OHIO'S VOICE FOR SUICIDE PREVENTION



IMPLEMENTING AN INTERPROFESSIONAL SUICIDE PREVENTION CURRICULUM AT YOUR INSTITUTION

AGENDA

- Open Discussion: What suicide prevention education, advocacy, and promotion activities is your campus providing?
- Overview: Interprofessional Suicide Prevention Course
- How to maintain fidelity while implementing the course
- Open Discussion / Q&A

WHAT SUICIDE PREVENTION ACTIVITIES ARE YOUR INSTITUTIONS IMPLEMENTING? — OPEN DISCUSSION

- Education
 - i.e. training, courses, etc.
- Advocacy
 - Administrative buy-in, postvention policies/procedures, advocacy groups, etc.
- Promotion
 - Campaigns, safe messaging, etc.
- Safe Messaging
 - Appropriate safe messaging resources

SUICIDE PREVENTION PLAN FOR OHIO: STRATEGY TWO



OHIO WILL CONCENTRATE EFFORTS ON INTEGRATING SUICIDE PREVENTION PRACTICES AND SUICIDE CARE, INCLUDING POSTVENTION, INTO HIGH-IMPACT SYSTEMS INCLUDING HEALTH CARE, PUBLIC SAFETY, AND EDUCATION.

STRATEGY 2 SPECIFIC GOALS

- Goal 2, Objective 1: "Promote the adoption of core education and training guidelines regarding suicide prevention into the higher education curricula of health professions".
- **Performance Measure:** Ohio Institutions of Higher Education will adopt suicide prevention care into curriculums by December 31, 2022.
- **Action:** OSPF finalized a marketing plan for the Interprofessional Suicide Prevention Curriculum and established capability to consult with institutions.
- Next Step: Disseminate course materials to Ohio institutions.

- Most counselors, social workers, therapists, etc. DO NOT receive education on suicide prevention while in college (undergraduate or graduate).
- Through SAMHSA GLS Grant #SM062894, OSPF funded the development and implementation of an Interprofessional Education (IPE) suicide prevention course at:
 - The University of Cincinnati
 - Old Dominion University
 - University of North Carolina (Charlotte)
- Three formats:
 - In-person
 - Blended
 - Online





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INTERPROFESSIONAL EDUCATION (IPE)

Definition

Educational model where students studying in the healthcare, social work, or any other related field learn together about a particular subject. (suicide prevention). The goal is to cultivate a collaborative process for a more patient/client – centered workforce.

- What types of institutions can adopt the course (in Ohio)
 - Public, 4-year universities
 - Private not-for-profit universities
 - Private, for-profit universities
 - Community Colleges

- What types of students can take the course
 - Health professions students (both undergraduate and graduate students):
 - Counseling
 - Social Work
 - Public Health
 - Psychology
 - Medicine
 - Ethics
 - Law
 - Nursing
 - Other relevant disciplines

- Overview of Major Topics
 - Foundational Competencies in Suicide Prevention
 - Community-Based Competencies (Primary Prevention & Postvention)
 - Social/Interpersonal & At-Risk Group Competencies (Secondary Prevention)
 - Clinical/Individual Competencies (Tertiary Prevention)

Key Findings

- The interprofessional suicide prevention course demonstrated sizable gains in suicide prevention related efficacy and knowledge.
- Increases in perceived ability to help self-harming patients, suicide prevention knowledge, and beliefs that persons dying by suicide possess characteristics consistent with depression and isolation.
- Participants expressed notably high intent to engage in best available intervention and prevention practices, draw on best available public health practices, and participate in interprofessional teams.

- Adopting institutions will get:
 - All course materials:
 - Sample syllabus
 - Course Implementation Guide
 - All research articles
 - All sample lecture PPTs
 - All quizzes & exams
 - All sample projects
 - A chance to consult with OSPF on fidelity adherence and implementation.
 - Fidelity package, suggestions, and requirements



Ohio Suicide Prevention Foundation Interprofessional Education Suicide Prevention: A Course Implementation Guide

