

# 2024 SUICIDE PREVENTION COORDINATING COUNCIL ANNUAL REPORT



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## Introduction

### Suicide Prevention Governance in Florida

As the designated mental health authority for the state of Florida, the Department of Children and Families (Department) Office of Substance Abuse and Mental Health (SAMH) administers the Statewide Office for Suicide Prevention (SOSP). The SOSP is appointed to develop initiatives and coordinate the state's suicide prevention efforts. More specifically, the SOSP's tasks established in section 14.2019, Florida Statutes (F.S.), include support of the Suicide Prevention Coordinating Council (SPCC), and developing the state plan for suicide prevention. The SOSP maintains a suicide prevention website and educates individuals and agencies on suicide prevention best practices by providing presentations and sharing resources.

The SPCC is comprised of 31 voting members and one non-voting member representing a diverse group of Florida state agencies, organizations, and suicide prevention partners. The SPCC membership and purpose is defined in s. 14.20195, F.S., and includes preparing of the SPCCs annual report. More information about the SPCC is detailed in the sub-section titled Suicide Prevention Coordinating Council (SPCC) under Suicide Prevention.

### Report Purpose and Goal

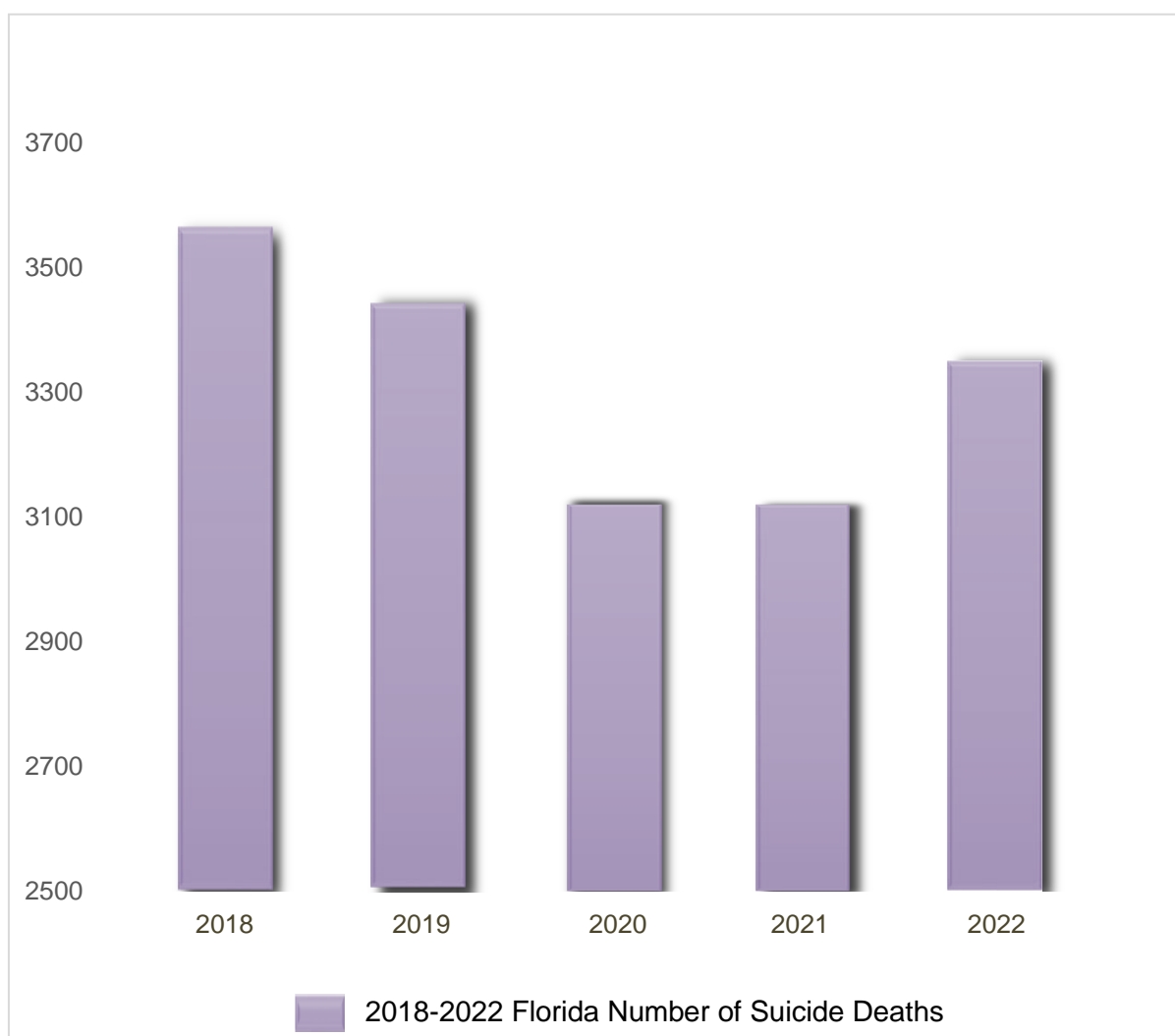
The SPCC annual report is prepared through collaboration between the Department, the SOSP and the SPCC to fulfill s. 14.20195(1)(c), F.S., which requires the SPCC to draft an annual report for submission to the Governor, the President of the Senate, and the Speaker of the House of Representatives by January 1 of each year. The contents within prioritize initiatives completed by the Department and SPCC members and the status of the statewide plan for suicide prevention. The narrative and data cited in this report serves as guidance to inform the planning and implementation of the coming year's efforts, in addition to the generation of the state's next strategic plan.

## The Issue of Suicide in Florida

### Floridians Lost to Suicide

Suicide is the ninth leading cause of fatalities in Florida, accounting for 3,445 Floridian lives lost in 2022 (Figure 1). This demonstrates the continued need to make suicide prevention policy and practices a priority within Florida. Suicide data is available through a public facing dashboard from the Department of Health's Community Health Assessment Resource Tool Set which can be accessed at [flhealthcharts.gov/Charts/](https://flhealthcharts.gov/Charts/).

**Figure 1: Number of Suicide Deaths, Florida 2018 – 2022**

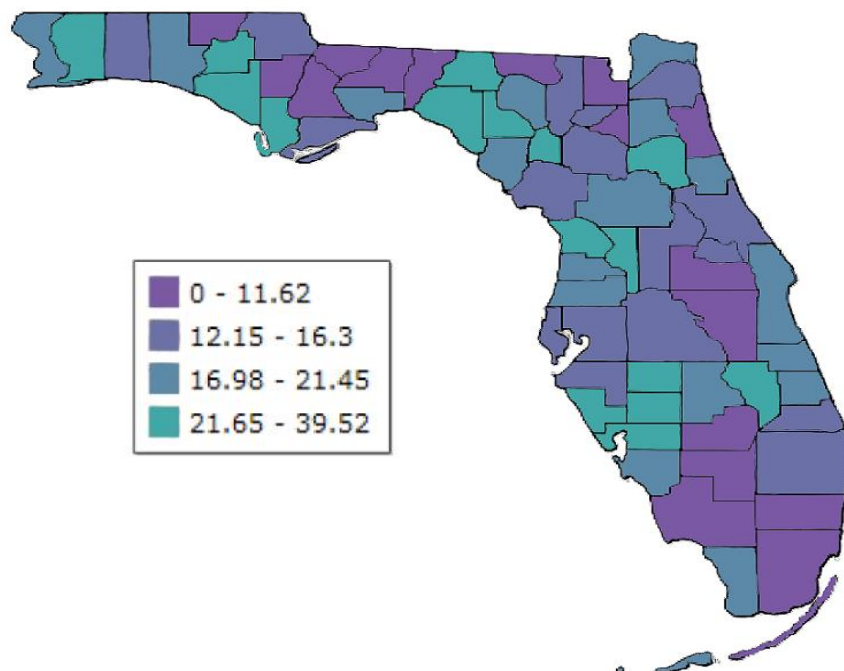


Data Source and Chart by: Florida Department of Health Bureau of Vital Statistics.

