



# OVERVIEW OF THE GARRETT LEE SMITH (GLS) NATIONAL OUTCOME EVALUATION AND IRB PROCESSES FOR STATE AND TRIBAL GRANTEEES

November 17, 2015

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# WEBINAR VIDEO AND HANDOUTS

- Today's Webinar is being recorded
- The slides were e-mailed prior to the webinar
  - If you did not receive the message, check your spam e-mail folder.
- The video will be made available on the Suicide Prevention Resource Center website and the Suicide Prevention Data Center (SPDC)

# NEED ASSISTANCE?

- For technical support
  - Contact us via the Questions pane
  - E-mail [William.Moore@icfi.com](mailto:William.Moore@icfi.com)



# ON TODAY'S AGENDA

- GLS National Outcomes Evaluation
- Prior Evaluation Findings
- Evaluation Design
- Data Collection for the National Outcomes Evaluation
- Institutional Review Board (IRB) Processes
- Suicide Prevention Data Center (SPDC)
- Evaluation Training and Technical Assistance

# ICF AND THE NATIONAL OUTCOMES EVALUATION

- ICF has conducted the National Suicide Prevention Evaluation since 2005
- ICF has worked with over 200 Campus grantees and over 190 State/Tribal grantees
- ICF houses the largest repository of youth suicide prevention data in the United States

# WHY IS THE EVALUATION IMPORTANT ?

## The National Outcomes Evaluation can contribute to:

- Program improvement
- Local evaluation
- Sustainability
- The overall evidence base for suicide prevention programming
- Impact assessments of GLS program activities

### **SAMHSA Evaluation Goal**

“The goal of the GLS Youth Suicide Prevention programs and the NSPL is the reduction of suicide and suicide attempts across America. In order to accomplish this critical, lifesaving work, it is essential that the effectiveness of these programs be evaluated on an ongoing basis, with implementation of suicide prevention programs continually informed by evaluation results”

# GLS SUICIDE PREVENTION PRIOR EVALUATION FINDINGS



# PRIOR EVALUATION FINDINGS

## What types of prevention strategies are grantees reporting?



**57**  
Tribal  
grantees

**97**  
State  
grantees



# PERCENTAGES OF STATE, TRIBAL AND CAMPUS GRANTEES WHO HAVE IDENTIFIED OUTREACH AND AWARENESS STRATEGIES FOCUSING ON EACH PRIORITY POPULATION

69%



Veterans,  
Active Military,  
and Military  
Families

69%



Lesbian, Gay,  
Bisexual,  
and  
Transgender

51%



American  
Indian and  
Alaskan  
Natives

41%



Hispanic  
and  
Latino

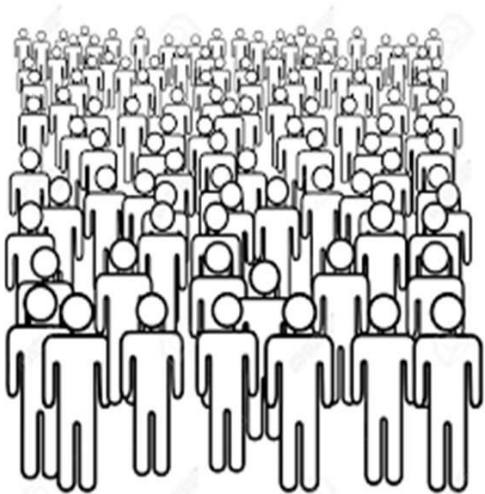
32%



Transition-  
Aged Youth

Source: Prevention Strategies Inventory, October 2008–July 2015; State/Tribal Cohorts 4–9 and Campus Cohorts 3–8 (n = 161).

# PRIOR EVALUATION FINDINGS



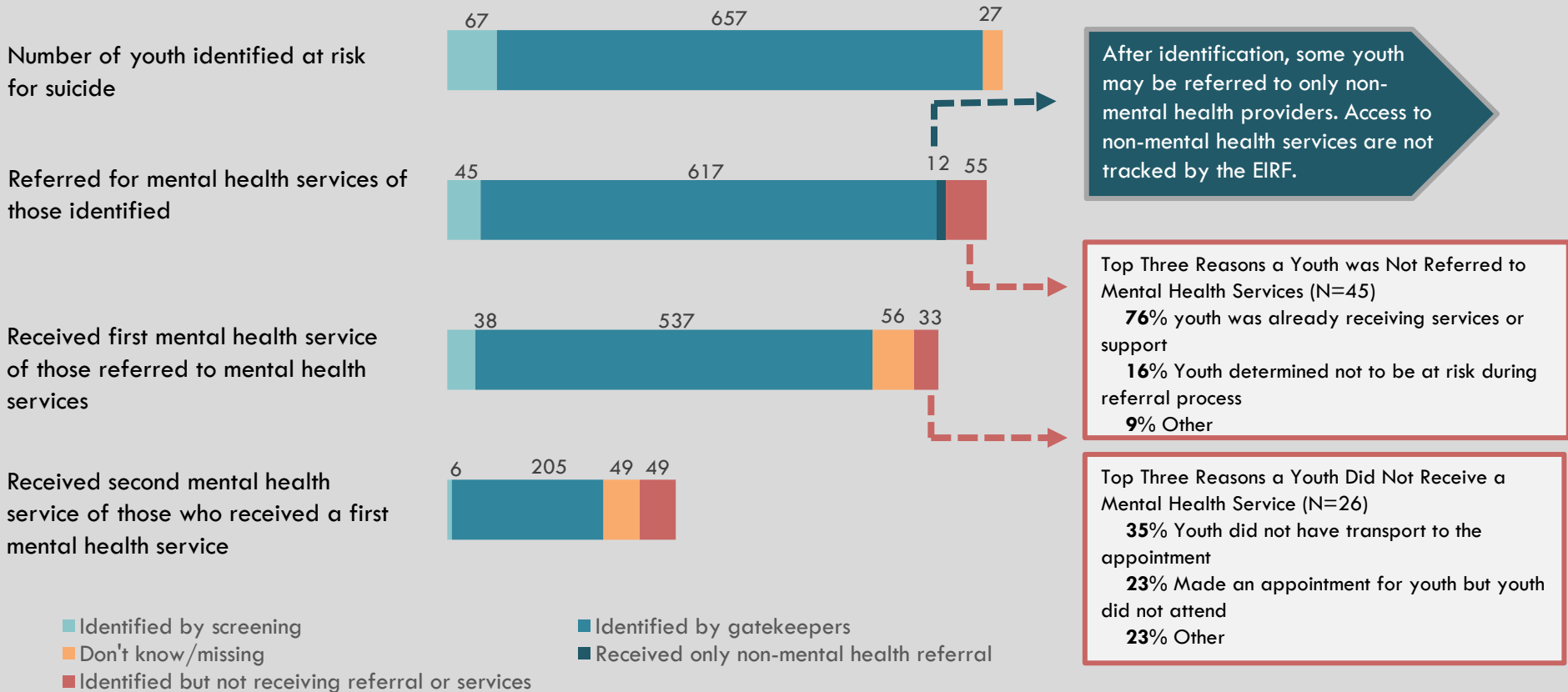
As of August 2015  
Campus, State, and  
Tribal grantees have  
trained **879,566** people  
and implemented **29,457**  
training activities as part  
of their GLS Suicide  
Prevention Programs.



