

INTRODUCTION

On average, 45% of suicide victims had contact with primary care providers within one month of suicide. . . . Only one-third of suicide decedents had contact with mental health services within the year of their death, while over 75% had contact with primary care providers.¹

Primary care staff can play an important role in suicide prevention. Primary care is often the place where patients come for most, if not all, of their health needs, including mental health concerns. This is especially true in areas with limited access to mental health services. Additionally, primary care staff are in a position to observe many of the warning signs and risk factors of suicide, but only if they know what to look for.

The one-hour training and supplemental information in the *Training Resource Guide for Suicide Prevention in Primary Care Settings* is intended to support primary care providers and staff in their efforts to identify and appropriately respond to patients who are suicidal.

This Training Resource Guide is based on two sources of information: (1) the *Suicide Prevention Toolkit for Rural Primary Care Practices*, created in collaboration by the Suicide Prevention Resource Center (SPRC) and the Western Interstate Commission for Higher Education (WICHE) and (2) a training program created by the San Diego Health and Human Services Agency and the Suicide Prevention Council.²

The Training Resource Guide includes the following:

- **Suicide Prevention in Primary Care Settings:** A one-hour suicide prevention training presentation intended for office staff and providers. The training presentation, detailed notes for the presenter, and handouts are provided on the enclosed CD.
- **Templates and tips to plan, implement, and evaluate the training, including:**
 - A letter to primary care offices introducing the training and materials
 - A flyer to promote the training
 - An evaluation to be handed out to participants at the end of the training
- **Three copies of the *Suicide Prevention Toolkit for Rural Primary Care Practices*.**

1. Luoma, J. B., Martin, C. E., & Pearson, J. L. (2002). Contact with mental health and primary care providers before suicide: A review of the evidence. *American Journal of Psychiatry*, 159(6), 909–16.

2. All of these materials can also be downloaded from the Your Voice Counts Resource Center at www.yourvoicecounts.org. Look under “Other Useful Resources.”

Tips for Planning, Implementing, and Evaluating Suicide Prevention Training in Primary Care Settings

Who should be part of the training?

Different members of a primary care team may be in a position to notice warning signs and risk factors among patients. For example, front office staff may have more information about a patient's financial issues or a pattern of canceled appointments, while medical staff may be more likely to uncover signs during patient screening, such as issues with sleeping or pain management. For this reason, it is important for as many members of a primary care office as possible be trained.

What resources are needed to implement the training?

The training is designed to require only a few resources:

- One hour of training time
- Two to three hours of preparation time for the trainers
- A small cost for printing handouts and obtaining optional additional copies of the *Suicide Prevention Toolkit for Rural Primary Care Practices* and related materials
- Cost of light refreshments if provided
- A room large enough to conduct the training, equipped with a projector for showing the presentation

What additional materials should be included with the training?

All of the materials needed to conduct the training are included in this Training Resource Guide. However, following are some additional resources and materials you may choose to obtain to supplement these materials:

- Additional copies of the *Suicide Prevention Toolkit for Rural Primary Care Practices* for participants of the training and/or for each primary care office that is trained. The toolkit is included on the enclosed CD. It can also be downloaded from <http://www.sprc.org/for-providers/primary-care-tool-kit-tools> or hard copies of the toolkit are available for \$25 through WICHE Mental Health Program. For more information, please contact Tamara Dehay at tdehay@wiche.edu (preferred option) or 303-541-0311.
- State and local data. The training presentation includes two optional slides for state and local level data on deaths, hospitalizations, and emergency room visits for self-inflicted injuries. If the presenter chooses to use one or both of these slides, the data can be obtained from the California

Department of Public Health's EpiCenter website (<http://epicenter.cdph.ca.gov/>). Note that the most current data posted on EpiCenter is usually about two years older than the current calendar year. Another option for obtaining more current local data is to reach out to your county coroner/medical examiner or public health officer.

- Outreach materials, such as tent cards or brochures, from your nearest suicide prevention hotline crisis center that can be distributed at the training. To identify your nearest crisis center, go to the following:
 - Your county's page in the Resources section of www.suicideispreventable.org
 - Suicide Prevention Lifeline website: <http://www.suicidepreventionlifeline.org/getinvolved/locator.aspx>
 - MY3 Suicide Prevention mobile application information sheet, page 2: http://www.my3app.org/wp-content/uploads/2013/11/My3_Guide_C1.pdf
- Information about local resources, such as suicide survivor support programs, substance abuse programs, and mental health warm lines so that primary care providers can choose to refer patients as needed. There is a slide near the end of the training presentation suggesting that the primary care office have available information. You may be able to assist in providing specific local contact information for this slide.

