. Briefly describe the members of your team and the relevant skills, knowledge, and experience they bring to the Zero Suicide Academy™.
  - b. What are your team's goals for participating in the Zero Suicide Academy™ and what does the team hope to learn during the training?
  - c. What successes and /or challenges have you had as a team or with other collaborative efforts?
  - d. How do you plan to successfully embed and sustain comprehensive suicide care in your organization?
  - e. One-page abstract describing the Zero Suicide initiative that your organization proposes to conduct. The abstract must include: aims, description of approach, implementation plan, and timeline drawing heavily from the [www.zerosuicide.com](http://www.zerosuicide.com) toolkit.
4. A Zero Suicide Organizational Self-Study, completed by the team members. The Self-Study can be found at <http://zerosuicide.sprc.org/resources/zero-suicide-organizational-self-study>.

**Eligibility:** Eligibility is limited to health and behavioral healthcare organizations and hospitals. Space is

limited. Applicants must come with a team of 4 individuals. Teams should include at least one senior leader from the organization as well as the person(s) responsible for implementation decisions.

**Funding:** Zero Suicide Academy™ fees, materials, and lunch will be provided by Exeter Health Resources. All other costs, such as travel and lodging, are not included and must be covered by participating organizations.

**Selection Criteria:** The review committee will rate applications based on their merit in responding to this application. The review committee reserves the right to select participants who are representative of geographical and organizational diversity. Applications will be judged using the following criteria:

1. The CEO or Director's knowledge of and commitment to the Zero Suicide initiative.
2. The feasibility of the timeline and work plan.
3. The organization's plans and expectations for embedding the Zero Suicide model into care as outlined in the [www.zerosuicide.com](http://www.zerosuicide.com) toolkit.
4. Demonstrated commitment to collaboration among team members.
5. The incorporation of persons with lived experience in leadership and planning roles.

**Deadline:** Application materials should be submitted via e-mail as two PDF files to [ckratz@edc.org](mailto:ckratz@edc.org) by 10/22/2017 at 5:00 pm EST. One PDF should include the following items in the following order: Cover sheet, Letter of commitment, and Narrative. The other PDF should consist of the completed Zero Suicide Organizational Self-Study. You will be notified via email by 10/29/2017 about your application status.

**Timeline:**

Application released	September 15, 2017
Application due	October 22, 2017
Applicants notified of their status	October 29, 2017
Zero Suicide Academy™ conducted	November 29th-30th, 2017

**Questions:**

Please contact Clayton Kratz, EDC, at [ckratz@edc.org](mailto:ckratz@edc.org) or (202) 572-5361.

## Exeter Health Resources Zero Suicide Academy™ Application Cover Sheet

<b>Organization Name:</b>			
<b>City, State:</b>			
<b>Lead Applicant</b>			
<b>Name, Degrees:</b>			
Job Title:			
Phone Number:			
Email Address:			
<b>Other Team Members</b>			
<b>Name, Degrees:</b>			
Job Title:			
Email Address:			
<b>Name, Degrees:</b>			
Job Title:			
Email Address:			
<b>Name, Degrees:</b>			
Job Title:			
Email Address:			
<b>Type of organization (check all that apply):</b>		<b>Please list other practice transformation initiatives (e.g., trauma informed care, just in time scheduling, collaborative documentation, expansion of peer workforce, etc.) your organization is currently working on.</b>	
<input type="checkbox"/> Community mental health center <input type="checkbox"/> Other behavioral health organization (e.g. alcohol and drug treatment, community psychiatric rehab, crisis response) <input type="checkbox"/> Federally qualified health center <input type="checkbox"/> Inpatient hospital <input type="checkbox"/> Integrated delivery system <input type="checkbox"/> Private insurer <input type="checkbox"/> Public insurer <input type="checkbox"/> State department of health or mental health <input type="checkbox"/> Other, please describe:			
<b>Number of clients served annually by your organization:</b>			
<b>Number of service sites:</b>			
<b>Total number of staff employed or contracted (include both clinical and non-clinical):</b>			
<b>Which population is your organization's primary focus? (Check both if applicable.)</b>		<input type="checkbox"/> Adults <input type="checkbox"/> Youth	
<b>Is your organization an Indian Health Service site, Tribal Health Program, or Urban Indian Health Program?</b>		<input type="checkbox"/> Yes <input type="checkbox"/> No	