## Geographic Distribution of Suicide Deaths

The age-adjusted rate of suicide death varied by county. This metric allowed for a degree of comparative value for suicide death fluctuations across the state relative to population size (Figure 2). In 2022, Jefferson County had the lowest rate (4.1 per 100,000 individuals). The counties with the highest rates included Putnam County (39.5 per 100,000 individuals), followed by Citrus County (34.5 per 100,000 individuals), and then Madison County (34.3 per 100,000 individuals). Data showed that majority of counties had a suicide rate of less than 17 per 100,000 individuals. Counties with large rural areas accounted for the highest rates, with a high number of suicides compared to a county's population. Higher rates may be a result of a single digit number of suicides in a county with a low population.

**Figure 2: Florida Suicide Rates by County, 2022**



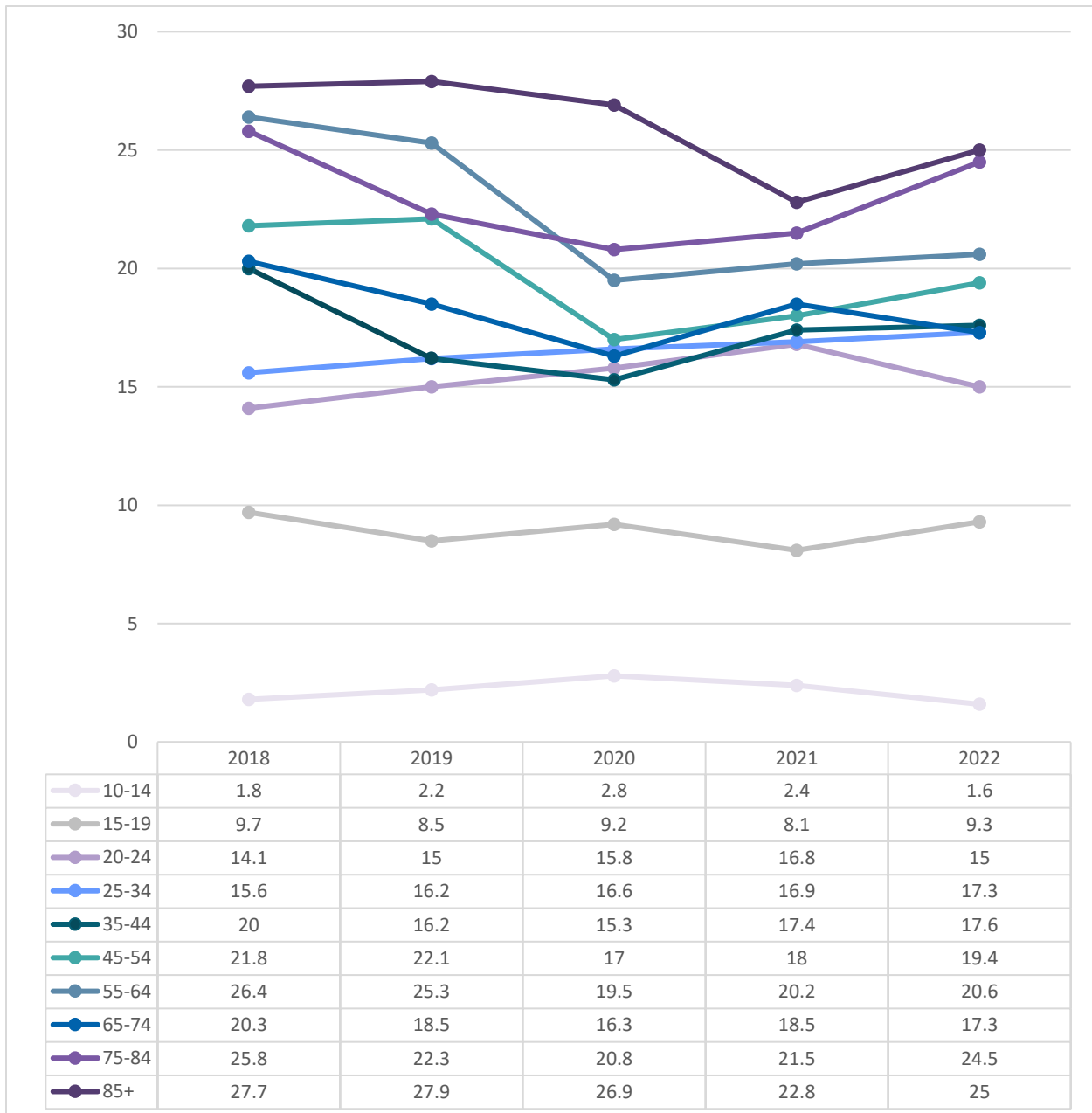
Data Source and Chart by: Florida Department of Health Bureau of Vital Statistics.

## Age

The trajectory of the suicide fatality rate over the past five years was varied. The suicide fatality rate continues to be the highest in those aged 85 or older from 2018 through 2022. In 2022, the highest rates following ages 85 and older, were among individuals ages 75 to 84, and ages 55 to 64 (Figure 3). As with rural counties, higher rates may be a result of a single digit number of suicides among the smaller population size of these three age ranges. In comparison to 2021, the data for 2022 shows a reduction in the

rate for 10–14-year-olds from 2.4 to 1.6, 20-24 year olds from 16.8 to 15, and for 65-74 age group from 18.5 to 17.3.

