

# National Suicide Prevention Initiatives

**MODERATOR**

**Christy Malik, M.S.W.**

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NASMHPD*

NASMHPD Annual Meeting

Monday, July 27, 2026



# National Action Alliance for Suicide Prevention



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# The Suicide Prevention Resource Center: **Providing National Leadership in Training and Technical Assistance**

July 27, 2026

**Jenna Dalley Heise, MA, NBCC**  
SPRC Executive Director

# Funding and Disclaimer



The Suicide Prevention Resource Center is supported by a grant from the U.S. Department of Health and Human Services (HHS), Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Mental Health Services (CMHS), under Grant No. 1H79SM090640.

The views, opinions, and content expressed in this product do not necessarily reflect the views, opinions, or policies of HHS, SAMHSA, or CMHS.

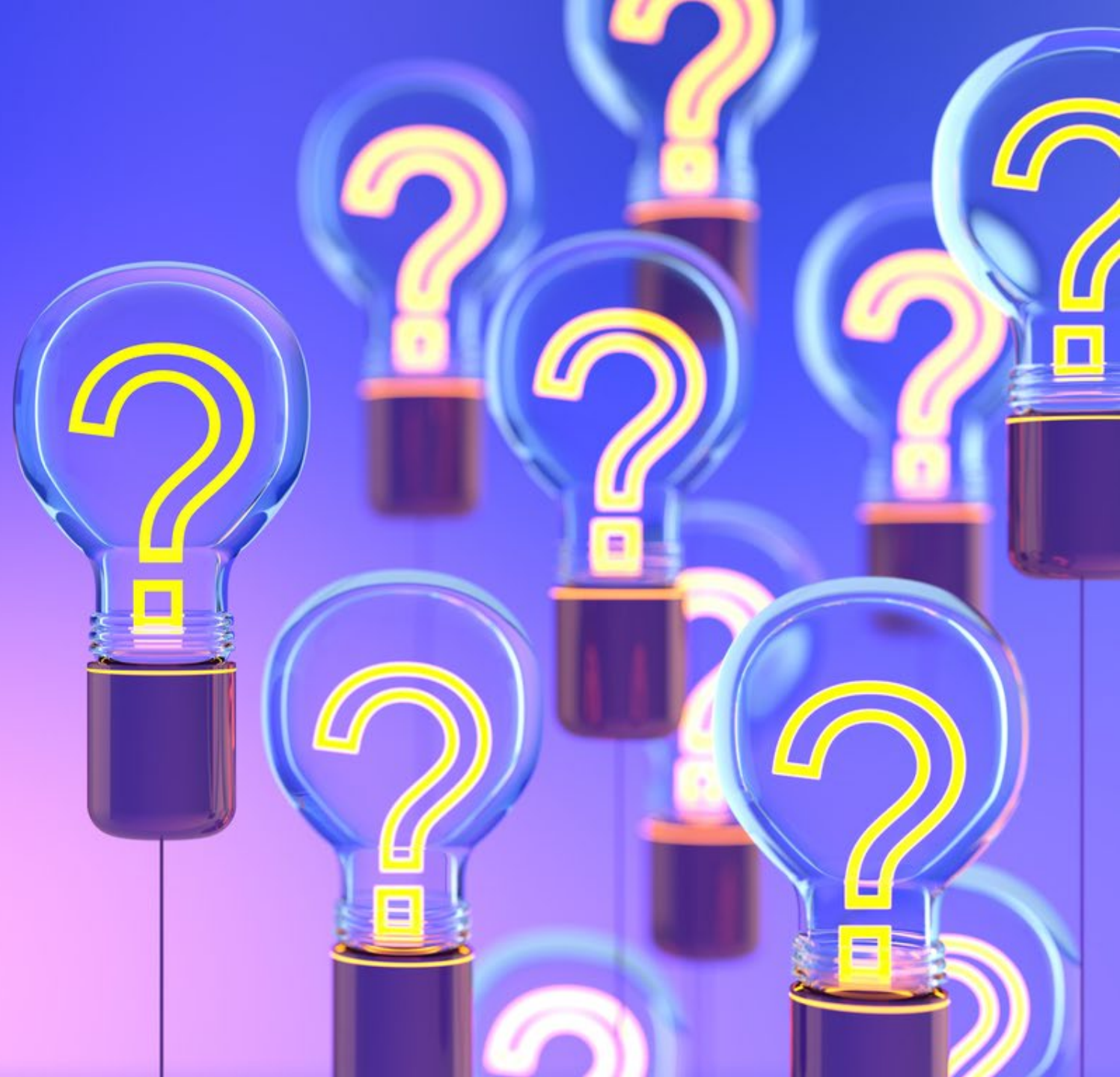
# About SPRC

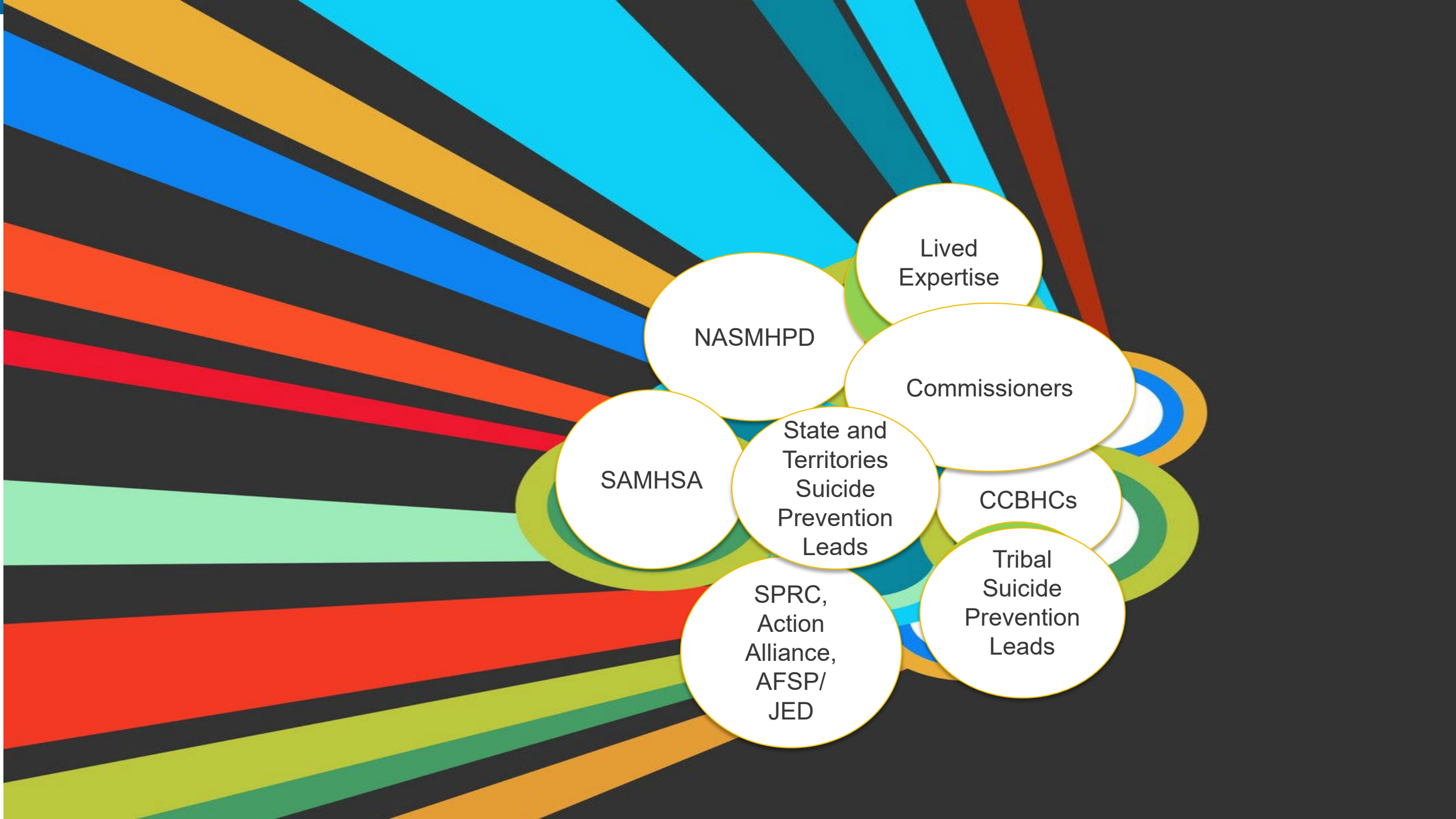
The Suicide Prevention Resource Center (SPRC) advances effective suicide prevention nationwide through free consultation, training, and tools for community organizations and coalitions; workplaces; state and Tribal leaders; health/behavioral health systems; professionals and professional education programs; and national public and private partners. SPRC is supported through a grant from the U.S. Department of Health and Human Services Substance Abuse and Mental Health Services Administration (SAMHSA).