Prepared by

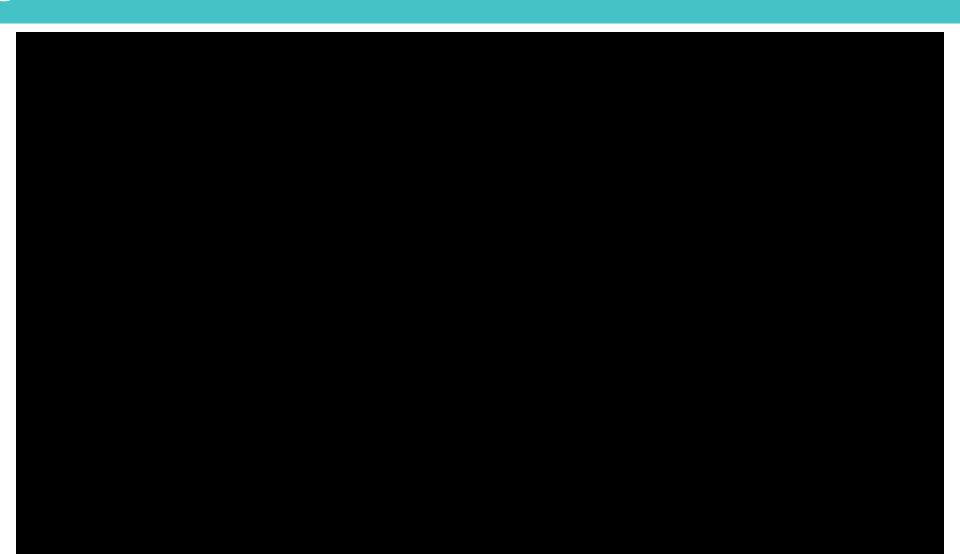
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INTERPROFESSIONAL SUICIDE PREVENTION COURSE MARKETING VIDEO



SYLLABUS OVERVIEW - FOUNDATIONAL COMPETENCIES IN SUICIDE PREVENTION

- Competency #1: Using contemporary suicide prevention-related terminology
- Competency #2: Managing personal attitudes, reactions, and social norms concerning suicide
- Competency #3: Knowing evidence-based risk and protective factors, and theories of suicide
- Competency #4: Recognizing legal and ethical considerations concerning suicide
- IPEC Competency #1: Ethical approach and respect for mutual contribution to provision of care

SYLLABUS OVERVIEW – CLINICAL/INDIVIDUAL COMPETENCIES (TERTIARY PREVENTION)

- IPEC Competency #2: Roles and Responsibilities
- IPEC Competency #3: Interprofessional Communication
- Competency #5: Developing and maintaining a collaborative, empathic stance toward persons experiencing suicidality
- Competency #6: Conducting and documenting a clinical risk assessment
- Competency #7: Understanding mental health service approaches to suicide prevention

SYLLABUS OVERVIEW – SOCIAL/INTERPERSONAL & AT-RISK GROUPS (SECONDARY PREVENTION)

- Competency #8: Enacting a collaborative evidence-based plan
- Competency #9: Comprehending social support approaches to suicide prevention

SYLLABUS OVERVIEW – COMMUNITY-BASED COMPETENCIES (PRIMARY PREVENTION)

- IPEC Competency #5: Ability to transfer interprofessional learning to the work setting
- IPEC Competency #6: Community engagement and centeredness
- Competency #10: Knowing public health approaches to suicide prevention
- Competency #11:Articulating community organizing and advocacy-based approaches to suicide prevention
- Competency #12: Adapting suicide prevention to special population needs
- Competency #13: Framing suicide prevention within a strategic plan

- Implementation science and research suggests that higher fidelity programs have better outcomes (McHugo, et al., 2007)
- Goals for Adopting Institutions:
 - Allow for adaptations while maintaining the highest fidelity possible
 - Ensure resulting outcomes from course are in line with intended goals
 - Students surveyed in a pre and post-test

Dimensions		2	3	4	5
Personnel: Instructor expertise	Instructor has little or no expertise in suicide prevention research or practice	Instructor has been through self-directed training in the area of suicide prevention, has a general understanding with no direct research or practice experience	Instructor has some basic knowledge or minimal formal suicide prevention training, and clinical or research experience in suicide prevention	Instructor actively engages in suicide prevention work both academically and clinically based with some formal training	Instructor is a published expert in research and practice in suicide prevention with more than 3 years of experience in both as well as relevant teaching experience

PERSONNEL – INSTRUCTOR EXPERTISE

- Should be delivered by content expert
 - i.e. SP research, practice, policy
 - Experience as a clinician, suicidologist
- Practice Experience
 - Working in the field more than 6 months
- Research Experience
 - Peer-reviewed publications (theory and/or practice)
- Training
 - Formalized SP professional development

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Dimensions		2	3	4	5
Course Delivery: Format	Course is fully online, asynchronous	Course fully online, synchronous	Course is hybrid/ blended, with the online portion being mostly asynchronous	Course is FtF/ blended with online portion being 75 to 100% synchronous	Course is fully in person/ FtFclassroom with less than 15% of content facilitated online