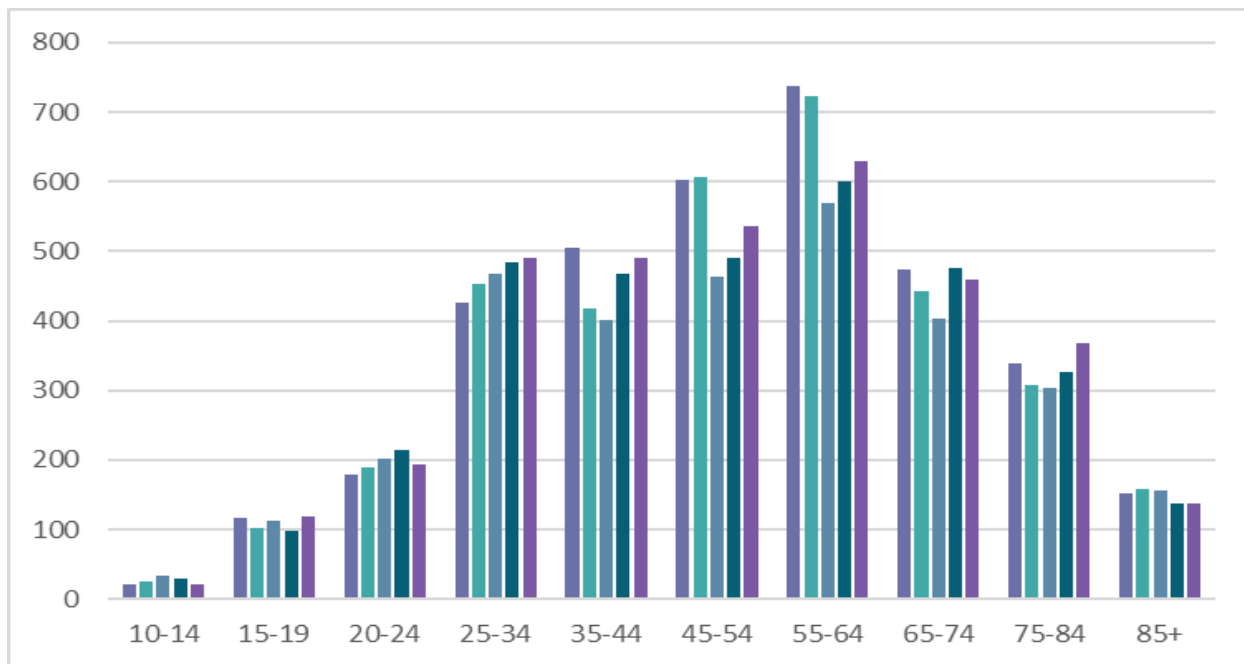
**Figure 3: Crude Suicide Death Rate by Age, 2018 – 2022**



Data Source: Florida Department of Health Bureau of Vital Statistics.

Figure 4 provides an overview of the suicide death count by age from 2018 through 2022. In comparison to 2018, suicides in 2022 decreased for those ranging from ages 35 to 74 and 85+.

**Figure 4: Suicide Death Count by Age, 2018 – 2022**



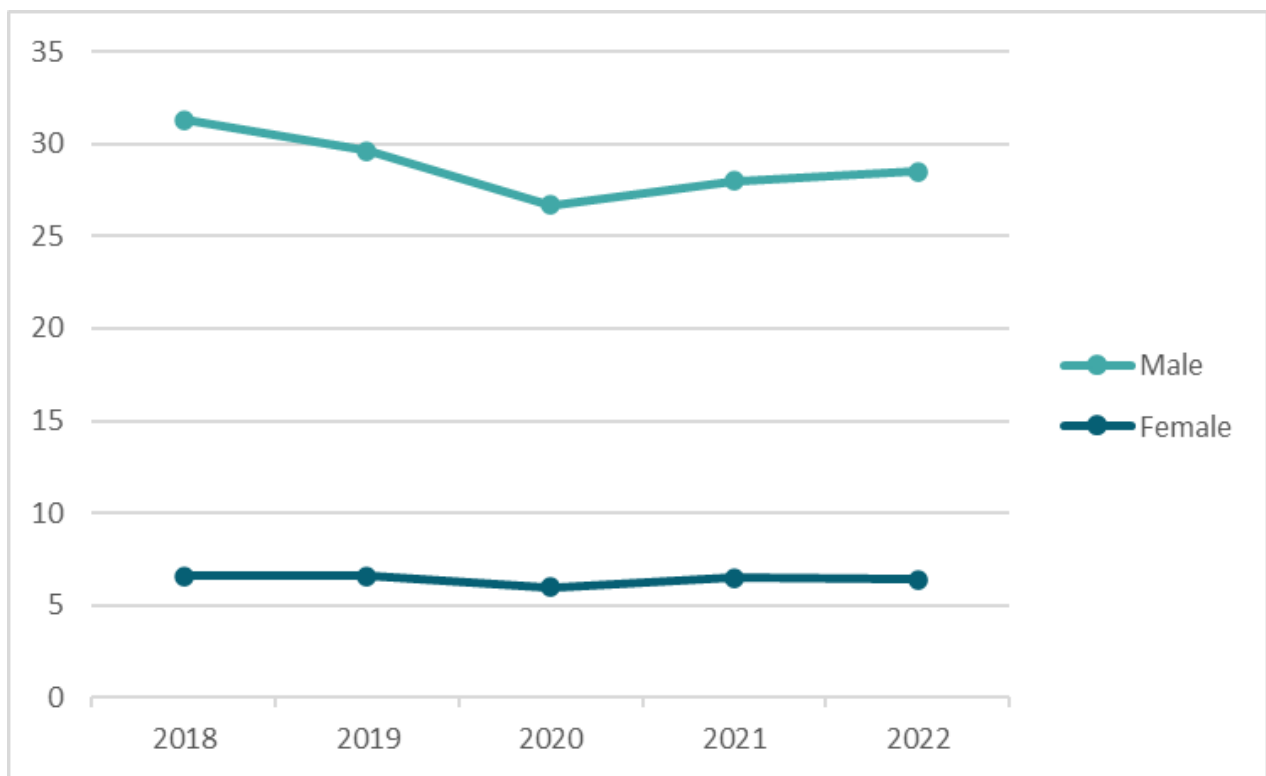
Data Source: Florida Department of Health Bureau of Vital Statistics. Note: Age group 5 – 9 was removed to maintain privacy since it had fewer than 10 deaths across all years.

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## Sex

In Florida, males experience more than three times the rate of suicide deaths compared to females, and the trend has persisted for over 50 years. In 2022, the rate of suicide death for males was 22.1 per 100,000 individuals, compared to females at 6.4 per 100,000 individuals (Figure 5). Females showed a slight decrease compared to 2018 (6.6 per 100,000 individuals). Males also saw a decrease in 2022 compared to 2018 (24.7 per 100,000 individuals). Overall, rates remained relatively stable from 2018 to 2022 (Figure 5).

**Figure 5: Age-Adjusted Suicide Rate per 100,000 Individuals by Sex, 2018 – 2022**



Data Source: Florida Department of Health Bureau of Vital Statistics.