# Overview



# Who are the Leaders in Suicide Prevention?





# How do you see the Suicide Prevention Resource Center?



Library



Creating Resources



Policy Guidance



National, State, and  
Local Guidelines



Best Practices  
Registry



Webinars and Online  
Courses



Coaching and  
Consulting



Distributing Surveys

# Our Charge

**Provide national leadership to address suicide across the country**



**Build national capacity for preventing suicide by providing:**

**Technical  
Assistance**

**Training and  
Resources**

**Suicide Prevention  
Strategies**

**Best Practices**



The Suicide Prevention Resource Center (SPRC) is your one-stop source for information to help you develop, deliver, and evaluate evidence-informed suicide prevention efforts.

## What we offer

- Consultation
- Training
- Tools
- And more!

## Who we serve

- Organizations
- Health Systems and Clinicians
- Communities
- States and Tribes



[www.sprc.org](http://www.sprc.org)



@SuicidePrevention  
ResourceCenter



@suicide-prevention-  
resource-center

# Visit SPRC.org



**Sign up** for the *Weekly Spark* newsletter for the latest resources from SPRC.



**Discover** how to develop and implement prevention efforts in any setting with our Effective Suicide Prevention Model.



**Explore** a library of programs and interventions with evidence of effectiveness.



**Learn** at your own pace with online courses, learning labs, and brief videos.



**Access** a wealth of resources, including toolkits, fact sheets, success stories, and more!



**Find** information on suicide prevention efforts in your state.



**Free** consultation and training.

# 2025-2030 Implementation Workplan Goals

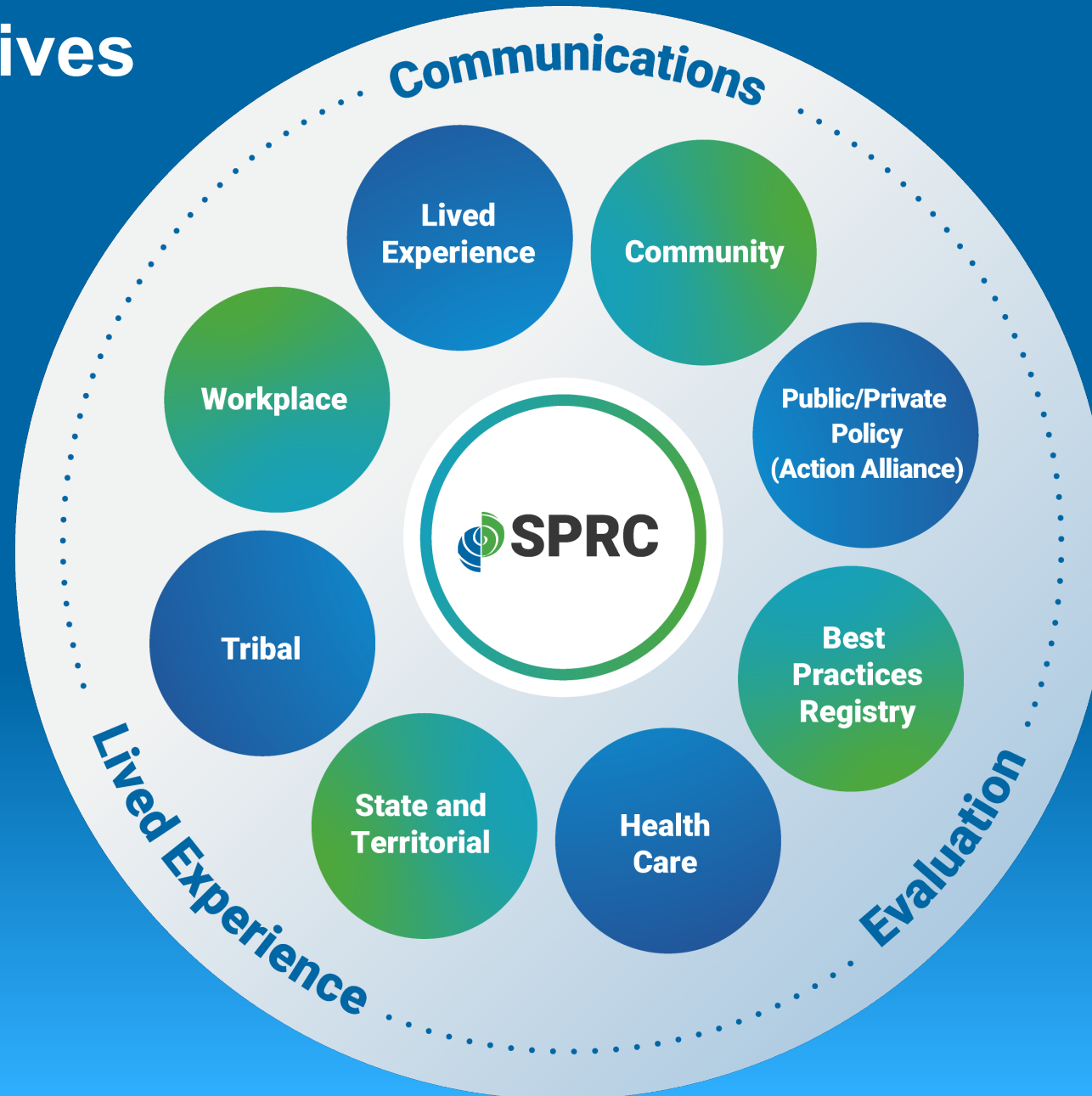
**Goal 1:** Increase the capacity of state, Tribal, territorial, and community systems, leaders, and organizations to support the implementation of effective suicide prevention strategies.

