Topics

I. Background

II. Roles & Responsibilities

III. Project Year 1 Timeline

IV. Technical Assistance and Evaluation
I. Background

History

Purpose

Goals

Funded Project

Resources
History

- **JUN 2015** - IHS announced it would launch its Zero Suicide Initiative in testimony before the U.S. Senate Committee on Indian Affairs on “Demanding Results to End Native Youth Suicides”.

- **DEC 2015** - IHS held its first American Indian/Alaska (AI/AN) Zero Suicide Academy in Phoenix, Arizona. Over 50 participants from 10 pilot sites across the country attended.

- **OCT 2016** - IHS contracts with the Education Development Center (EDC), Inc. (SPRC) to provide technical assistance and consultation to current/future sites.

- **JAN - AUG 2017**: AI/AN Zero Suicide of Learning (CoL) collaborative webinars held.

- **SEP 2017** - IHS held its second AI/AN Zero Suicide Academy in Albuquerque, NM. Over 50 participants from 10 pilot sites across the country attended.
ZSI Cooperative Agreement/Award Program

- On November 15, 2017, IHS awards 8 ZSI cooperative agreement and federal program awards with an anticipated three-year funding cycle.

- The Zero Suicide Initiative is a nationally-coordinated program that promotes the development of a system of care for those at risk for suicide through the implementation of a comprehensive, culturally informed approach to suicide prevention in Indian health systems.

- The goal is to prevent suicide deaths among individuals who present to AI/AN health systems.
Zero Suicide Elements

- **LEAD**: Leadership commitment to improved suicide care
- **TRAIN**: Competent, confident, and caring workforce
- **IDENTIFY**: Universal screening & assessment
- **ENGAGE**: Collaboratively-developed safety & care plan
- **TREAT**: Effective EBTs that target suicide behaviors
- **TRANSITION**: Continuous f/u, including post-acute care
- **IMPROVE**: Data-driven, quality improvement
Goals

1. Establishment of a leadership-driven commitment to transform the way suicide care is delivered within AI/AN health systems.

2. Assessment of training needs and creation of a training plan to develop and advance the skills of health care staff and providers at all levels.

3. Implementation of policies and procedures for comprehensive clinical standards, including universal screening, assessment, treatment, discharge planning, follow-up, and means restriction for all patients under care and at risk for suicide.
4. Development of strategy to collect, analyze, use, and disseminate data to enhance and better inform suicide care across the health system.

5. Application of evidence-based practices to screen, assess, and treat individuals at risk for suicide that incorporates culturally informed practices and activities.

6. Development of a Suicide Care Management Plan for every individual identified as at risk of suicide to include continuous monitoring of the individual's progress through their electronic health record (EHR) or other data management system, and adjust treatment as necessary.
2017 ZSI Awarded Projects

- Total Awards = 8
- 5 Tribal Projects X 400K each = 2 Million
- 3 Federal Projects X 400K each = 1.2 Million

Total Funds Awarded: $3.2 Million
ZSI Projects by IHS Area

[Map showing various areas with codes BIL, OKC, BEM, ABQ, PHX, NAV, each marked with a number indicating the number of projects.]

- BIL: 1 project
- OKC: 1 project
- BEM: 1 project
- ABQ: 1 project
- PHX: 3 projects
- NAV: 1 project
ZSI Funding Cycle

- Grant and federal program award process:
  - Grantees
  - IHS federal program awardees

- Three-year funding cycle that runs from
  - FY2017 – FY2020*

- Project Period Year 1 Timeline:
  - November 15, 2017 – October 31, 2018

* contingent upon funding
Helpful Tools

Joint Commission Sentinel Event Alert 56

ZS Organizational Self Study

ZS Workforce Survey

ZS Data Elements Worksheet

ZSI
Additional Resources

- **Zero Suicide Website** – Visit EDC, Inc., Zero Suicide page for easy access to a host of materials, resources, including the Zero Suicide Toolkit. In addition, by entering ‘American Indian’ or ‘Alaska Native’ into the search engine, you will find many relevant materials related to implementing Zero Suicide model in Indian country.

- **Clinical Pathways in Primary and Behavioral Health at the Institute for Family Health**

- **Sentinel Event Alert 56: Detecting and treating suicide ideation in all settings** [Exit Disclaimer: You Are Leaving www.ihs.gov](#) [PDF - 233 KB] — The Joint Commission


- **Suicide Prevention in Primary Care** [Exit Disclaimer: You Are Leaving www.ihs.gov](#) edition of eSolutions which focuses on common warning signs of suicide, as well as a profile of New York FQHC.