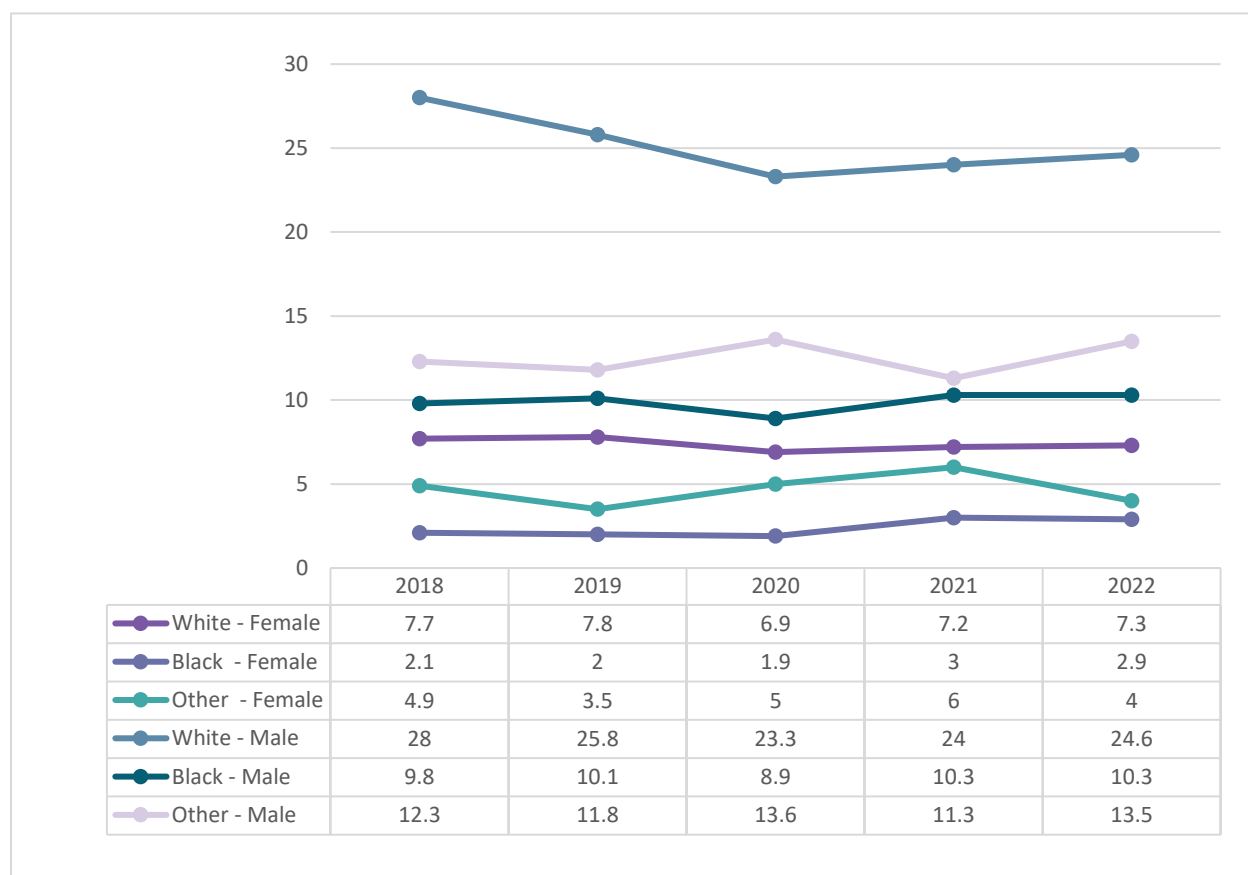
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## Race and Sex

The rate of suicide death is highest among White males. In 2022, the suicide rate of death per 100,000 individuals was 24.6 for White males (Figure 6). The suicide death rate for Black females, which had a notable upward trend in 2021, has started to trend downward in 2022 to 2.9 per 100,000. In 2022, females of other races had a decreased rate of four per 100,000 individuals, down from six per 100,000 in the prior year. (Figure 6).

**Figure 6: Age-Adjusted Suicide Rate per 100,000 Individuals by Race and Sex, 2018 – 2022**



Data Source: Florida Department of Health Bureau of Vital Statistics.

## Method

In Florida, the majority of suicide fatalities across all age groups reflect national trends. Suffocation and poisoning are the second and third most commonly used methods in suicide deaths. The remaining fatalities were classified as other and accounted for less than 10% of suicide deaths.

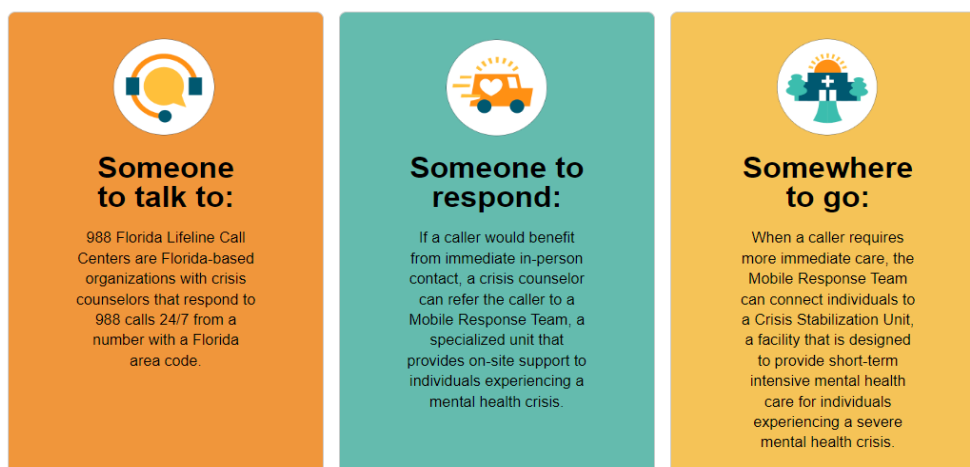
## Florida Suicide Prevention Initiatives

The following pages provide an overview of various initiatives and grant projects taking place statewide, representing efforts of the Department and the SOS, SPCC, other state agencies and stakeholders.

### 988 Implementation

On October 17, 2020, the National Suicide Hotline Designation Act amended the Communications Act of 1934 to designate 988 as the new, three-digit dialing code that connects individuals experiencing suicidal thoughts, substance use, mental health crises, or any other kind of emotional distress to a crisis counselor in their immediate area. 988 crisis counselors are equipped with specialized skills and knowledge to de-escalate and, if needed, link callers to community-based providers who can deliver a full range of crisis care services.

The 988 Suicide & Crisis Lifeline provides a single-point-of-entry to a crisis care continuum that serves individuals with a variety of needs as the initial piece of three essential elements:



The framework for this modernized crisis continuum of care begins when an individual experiencing emotional distress dials 988 and has their call answered by a local crisis counselor at one of Florida's thirteen 988 call centers. In FY 2023-2024, 96% of calls to the 988 Suicide & Crisis Lifeline in Florida were resolved at this stage without the need for higher-level intervention. In cases where a call cannot be de-escalated over the phone, a warm hand-off is provided to a local Mobile Response Team (MRT). This was the case for 2.8% of 988 calls in Florida in FY 2023-2024.

The 988 Suicide & Crisis Lifeline centers also work in coordination with local 911 Public Service Answering Points (PSAPs) to dispatch immediate law enforcement or Emergency Medical Services (EMS) response when a caller dials 988 during an active suicide attempt in progress – in SFY 2023-24, this was the case for 1.7% of 988 Suicide & Crisis Lifeline calls.

## Call Center Data

In FY 2023-2024, the 988 Suicide & Crisis Lifeline in Florida:

- Answered 120,318 calls from individuals experiencing suicidal, substance use, and/or emotional distress.
- Reported a 96% diversion rate, or crisis calls that did not require an in-person response after telephonic support.
- Experienced a call volume increase by 38%, rising from 11,215 in July 2023 to 15,491 in June 2024.
- Answered 1,452 calls that included a suicide attempt in progress, with zero resulting in a death by suicide while on the phone with a 988 crisis counselor. Meaning, that every individual that reached out to 988 with an active suicide reached the next phase of care alive.

