Zero Suicide Colorado will reduce the burden of suicide among Colorado adults ages 25+ by promoting suicide prevention as a core component of healthcare and increasing effective clinical and professional strategies for assessing and treating those at risk for suicide. Statewide efforts include implementing the Zero Suicide framework in health settings. The Office of Suicide Prevention will infuse saturated efforts within five higher burden counties in the state. Within Denver, El Paso, Larimer, Mesa and Pueblo counties, Zero Suicide Colorado will work collaboratively with community mental health centers and health systems within five key counties of the state to implement all elements of Zero Suicide. The project will include training for both clinical and non-clinical staff, establishment of embedded screening and assessment protocols, and the development of robust suicide care management plans for clients at risk for suicide. Zero Suicide Colorado will also include telephonic follow-up services for suicidal individuals post-discharge from emergency and inpatient settings. Zero Suicide Colorado will streamline and coordinate existing implementation of the Zero Suicide framework, including a rollout of shared metrics across sites to more timely measure system changes as well as outcomes related to suicide attempts and suicide deaths within participating health sectors. The funding will allow Colorado to move from planning and pilot stages to full implementation, giving special attention to veterans not connected with Veterans Administration Health services. Zero Suicide Colorado will accomplish the following goals during the five-year project:

Goal 1: Reduce the suicide death rate among adults age 25 and older in Colorado from 25 deaths per 100,000 residents in 2015 to 19 by 9/29/22.

Goal 2: Reduce the suicide attempt hospitalization rates among adults age 25 and older in Colorado from 51.9 suicide attempt hospitalizations per 100,000 residents in 2015 to 45 by 9/29/22.

Goal 3: Reduce the suicide attempt emergency department visit rates among adults age 25 and older in Colorado from 74.5 suicide attempt emergency department visits per 100,000 residents in 2015 to 65 by 9/29/22.

The OSP will conduct process, outcome, and performance evaluations throughout the cooperative agreement, and will contract with evaluation partners at the University of Colorado, School of Public Health and Injury Control Research Center -Suicide Prevention at the University of Rochester to design and implement evaluation tools for the life of the project.