



**DBH**

DIVISION OF BEHAVIORAL HEALTH

# Zero Suicide Initiative (ZSI)

## Welcome Webinar

**January 24, 2018**

# 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

## Goals, cont.

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



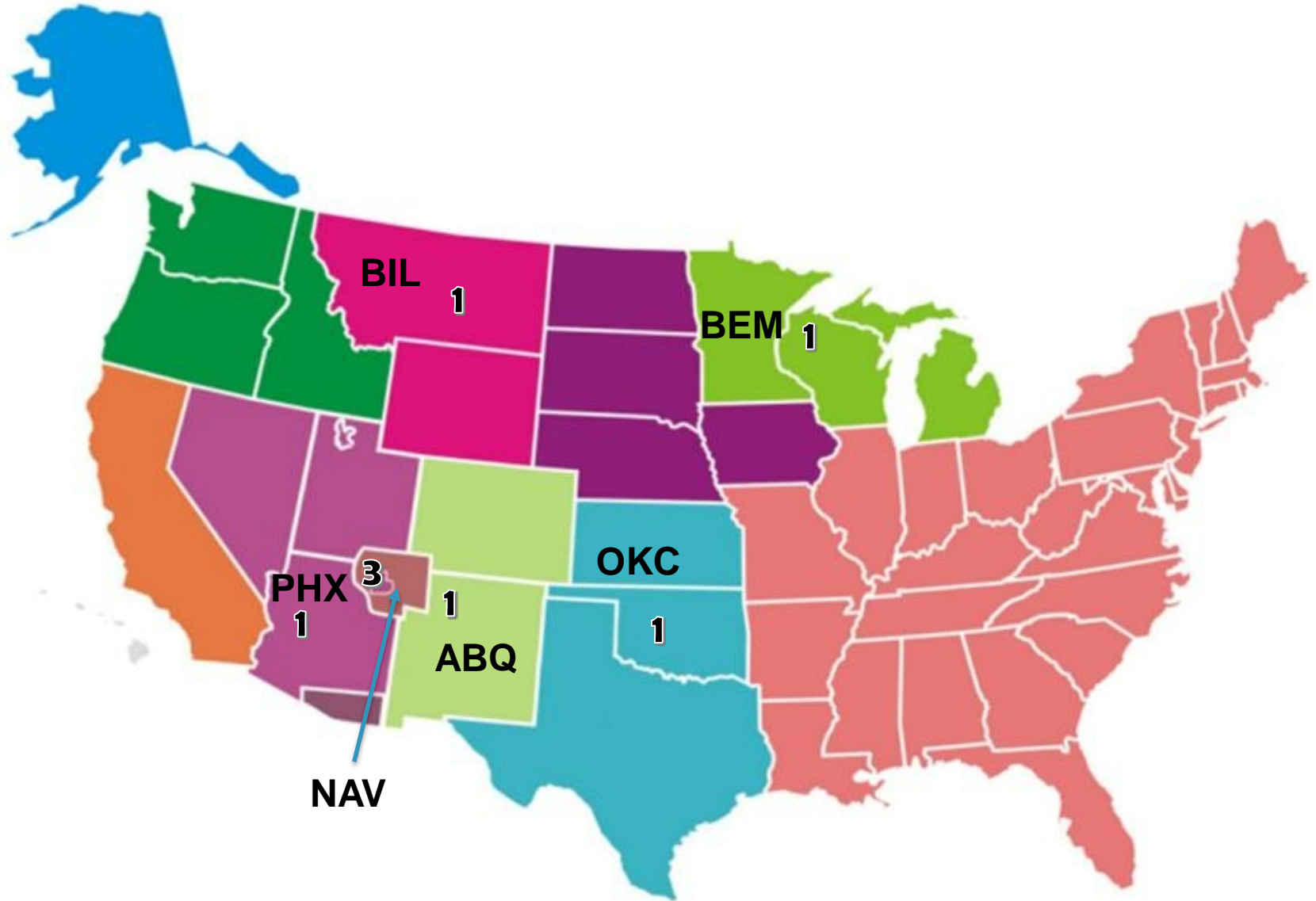
# 2017 ZSI Awarded Projects

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

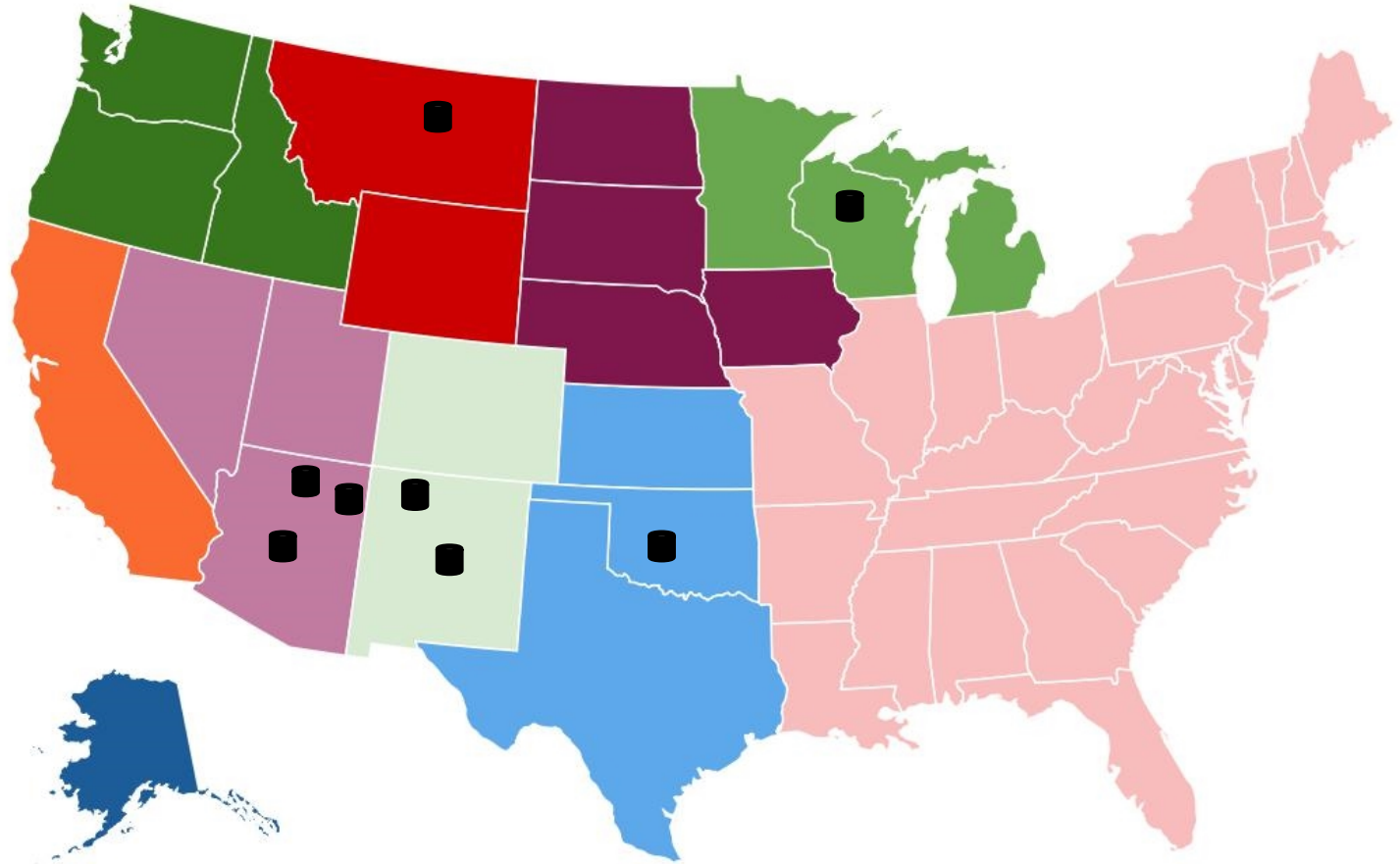
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**Total Funds Awarded:            \$3.2 Million**

# ZSI Projects by IHS Area



# ZSI Projects by State



# 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**

**ZSI**

**ZS Workforce Survey**

**ZS Data Elements  
Worksheet**

# 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 setting](#) [Exit Disclaimer: You Are Leaving www.ihs.gov](#) [PDF - 233 KB] — The Joint Commission
- [Suicide Care in Systems Framework](#) [Exit Disclaimer: You Are Leaving www.ihs.gov](#) [PDF - 3 MB] – from the National Action Alliance for Suicide Prevention (NAASP) Clinical Care and Intervention Task Force 2011 report.
- [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](mailto:Sean.Bennett@ihs.gov)

- ZSI Program Official/Project Officer assists with national programmatic inquiries (*e.g., Programmatic 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](mailto: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](mailto: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>