The Department continues to work towards increasing funding and sustainability for 988 in Florida. In FY 2023-2024, the Department was able to increase the budget from \$12 million in the initial implementation year, to \$20.5 million, and the budget for FY 2024-2025 is \$21.3 million. This funding comes from multiple funding streams, including a Federal State and Territory Cooperative Agreement Grant, the Substance Abuse and Mental Health Block Grants, and state general revenue. These funds provide support for the hiring, recruiting, and retention of crisis counselors to meet call volume, provide marketing and awareness supports and to make continued improvements to infrastructure.

**Table 3: Florida's 988 Funding**

988 Funding			
Funding Source	FY 2022-2023	FY 2023-2024	FY 2024-2025
American Rescue Plan	\$8,400,000.00	\$8,400,000.00	\$0.00
Bipartisan Safer Communities Act	\$0.00	\$2,381,827.00	\$2,381,827.00
Discretionary Grants	\$3,642,194.00	\$9,788,543.00	\$8,195,132.00
Block Grants	\$0.00	\$0.00	\$8,174,475.00
General Revenue	\$0.00	\$0.00	\$2,567,586.00
<b>Total</b>	<b>\$12,042,194.00</b>	<b>\$20,570,370.00</b>	<b>\$21,319,020.00</b>

*Note: Federal awards are based on the Federal Fiscal Year, October – September. This table depicts budget for the State Fiscal Year, July – June.*

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## Improving Collaboration with Mobile Response Teams (MRTs)

The second element to the crisis continuum of care is mobile response. In 2018, following recommendations from the Marjory Stoneman Douglas Commission, the Department established MRTs statewide serving youth and young adults ages 26 and under. In 2022 and 2024, the Legislature provided additional funding to expand MRTs across the state. These expansions increased capacity in existing MRTs, created new MRTs, and expanded MRT services to individuals of all ages.

Florida's MRTs are available 24 hours a day, 365 days per year to provide in-person support to assist in diffusing crises and diverting individuals from involuntary Baker Acts. MRTs provide on-demand crisis services in any setting and allow individuals to safely recover within communities. In FY 2023-2024, 31,509 individuals received care from MRTs and 80% were successfully stabilized at home and did not need an involuntary Baker Act.

For individuals that cannot be de-escalated by a 988-crisis counselor, and need someone to respond, it is imperative to have strong partnerships that allow for the warm hand-off of these individuals needing a higher level of care. Following the implementation of 988 in July 2022, 988 Lifeline Centers and MRTs across the state began establishing formal MOUs to better assist individuals that cannot be de-escalated by a 988-crisis counselor and need someone to respond. In FY 2023-2024, 3,428 callers were referred to MRTs by 988. With the continued growth of the 988 Suicide & Crisis Lifeline in Florida, the Department will also continue to strengthen these relationships through changes to policy, guidance, and monitoring data to troubleshoot and eliminate gaps in the crisis framework.

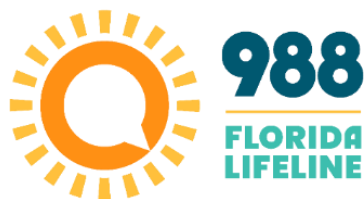
## Health Communication and Marketing

In Florida, the need to inform people about 988's role in crisis care is critical, as some Floridians remain unaware of the service provided by the 988 Suicide & Crisis Lifeline. A Pew Trusts survey released nine months after the rollout of 988 reported that only 13% of U.S. adults were aware of 988 and knew its purpose. [1] As part of Florida's broader mental health infrastructure, 988 plays a pivotal role in offering timely support and connections to local services, such as MRTs, community mental health providers, or emergency response services. While more individuals have become aware of its existence as 988 has become more integrated with existing behavioral health providers, more can be done to inform the public of the 988 Suicide & Crisis Lifeline's scope of services through marketing campaigns and presentations at community stakeholder events. In year three of 988, the Department intends to prioritize outreach and education efforts to make 988 as ubiquitous in the mental health space as 911 is in the realm of emergency response.

In FY 2023-2024, the Department aimed to increase health communication and marketing efforts for Suicide Prevention and the 988 Suicide and Crisis Lifeline. As required by s. 14.2019, F.S., the Department is responsible for increasing health communication around topics related to suicide prevention and acting as a clearinghouse for information and resources related to suicide prevention by disseminating and sharing evidence-based

best practices relating to suicide prevention.

The Department funds and oversees the 988 Suicide and Crisis Lifeline through a combination of federal grant funding and general revenue as a resource for individuals with suicidal thoughts or behaviors. One requirement of the 988 State and Territory Cooperative Agreement Grant is to create a Communications Plan for messaging and marketing for 988.



In October 2024, the 988 Florida Lifeline website became public at [988FloridaLifeline.com](https://988FloridaLifeline.com). Previously, the 988 Florida Lifeline information was located on the Department's Suicide Prevention webpages. Creating a stand-alone website better supports individuals and families, behavioral health partners, and individuals engaging in suicide prevention and awareness activities. The website includes information on how to access services, resources, a marketing toolkit, and FAQs. The Department, in conjunction with behavioral health partners and SPCC Members, will continue to work in coordination to update and inform the public of these changes.

The Department created a social media content calendar, social media shareables, and supporting captions for Suicide Prevention Awareness Month. Additionally, they created a suicide prevention awareness logo to use during September. Social media and posters included messaging for the public and messages for special populations – elders, first responders, Veterans, youth. Additional posters provided information about how the 988 Florida Lifeline works, and mental health and disaster support resources. The Department is working to identify speakers and messaging for a suicide prevention public service announcement, specifically targeting special populations, some of which have recently had increased rates of suicide. Educational materials and other interactive media are being created to increase awareness and knowledge of these programs.



Suicide Prevention social media shareables, published September 2024.

## First Responder Resiliency

In 2021, First Lady Casey DeSantis, in partnership with the Department, announced \$12 million to expand peer-to-peer mental health services providing prevention and early intervention services to support first responders and families. In the first year, over 640 first responder peers were trained to volunteer within organizations or work as call center personnel, 128,401 staff hours were dedicated to peer supports, and 16,980 individuals were served.

Following the three-year anniversary, the program continues to yield positive outcomes and provide essential services and supports. In FY 2023-2024, 818 first responder peers were trained, providing over 52,000 staff hours dedicated to peer supports. Over 29,000 first responders and their families received behavioral health navigation services and/or linkages for follow-up care. The program has developed websites, social media campaigns, newsletters, and interactive platforms resulting in 129,000,000 public awareness campaign views. Since the program's inception in December 2021, the Department has invested over \$22 million in the program.

A customizable statewide resource toolkit that provides first responder agencies step-by-step guidance for developing mental health policies is available on the Department's First Responder Resiliency webpage: [myflfamilies.com/first-responder-resiliency](https://myflfamilies.com/first-responder-resiliency). The toolkit was created by the 2<sup>nd</sup> Alarm Project in collaboration with Florida Agricultural and Mechanical University and the University of Central Florida RESTORES program.