- **Suicide Prevention Toolkit for Rural Primary Care** [Exit Disclaimer: You Are Leaving www.ihs.gov](#) contains tools, information, and resources to implement suicide prevention practices and overcome barriers to treating patients at risk for suicide in a primary care setting.
II. Roles, Responsibilities, & Communications

Division of Behavioral Health Staff (IHS HQ)

Division of Grants Management Staff (IHS HQ)

Program Support Center (HHS PSC)

EDC, Inc./Zero Suicide Institute
IHS Division of Behavioral Health (DBH)

- IHS Division of Behavioral Health (DBH) – Program Office
  
  Sean Bennett, ZSI Program Official/Project Officer
  Public Health Advisor
  National Lead Zero Suicide Initiative
  301-443-0104
  Sean.Bennett@ihs.gov

- ZSI Program Official/Project Officer assists with national programmatic inquiries (e.g., Programmitic Terms & Conditions); and with technical assistance
IHS – Division of Grants Management (DGM)

Andrew J. Diggs
Senior Grants Management Specialist (GMS)
Division of Grants Management
Indian Health Service
Telephone: 301- 443-2298
Email: Andrew.Diggs@ihs.gov
GMS assists with national grants guidance, e.g., Standard Terms & Conditions, etc.

Paul Gettys
Senior Grants Systems Coordinator (GSC)
Division of Grants Management
Indian Health Service
Telephone: 301- 443-2298
Email: Paul.Gettys@ihs.gov
GSC assist with access to GrantSolutions and other grants system-related needs
Health & Human Services (HHS) – Program Support Center (PSC): Payment Management System (PMS)

- Payment Management Services
  - Operates the Payment Management System (PMS)
  - PMS is a centralized, full-service grants payment and cash management system

- Primary POC: Ms. Tonja J. Thomas
  - Chief, Government & Tribal Payment Section
  - Grants Finance and Administrative Services
  - Telephone: 301-492-4999

- Payment Management Services – Home Page: [https://pms.psc.gov](https://pms.psc.gov)

- Payment Management Services Help Desk Number - 877-614-5533

- E-Mail: PMSSupport@psc.hhs.gov

- Hours of Operation
  - Monday through Friday: 5:00 a.m. until 11:00 p.m. EST
  - Saturday and Sunday: 9:00 a.m. until 9:00 p.m. EST
Education Development Center (EDC) Inc./Zero Suicide Institute

Heidi L. Kar, PhD, MHS
Violence Prevention Lead
Suicide, Violence, and Injury Prevention Portfolio
Education Development Center, Inc. (EDC)
Telephone: 212-807-4278
Email: hkar@edc.org
EDC is a global nonprofit with international & domestic divisions

Suicide, Violence, & Injury Prevention

Zero Suicide Institute (Z.S.I.)
Suicide Prevention Resource Center (SPRC)
Z.S. Institute Role in IHS Grant Program

- Design & Conduct Zero Suicide workshops for grantee sites
- Design & Facilitate virtual Community of Learning program for grantee & existing ZS implementing sites
- Provide technical assistance to support local implementation efforts
- Provide consultation to IHS on evidence-based ZS implementation processes
Official Communication with Project Staff

Grantees:

- Official contacts are listed in the official NoA as the **Project Director** and the **Authorizing Official**. These individuals receive all communication.

- If changes need to be made to official contacts listed in the NoA, please contact the Program Official, the Grants Management Specialist; or directly to the Grants Systems Coordinator, Paul Gettys at [Paul.Gettys@ihs.gov](mailto:Paul.Gettys@ihs.gov) for guidance on how to submit this request.

Federal Awardees:

- Your official contacts are those individuals that were listed in the application submission.

- If you have changes to your official contacts, please IHS Program Official, Sean Bennett at [Sean.Bennett@ihs.gov](mailto:Sean.Bennett@ihs.gov); **and** Shelly Carter at [Shelly.Carter@ihs.gov](mailto:Shelly.Carter@ihs.gov).
III. What to Expect: Project Year 1

Notice of Award - Terms and Conditions

Required Reporting (grantee & federal awardees)

ZSI Online Data Portal(s)

Virtual and In-Person ZSI Meetings
Notice of Award

- All official Notices of Award (NoA’s) have been disseminated via email:
  - Grantees: IHS Division of Grants Management (DGM)
  - IHS Federal Facilities: IHS Division of Behavioral Health (DBH)

- NoAs for Grantees were emailed by DGM to the individual(s) listed as the Project Director and/or the Authorizing Official.
Notice of Award: Terms & Conditions

- Terms & Conditions are included in your NoA. Please review this information carefully!

- Standard Grant Conditions (Grantees Only):
  - Includes contact information for your IHS Program Official and IHS Grants Management Specialist (GMS), reporting requirements and deadlines, federal regulations, cost principals, when to obtain approval for changes to grant, audit requirements, etc.