Source: Training Activity Summary Page, October 2006–July 2015; State/Tribal Cohorts 1–9 and Campus Cohorts 1–8.

# ACCESS TO SERVICES FOR YOUTH IDENTIFIED AND REFERRED TO MENTAL HEALTH SERVICES

*“The programmatic approach of **Zero Suicide** is based on the realization that suicidal individuals often fall through multiple cracks in a fragmented and sometimes distracted health care system, and on the premise that a systematic approach to quality improvement is necessary”*



- Early Identification, Referral, and Follow-up Individual Forms (EIRF) have been collected for **751** total youth in Cohort 8
- For all identifications made by Cohort 8 grantees, 91% are referred for MH services; of those referred, 95% receive a first mental health service within three months of the date of identification

Data collected through March 2015; Data Source: Early Identification, Referral and Follow-up – Individual Form(EIRF)

# Garrett Lee Smith Suicide Prevention Program

## The Impact of GLS Programs on Suicide Mortality



Is there a difference in suicide mortality rates among population aged 10-24 as a result of the implementation of GLS trainings?

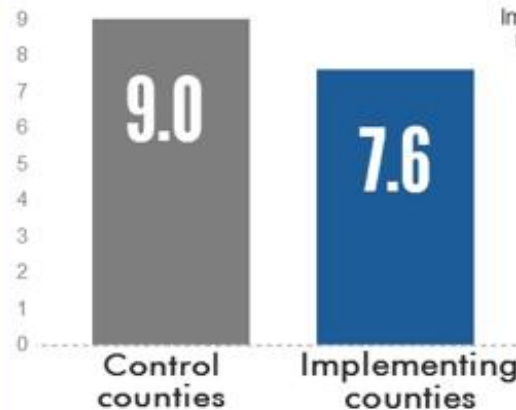
Estimated youth 10-24 years suicide mortality rates (per 100,000) the year following training implementation

Assessment of suicide rates in counties:

**466**  
**implementing**  
GLS trainings  
between 2006 -  
2009

vs.

**1,161**  
**not implementing**  
GLS trainings that  
shared key  
characteristics



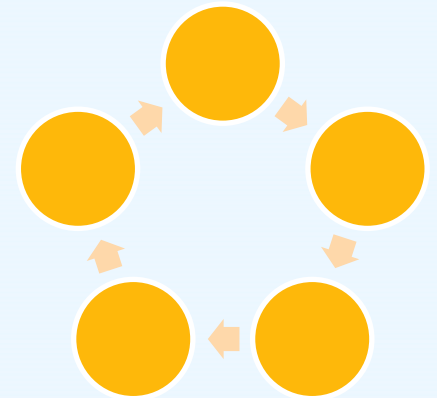
Implementing counties reflect the efforts of:

**46**  
State  
grantees

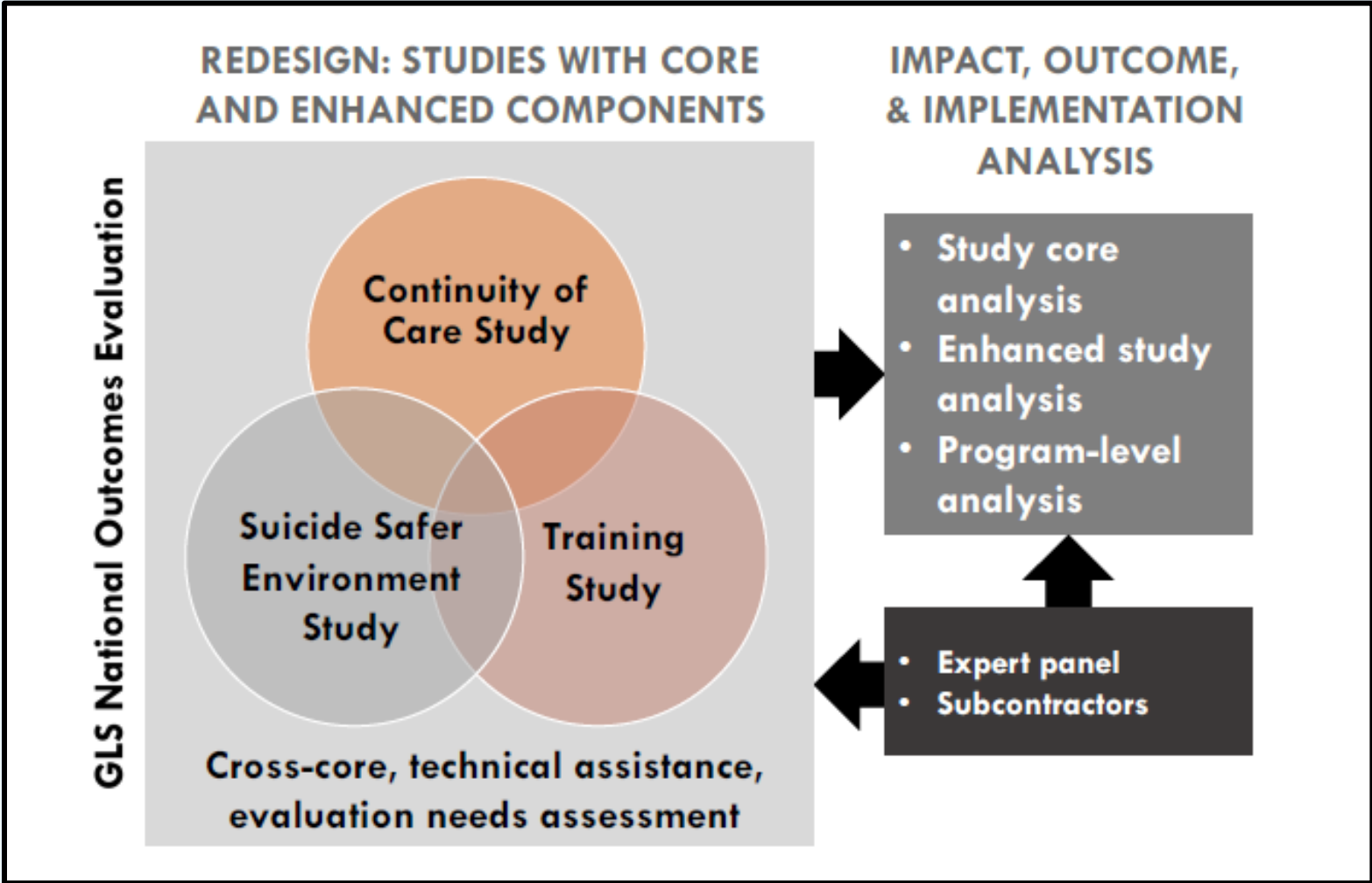
**12**  
Tribal  
grantees

The implementing counties include more than 4,000 training events in which above 100,000 trainees participated. On average, 140 gatekeepers were trained per county per year.