**Goal 2:** Strengthen and sustain high-impact national, state, and local partnerships across public and private sectors to build alignment and consensus and advance the field of suicide prevention.

**Goal 3:** Improve capacity of states, Tribes, health care systems, and providers to effectively screen, assess, intervene, treat, and follow up with those at risk of suicide and use the Zero Suicide Model.

**Goal 4:** Increase availability of support for those at the highest suicide risk, survivors, and families to improve crisis response, help loved ones get care and increase access to community supports.

# SPRC Initiatives



# SPRC Resources for National Audiences

## SPRC Website: Learning Center

The screenshot shows the SPRC Learning Center interface. At the top, there is a dark header with the SPRC logo, the text "Suicide Prevention Resource Center", and three buttons: "Search", "Contact Us", and "About SPRC". Below the header is a navigation bar with links: "Get Help", "About Suicide", "Effective Suicide Prevention", "Resources", and "Best Practices Registry". The main content area has a green background with the text "Learning Center" in large white font. To the right, under the heading "I Want to Learn About:", there is a list of six topics in white boxes: "Suicide Prevention in Health Care Settings", "Centering Lived Experience in Prevention Efforts", "Suicide Prevention Infrastructure for States and Territories", "Choosing a Suicide Prevention Program", "Preventing Suicide in Tribal Communities", and "How to Get Started in My Community". On the right side of this list, there is a vertical sidebar with the "988 SUICIDE & CRISIS LIFELINE" logo and two buttons: "▼A" and "▲A".

## Resources

The screenshot shows the SPRC Resources interface. It has the same header and navigation bar as the Learning Center. The main content area has a light beige background. On the left, there is a vertical sidebar with buttons for different resource types: "Video/Audio", "Webinar", "Guidance", "Fact Sheet", "Online Course", "Guidance", and "Issue Brief". The "Guidance" button is highlighted with a yellow circle. To the right of this sidebar, there is a list of resource titles corresponding to the buttons: "The Patient Safety Screener: A Brief Tool to Detect Suicide Risk", "The Power of Human Connections: Improving the Treatment of Suicidality with the Insights of Lived Experience", "Primary Care Pocket Guide: Assessment and Interventions with Potentially Suicidal Patients", "Resources for Suicide Loss Survivors", "Safety Planning for Youth Suicide Prevention", "Screening and assessment of co-occurring disorders in the justice system", and "Screening and Safety Planning With Adults at Risk of Intimate Partner Violence (IPV) and Suicide: An Issue Brief for Clinicians". On the right side of this list, there is a vertical sidebar with the "988 SUICIDE & CRISIS LIFELINE" logo and two buttons: "▼A" and "▲A".

# SPRC Resources for Specific Groups and Focused TTA

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## Resources for Specific Groups

- Learning collaborative for community coalitions
- Community of practice for primary care providers
- Action Alliance listening session for national experts
- Webinar series on postvention, grief, and healing in Tribal communities

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## Focused TTA

- Building strategic plans
- Elements of suicide care and Zero Suicide
- Data dashboard health care goals *National Strategy*
- Lived experience in systems

# Individualized Technical Assistance

## Office Hours

- Lived Experience Initiatives
  - Structured with guest speakers
- Tribal Initiatives
  - Topics
- Best Practices Registry
  - How to apply and evaluation support
- Health Care Initiatives
  - Crisis Care Continuum and Zero Suicide
- State and Territorial Initiatives
  - Quarterly TA calls

## Individualized TTA

- Systems
  - Workplace trade unions
  - Suicide-centered lived experience with organizational leadership
  - Community coalitions
- Tribes and Tribal Communities
  - Service members and veterans
- States and Territories
  - Strategic planning with state leaders for statewide rural initiative

# SPRC's Technical Expert Panel

- **Technical Expert Panel:** SPRC has organized a strategic advisory body of subject matter expert consultants.
- **Expertise:** Panelists align with SPRC's initiatives and include members of other national suicide prevention organizations and individuals representing populations at high risk for suicide, and people with suicide-centered lived experience.
- **Purpose:** To advise, advance, and amplify SPRC's mission, goals, and strategic direction.



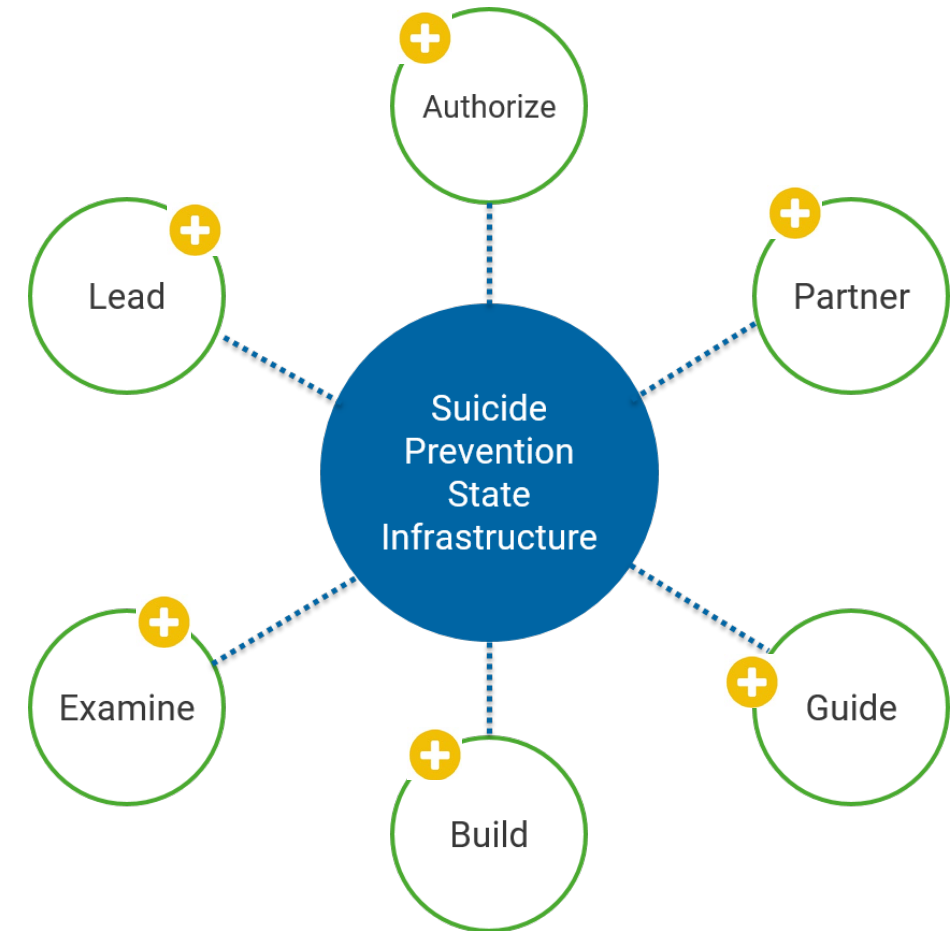
# State Suicide Prevention Leadership

- The State and Territorial Initiatives team provides TTA to state and territorial suicide prevention leadership.
- TTA addresses topics such as:
  - Communicating your state and territorial suicide prevention data needs and priorities to community champions and leadership for action
  - Connecting with other states or territories about how they have shared their priorities with leadership and community champions
  - Strategizing ways to frame suicide prevention messages for community champions (including those with lived experience) and policy makers

