The Garrett Lee Smith (GLS) Suicide Prevention National Outcomes Evaluation is supported through contract no. HHSS283201200007I/HHSS28342002T (reference no. 283-12-0702) awarded to ICF International by the Center for Mental Health Services (CMHS), Substance Abuse and Mental Health Services Administration (SAMHSA), US Department of Health and Human Services (HHS).

OVERVIEW OF THE GARRETT LEE SMITH (GLS) NATIONAL OUTCOME EVALUATION AND IRB PROCESSES FOR CAMPUS GRANTEES

Taylor Moore, PhD
Sophia Zanakos, PhD
Connie Maples, MA

November 9, 2017
WEBINAR VIDEO AND HANDOUTS

• Today’s webinar is being recorded
• The slides were e-mailed to you prior to the webinar
  • If you did not receive the message, check your spam e-mail folder
• The video will be made available on the Suicide Prevention Resource Center website and the Suicide Prevention Data Center (SPDC)
NEED ASSISTANCE?

• For technical support
  • Contact us via the Questions pane
  • E-mail Betty.Treschitta@icf.com
Taylor Moore, PhD
Grantee Support Team Leader

Taylor.Moore@icf.com
ON TODAY’S AGENDA

• GLS National Outcomes Evaluation
• Prior Evaluation Findings
• Evaluation Design
• Data Collection for the National Outcomes Evaluation
• Institutional Review Board (IRB) Processes
• Suicide Prevention Data Center (SPDC)
• Evaluation Training and Technical Assistance
ICF AND THE NATIONAL OUTCOMES EVALUATION

• ICF has conducted the National Suicide Prevention Evaluation since 2005

• ICF has worked with over 200 Campus grantees and 199 State/Tribal grantees

• ICF houses the largest repository of youth suicide prevention data in the United States
WHY IS THE EVALUATION IMPORTANT?

The National Outcomes Evaluation can contribute to:

- Program improvement
- Local evaluation
- Sustainability
- The overall evidence base for suicide prevention programming
- Impact assessments of GLS program activities

SAMHSA Evaluation Goal

“The goal of the GLS Youth Suicide Prevention programs and the NSPL is the reduction of suicide and suicide attempts across America. In order to accomplish this critical, lifesaving work, it is essential that the effectiveness of these programs be evaluated on an ongoing basis, with implementation of suicide prevention programs continually informed by evaluation results.”
NOE DESIGN OVERVIEW

CORE & ENHANCED STUDY ANALYSIS
(Including Implementation and Proximal Outcomes)

- **Continuity of Care Study:** Assessing system conditions, capacity, and infrastructure.
- **Exploratory Study of Factors Influencing Care**
- **Training Study:** Assessing grantee training activities, settings, and recipients.
- **Randomized Control of Role Play and Booster Training**
- **Suicide Safer Environment:** Assessing grantee and provider practices within healthcare settings.
- **Quasi-Experimental Study Utilizing Medicaid Data**

**Cross Program Analysis and Impact:**
Addresses evaluation questions that cut across the three studies (core and enhanced) and utilizes secondary data sources as well as data collected from currently and previously funded grantees to assess the impact of suicide prevention activities on ultimate outcomes such as mental health service utilization, suicide attempts, and suicide deaths and explores where feasible the cost of implementation relative to the impact.
<table>
<thead>
<tr>
<th>Evaluation Questions</th>
<th>Study</th>
</tr>
</thead>
<tbody>
<tr>
<td>EQ 1: Are certain training approaches effective in building capacity to increase youth identification (when compared with more basic trainings)?</td>
<td>Training Study</td>
</tr>
<tr>
<td>EQ 2: Are GLS prevention activities effective in developing continuity of care from identification, to referral of youth at risk for suicide, to the provision of needed services?</td>
<td>Continuity of Care Study</td>
</tr>
<tr>
<td>EQ 3: To what extent are grantees and associated providers implementing suicide safer environment/Zero Suicide frameworks? Does this framework implementation lead to decreases in suicide attempts and completions?</td>
<td>Suicide Safer Environment Study</td>
</tr>
</tbody>
</table>
GLS SUICIDE PREVENTION PRIOR EVALUATION FINDINGS

Sophia Zanakos, PhD
Project Director
National Outcomes Evaluation

Sophia.Zanakos@icf.com
As of June 2017, Campus, State, & Tribal Grantees

Trained 1,304,600 people

Implemented 35,301 training activities

OVERVIEW OF SUICIDE PREVENTION TRAININGS

307 Trainings
8,316 People Trained

In the three months following the GLS training, respondents used their GLS training to...

- 76% Have informal conversations about suicide
- 57% Identify students at-risk for suicide
- 50% Link students at risk with services
- 29% Train others

TOP THREE TRAINING CURRICULA BY CAMPUS SIZE

- QPR
- Connect
- ASIST
- Campus Connect
- Kognito

- Small Campuses (n=8): QPR 55.1%, Connect 10.5%, ASIST 2.4%, Campus Connect 5.1%, Kognito 2.4%
- Medium Campuses (n=14): QPR 55.8%, Connect 2.4%, ASIST 2.4%, Campus Connect 2.4%, Kognito 4.7%
- Large Campuses (n=35): QPR 39.7%, Connect 2.9%, ASIST 4.7%, Campus Connect 2.9%

7.8% Of campus trainings are online

Online trainings participants do not participate in the TUP-S

Source: TUP-S, 1,334 respondents from cohorts 4-9

Source: TASP
What percent of your student body use behavioral health services on your campus?