# GLS SUICIDE PREVENTION NATIONAL OUTCOMES EVALUATION DESIGN



# NOE DESIGN OVERVIEW



# EVALUATION QUESTIONS

Evaluation Questions	Study
<b>EQ 1:</b> Are certain training approaches effective in building capacity to increase youth identification (when compared with more basic trainings)?	Training Study
<b>EQ 2:</b> Are GLS prevention activities effective in developing continuity of care from identification, to referral of youth at risk for suicide, to the provision of needed services?	Continuity of Care Study
<b>EQ 3:</b> To what extent are grantees and associated providers implementing suicide safer environment/Zero Suicide frameworks? Does this framework implementation lead to decreases in suicide attempts and completions?	Suicide Safer Environment Study

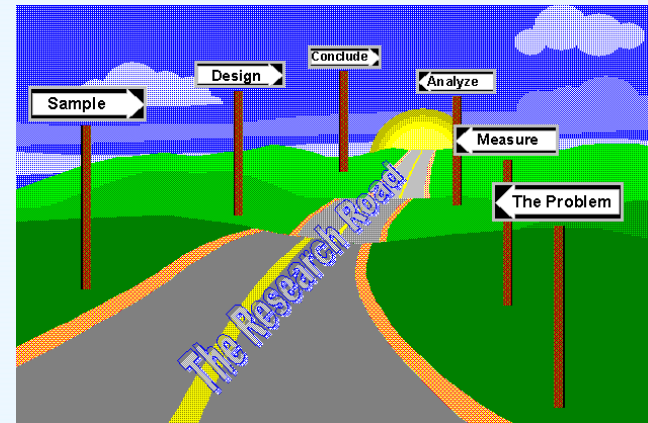


# QUESTIONS?





# DATA COLLECTION FOR THE NATIONAL OUTCOMES EVALUATION





# **PREVENTION STRATEGIES INVENTORY**

# PREVENTION STRATEGIES INVENTORY (PSI)

## Purpose

- Inventory of all prevention strategies and products that are a part of grantee GLS funded programs
- Expenditures: Total amount of GLS funds (including in-kind) expended to date, and the percent of funds expended to date by strategy

# PREVENTION STRATEGIES INVENTORY (PSI)



# PREVENTION STRATEGIES INVENTORY (PSI)

- **Strategies Budget Expenditure**
  - Direct costs that you can map to each category
  - Aim to account for 75%-80% of your expenditures

## Prevention Strategies Inventory

### Budget

How much of your GLS budget (including any matching funds) have you spent to date? Specify dollar amount:

\$

Please estimate the percentage of your total budget expended to date on the following prevention strategies.

### 1. Outreach and Awareness

1.1. Public Awareness Campaigns

1.2. Outreach and Awareness Activities/Events

1.3. Outreach and Awareness Products

<input type="text"/>	%
<input type="text"/>	%
<input type="text"/>	%
<input type="text"/>	%

### 2. Gatekeeper Training

2.2. School-Based Peer Gatekeeper Training

2.3. Community Adult Gatekeeper Training

<input type="text"/>	%
<input type="text"/>	%
<input type="text"/>	%

# PREVENTION STRATEGIES INVENTORY (PSI)

<b>Who is responsible for data collection for the PSI?</b>	Grantee Program Staff
<b>How is the PSI administered/entered?</b>	Web-based form entered into SPDC
<b>When will the PSI be administered?</b>	Once per quarter, throughout the grant period
<b>When will the PSI begin?</b>	January 2015



# TRAINING INSTRUMENTS

# TRAINING ACTIVITY SUMMARY PAGE (TASP)

## Purpose

- Gathers aggregate training information for training activities implemented
- Collects trainee role, setting, intended outcome and booster training information



# TRAINING ACTIVITY SUMMARY PAGE (TASP)

<b>Who is responsible for TASP data collection/entry?</b>	Grantee Program Staff
<b>How is the TASP administered/entered?</b>	Information submitted via the SPDC using web-based form or excel spreadsheet upload
<b>When is the TASP administered?</b>	Within 2 weeks of training activity, ongoing throughout the grant period
<b>When will the TASP begin?</b>	As soon as training activities begin

# TRAINING UTILIZATION AND PRESERVATION SURVEY (TUP-S)

## Purpose

- Examines use and retention of participants' knowledge, skills, and/or techniques learned
- Measures gatekeeper behaviors, self-efficacy, awareness, education efforts, suicide identification behavior
- Collects information about subsequent referrals and/or supports provided by the trainee, information about services accessed by the at-risk individual
- Gather information about use and retention of participants' knowledge, skills, and/or techniques learned through the training 3- and 6-months after the activity

# TRAINING UTILIZATION AND PRESERVATION SURVEY (TUP-S)

<b>Who is responsible for collecting the TUP-S consent to contact forms?</b>	<ul style="list-style-type: none"><li>• 3-month: Grantee Program Staff and/training facilitators – distribute forms to trainees and gather and submit them to ICF within 2 weeks of a training</li><li>• 6-month: ICF Interviewers obtain consent to contact at the conclusion of 3-month survey via phone</li></ul>
<b>Who are the TUP-S respondents?</b>	<ul style="list-style-type: none"><li>• Random sample of trainees who consent to be contacted at 3- and 6- months</li></ul>
<b>How is the TUP-S administered?</b>	<ul style="list-style-type: none"><li>• Computer-Assisted Telephone Interview (CATI) implemented by ICF with trainees</li></ul>
<b>When will TUP-S be administered?</b>	<ul style="list-style-type: none"><li>• At 3- and 6- months following a training event; throughout the grant period</li></ul>
<b>Do trainees receive an incentive?</b>	<ul style="list-style-type: none"><li>• Yes, a \$10 money order or Amazon gift code</li></ul>
<b>When will the TUP-S begin?</b>	<ul style="list-style-type: none"><li>• As soon as training activities begin</li></ul>



# **EARLY IDENTIFICATION, REFERRAL & FOLLOW-UP**



# EARLY IDENTIFICATION, REFERRAL AND FOLLOW-UP FORM (EIRF)

## Purpose

- Guided by best practice
- Record program activities related to the identification of youth at risk for suicide, referral for services and linkages to those services



# EARLY IDENTIFICATION, REFERRAL, AND FOLLOW-UP INDIVIDUAL (EIRF-I) FORM

- Grantees track and monitor at risk youth identified by trained gatekeepers or screenings
- Individual-level de-identified information about:
  - Source and setting of identification
  - Mental health and non-mental health referrals
  - Mental health services



# EARLY IDENTIFICATION, REFERRAL, AND FOLLOW-UP SCREENING (EIRF-S) FORM

- Monitor rates of identification from suicide prevention screenings
- Aggregate-level information
  - All youth screened
  - Youth with positive result
- For grantees who implement screening (only)

# EIRF-I and EIRF-S

**Who is responsible for the EIRF data collection/entry?**

- Grantee program and/or agency staff, providers, evaluator

**Who are the EIRF respondents?**

- Data abstraction
- No primary data collection

**How is the EIRF administered?**

- Information submitted via the SPDC using web-based form or excel spreadsheet upload.
- Data collection plan developed on site-by-site basis—tracking forms or existing data sources will most likely be used

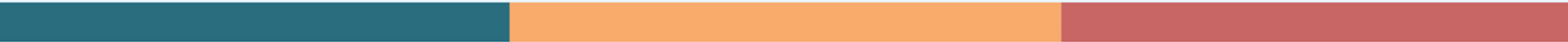
**When will EIRF be administered?**

- Can be entered once per quarter or on an ongoing basis
- Ongoing throughout the grant period

