

Tech Ends Suicide Together

Progress Worksheet

The purpose of the Progress Worksheet is to assist in the initial development and advancement of the *Tech Ends Suicide Together* initiative.

The worksheet reflects the Seven Core Principles of the Zero Suicide philosophy.

Each campus unit is encouraged to use the worksheet to document progress in each area that can be helpful in demonstrating progress in a particular area and opportunities for continued development.

Area I- LEAD (Institutional): Leadership should be assessed at both the institutional and unit level. At the core of the program is the establishment of a leadership group that spearheads the initiative and is representative of the entire campus community. The leadership group, or implementation team, should also include both survivors and those with lived experience.

Institutional Progress

Task	Timeline to Complete	Assigned Staff/Unit	Progress Status (complete/incomplete)	Task Progress Notes
Discussion of Zero Suicide initiative with campus administration. This should include: <ul style="list-style-type: none"> • Vice President for Student Life/Student Affairs • Dean of Students • Provost • President 				
Identify campus partners for Implementation Team (see end of document)*				
Establish Implementation Team				
Provide an initial orientation meeting to the Implementation Team. Orientation should include: <ul style="list-style-type: none"> • Overview of Zero Suicide philosophy and principles • Overview of levels of prevention/intervention • Discussion of campus messaging 				
Provide Implementation Team planning meeting. This meeting should include: <ul style="list-style-type: none"> • Review of Zero Suicide philosophy and principles • Review of levels of prevention/intervention • Evaluate each campus partner's contribution to the initiative by identifying existing and proposed programs, services, policies/practices as they align with levels of prevention/intervention 				
Create initial campus Blueprint of current and proposed programs, services, policies/practices as they align with levels of prevention/intervention.				

Task	Timeline to Complete	Assigned Staff/Unit	Progress Status (complete/incomplete)	Task Progress Notes
<p>Develop campus communication strategy. This should include:</p> <ul style="list-style-type: none"> • Development of a communication plan to the campus. • Development of necessary communications materials (e.g., stickers, buttons, website). • Development of a roll-out strategy of the initiative to the campus. 				
<p>Establish Oversight Team. This should include:</p> <ul style="list-style-type: none"> • Identify diverse representatives from the implementation team (e.g., students, faculty, staff). • Total membership should be of a manageable size for effective functioning (e.g., 20% of total implementation team membership). • Oversight Team should be led by mental health professional(s). • Membership should include survivors and/or those with lived experience with suicide. 				

(The Oversight Team serves as the executive leadership for the Tech Ends Suicide Together Initiative. Members of the team are selected to represent 4-5 units of the larger Implementation Team and serve as consultations and liaisons as needed. The Oversight Team is committed to the mission of the initiative and works to promote, encourage, and support a culture of zero suicides within their respective units.)

Area I- LEAD (Unit): Leadership is dedicated and committed to ending suicide and providing appropriate care through programs and services. There are three essential components: an identified leadership group within the unit, commitment through identification and mobilizing staff, and leadership support.

Unit Progress

Task	Timeline to Complete	Assigned Staff/Group	Progress Status (complete/incomplete)	Task Progress Notes
Component 1: Identification of Unit Leadership				
Formal identification of lead individual or group that actively serves to promote, establish, and sustain suicide prevention efforts within the unit.				
Component 2: Identifying and Mobilizing Staff				
At least 25% of members who demonstrate a commitment to suicide prevention through active involvement of current members.				
At least 50% of members who demonstrate a commitment to suicide prevention through active involvement of current members, but there are no organizational policies and procedures in place to promote on-going suicide prevention efforts.				
At least 75% of members who demonstrate a commitment to suicide prevention through active involvement of current members and our unit is developing policies and procedures to promote on-going suicide prevention efforts.				
There is a strong commitment to suicide prevention efforts as demonstrated through active involvement of all members. There are organizational policies and procedures in place to promote on-going suicide prevention efforts.				

Task	Timeline to Complete	Assigned Staff/Group	Progress Status (complete/incomplete)	Task Progress Notes
Component 3: Leadership Support				
Establish unit leadership that is committed to providing support and recognition to members for their active involvement in suicide prevention efforts.				
Establish a systematic process to provide on-going recognition and support to members for their active involvement in suicide prevention efforts.				
Establish systematic support to provide members with opportunities for professional development to further their knowledge and awareness of suicide prevention.				

Area II- TRAIN: Training is critical to providing a network of informed campus members on the philosophy of Zero Suicide and suicide prevention and intervention (i.e., the warning signs and risk factors of suicide and information on available campus services). The unit has made a total commitment of its members to engage in suicide prevention training.

Task	Timeline to Complete	Assigned Staff/Group	Progress Status (complete/incomplete)	Task Progress Notes
Identify empirically validated and campus-supported training for unit members.				
At least 30% of unit members have successfully received training on suicide prevention and intervention.				
At least 50% of unit members have successfully received training on suicide prevention and intervention.				
At least 75% of unit members have successfully received training on suicide prevention and intervention and at least one unit member has been certified to provide suicide prevention training.				
100% of unit members have successfully received training on suicide prevention and intervention.				
At least one unit member has been identified and certified to provide suicide prevention training.				
Develop plan to offer ongoing suicide prevention training.				

Area III- IDENTIFY: A network of care is established in which all campus members work to identify those at risk for suicide. This involves the development of skill sets to identify suicide risk, the knowledge of campus resources, and the ability and will to intervene appropriately.