# State Suicide Prevention Infrastructure:

The recommendations articulate essential infrastructure elements for advancing and sustaining suicide prevention efforts

- ✓ Developed in collaboration with an advisory panel of experts and key partners
- ✓ Tools, success stories, webinars, and more are available to help states implement
- ✓ Available at [sprc.org/state-infrastructure](https://sprc.org/state-infrastructure)



# State Infrastructure: LEAD

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## Key

- Maintain a dedicated leadership position
- Dedicate core staff positions, training, and technology needed to carry out all six essential functions
- Develop capacity to respond to information requests from officials, communities, the media, and the general public

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## To Further Strengthen

- Where interests intersect, establish a formal connection between the relevant government divisions or offices
- Build staff capacity to effectively communicate across multiple audiences and formats
- Develop division/agency commitment to spur cross-discipline collaboration and integrate programs across funding sources

# SPRC's 2025 State and Territorial Suicide Prevention Staff Summer Summit

- Four-session virtual learning series for state and territorial suicide prevention leaders
  - Sessions focused on strategic planning, state plan implementation, monitoring and evaluation, and leadership and community engagement
- 22 states and territories participated
- Created new opportunities for cross-state networking and problem-solving
- **Takeaway:** State suicide prevention leads consistently value opportunities to learn directly from peers facing similar implementation challenges.



# State Coordinator Collective Calls: Ongoing Peer Learning and Problem Solving

- Regular quarterly forum connecting suicide prevention coordinators across states and territories; creates a national peer network for rapid exchange of ideas and resources
- May 20th session focused on strengthening postvention efforts
- 20+ states and territories represented
- States shared practical approaches to school response, surveillance, media engagement, and community support
- **Takeaway:** Strengthens state suicide prevention efforts by connecting suicide prevention leaders to peers, practical solutions, and real-world implementation experience.



# SPRC Year 2 Suicide Prevention for States and Territories

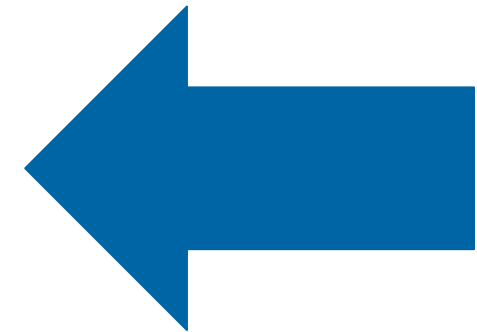
- Currently developing an online course for state and territorial suicide prevention leads
- Goal: Equip state and territorial suicide prevention professionals with the key skills needed to effectively carry out their work and knowledge of how those skills support the development of a comprehensive strategic plan.
- Objectives:
  - Describe and differentiate the components of a comprehensive suicide prevention approach by accurately defining each component and explaining its purpose and application.
  - Explain how five key skill domains: Public Health, Data-informed Decision Making, Selecting and Implementing Evidence-Informed Strategies; Partnership and Collaboration, Continuous Quality Improvement, and Sustainability support the implementation of the components of a comprehensive suicide prevention approach.

# Upcoming – SPRC Year 2

- Free, self-paced Zero Suicide resources
- Online course on safe and effective suicide prevention messaging
- Early intervention and prevention toolkit for a specific high-risk group or setting – planned focus is school settings
- Convene suicide prevention researchers and prevention program developers for an intensive research to practice summit to identify and disseminate new suicide prevention research findings and inform prevention and intervention program design
- Webinar series, resources, and tools that provide guidance on best practices, effective self-care, and support strategies after a suicide attempt for a different audience or setting each year

# NASMHPD Commissioners: Next Steps to Elevate Suicide Prevention in Your State

- **Participate** in regularly scheduled NASMHPD regional calls with guest speakers, including SPRC's State and Territorial Initiatives.
- **Learn** about the LEAD essential element from SPRC's *Recommendations for State Suicide Prevention Infrastructure*.
- **Attend** the suicide prevention leads quarterly forum that connects suicide prevention coordinators across states and territories.
- **Join** the NASMHPD September Meet Me Webinar featuring Scott Barton, SPRC's Director of Tribal Initiatives, to learn about suicide prevention in Tribal communities in your state or territory.





Questions?

# Resources

Suicide Prevention in Health Care Settings:

<https://sprc.org/health-care/>

Preventing Suicide in Tribal Communities:

<https://sprc.org/tribal-resources>

Centering Lived Experience in Prevention Efforts:

<https://sprc.org/livedexperience/>

How to Get Started in My Community:

<https://sprc.org/community-suicide-prevention/>

Suicide Prevention Infrastructure for States  
and Territories:

<https://sprc.org/state-infrastructure>

Choosing a Suicide Prevention Program:

<https://bpr.sprc.org>



# Thank you!

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Jenna Heise  
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# SAMHSA Zero Suicide Evaluation