**When will the EIRF begin?**

- Once tracking mechanisms are in place



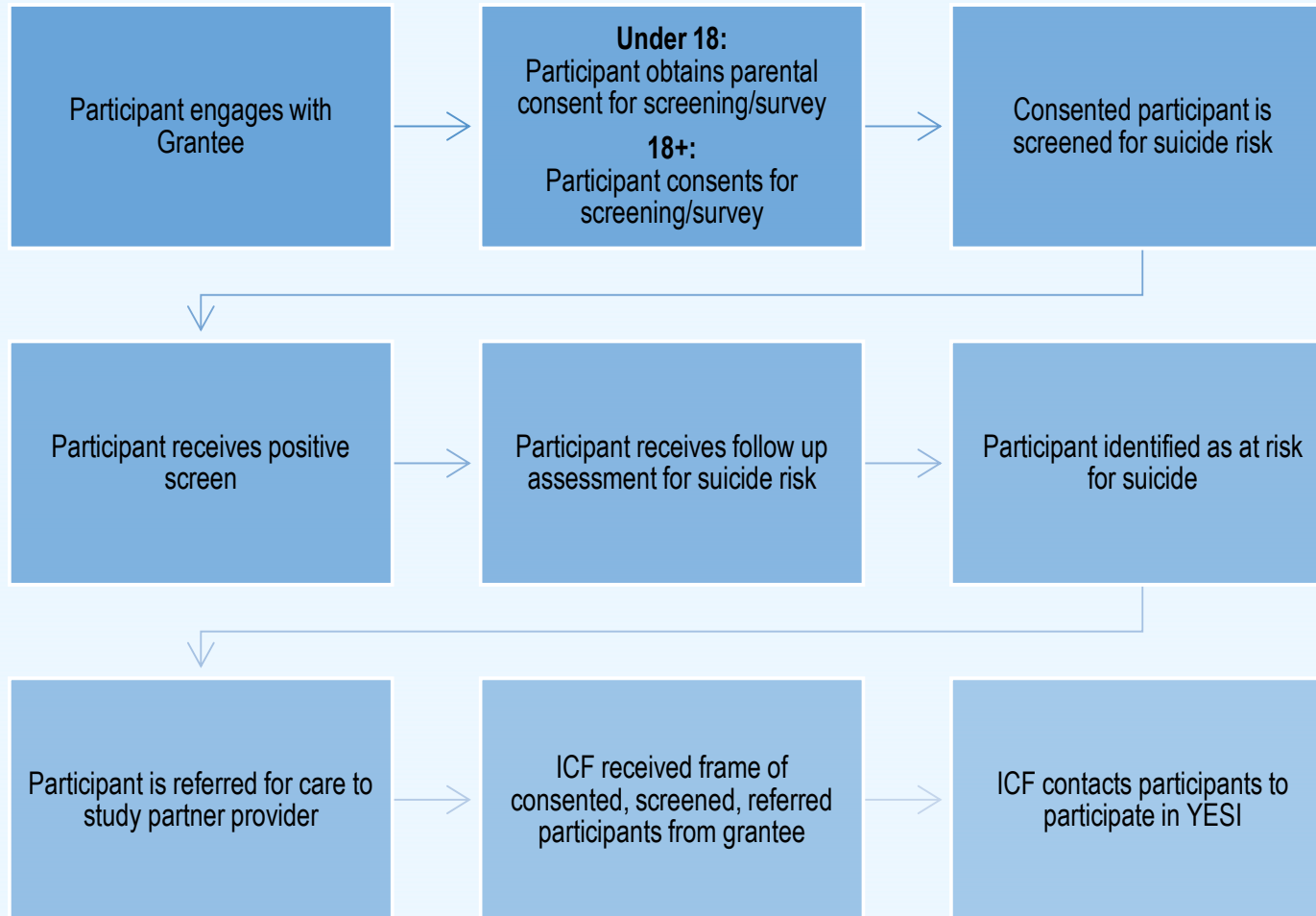


# Youth Exploratory Services Interview

# YOUTH EXPLORATORY SERVICES INTERVIEW (YESI)

- Newly developed activity to learn about the service experience of youth who are identified at risk and receive a referral to mental health provider
  - Demographics
  - Setting and source of early identification
  - Status of treatment
  - Identification experience
  - Service experience
- State- Youth that were identified through a screening activity and referred to mental health provider
- Tribal- Youth that were identified through screening activity and referred to a traditional healer

# YESI INCLUSION PATHWAY



# Youth Exploratory Services Interview (YESI)

**Who is responsible for data collection for the YESI?**

Grantee program staff will obtain consent from parents and youth who have been referred for services and send to ICF. ICF will follow-up with youth within 3 months of referral to conduct interview

**Who are the YESI respondents?**

Youth identified at risk that were referred for services including those who followed up on referral and those who did not

**How is the YESI administered/entered?**

Phone interview completed by NOE team

**When will the YESI be administered?**

Beginning Fall 2016

**Will participants receive an incentive?**

Yes, a \$20 money order



**Behavioral Health Provider Survey (BHPS)  
Medicaid/Claims data**



# SUICIDE SAFER ENVIRONMENT STUDY: DATA SOURCES

- Behavioral Health Provider Survey (BHPS)
- Medicaid/Claims data

# BEHAVIORAL HEALTH PROVIDER SURVEY (BHPS)

- Currently under OMB review
- Additional information about the BHPS will be sent to all grantees following the webinar

# BEHAVIORAL HEALTH PROVIDER SURVEY (BHPS)

- Gathers a central set of **provider characteristics of behavioral health providers**
- Collects information about referrals for at-risk youth and the extent of implementation of Goals 8 and 9 of the NSSP



# BEHAVIORAL HEALTH PROVIDER SURVEY (BHPS)

- **BASELINE**—administered to between 1 and 10 administrators from the behavioral health provider organization
- **FOLLOW-UP**—administered to the behavioral health provider annually for the remainder of the grant period

# BEHAVIORAL HEALTH PROVIDER SURVEY (BHPS)

**Who is responsible for data collection for the BHPS?**

ICF is responsible for data collection

**What are the grantee responsibilities related to the BHPS?**

Grantee staff will provide the contact information for the primary partner organization

**How is the BHPS administered/entered?**

A partner organization partner will be invited to participate in a web-based survey; in addition, the primary respondent will recommend up to 9 potential “on the ground” employees to complete the survey

**When will the BHPS be administered?**

Annually, during the late spring/early summer

**When will the BHPS begin?**

Pending OMB approval

# MEDICAID/CLAIMS DATA

Review data related to:

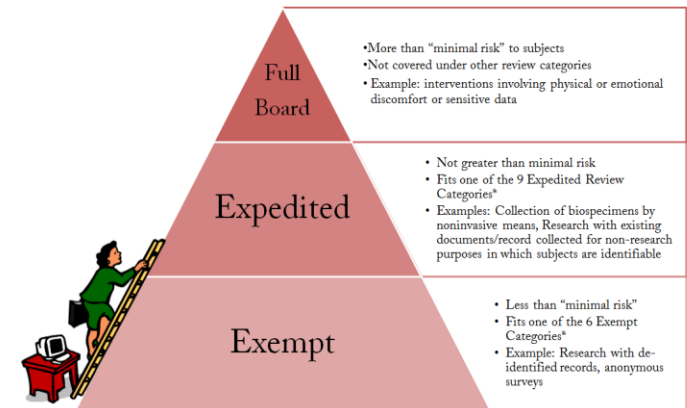
- Service utilization
- Diagnosis
- Deaths by suicide
- Cost of services received