Task	Timeline to Complete	Assigned Staff/Group	Progress Status (complete/incomplete)	Task Progress Notes
Establish a knowledge base of campus or community resources and services for persons at risk for suicide.				
Establish guidelines or procedures to identify persons at risk for suicide.				
Implement guidelines or procedures to identify persons at risk for suicide.				
Identify other campus or community resources for collaboration to enhance current guidelines and procedures for those persons at risk for suicide.				
Establish collaboration with campus or community resources to enhance current guidelines and procedures for those persons at risk for suicide.				

Area IV- ENGAGE: Establishing an effective plan for providing care to those identified at risk for suicide is crucial for each campus unit. By developing an effective plan, each unit defines their unique services and the extent of their services to adequately maintain the safety of those at risk. Effective plans also recognize unit limitations and the importance of appropriate collaboration to ensure the safety of persons at risk for suicide.

Task	Timeline to Complete	Assigned Staff/Group	Progress Status (complete/incomplete)	Task Progress Notes
Develop a plan (including provision of appropriate resources) for guidelines and procedures to engage persons at risk for suicide.				
Identify other campus or community resources for collaboration to ensure treatment and safety for those persons at risk for suicide.				
Establish collaboration with campus or community resources to ensure treatment and safety for those persons at risk for suicide.				
Implement established plan (including provision of appropriate resources) of guidelines and procedures to engage persons at risk for suicide.				

Area V- TREAT: Counseling center and other campus mental health professionals provide therapeutic interventions that are rooted in theory-based, empirically supported approaches that are specific to college student development and targeted to the remediation of suicidal behavior, the reduction of suicide risk factors and the enhancement and promotion of the protective factors. Based on their experience and expertise, campus mental health professionals are also uniquely qualified and obligated to provide programs and services at the secondary and tertiary level of prevention/intervention.

For other campus units, treatment should take the form of programs or services within their scope that are informed by the latest research findings regarding suicide prevention, including the reduction of risk factors and the promotion of protective factors.

Task	Timeline to Complete	Assigned Staff/Group	Progress Status (complete/incomplete)	Task Progress Notes
Identify and develop appropriate programming or services.				
Establish a systemic, integrated process for providing programs or services that contributes to either primary, secondary, or tertiary level of suicide prevention/intervention.				
Provide at least 1 program or service that contributes to either primary, secondary, or tertiary level of suicide prevention/intervention.				
Provide at least 2 programs or services that provide primary, secondary, and/or tertiary prevention/intervention.				
Provide at least 3 programs or services that provide primary, secondary, and/or tertiary prevention/intervention.				
Provide at least 5 programs or services that provide primary, secondary, and/or tertiary prevention/intervention.				
Develop guidelines and procedures to provide program evaluation and assessment for the purposes of program/service improvement.				
Implement guidelines and procedures to provide program evaluation and assessment for the purposes of program/service improvement.				

Task	Timeline to Complete	Assigned Staff/Group	Progress Status (complete/incomplete)	Task Progress Notes
<p><i>For mental health professionals:</i> Develop and provide at least 1 additional program or service dedicated to secondary or tertiary prevention.</p>				
<p>Implement developed guidelines and procedures to provide program evaluation and assessment for the purposes of program/service improvement.</p>				

Area VI- TRANSITION: Transition involves care for the individual at risk that is continuous and ongoing. Care is broadly defined as follow-up contact after the initial engagement with the person at risk. Campus units should develop effective guidelines and procedures to maintain and extend care in a manner appropriate to each unit.

Task	Timeline to Complete	Assigned Staff/Group	Progress Status (complete/incomplete)	Task Progress Notes
Establish guidelines or procedures that clearly define the process of re-engagement and confirms a plan of treatment and safety with an individual at risk for suicide.				
Implement guidelines or procedures that clearly define the process of re-engagement and confirms a plan of treatment and safety with an individual at risk for suicide.				
Establish continued collaboration with appropriate units to support established guidelines or procedures.				
Establish a plan for ongoing re-engagement for the individual at risk for suicide until such time that the person is no longer at risk.				

Area VII- IMPROVE: A strong dedication and commitment must exist among campus partners to engage in a culture and practice of evaluation and assessment of the efficacy of all levels of prevention services (i.e., primary, secondary, tertiary). Ongoing evaluation and assessment of suicide prevention efforts is critical to objectively measure and define the degree of impact of a unit's efforts and to inform strategic planning. Improvement is defined as assessment and evaluation of all levels of prevention services.

Task	Timeline to Complete	Assigned Staff/Group	Progress Status (complete/incomplete)	Task Progress Notes
Establish an on-going assessment and evaluation process to determine the efficacy of programs or services.				
Implement an on-going assessment and evaluation process to determine the efficacy of programs or services.				
Implement the use of evaluation and assessment data to inform continued strategic service and program planning.				

* Examples of Campus Partners

Academic Affairs
Academic Advisors
Admissions Office
Athletic Association
Campus Facilities
Campus Health Services
Campus Ministries
Campus Police Department
Campus Recreation Center
Career Center
Communications and Marketing
Counseling Center
Faculty (undergraduate & graduate)
Faculty Staff Assistance Program
Health Promotions
Housing
Human Resources
International Education
Office of Assessment
Office of Diversity Programs
Office of Student Engagement
Parent and Family Programs
Psychiatry Clinic
Student Affairs/Student Life
Student Groups (e.g., student government, student mental health awareness/advocacy groups)
Wellness Center
Others