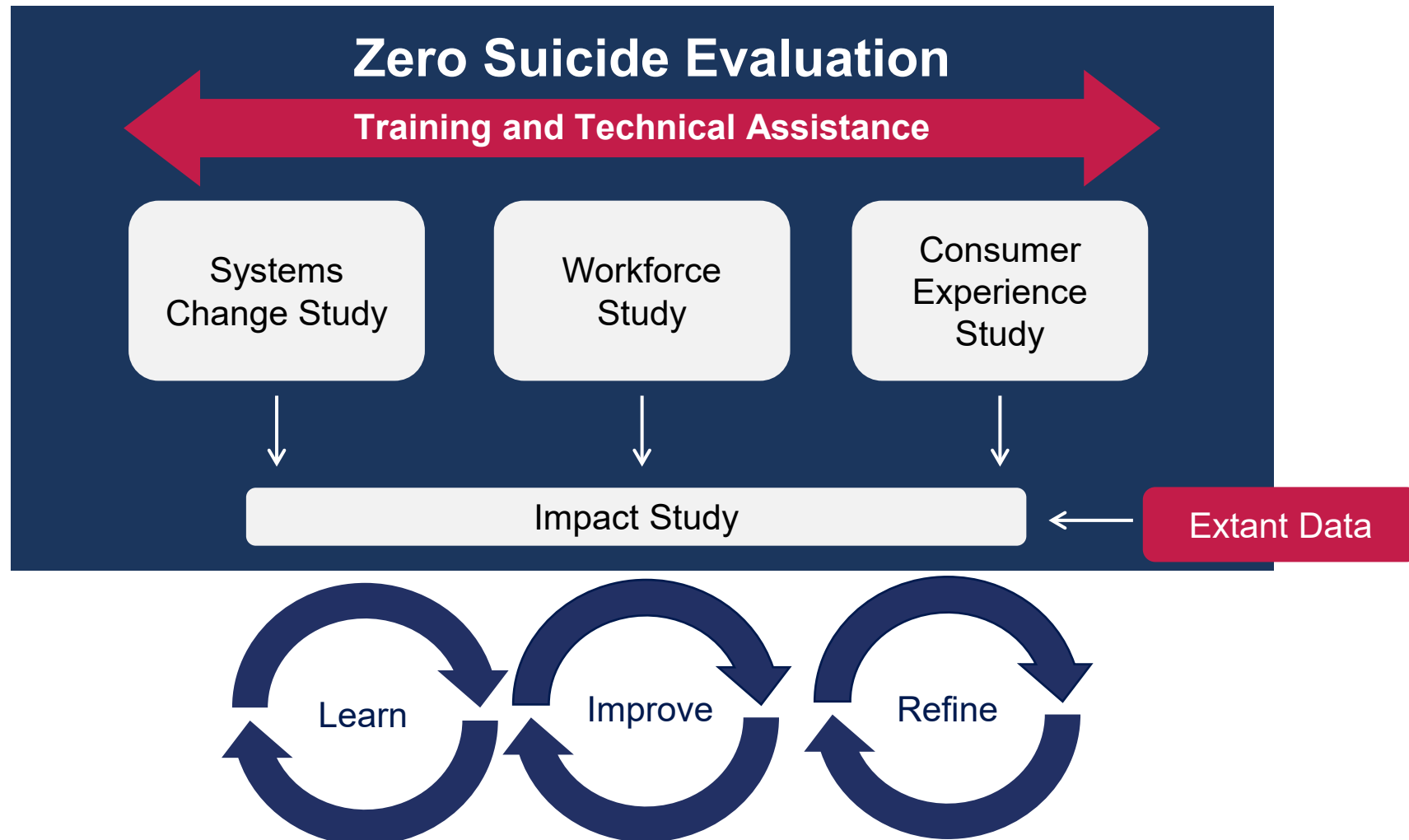
Brandon Johnson  
[Brandon.Johnson1@samhsa.hhs.gov](mailto:Brandon.Johnson1@samhsa.hhs.gov)



# Evaluation Design

# Overview of Zero Suicide Evaluation Design

The purpose of this evaluation is to support SAMHSA in assessing Zero Suicide Program implementation, outcomes, and impact; support continuous quality improvement; and guide program development.



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# Evaluation Questions

## Four Overarching Questions

### **Systems Change Study**

To what extent are grantees implementing the Zero Suicide Program in accordance with the Zero Suicide Framework, adoption of core activities, and indicators of sustainable systems change?

### **Workforce Study**

What are the outcomes of the organization-wide workforce training programs to enhance suicide intervention skills, and how do providers describe their experience throughout this change?

### **Consumer Experience Study**

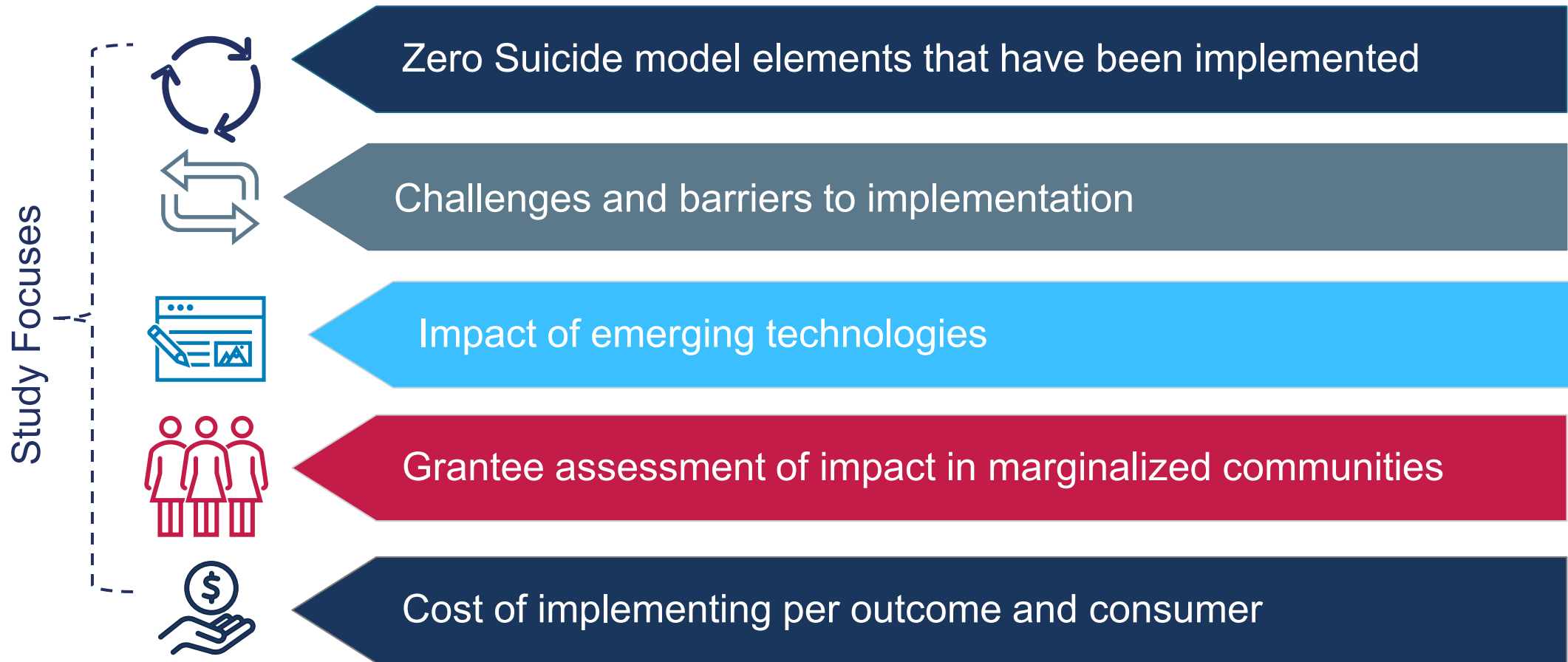
How do Zero Suicide Program consumers perceive their care and services, and do their clinical outcomes improve over time?

### **Impact Study**

What is the overall impact of the Zero Suicide Program on reducing suicide rates in terms of morbidity and mortality?