# QUESTIONS?



# INSTITUTIONAL REVIEW BOARD (IRB) PROCESSES

## Levels of IRB Review



\*Defined by federal regulation (45 CFR 46)

# ROLE OF THE IRB

Protect the rights and welfare of individual research subjects and ensure:

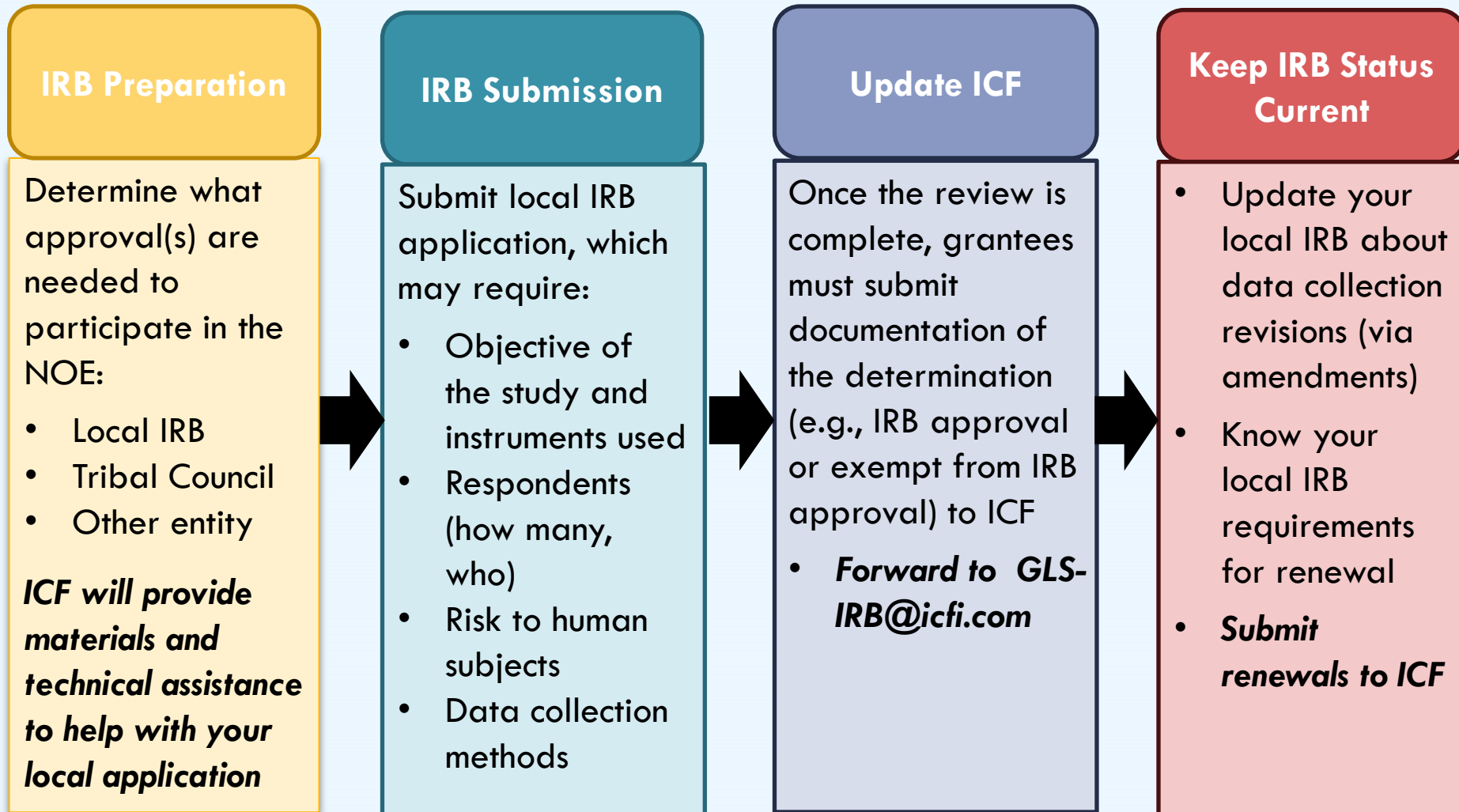
- Risk to subjects are minimized and reasonable in relation to anticipated benefits
- Selection of subjects is fair
- Informed consent is appropriately documented
- When appropriate, the research plan makes provisions for monitoring data collection
- Privacy and confidentiality of research subjects is appropriately protected



# ROLES AND RESPONSIBILITIES

- **ICF's IRB reviews the National Outcomes Evaluation protocol and provides approval for ICF to conduct the State/Tribal and Campus evaluations**
- **Grantee IRB (or appropriate entity) reviews relevant National Outcomes Evaluation data collection activities before grantee can participate/submit data and either**
  - Provides IRB approval
  - Determines monitoring is not required by the grantee IRB (i.e., determines data collection is exempt from IRB approval)

# IRB PROCESSES





# NEXT STEPS

- Revised and new instruments are under review at OMB
- Submit current instrument versions for approval **NOW**
- Submit an amendment for revised and new instruments **AFTER** OMB clearance is obtained

Now	After OMB Approval
<ul style="list-style-type: none"><li>▪ PSI</li><li>▪ TASP</li><li>▪ EIRF-I</li><li>▪ EIRF-S</li><li>▪ TUP-S</li></ul>	<ul style="list-style-type: none"><li>▪ Updated PSI</li><li>▪ Updated TASP</li><li>▪ Updated EIRF-I</li><li>▪ Updated EIRF-S</li><li>▪ Updated TUP-S</li><li>▪ BHPS</li><li>▪ YESI</li></ul>

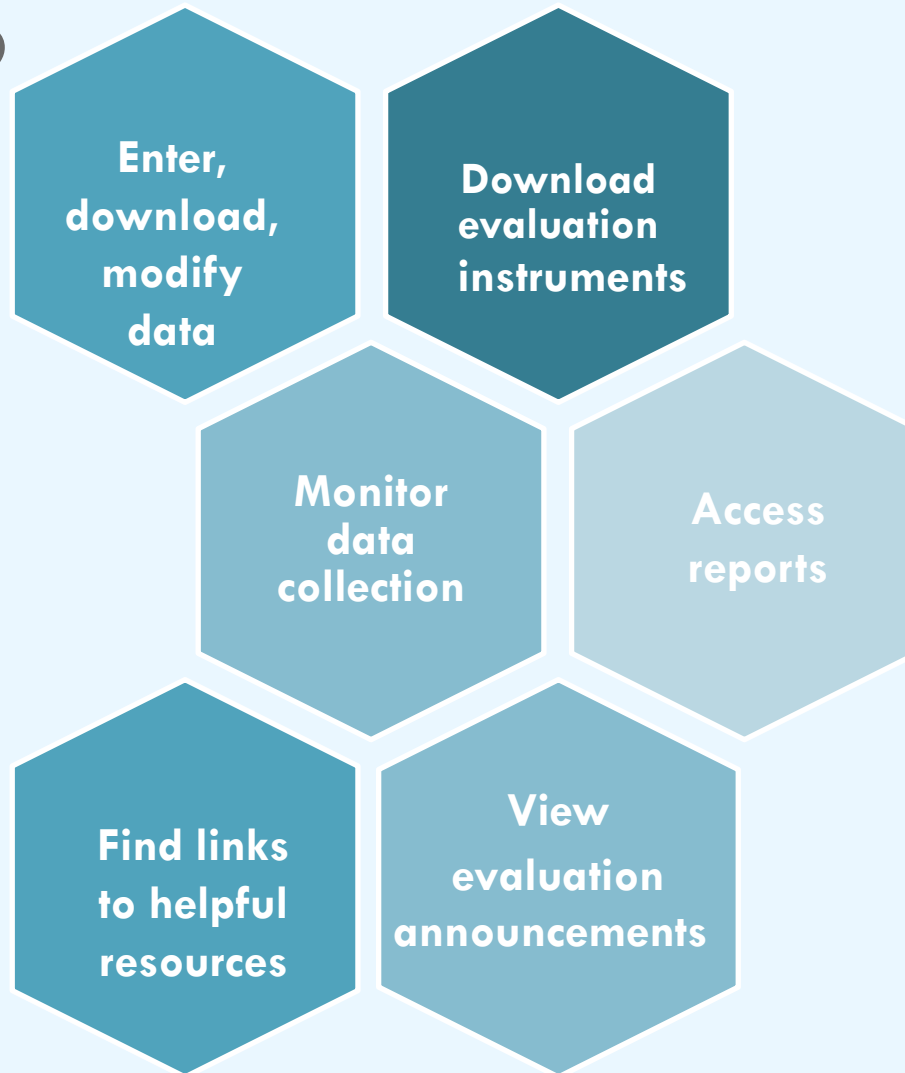
# QUESTIONS?