"This Toolkit has the potential to change the face of mental wellness in First Responder Organizations." - Toolkit User

Data Source: Second Alarm Project

### Programmatic Data Totals: July 2023 – June 2024\*

The following table details the primary data elements collected from the First Responder Resiliency program.

**Table 2: First Responder Resiliency**

Resource and Referrals to Services		Peer Support		Public Awareness Campaign
Number of Contacts	723,426	Number of Persons Served	29,487	129,266,583  Number of Impressions
Number of Referrals	16,366	Number of Trained Peer Support	817	
Number of Direct Staff Hours	52,895	Number of Direct Staff Hours	27,292	

\*At the time of publication, data was available through June 2024. Data is provisional and subject to change.



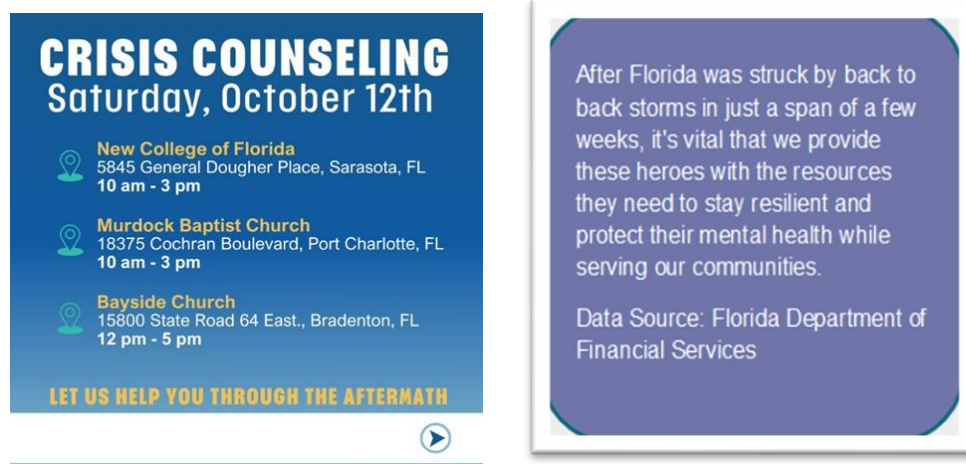
## Interagency Collaboration to Address Disaster Recovery

Suicide risk is elevated following exposure to precipitating events, including natural disasters. The stress response following a disaster may include an exacerbation of pre-existing mental or emotional distress, increase in nightmares or difficulty sleeping, and/or post-traumatic stress. Individuals may show signs of psychological distress immediately following the devastating event, or there may be a delayed onset of signs. This is normal and promotes the necessity of a comprehensive list of available resources for individuals as they may need support.

In 2024, many families and communities in Florida were significantly impacted by Hurricanes Helene and Milton. The hurricanes arrived in the span of two weeks, compounding the need for response and recovery efforts. The Department, SPCC members, and suicide prevention organizations provided aid to residents during this time.

Agencies and organizations created hurricane specific websites to notify residents of disaster relief efforts. Many state agencies deployed personnel to provide emergency response and to coordinate relief efforts, alongside disaster relief partner agencies. Disaster response social media posts included suicide prevention and mental health resources and were widely shared both during and post hurricane season. Crisis counseling and disaster relief directory information was made available both by phone and in person. Mental health resource flyers were provided alongside shelf-stable food, baby supplies, and water, made available to areas affected by the hurricanes.

Florida's first responders received additional opportunities for mental wellness through a concerted effort between multiple agencies including the State Emergency Response Plan, State Fire Marshal, 2<sup>nd</sup> Alarm Project, and UCF Restores. First responders received clinical support in-person and through a consultation line, and received follow-up resources, palm cards, and brochures about mental wellness resources during both hurricanes.



Data Source: The Department Disaster Recovery social media post.

## **2024 Suicide Prevention Awareness Month**

The SOSP maintains a suicide prevention webpage that provides suicide prevention information and resources ([myflfamilies.com/suicideprevention](https://myflfamilies.com/suicideprevention)). The webpage is updated regularly and is organized with information about suicide, crisis support information for the public and specific resources for military service members and veterans, first responders, individuals who are deaf or hard of hearing, and non-English speaking individuals. The page had 13,000 views from January 2024 to September 2024.

Social media posts during the month of September included information about extending support to Florida's continued observance of Suicide Prevention Awareness Month each year. Social media posts included the risk and warning signs for suicide, common misconceptions about suicide, and help-seeking information, including the promotion of the suicide prevention website and 988. These posts accumulated more than 9,000 impressions.

To support outreach initiatives, over 5,000 marketing materials with the suicide prevention website and 988 contact information were distributed across Florida through meetings and events in August and September, SPCC meetings, the Annual Florida Children and Families Summit, and various community events. SOSP staff provided marketing materials, logistical and resource information for events, and direction to comprehensive resources for state agencies, non-profit organizations, faith-based organizations, and behavioral health organizations that contacted the office for support to promote events during Suicide Prevention Awareness Month.

## **Suicide Prevention Coordinating Council (SPCC)**

Members of the SPCC are designated representatives from various state agencies, Florida-based professional organizations, and suicide prevention non-profit organizations both Florida-based and national. For a full list of current SPCC membership, see Appendix C.

The SPCC advises the SOSP in the development of the statewide strategic plan for suicide prevention; makes findings and recommendations regarding evidence-based suicide prevention programs and activities; and contributes to the annual report regarding the status of suicide prevention efforts and recommendations for further improvement. The SPCC presently engages two committees—the Planning and Evaluation Committee, and the First Responder Mental Wellness and Suicide Deterrence Committee.

## **Suicide Prevention Coordinating Council Quarterly Challenge**

Each quarter, the SPCC puts forward a new call to action referred to as the quarterly challenge. The quarterly challenge is geared toward all Floridians, to increase public awareness of suicide prevention resources and best practices.



## Florida Governor's Challenge Team

In March 2019, President Donald Trump signed Executive Order 13861 outlining a “National Roadmap to Empower Veterans and End Suicide” that served as a call to action for the nation. The United States Department of Veterans Affairs and SAMHSA partnered to launch the city-level “Mayor’s Challenge to Prevent Suicide Among Service Members, Veterans, and their Families,” and shortly thereafter the state-level “Governor’s Challenge to Prevent Suicide Among Service Members, Veterans, and their Families” were established.

Governor Ron DeSantis accepted the Governor’s Challenge in December 2019, making Florida one of the first 10 states to act. As of August 2022, all 50 states and three United States territories have accepted the Governor’s Challenge with the purpose of helping local leaders in community and state government work together to prevent suicide among veterans. The Florida Governor’s Challenge Team is a public-private partnership, with dedicated individuals from over 20 organizations, including the Florida Department of Veterans Affairs, the Department’s SOS, and other state agencies and organizations in the community.

In 2024, work in the phase four stage continues among the following priority areas:

- Identify Service Members, Veterans, and their families and screen for suicide risk.
- Promote connectedness and improve care transitions.
- Lethal means safety and safety planning.

Recent accomplishments of the Florida Governor’s Challenge Team include the development and implementation of a suicide prevention training for County Veteran Service Officers and Veteran Claims Examiners, promotion of Watch Stander training geared toward the public across the state, promotion of the Veterans Affairs’ safety planning application, and development of public service announcements along with a comprehensive media campaign.