# Systems Change Study

## Overview



# Systems Change Study

## Data Collection Instruments

The Systems Change Study data will utilize a combination of primary data collection via **two surveys, two case studies, and secondary data** to understand implementation of the Zero Suicide framework in Health Systems, including the core activities accomplished and indicators of sustainable systems change.

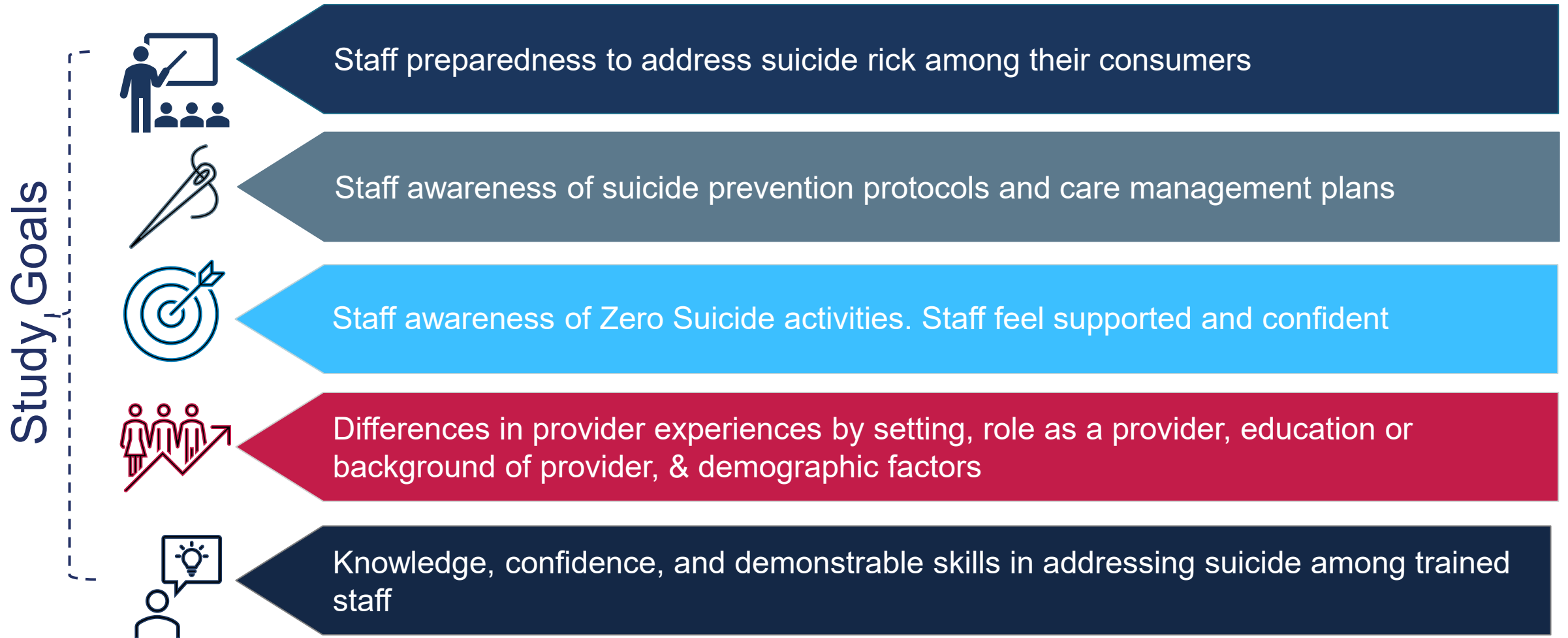
Prevention  
Strategies  
Inventory (PSI)

Behavioral Health  
Provider Survey  
(BHPS)

Case and Cost  
Study  
Key Informant  
Interviews

# Workforce Study

## Overview



# Workforce Study

## Data Collection Instruments

The Workforce Study will utilize primary data collection via **three different surveys** to understand how training materials are used, how they help increase knowledge, skills, and confidence among the behavioral health workforce, and how effective they are in sustaining the benefits over time.

Workforce  
Survey  
(WS)

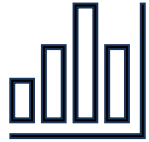
Training  
Activity  
Summary  
Page  
(TASP)

Training  
Utilization and  
Preservation  
Survey  
(TUPS)

# Consumer Experience Study

## Overview

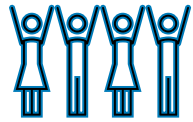
### Study Focuses



How effectively services reduce suicide risk and promote recovery



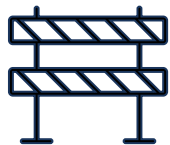
How satisfied consumers are with the services they've received



Who benefits most from services (and who might need extra support)



How often clinicians are implementing Zero Suicide practices



Any common barriers to service engagement

# Consumer Experience Study

## Data Collection Instruments

The Consumer Experience Study data will utilize primary data collection to understand the experiences and behavioral health outcomes of consumers as they navigate their pathway to and through care within Zero Suicide organizations.

Consumer Study  
Interest Form  
(C-SIF)

Consumer  
Experiences  
Survey (CES)

Consumer Key  
Informant Interview  
(C-KII)

# Impact Study

## Overview

### Study Goals



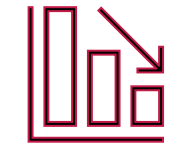
Achievement of goal to reduce suicide and suicidal ideation



Impact on individuals in grant services area



Impact on suicidal behavior of individuals receiving treatment



Influence of the model on outcomes



Variation of impacts across different groups

# Impact Study

Impact study relies on secondary data sources.

Medicaid Claims  
Data

CDC Mortality  
Data

US Census Data

Grantee-provided  
Mortality Data

Healthcare Cost  
and Utilization  
Project (HCUP)  
Data

# Input from Expert & Evaluator Panels and Grantees



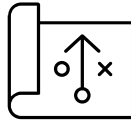
## Grantee Evaluators

Two virtual sessions held in March of 2024.

- On March 5 with 47 grantee attendees.
- On March 6 with 21 grantee attendees.

**Focus:** Review of the overall evaluation design.

Requesting data and communicating with health care organizations, recruiting participants, barriers to data collection.



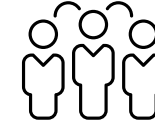
## Expert Advisory Panel (Consultants)

One virtual session with a panel of experts held on March 13, 2024.

- Seven experts participated in the session.
- Additional written feedback also received from one participant.

**Focus:** Review of the overall evaluation design.

Different organizational structures, engagement and retention in longitudinal studies, methodological approaches for analysis.