<table>
<thead>
<tr>
<th>Pre-GIS Funding</th>
<th>During GIS Funding</th>
</tr>
</thead>
<tbody>
<tr>
<td>3.50</td>
<td>4.37</td>
</tr>
<tr>
<td>4.75</td>
<td>4.97</td>
</tr>
<tr>
<td>4.56</td>
<td>4.79</td>
</tr>
<tr>
<td>7.21</td>
<td></td>
</tr>
</tbody>
</table>

What are the top screening instruments used by GIS campuses of different sizes?

<table>
<thead>
<tr>
<th>Small Campuses</th>
<th>Medium Campuses</th>
<th>Large Campuses</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>OTHER</strong></td>
<td><strong>Columbia Suicide Center Assessment of Psychological Symptoms (CSCPS)</strong></td>
<td><strong>Columbia Suicide Screen (BSS)</strong></td>
</tr>
</tbody>
</table>

Cohort level information

54 campuses from cohorts 8-10 participated in the grant data from the GIS funded years and the four years prior to the grant.
SERVICES RECEIVED BY STUDENTS IDENTIFIED AS AT RISK ON CAMPUSES

<table>
<thead>
<tr>
<th>Service</th>
<th>Percent of Students</th>
</tr>
</thead>
<tbody>
<tr>
<td>Behavioral health counseling</td>
<td>82.67%</td>
</tr>
<tr>
<td>Medication management</td>
<td>12.75%</td>
</tr>
<tr>
<td>Crisis/emergency service</td>
<td>19.96%</td>
</tr>
<tr>
<td>Initiation of an on-campus emergency protocol</td>
<td>11.09%</td>
</tr>
</tbody>
</table>

Source: Student Behavioral Health Form; Summer 2016-2017; Campus Cohorts 7-10
YOUTH SUICIDE OUTCOMES FOLLOWING GLS IMPLEMENTATION

79,379 Attempts Avoided Between 2007–2010, resulting in $222.1 million in savings from averted hospitalizations and ED visits

Suicide Attempts per 1,000 Youth Aged 16–23

<table>
<thead>
<tr>
<th>GLS Implementation Year</th>
<th>GLS</th>
<th>GLS + 1YR</th>
<th>GLS + 2YR</th>
</tr>
</thead>
<tbody>
<tr>
<td>GLS Counties</td>
<td>10</td>
<td>8</td>
<td>7</td>
</tr>
<tr>
<td>Other Counties</td>
<td>12</td>
<td>8</td>
<td>7</td>
</tr>
</tbody>
</table>


427 Deaths Avoided Between 2007–2010

Suicide Deaths per 100,000 Youth Aged 10–24

<table>
<thead>
<tr>
<th>GLS Implementation Year</th>
<th>GLS</th>
<th>GLS + 1YR</th>
<th>GLS + 2YR</th>
</tr>
</thead>
<tbody>
<tr>
<td>GLS Counties</td>
<td>4</td>
<td>6</td>
<td>5</td>
</tr>
<tr>
<td>Other Counties</td>
<td>8</td>
<td>6</td>
<td>6</td>
</tr>
</tbody>
</table>

QUESTIONS?
DATA COLLECTION FOR THE NATIONAL OUTCOMES EVALUATION
PREVENTION STRATEGIES INVENTORY
Purpose

- Strategies: Inventory of all prevention strategies and products that are a part of grantee GLS funded programs
- Expenditures: Total amount of GLS funds (including match and in-kind) expended to date, and the percent of funds expended to date by strategy
SUICIDE PREVENTION STRATEGIES

- OUTREACH & AWARENESS
- GATEKEEPER TRAINING
- ASSESSMENT, CLINICAL & REFERRAL TRAINING
- LIFE SKILLS & WELLNESS
- SCREENING PROGRAMS
- HOTLINES, HELPLINES, TEXTLINES & CHATLINES
- MEANS RESTRICTION
- COALITIONS & PARTNERSHIPS
- POLICIES, PROTOCOLS & INFRASTRUCTURE
- OTHER PREVENTION STRATEGIES
- OUTREACH & AWARENESS
PREVENTION STRATEGIES INVENTORY (PSI)

- Strategies Budget Expenditure
  - Direct costs that you can map to each category (including staff time)
  - Aim to account for at least 75% of your expenditures
### Prevention Strategies Inventory (PSI)

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Who is responsible for data collection for the PSI?</td>
<td>Grantee Program Staff</td>
</tr>
<tr>
<td>How is the PSI administered/entered?</td>
<td>Web-based form entered into SPDC</td>
</tr>
<tr>
<td>When will the PSI be administered?</td>
<td>Ongoing throughout the grant period, but the PSI must be reviewed and submitted during quarterly administration periods</td>
</tr>
<tr>
<td>When will the PSI begin?</td>
<td>January 2018</td>
</tr>
</tbody>
</table>
Purpose