## The Florida Violent Death Reporting System

The Florida Department of Health maintains the Florida Violent Death Reporting System (FLVDRS), a state-based surveillance system developed and funded by the Centers for Disease Control and Prevention. Beginning September 2023, FLVDRS must collect and analyze data on at least 60% of violent deaths occurring in Florida, with expanded data collection efforts in subsequent years. All information is entered into an anonymous encrypted database. Data sources include vital statistics death certificates, medical examiner records (with toxicology when available), and law enforcement reports.

Reported data may include information on mental health problems, recent problems with employment, finances, or relationships, physical health problems, and information about circumstances of death. By combining information from these sources, FLVDRS enhances public health data surveillance of all types of violent deaths, including suicides. This data is used to identify trends and conduct more in-depth analyses. In addition, it

aids in the design and implementation of improved strategies for suicide prevention and intervention efforts.

### **Florida Suicide Prevention Training**

A myriad of suicide prevention related courses are offered throughout the state, including assessing suicide risk, suicide prevention, and youth suicide prevention. These courses are offered to the public and specific populations and are available in person and online.

### **Question, Persuade, and Refer (QPR)**

The three simple steps anyone can learn to help save a life from suicide. Individuals trained in QPR learn how to recognize the warning signs of a suicide crisis and how to question, persuade, and refer someone to help. The Southern Region trainer is an individual with lived experience.

### **Question, Persuade, Refer, Treat (QPRT)**

QPRT is an advanced suicide prevention and assessment training that helps participants understand risk factors, warning signs, and protective factors along with how to appropriately assess suicide risk during a crisis. It is appropriate for those with clinical backgrounds and completed in small groups to allow for role-playing and practice.

### **Zero Suicide**

SEFBHN in conjunction with the Hanley Foundation provide training to law enforcement officers on trauma informed care and Zero Suicide. Officers learn de-escalation techniques, active listening, cultural diversity, and observation and use of body language to equip them with the tools to aide clients experiencing a mental health crisis and/or suicidal ideation.

### **Florida Launch Engage Activate Departments and Systems for Zero Suicide**

The University of Central Florida operates the Florida Launch Engage Activate Departments and Systems (LEADS) for Zero Suicide project, a federally funded project through SAMHSA. The five-year grant project began April 2021. The goal of the Florida LEADS project is to transform and improve suicide care practices, standards, and outcomes at the state and regional levels for adults aged 25 and older.

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## Florida LEADS Project Achievements (April 2021- September 2024)

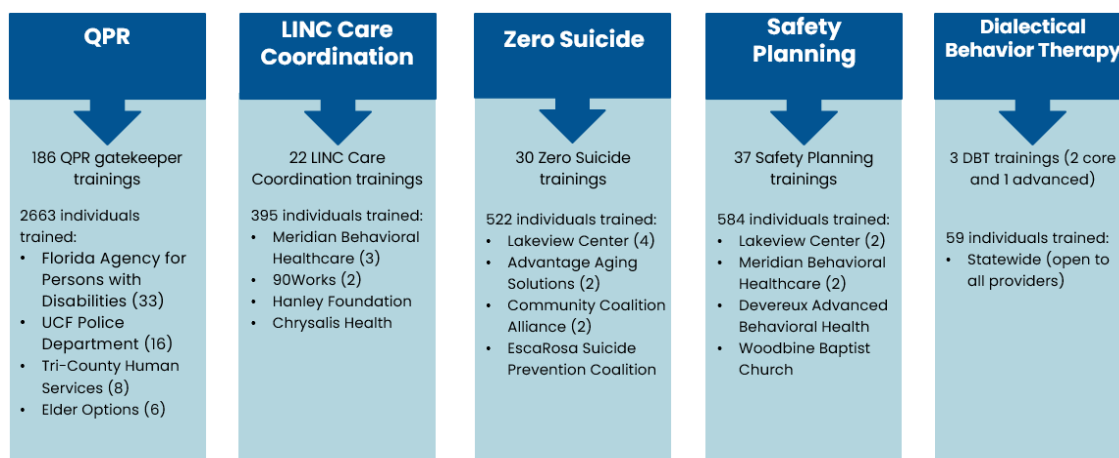
### Collaborative Network

To date, the Florida LEADS Project has developed 63 MOUs and informal partnerships with state and regional agencies throughout Florida to implement Zero Suicide components and practices. Partners include:

- Florida Department of Children and Families.
- Florida Department of Health.
- Agency for Persons with Disabilities.
- Florida Department of Elder Affairs.
- Lutheran Services Florida Health Systems.
- Lakeview Center.
- Molina Healthcare of Florida.
- Florida Behavioral Health Association.
- Peer Support Coalition of Florida.
- The Fire Watch/Veteran Overwatch Program.
- Gulf Coast Veterans Health Care System.
- Santa Rosa Department of Health.
- Tri-County Human Services.
- Northwest Florida Health.
- Henley Foundation.
- Veterans Affairs of North Florida / South Georgia Health System.

### Suicide Prevention and Intervention Training

The Florida LEADS project has trained over 4,223 individuals throughout the state using suicide prevention curriculums. The following training programs have been provided to project partners:



Data Source and Chart by: Florida LEADS Project.

### Crisis Response Services

The Florida LEADS project has partnered with Lakeview Center and Charlotte Behavioral Health Care to implement Florida LEADS Linking Individuals Needing Care (LINC) 90-day care coordination program model. This model seeks to enhance MRT services for adults at risk of suicide. The Florida LEADS project previously worked with Meridian Behavioral Health MRTs to enhance services.

A total of 148 clients have been enrolled into the LINC Care Coordination program since the start of the project. The most common services used include counseling, mindfulness, and case management. Preliminary reviews show a reduction of both depressive symptoms and suicide risk levels.

### Social Awareness

The Florida LEADS project has developed a website to highlight program goals, promote training opportunities, and disseminate educational resources. The project hosted 53 focus groups with 73 community stakeholders to obtain recommendations on ways to increase awareness about suicide prevention. Resulting recommendations were used to create messaging shared and promoted.

To learn more about the Florida LEADS Project, visit [www.floridaleadsproject.com](http://www.floridaleadsproject.com).

### **School Mental Health Assessment, Response, and Training for Suicide Prevention (SMARTS)**

The School Mental Health Assessment, Response, and Training for Suicide Prevention (SMARTS) project is operated through the University of South Florida and the University of Central Florida. The project is a five-year federally funded training model to facilitate youth suicide prevention and early intervention strategies. The SMARTS project aims to use a multisystem, interconnected approach across multiple delivery systems of care, including middle schools, high schools, and community behavioral health agencies to reduce suicide rates, decrease mental health risks, and build sustainable prevention services. The SMARTS project aims to improve access to high-quality behavioral health care to school systems in Florida.

### Project Achievements (October 2023 - September 2024)

#### Collaborative Network

Since its launch in 2022, the SMARTS project has built a collaborative network of partnerships with the following agencies and community providers:

- University of South Florida.
- University of Central Florida.
- Pasco County Schools.
- Pinellas County Schools.
- Miami-Dade County Schools.