## Grantee Meeting

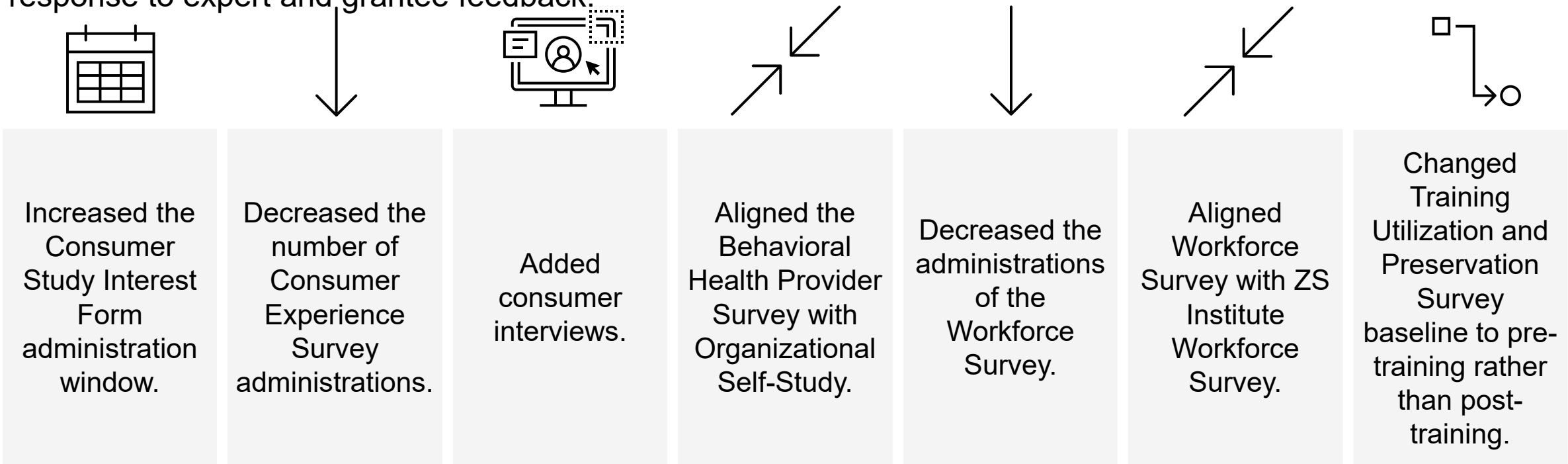
Evaluation team held a round table session on June 6, 2024, during the SAMHSA Zero Suicide/National Strategy for Suicide Prevention Grantee Meeting.

**Focus:** IRB, Staff buy-in, Connecting with Consumers, Barriers and facilitators to participation.

# Input from Grantee Evaluators, Expert Advisory Panel, and Grantees at Zero Suicide Grantee Meeting

## Implementation of Feedback

The Evaluation Team implemented the following changes to the Evaluation and Data Collection Plan in response to expert and grantee feedback.



# Integration of Grantee Reporting Data

Grantee reporting data will supplement primary data collected via the evaluation

## **SAMHSA's Performance Accountability and Reporting System (SPARS)**

Performance data obtained through SPARS will provide an additional means of highlighting some areas of focus, including access to mental health services, referral, screening, and training services.

- Accountability
- Access
- Referral
- Screening
- Types/Targets of Practices
- Training Workforce Development

## **Programmatic Progress Reports (PPR)**

The evaluation removed some indicators from our instruments and will utilize PPR data. The evaluation team worked with SAMHSA to have the following added to the PPR.

- Clients served with group treatment
- Individuals received follow up after an ED or inpatient discharge
- Profile and Outcomes of Individuals (for inpatient/outpatient)
- Follow-up after discharge
- Screened and assessed positive for suicide risk
- Under organization's care a care management plan who experienced an episode of acute care
- Episode of acute care

# Zero Suicide

Julie Goldstein Grumet, PhD  
VP, Suicide Prevention Strategy  
Director, Zero Suicide Institute at EDC

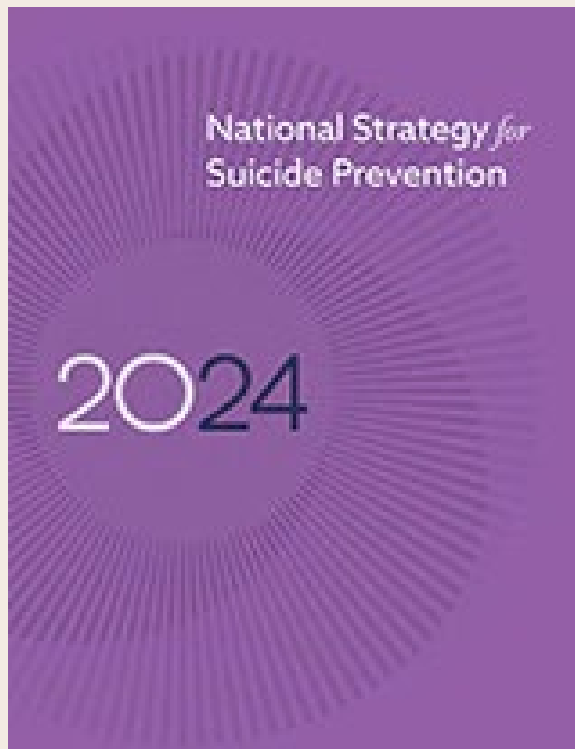
[jgoldstein@edc.org](mailto:jgoldstein@edc.org)

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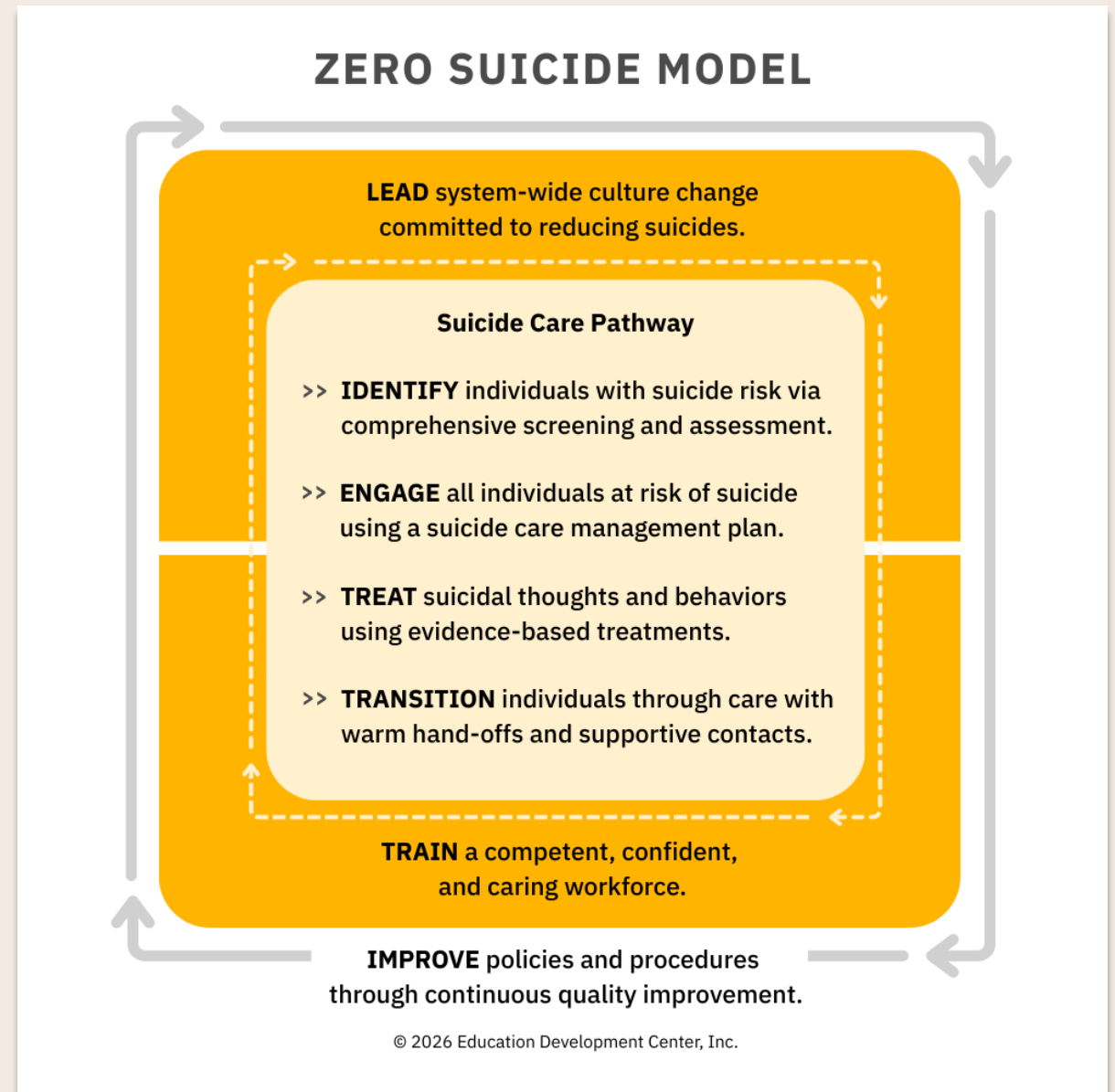
# National Strategy for Suicide Prevention