- Programmatic Terms & Conditions (Grantees & IHS Federal Programs):
  - Includes program-specific requirements: submission of required reports and financial forms, submission of brief project overview, revisions to applications, continuation applications, kick-off meeting, required participation in national evaluation and technical assistance calls, and how/when to notify of personnel changes.
Standard Terms and Conditions

- Reporting Requirements, Due Dates, & Format Information
- Code of Federal Regulations
- OMB Cost Principles
- When & how to obtain written approval from the GMS
- Hotline Information
- Grants Payment Information
- FFATA Sub-award Requirements
- Audit Requirements
Programmatic Terms and Conditions

- Submission of Brief Project Overview
- Submission of Required Annual Progress Reports
- Submission of Required Financial Forms/Reports
- Required Revisions to Approved Applications
- Continuation Application Kit and Submission
- Participation in a Zero Suicide Academy/Workshop
- Participation in National Evaluation
- Participation in Zero Suicide Community of Learning (CoL) Technical Assistance Conference Calls
- Notification of Personnel Changes
Required Reporting – All Projects

- SF- 425 GrantSolutions & PMS Submissions (grantees)
- SF- 425 Data Portal – Max.gov Submissions
- Continuation Application Kit (CAK) Submissions
- Annual Progress Report (APR) Submissions

Additional required submissions:
- Brief Project Description (BPD)
- Listed in the official NoA
SF-425 Submission: GRANTEEES

- Submit financial reports to:
  - PMS and GrantSolutions

- All grantees are required to draw down funds from PMS.

- Important Reminder: Please connect with your Tribal Finance office to ensure that the project financial staff have access to PMS.

- Payment Management System (PMS) recorded Training on how to submit SF 425:
  - PMS Webinar November 30, 2017
SF-425 Submission: Federal Awardees

- Submit financial reports to:
  - Max.gov

- All Federal awardees should have access to the MAX.gov

- Important Reminder: If you do not have access to the Max.gov, please inform your Program Official immediately to assist with obtaining access.

<table>
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<th>Project Year 1 Start Date: November 15, 2017</th>
<th>Quarter</th>
<th>Due Date of SF-425</th>
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<td>November 2017 December 2017</td>
<td>Quarter 1</td>
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<td>2018</td>
<td>July 2018 August 2018 September 2018</td>
<td>Quarter 4</td>
<td>Quarter 4: October 30, 2018</td>
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Required Reporting: Continuation Application Kit

- **Continuation Application Kit (CAK)**
  - To receive your Year 2 funds, all projects are required to submit a CAK.
  - Guidance will be given to all projects from Program Official

- **Grantees:**
  - GrantSolutions submission
  - Official email notification from DGM

- **Federal Awardees:**
  - Official email notification from DBH, Program Official
  - Submission via Max.gov
Required Reporting: Annual Progress Report

Annual Progress Report (APR)
- One (1) progress report per year
- Year 1 APR covers November 15, 2017 – October 31, 2018
  Due November 30, 2018

Grantees and Federal Awardees complete the APR via the MAX.gov.
- More information will be provided to all projects by your ZSI Program Official.
Secure Data Portal

- Max.gov portal is open

- Each project is assigned unique username and password

- Connect with ZSI Program Official to assist with clarification on documents to be submitted to the Max.gov platform
Timeline

APR = Annual Progress Report
CAK = Continuation Application Kit

* Applies to both grantees and awardees
ZSI Virtual & In-Person Meetings

- ZS Workshops: Local or Regional: JAN-MAR 2018
- ZS Community of Learning Start Date: MAR 28, 2018
- AI/AN Zero Suicide Meeting will be scheduled during the Annual NIHB Behavioral Health Conference
  - Tentative: Sacramento, CA - JUL 2018
IV. Technical Assistance and Evaluation

I. Who Provides Technical Assistance

II. Who serves as the National Evaluator

III. What should projects be collecting and reporting

IV. Contact Info
Technical Assistance (TA) and Evaluation

- ZSI Local Data Collection Plan (LDCP):
  - The role of DBH: Provides the LDCP template and technical assistance on what to collect
  - The role of EDC/Zero Suicide Institute: Using the Data Elements Worksheet and other technical assistance tools, assist projects with addressing what data to measure

- ZSI National Evaluation
Where can I find all this information?

- ZSI Project information and any upcoming technical assistance calls, webinars, and other general information can be found on the Division of Behavioral Health ZSI webpage:

https://www.ihs.gov/suicideprevention/zerosuicide/
Contact Information

National ZSI Program Official

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Public Health Advisor
Indian Health Service
Office of Clinical Preventive Service
Division of Behavioral Health
5600 Fishers Lane
Rockville, Maryland 20857

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