- BayCare Behavioral Health.
- Florida Department of Education.
- Florida Department of Children and Families.

### Suicide Prevention and Intervention Training

The SMARTS project provided the following training programs to its partners at no cost, decreasing the burden of training staff to implement life-saving strategies to community youth:

- QPR: 358 trained.
- LINC: 19 trained.
- Dialectical Behavior Therapy (DBT): 65 trained.
- Zero Suicide: 150 trained.

The SMARTS project will also offer trainings in three assessment tools to partners:

1. Columbia-Suicide Severity Rating Scale (C-SSRS).
2. Patient Health Questionnaire-9 (PHQ-9).
3. Social, Academic, and Emotional Behavior Risk Screener (SAEBRS).

Adaptations of QPR-Y, SRAM, and LINC-2-Life geared toward school-aged children are underway. Training plans are under development with the Florida Department of Education.

### Community Advisory Board

The purpose of the Community Advisory Board (CAB) is to help guide and inform Florida SMARTS project practices to better meet the needs of different school districts in Florida. The Florida SMARTS CAB is comprised of school-affiliated individuals, mental health practitioners, and parents/caregivers from each school district.

- Total number of meetings held: six to date and ongoing.
- Total number of members in attendance across meetings held to date: 32

### Crisis Response Services

Mobile Response Teams (MRTs) in partner counties receive training in QPR, LINC, LINC2Life, and Zero Suicide. The adoption of the LINC care coordination model is ongoing for partners at BayCare Behavioral Health. BayCare is the largest full-service community-based health care system in the Tampa Bay Area serving Pinellas, Hillsborough, Polk, Pasco, and Hernando Counties.

SMARTS project staff have worked with school partners to implement care coordination, an intervention used to monitor suicide risk. School districts will select a care coordinator(s) to work with high-risk students. These interventions will include developing personal safety plans, providing psychological education, and assessing barriers to services.

## Social Awareness

The SMARTS project aims to highlight program goals, promote training opportunities, and disseminate educational resources to community stakeholders and mental health services providers. Project SMARTS is working with stakeholders and providers to enhance wraparound care opportunities for school partners. Project SMARTS is in the process of providing training to community providers working within the schools of district partners to offer a comprehensive system of care for everyone who is providing mental health services to students within partner school districts.

## Evaluation

- **QPR Training Evaluation:** QPR gatekeeper trainings have been delivered with high fidelity to the training curriculum. Trainees have shown above average knowledge of suicide risk, warning signs, and risk factors. Trainees reported the curriculum provides the education and tools to support individuals experiencing suicidal thoughts and behaviors.
- **LINC Care Coordination Training Evaluation:** In May 2024, SMARTS provided LINC care coordination training to Mental Health Professionals (MHPs) in Pasco County Schools. The eight-hour, skills-based training focused on teaching care coordinators/case managers continuity of care strategies (referrals and linkages) and steps for monitoring suicide risk and coping resources. Data collection from this training is ongoing.
- **ZS Evaluation:** Trainees have shown improvements in suicide prevention knowledge immediately following the Zero Suicide training. Trainees have also reported high behavioral intentions to implement Zero Suicide practices and reported high behavioral efforts to implement the Zero Suicide framework in their organizations in the months following training.
- **DBT Evaluation:** In June 2024, SMARTS and the Mazza group provided Dialectical Behavioral Therapy STEPS-A to Mental Health Professionals in Pasco County Schools. The training covered clinical modality components aimed to treat suicide ideation and provides opportunity for participants to engage in role-play to practice skills. Data collection from this training is ongoing.

To learn more about Project SMARTS, visit <https://testsite.usf.edu/education/school-mental-health-collaborative/index.aspx>.

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## 2024 Suicide Prevention Coordinating Council Recommendations

### Support the Sustainability of the 988 Florida Lifeline

988 provides a universal entry point to a modernized crisis continuum of care that begins when an individual dials 988 and has their call answered by a crisis counselor. In FY 2023-2024, 120,318 calls were answered, ranking Florida fourth in the nation. A total of 96% of individuals that reach a crisis counselor receive the support they need over the phone without the need for a higher-level intervention, allowing law enforcement, MRTs, and receiving facilities to apply their resources elsewhere while reducing the number of lives lost. From July 2023 to June 2024, 1,452 suicides in-progress received life-saving emergency rescue through the 988 Florida Lifeline.

Sustainable funding to support workforce and technological improvements will build upon the already-impactful service that has been offered by the 988 Florida Lifeline since its inception and provide Florida's crisis care continuum with an entry point for behavioral health services as ubiquitous as 911 currently is for emergency services.

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## Appendix A: Membership

### 2024 Suicide Prevention Coordinating Council Members and Designees

Representing	Appointed Official or Designee	
Statewide Office for Suicide Prevention	Jessica Felts, Chair (non-voting)	
1. Florida Association of School Psychologists	Dr. Gene Cash	
2. Florida Sheriffs Association	Matt Dunagan	Allie McNair
3. Florida Initiative of Suicide Prevention	Paul Jaquith	
4. Florida Suicide Prevention Coalition	Rachelle Burns	
5. American Foundation of Suicide Prevention	Tara Sullivan Larsen	
6. Florida School Board Association	Karen Brill	
7. National Council for Suicide Prevention	Dr. Dan Reidenberg	Jennifer Owens
8. State Chapter of AARP	Vacant	
9. Florida Behavioral Health Association	Ute Gazioch	Jennifer Johnson
10. Florida Counseling Association	Dr. Carly Paro	
11. NAMI Florida	Suzanne Mailloux	
12. Florida Medical Association	Dr. Ryan Hall	
13. Florida Osteopathic Medical Association	Dr. Ramsey Pevsner	
14. Florida Psychiatric Society	Dr. Joseph Edward Thornton	
15. Florida Psychological Association	Dr. Diane McKay	Deborah Foote
16. Veterans Florida	Joe Marino	Jeremy Sinnemaki
17. Florida Association of Managing Entities	Natalie Kelly	Paul Bebee



18. Secretary of Elder Affairs	Michelle Branham	Gretta Jones
19. State Surgeon General – Department of Health	Dr. Joseph Ladapo	Shay Chapman / Cory Smith / Rhonda Jackson
20. Commissioner of Education	Manny Diaz, Jr.	Beverley Wilks / Anna Williams-Jones
21. Secretary of Health Care Administration	Jason Weida	Dr. Timothy Buehner
22. Secretary of Juvenile Justice	Eric Hall	Dr. Tracy Shelby / Joy Bennink
23. Secretary of Corrections	Ricky D. Dixon	Dr. Tammy Lander / Dr. Angela Williams
24. Commissioner of Department of Law Enforcement	Mark Glass	Matthew Walsh
25. Executive Director of Department of Veterans Affairs	James Hartsell	Al Carter/ Roy Clark
26. Secretary of Department of Children and Families	Shevaun L. Harris	Erica Floyd Thomas / Shila Salem
27. Secretary of Department of Economic Opportunity	J Alex Kelly	Caroline Womack
28. Secretary of Department of Transportation	Jared W. Perdue	Mark Eacker / Brenda Young / Lora Hollingsworth
29. – 31. Governor's Appointees	Vacant	

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