- **Payment Management Services Help Desk Number - 877-614-5533**
- **E-Mail:** [PMSSupport@psc.hhs.gov](mailto: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](mailto:hkar@edc.org)

# Education Development Center: The Zero Suicide Institute

- 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: **GRANTEES**

- 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.

# SF-425 Financial Report Submission Chart: September 30, 2017 – September 29, 2018

Calendar Year	Project Year 1 Start Date: November 15, 2017	Quarter	Due Date of SF-425
2017	November 2017 December 2017	Quarter 1	Quarter 1: January 30, 2018
2018	January 2018 February 2018 March 2018	Quarter 2	Quarter 2: April 30, 2018
2018	April 2018 May 2018 June 2018	Quarter 3	Quarter 3: July 30, 2018
2018	July 2018 August 2018 September 2018	Quarter 4	Quarter 4: October 30, 2018

# 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**

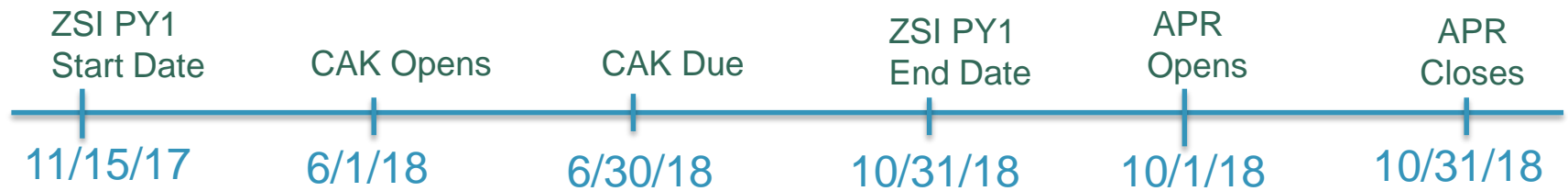
Grantees and Federal Awardees complete the APR via the MAX.gov.

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

**Sean K. Bennett, LCSW, BCD**

Public Health Advisor

Indian Health Service

Office of Clinical Preventive Service

Division of Behavioral Health

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