# **SUICIDE PREVENTION DATA CENTER (SPDC)**

# WHAT CAN GRANTEES DO ON THE SPDC?



# HOW DO I ACCESS THE SPDC?

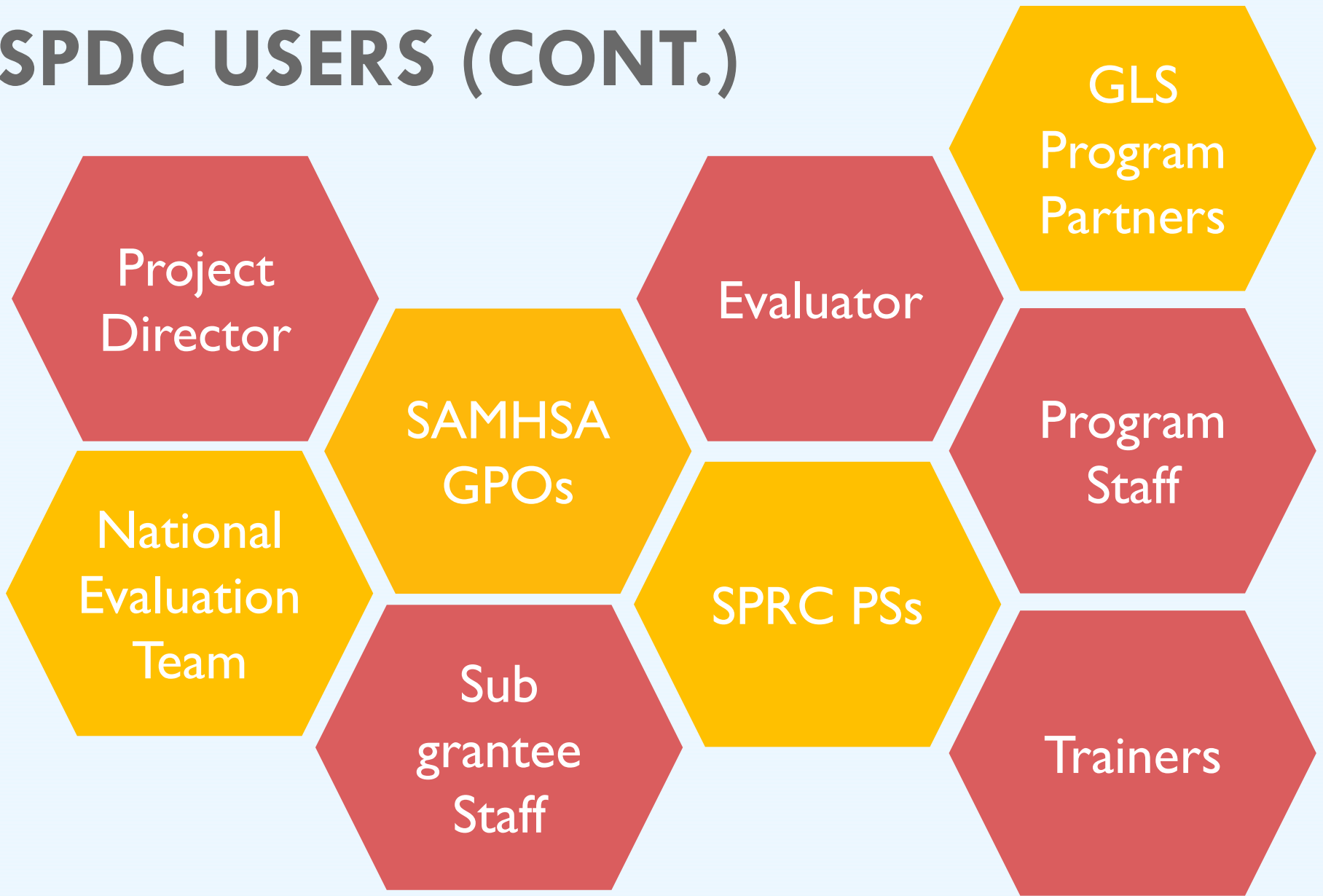
Grantee SPDC users  
provided with username  
and password



# SPDC USERS

- No public access - Access requires a user name and password
- Who are appropriate users of the SPDC in your community?
- Are there any concerns about who to include/exclude?
- SPDC has various levels of security for users

# SPDC USERS (CONT.)



# SECURITY AND USER LEVELS

**Security level for each individual should be determined by the primary functions they serve**

## **User Security Levels**

- Site Administrator—highest level of access
- Site User—medium level of access
- Contact User—lowest level of access

