**PHD Youth Suicide Prevention *Caring Connections Initiative* (GLS Grant) Abstract**

Oregon Public Health Division’s (PHD) Caring Connections Youth Suicide Prevention Initiative capitalizes on a long history of successful public/private collaboration and Oregon’s dynamic health care delivery system to reduce the burden of suicide among youth ages 10-24 by implementing comprehensive suicide prevention and early identification best practices. The Initiative targets 468,809 youth aged 10-24, with special focus on at-risk youth, which includes those who live in seven Oregon counties with a higher than national rate of youth suicide, military families, youth involved in the foster care and juvenile justice systems, Native American youth, Latino youth, and sexual minority youth. PHD’s multifaceted approach for comprehensive suicide prevention and early identification includes implementation of evidence-based and best practice strategies at both the state level, and intensely at the community level. Oregon’s proposal mobilizes 28 key partners, including the community mental health programs, public health, hospitals and health centers, schools, addictions and mental health clinicians, universities, juvenile justice, veteran’s organizations, Tribes, and the Coordinated Care Organizations in seven counties in the Willamette Valley, Southern Oregon, Central Oregon, Northeastern Oregon, and the Portland area to implement the following strategies:

**Gatekeeper Training** to increase by 30% the number of individuals in youth serving organizations trained to identify and refer youth at risk by: hosting quarterly Applied Suicide Intervention Skills Trainings (ASIST) to behavioral health clinicians, and/or Question, Persuade and Refer (QPR) or Safe Talk trainings to community members annually; establishing RESPONSE in 50% of the high schools in three CMHP catchments areas; and providing Kognito *At Risk for High School Educators* and Kognito *Step In! Speak Up!* LGBTQ module training to 20,000 educators and school staff.

**Clinical Training** to increase health, mental health and substance abuse clinicians trained to assess, manage and treat youth at risk for suicide by:hosting 11 trainings in Assessing and Managing Suicide Risk (AMSR) for 550 behavioral health clinicians; implementing Kognito *At-Risk for Primary Care* training for staff at all School-Based Health Centers, and to pediatricians in three counties; and implementing Kognito *At-Risk for EDs* for Emergency Department staff in all four Portland metro health systems that treat more than 300,000 patients annually.

**Improving Continuity of Care**for youth discharged from emergency departments and inpatient psychiatric units, and for veterans and military families receiving care in the community; and improved county crisis response plans for full wrap around services.

**Comprehensive Implementation of Goals 8 & 9 of NSSP**inWashington County, a Portland metro county that has adopted the Zero Suicide approach to reduce rates of suicidal ideation, suicide attempts, and suicide deaths.

**Promotion of the National Suicide Lifeline** and **Project Evaluation** with all partners.

**Implementation Notes:**

The Caring Connections Initiative (CCI) grant project began September 30, 2014 with funding from SAMHSA’s Garrett Lee Smith (GLS) grant program for 5 years, through September 29, 2019. We will fund and work with four Cohort 1 counties for the entire 5 years: Deschutes County Health Services, Jackson County HHS, Josephine County through Options for Southern Oregon, Inc., and Washington County Mental and Public Health. Three Cohort 2 counties will be funded in years 3 through 5: Klamath County (Klamath Child & Family Treatment Center), Linn-Benton (Linn County Health Services is taking the lead), and Umatilla County Public Health. Other contract partners include PSU-Regional Research Institute for program evaluation, AOCMHP to organize trainings, and a consultant from OSU-Cascades to work with Cohort 2 counties.