

ZERO SUICIDE FUNDING

Policy Issue Summary

In 2017, 1,146 Coloradans died by suicide, which is approximately a 30 percent increase since 2004.^{1,2} In 2015, Colorado ranked ninth for the highest suicide rate in the United States and is consistently among the top ten states with the highest suicide rates nationally.³ Among youth and young adults ages 10 to 24, suicide remained the leading cause of death in Colorado.³

During the 2016 legislative session, the General Assembly passed SB16-147, which required the Colorado Department of Public Health and Environment (CDPHE) to expand the Zero Suicide framework to health care systems, health clinics in educational settings, and the justice system. However, this bill did not provide state funding for full implementation of the bill. The Zero Suicide framework includes seven elements that health care systems and other sites like school districts can adopt to prevent suicide.

This proposal would dedicate an additional \$861,000 to the Office of Suicide Prevention (OSP) to implement grants for additional sites to implement Zero Suicide across the state. The additional funding will help OSP adapt the framework to other systems such as criminal justice, the faith community, schools, and higher education institutions. In addition to training community mental health centers statewide, the funding would allow OSP to expand to hospitals and primary care settings.

Unit	Cost
25 sites	\$25,000/site
Learning collaboratives to help support each site. This includes community mental health centers, primary care, substance use disorder treatment providers, retirement communities, etc.	\$105,000 for 5 learning collaboratives
Zero Suicide Academy to onboard new sectors each year	\$52,000
Contract/grant management	\$79,000 for FTE
Total	\$861,000

Reason for Involvement by the Health District of Northern Larimer County

Policy Priority

The Health District has a strong interest in the implementation of Zero Suicide statewide due to the potential to prevent suicide by training staff to identify patients at high risk for suicide, providing evidence based care, and engaging individuals in a suicide care management plan. In the month before their death by suicide, 50 percent of individuals saw a general health care provider and 30 percent saw a mental health professional.⁴ Further, in the 60 days before their death by suicide, 10 percent of individuals were seen in an emergency department.

¹ 795 total suicides were reported in 2004.

² CDPHE (2018). *Colorado Suicide Data Dashboard*. Retrieved from https://cohealthviz.dphe.state.co.us/t/HSEBPublic/views/CoVDRS_12_1_17/Story1?:embed=y&:showAppBanner=false&:showShareOptions=true&:display_count=no&:showVizHome=no#4

³ Brummett, S., Fine, E., Hindman, J., & Myers, L. (2017). *Office of Suicide Prevention Annual Report 2016-2017*. Department of Public Health and Environment. Retrieved from https://www.colorado.gov/pacific/sites/default/files/PW_ISVP_OSP-2016-2017-Legislative-Report.pdf

⁴ Zero Suicide (n.d.) *Can Suicide Be a Never Event? PowerPoint Presentation*. Retrieved from <http://zerosuicide.sprc.org/resources/can-suicide-be-never-event-powerpoint-presentation>

Involvement Background

This request is being supported by Mental Health Colorado. During the 2016 legislative session the Health District Board of Directors supported SB16-147. The Health District is currently implementing the Zero Suicide framework.

Staff Recommendation

The Health District Public Policy Strategy Team recommends that the Board of Directors support the dedication of state funds to expand the Zero Suicide framework.

About this Memo

This memo was prepared by Health District of Northern Larimer County staff to assist the Health District Board of Directors in determining whether to take an official stand on various health-related issues. The Health District is a special district of the northern two-thirds of Larimer County, Colorado, supported by local property tax dollars and governed by a publicly elected five-member board. The Health District provides medical, mental health, dental, preventive and health planning services to the communities it serves. This memo is not a complete analysis of this policy issue. This memo is accurate to staff knowledge as of date printed. For more information about this summary or the Health District, please contact Alyson Williams, Policy Coordinator, at (970) 224-5209, or e-mail at awilliams@healthdistrict.org.