## **No identifying information collected**

- No information reported with <10 cases

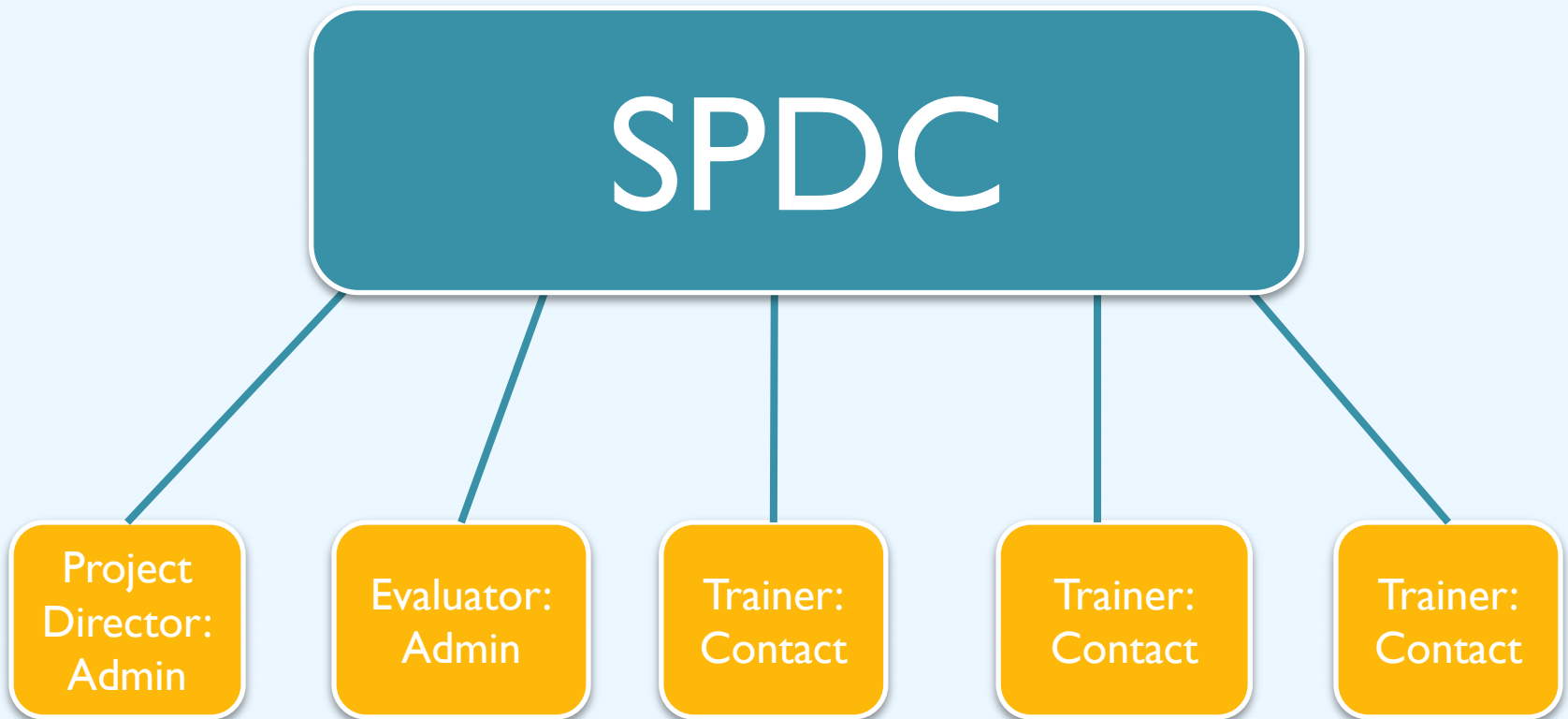


# ASSIGNING USER LEVELS

- ICF will create one site administrator account for each grantee
- Site admins register new users
- Site administrators can also...
  - Designate users
  - Assign user security level (e.g., site user or contact user)
  - Provide username and password
  - Edit or delete users

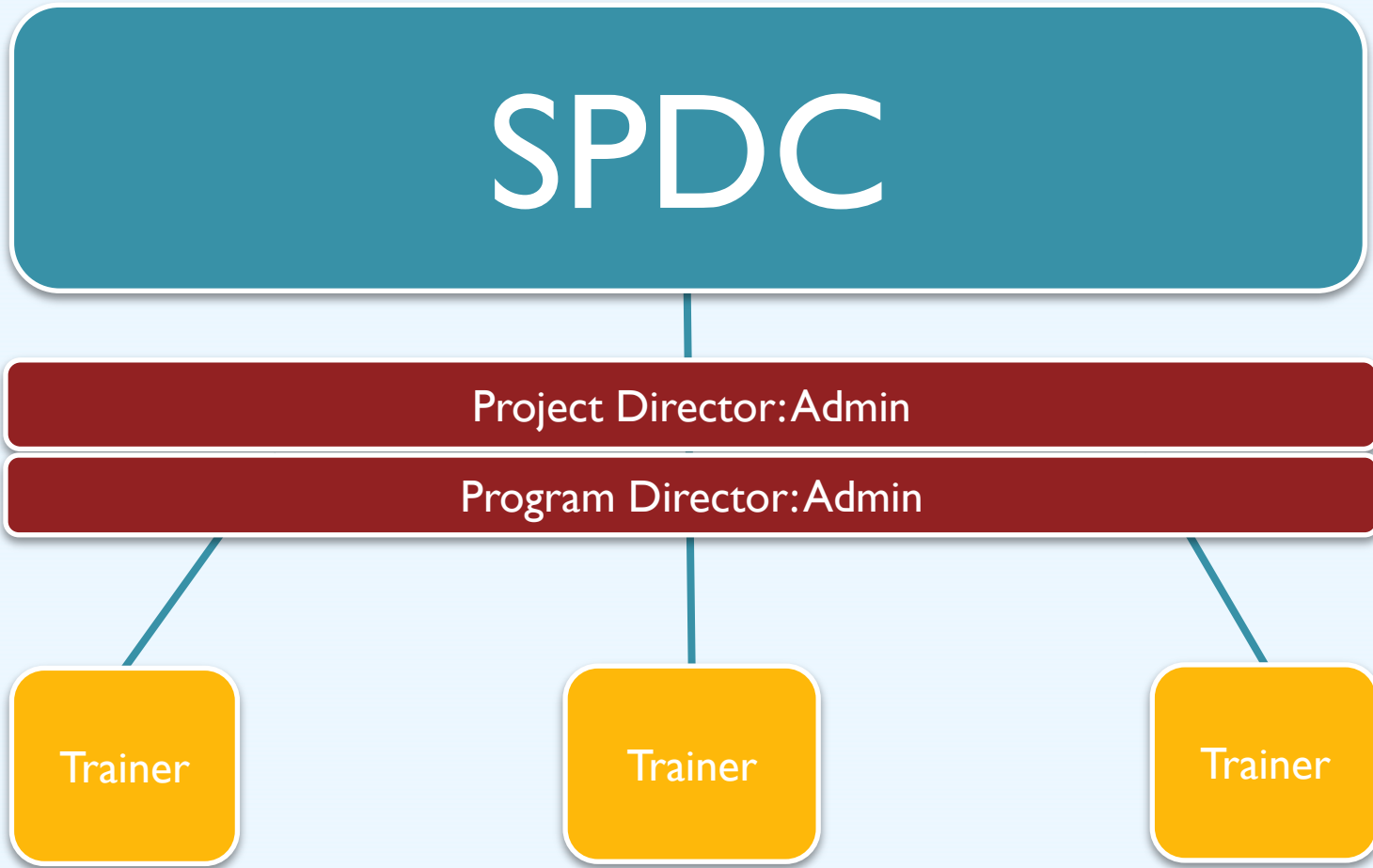
# ASSIGNING USER LEVELS

Working with Partners – Direct Entry



# ASSIGNING USER LEVELS

Working with Partners – Admin Entry



# LOG IN SCREEN

GARRETT LEE SMITH  
MEMORIAL SUICIDE  
PREVENTION EVALUATION



Data Reports

Data Descriptions

Request Data

USERNAME

PASSWORD

LOGIN

FORGOT USERNAME

FORGOT PASSWORD

## Welcome to the SPDC

The Suicide Prevention Data Center (SPDC) is an online data collection and management system to support Garrett Lee Smith (GLS) Youth Suicide Prevention and Early Intervention Program grantees in implementing the cross-site evaluation as required by the Garrett Lee Smith Memorial Act (GLSMA). The SPDC is a mechanism for communicating evaluation activities, managing and storing data, and disseminating evaluation findings. The SPDC provides necessary resources to grantees and supports them in implementing the cross-site evaluation. Additionally, the SPDC is a resource for other GLS project stakeholders.