Goal 8: Implement effective suicide prevention services as a core component of health care



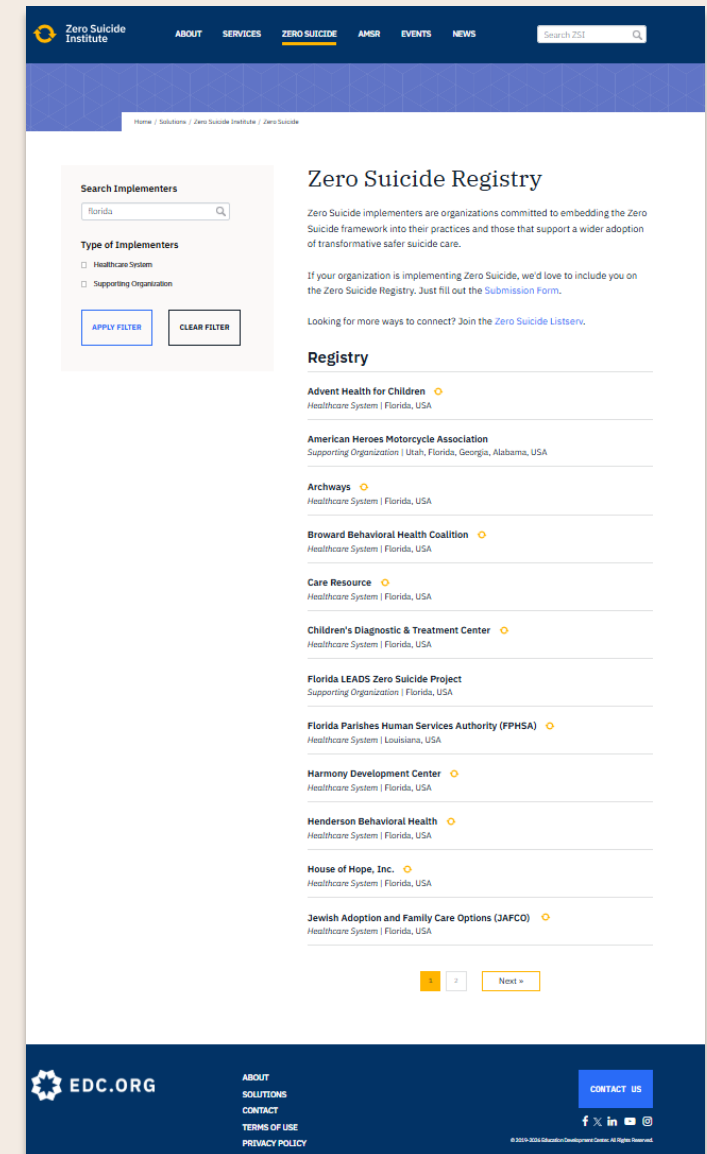
# Zero Suicide

Zero Suicide is a system-wide approach to improving suicide care in health and behavioral health settings, helping organizations implement evidence-based practices that save lives.



# Zero Suicide in the U.S.

- Over 2,000 healthcare systems have adopted Zero Suicide to date
- Evidence for adoption of Zero Suicide exists
- Healthcare systems remain unaware of the framework





# Four Pines Fund

- Founded by family who lost son, Alan, to suicide in 2015
- Informed by background as physicians and lived experience
- Fund projects & partnerships that expand access to suicide care

[fourpines.org](https://fourpines.org)

# Four Pines Project at EDC

3-year project designed to increase adoption of Zero Suicide with fidelity

- Update implementation tools and website
- Evaluate impact of EDC's Zero Suicide Academy & Community of Practice
- Provide comprehensive TTA services across outpatient care
  - ✓ CCBHCs/CMHCs
  - ✓ Integrated primary care
  - ✓ Crisis respite services
- Identify opportunities for states to support Zero Suicide

# Coming Soon: Identify States

Assist with identifying states best prepared to lead adoption of the Zero Suicide Principles—determinations will be based on each state's:

- Commissioner leadership commitment
- Behavioral health service system capacity
- Zero Suicide strategies currently included in state suicide prevention plans
- Prior participation in similar suicide prevention initiatives



# Additional Tasks

- Conduct a needs assessment
- Support SMHAs to pilot at least one new strategy to modify or invest in: policy, technology, data, funding opportunities during the 3-year project
- Develop tailored resources for SMHA leadership
- Assess pilot SMHA's progress and saturation of statewide Zero Suicide implementation
- Share lessons learned

# Anticipated Outcomes

Tools and resources for adoption are strengthened



States reduce barriers/improve opportunities for adoption and sustainability



Enhanced fidelity of care practices in systems using Zero Suicide



Demonstrated outcomes



Articulation of value proposition



Greater uptake of Zero Suicide



Stronger, more resilient health and behavioral health systems



Improved care quality and safety for individuals at risk

# Thank You!



# 988 Updates

## Progress and Future Directions

**Lula Haile** | Vibrant Emotional Health

**Wendy Martinez Farmer** | Vibrant Emotional Health

**NASMHPD Annual Meeting**

**July 27, 2026**