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Dimensions		2	3	4	5
Course Delivery: Time and Content	Total contact time = I hour (I credit hour course/seminar with no expected time for out of course study) weekly	Total contact time with content = 2 hours (I credit hour course/seminar with I hour of expected time out of course study)	Total contact time with content = 3 hours (2 credit hour course with I hour of expected out of course study)	Total contact time with content = 4 hours (2-3 credit hour course with 2 hours of expected out of course study)	Total contact time = 6 hours (3 credit hour course time and 3 hours of expected out of class study) weekly

Dimensions		2	3	4	5	
Course	Course uses	Course uses	Course uses all	Course uses all	Course uses up-	
Delivery:	materials that are	more than 25%	materials	materials	to-date evidence-	
Evidence-	not rooted in the	of materials	provided in	provided in the	based literature	
Based	research	provided in	course package	package without	and materials	
Materials	literature	course package	with a few	supplementation	(both provided	
	(instructor is not	with a few	supplemented by	of any	and	
	using less than	supplemented by	instructor that	new/current	supplemented by	
	25% of materials	instructor that	are not evidence-	literature	instructor) from	
	provided or is	are not evidence-	based or peer-	/materials	professional and	
	using own	based or peer-	reviewed		peer-reviewed	
	materials not	reviewed			sources	
	aligned with					
	current evidence)					

COURSE DELIVERY – EVIDENCE-BASED MATERIALS

- Materials need to be derived from the most recent and relevant literature at the time of course development
 - Course will be updated every five years
 - Materials can be added/replaced best on best practice
 - Materials should come from scholarly sources

Dimensions		2	3	4	5
Course Delivery: Content and Planning	Course content is missing either IPE competencies or SP competencies and does not offer both didactic engagement and IPE-driven SP activities	Course touches on IPE or SP competencies, but does not fully integrate the key concepts throughout, and is missing elements from one or both didactic engagement of weekly topic and/or activities	Course consistently addresses IPE and SP competencies in content, but does not fully integrate into discussion/ engagement and course activities	IPE and SP competencies are fully integrated through literature and discussion, but not practiced through class or independent activities	Course uses provided delivery including IPE and SP materials, didactic engagement in weekly topic between instructor and students, engagement in learning/ practice activities

Dimensions		2	3	4	5
Data Collection: Effectiveness and Outcomes Monitoring	No data are collected during or related to the facilitation of the course	Data are collected from university/admini stration (e.g. student evaluations), but no scales provided with the course materials are used for evaluation	The course uses I-2 of the provided scales/ measures, collected data are provided to the OSPF within one year	The course implements 3-4 of provided scales, data are provided to the OSPF and sometimes used for quality improvement	The course uses all scales/ measures provided and data are shared with the OSPF and regularly used for course improvement

DATA COLLECTION – EFFECTIVENESS AND OUTCOMES MONITORING

- Students will be asked to take at least one pre- and post-test survey
- The following should be submitted to OSPF on a regular basis:
 - Syllabi for the course
 - Fidelity measure outcomes using provided document
 - Optional scale data

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Dimensions	I	2	3	4	5
<u>Class</u>	Students are all	Students are	Students are	Students are	Students are
Composition:	from one fields of	from two fields	from three or	from four or	from more than
Representation	study/practice	of study/practice	more fields of	more fields of	four fields of
of IPE			study/practice	study/practice	study/practice
Students					

Dimensions		2	3	4	5
Accessibility: Equitable potential to accomplish learning objectives	Accessibility has not been addressed and is not assessed by provider or educational body.	Accessibility has been addressed for 25% or less of the course materials, (e.g. audio/lectures/ subtitles), but majority of materials have not been made accessible to those in need of visual or auditory assistance or require the use of a text reader.	Accessibility has been addressed for two areas of materials (lecture/readings; more than 50% of materials), but not all (e.g. videos do not include subtitles, some files cannot be accessed by text readers).	Accessibility has been addressed in all areas by the instructor, but not fully vetted by college/university accessibility office with some indication that less than 90% of materials are fully accessible.	Course (all materials) has been fully vetted and modified for accessibility for all students in course by accessibility office or outside consultant with over 95% accessibility an alternate materials or resources in the case of a lack of accessibility.

HOW TO SIGN-UP

- Reach out to OSPF and ask for application (only Ohio schools currently eligible)
- Submit application
- Consult with OSPF as needed
- OSPF will provide course materials

Q&A AND LIVE CONSULTATION

Questions?

THANK YOU!

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