Who will give the training?

Ideally, the training will be conducted by an individual with experience as a trainer as well as expertise in suicide prevention and/or familiarity with the primary care setting. The Training Resource Guide contains enough information so that an individual with either background can familiarize themselves with the contents and conduct the training.

To find a suicide prevention organization in your county or to identify ASIST, safeTALK, and QPR trainers, visit the Reach Out page at www.suicideispreventable.org. Local organizations are listed under each county, and information about training resources is included in the California Statewide and National Resources section.

You may have individuals on your staff who would be good trainers, or you may want to reach out to different community organizations to identify a trainer. Some suggestions include:

- Local suicide prevention organizations or programs, such as a chapter of the American Foundation for Suicide Prevention, Mental Health America, or Yellow Ribbon chapter
- An individual trained in ASIST (Applied Suicide Intervention Skills Training)
- Your nearest suicide prevention crisis hotline

Scheduling the presentation

We recommend that you offer the training during lunch breaks or integrate it into regular staff meetings, keeping the training at no more than one hour in length. Providing lunch and refreshments will go a long way in encouraging participation! You may need to conduct the training more than once to reach all staff.

Evaluation

Measuring effectiveness is a key component of any training and will help the continued development of suicide prevention efforts. A brief evaluation is included for all participants to take at the conclusion of the training. This evaluation will offer immediate feedback to the presenter on how to improve for future presentations.

If you are interested in participating in a follow up evaluation for this training, the Know the Signs project staff would be happy to talk with you. Please e-mail us at KnowTheSigns@edc.org.

Additional Resources

Suicide Prevention Toolkit for Rural Primary Care Practices: Created in collaboration by the Suicide Prevention Resource Center (SPRC) and the Western Interstate Commission for Higher Education (WICHE). This toolkit offers a range of resources, including:

- Safety Planning Guide
- Crisis Support Plan
- Suicidality Treatment Tracking Log
- Assessment and Interventions with Potentially Suicidal Patients: A Pocket Guide for Primary Care Professionals
- Office Protocol Development Guide

It's Up to Us Primary Care Resources (www.MDHelpSD.org): This site, created as part of San Diego County's stigma reduction and suicide prevention campaign, offers a range of tools specifically for primary care providers and settings. On the Resources page, you'll find:

- Tips for talking with patients about their mental health concerns
- Screening and treatment tools
- Helpful fact sheets
- Referrals and resources to provide patients with the guidance they need

Know the Signs (www.suicideispreventable.org): The Know the Signs website is another educational resource:

- Know the Signs—Warning signs of suicide with examples
- Find the Words—How to have a conversation with someone you are concerned about. What to say and what **not** to say.
- Reach Out—Where to find help in your county and the state. Each county has a page with a list of local resources.

National Suicide Prevention Lifeline (<http://www.suicidepreventionlifeline.org/>): The National Suicide Prevention Lifeline is a 24-hour, toll-free, confidential suicide prevention hotline available to anyone in suicidal crisis or emotional distress. By dialing 1-800-273-TALK (8255), the call is routed to the nearest crisis center. Currently, there are 10 crisis centers throughout California that are members of the Lifeline.

It's Up to Us—Outreach to Primary Care Providers in San Diego County

The recommendations, presentation, and supplemental tools in the *Suicide Prevention in Primary Care Settings* training have all been adapted from a primary care outreach effort administered by the San Diego County Health and Human Services Agency (HHSA) as part of San Diego County's It's Up to Us stigma reduction and suicide prevention campaign. For more information visit www.MDHelpSD.org and www.up2SD.org.

Through the efforts of the San Diego County Primary Care Program, 14 federally qualified community clinics and family resource centers received the one-hour suicide prevention training, reaching 216 primary care office staff members, including 44 doctors and clinicians.

Additionally, three out of the five primary care offices that participated in the three-month post-evaluation survey stated that since the training:

- Their office has improved in routinely assessing for suicide risk in patients.
- Their office had utilized the SPRC/WICHE *Suicide Prevention Toolkit for Primary Care Settings*.

And, two out of the five primary care offices indicated that they accessed local suicide prevention resources.