## Background about the GLS program

The GLSMA, signed into law in October 2004, was the first legislation to provide funding specifically for youth suicide prevention programs. Under this legislation, funding was set aside for campuses, states, tribes and US territories to develop, evaluate, and improve early intervention and suicide prevention programs. This funding appropriation authorizes the GLS Suicide Prevention Program, which is administered by SAMHSA's Center for Mental Health Services (CMHS). There are currently 104 GLS grantees funded: 59 campus grantees and 45 state and tribal grantees.

On this site you can:

- create customizable [data summaries](#),
- review [descriptions of evaluation data](#) available by request,
- and request access to the [raw data](#).

"Because of the tragic prevalence of suicidal ideation in American Indian and Alaska Native (AI/AN) communities, SAMHSA awarded a large proportion of GLS grants to AI/AN communities. Many Tribal communities have a history of distrust resulting from the use of their community data to gain media attention and at times grant funding for programs that do not serve their community members. Often community members become opposed to all data gathering activities based on their experiences with how the data was misused in the past. Even when re-assured that funding is being used in certain ways, people may distrust the intent based on past and current experiences in the community. Please use these data carefully and with respect." ~Adapted from Caroline Cruz, EagleCruz Consulting Â© by Jannae Parrot, author of the Oregon's Tribal Needs Assessment Workbook, prepared for the State of Oregon, 2012, with minor changes by the Life is Sacred Native Youth Suicide Prevention Program Evaluation Team.

WWW.SUICIDEPREVENTION-DATACENTER.COM

# HOME SCREEN

GARRETT LEE SMITH  
MEMORIAL SUICIDE  
PREVENTION EVALUATION



Home Instruments Response Monitoring Data Download Reports Administration Evaluation Resources LOG OUT CHANGE PASSWORD

## ICF Demo Grantee - State/Tribal Cohort 8 Site ID: 9984

<b>Early, Identification, Referral, and Follow Up (EIRF)</b>	Date of Last EIRF-I Submission: 02/09/2015 Date of Last EIRF-S Submission: -	Total Number of Individual Forms submitted: 1 Total Number of Screening Forms submitted: 0
<b>Training Activities (TASP and TUPS)</b>	Date of Last TASP submission: 01/21/2015	Total Number submitted: 1 Total Number of TUPS Consents received:
<b>Prevention Strategies Inventory (PSI)</b>	Current PSI Status: Data	Total Number of strategies: 3

### ANNOUNCEMENTS

The PSI is OPEN Oct. 13 through Oct. 30th

### MOST RECENT REPORTS

- [Cohort 8 Aggregate S/T GSR 3Q - 2015](#)
- [PSI Data Sharing Report - State and Tribal Sites](#)
- [PSI Data Sharing Report - Campus Sites](#)
- [Grantee Summary Report - Site \(Q2\)](#)
- [Cohort 8 State/Tribal Local Evaluation Spreadsheet](#)

# NAVIGATION

GARRETT LEE SMITH  
MEMORIAL SUICIDE  
PREVENTION EVALUATION



Home	Instruments	Response Monitoring	Data Download	Reports	Administration	Evaluation Resources	LOG OUT CHANGE PASSWORD
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ICF Demo *Tribal Cohort 8 Site ID: 9984*

EIRF-I/EIRF-S		
PSI		
Early, Identification and Follow Up (EIRF)	Date of Last EIRF-I Submission: 02/09/2015 Date of Last EIRF-S Submission: -	Total Number of Individual Forms submitted: 1 Total Number of Screening Forms submitted: 0
TASP/TUPS	Date of Last TASP submission: 01/21/2015	Total Number submitted: 1 Total Number of TUPS Consents received:
RNS	Current PSI Status: Data	Total Number of strategies: 3

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<a href="#">PSI Data Sharing Report - State and Tribal Sites</a>	<a href="#">Cohort 8 State/Tribal Local Evaluation Spreadsheet</a>

SPDC Problems OR Questions  
Hope.Sommerfeldt@icfi.com  
OR  
Spdc-help@icfi.com





# EVALUATION TRAINING AND TECHNICAL ASSISTANCE





# EVALUATION TRAINING AND TECHNICAL ASSISTANCE

Technical Assistance Liaison (TAL)

- Support data collection and submission
- Send monthly email to grantees
- Overall NOE guidance

Data Collection Liaison (DCL)

- Support data collection and submission
- NOE instrument specific guidance

Evaluation and Reporting

# TECHNICAL ASSISTANCE LIAISON CONTACTS

*We're here to help!*

State TAL	Tribal TALs
<p><b>Tiffany Fambro</b></p> <p>404-592-2242 (<i>Eastern Time Zone</i>)</p> <p><a href="mailto:Tiffany.Fambro@icfi.com">Tiffany.Fambro@icfi.com</a></p>	<p><b>Gretchen Clarke</b></p> <p>907-747-7124 (<i>Alaska Time Zone</i>)</p> <p><a href="mailto:Gretchen.Clarke@icfi.com">Gretchen.Clarke@icfi.com</a></p>
	<p><b>Candace Fleming</b></p> <p>303-724-1471 (<i>Mtn Time Zone</i>)</p> <p><a href="mailto:Candace.Fleming@ucdenver.edu">Candace.Fleming@ucdenver.edu</a></p>

# DATA COLLECTION LIAISON CONTACTS

NOE Instrument	Data Collection Liaisons (DCLs)
<b>Prevention Strategies Inventory (PSI)</b>	<b>Erin Maher</b> <a href="mailto:glc-psi@icfi.com">glc-psi@icfi.com</a> 617-250-4289 ( <i>Eastern Time Zone</i> )
<b>Early Identification, Referral, and Follow-up (EIRF)</b>	<b>Jane Carmona</b> <a href="mailto:Gls-eirf@icfi.com">Gls-eirf@icfi.com</a> 646-695-8146 ( <i>Eastern Time Zone</i> )
<b>Training Activity Summary Page (TASP) and Training Utilization and Preservation Survey (TUP-s)</b>	<b>Bhuvana Sukumar</b> <a href="mailto:Gls-tasp@icfi.com">Gls-tasp@icfi.com</a> and <a href="mailto:Gls-tups@icfi.com">Gls-tups@icfi.com</a> 404-592-2122 ( <i>Eastern Time Zone</i> )

# GRANTEE ROLES AND RESPONSIBILITIES

- ✓ Obtain appropriate local approvals including IRB approval
- ✓ Participate in training and technical assistance activities
- ✓ Participate in data collection and submission activities
- ✓ Send monthly call agenda/updates to your TAL



# MARK YOUR CALENDAR!

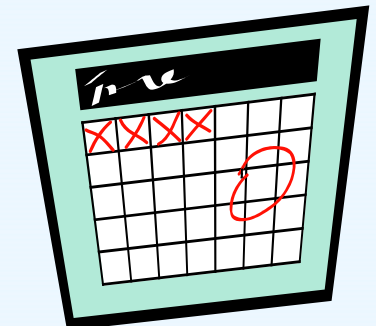
## *Upcoming Webinars*

*GLS National Outcomes  
Evaluation Data Collection  
Instruments and Data Submission  
Processes (Part 1)*

**December 9, 2015**  
**3:00-4:30pm ET**

*GLS National Outcomes Evaluation  
Data Collection Instruments and  
Data Submission Processes (Part 2)*

**January 19, 2016**  
**3:00-4:30pm ET**



# QUESTIONS?