• Gathers aggregate training information for training activities implemented

• Collects trainee role, setting, intended outcome and booster training information
<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Who is responsible for TASP data collection/entry?</td>
<td>Grantee Program Staff</td>
</tr>
<tr>
<td>How is the TASP administered/entered?</td>
<td>Information submitted via the SPDC using web-based form or excel spreadsheet upload</td>
</tr>
<tr>
<td>When is the TASP administered?</td>
<td>Within 2 weeks of training activity, ongoing throughout the grant period</td>
</tr>
<tr>
<td>When will the TASP begin?</td>
<td>As soon as training activities begin</td>
</tr>
</tbody>
</table>
STUDENT BEHAVIORAL HEALTH FORM
STUDENT BEHAVIORAL HEALTH FORM (SBHF)

...Will be completed a total of three times by all campus grantees over the course of their grant period

...Will be completed during late spring/early summer (May 7-June 24)

...Will include questions regarding the most recent academic year and the four prior academic years.
STUDENT BEHAVIORAL HEALTH FORM (SBHF)

The SBHF gathers information about:

- Behavioral health services on campus
- Screenings and assessments of suicide risk
- Services for students at risk of suicide
- Suicide attempts and completions

The instrument includes a mix of quantitative questions (e.g., how many suicide attempts occurred on campus?) and policy related questions (e.g., after a suicide attempt, what happens?).
## STUDENT BEHAVIORAL HEALTH FORM (SBHF)

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Who is responsible for data collection for the SBHF?</td>
<td>Grantee Program Staff</td>
</tr>
<tr>
<td>How is the SBHF administered/entered?</td>
<td>Web-based form entered into SPDC</td>
</tr>
<tr>
<td>When will the SBHF be administered?</td>
<td>Annually, during the late spring/early summer</td>
</tr>
</tbody>
</table>
INSTITUTIONAL REVIEW BOARD (IRB) PROCESSES
ROLE OF THE IRB

Protect the rights and welfare of individual research subjects and ensure:

• Risk to subjects are minimized and reasonable in relation to anticipated benefits
• Selection of subjects is fair
• Informed consent is appropriately documented
• When appropriate, the research plan makes provisions for monitoring data collection
• Privacy and confidentiality of research subjects is appropriately protected
ROLES AND RESPONSIBILITIES

• ICF’s IRB reviews the National Outcomes Evaluation protocol and provides approval for ICF to conduct the State/Tribal and Campus evaluations

• Grantee IRB (or appropriate entity) reviews relevant National Outcomes Evaluation data collection activities before grantee can participate/submit data and either

  – Provides IRB approval
  – Determines monitoring is not required by the grantee IRB (i.e., determines data collection is exempt from IRB approval)
IRB PROCESSES

**IRB Preparation**
Determine what approval(s) are needed to participate in the NOE:
- Campus IRB

*ICF will provide materials and technical assistance to help with your local application*

**IRB Submission**
Submit local IRB application, which may require:
- Objective of the study and instruments used
- Respondents (how many, who)
- Risk to human subjects
- Data collection methods

**Update ICF**
Once the review is complete, grantees must submit documentation of the determination (e.g., IRB approval or exempt from IRB approval) to Connie.Maples@icf.com

**Keep IRB Status Current**
- Update your local IRB about data collection revisions (via amendments)
- Know your local IRB requirements for renewal
  
  *Submit renewals to Connie.Maples@icf.com*
NEXT STEP

Prepare your IRB package and submit for approval ASAP!

Grantees are expected to have notification of approval or exemption by mid-January, 2018.
QUESTIONS?
WHAT CAN GRANTEES DO ON THE SPDC?

- Enter, download, modify data
- Download evaluation instruments
- Monitor data collection
- Access reports
- Find links to helpful resources
- View evaluation announcements
HOW DO I ACCESS THE SPDC?

Grantee SPDC users provided with username and password
SPDC USERS

• No public access - Access requires a user name and password

• Who are appropriate users of the SPDC in your community?

• Are there any concerns about who to include/exclude?

• SPDC has various levels of security for users
SPDC USERS (CONT.)

- Project Director
- National Evaluation Team
- SAMHSA GPOs
- Sub grantee Staff
- Evaluator
- SPRC PSs
- Program Staff
- Trainers
- GLS Program Partners
SECURITY AND USER LEVELS

Determined by the primary roles they serve

<table>
<thead>
<tr>
<th>Role</th>
<th>DATA DOWNLOAD, VIEW, EDIT, DELETE</th>
<th>RESPONSE MONITORING TABLES &amp; DATA ISSUE REPORTS</th>
<th>VIEW AGGREGATE-LEVEL REPORTS</th>
<th>VIEW SITE-LEVEL REPORTS</th>
<th>DATA ENTRY VIA UPLOAD</th>
<th>DATA ENTRY VIA ONLINE SURVEY</th>
<th>RECEIVES EMAIL UPDATES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grantee Site Administrator</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>Optional</td>
</tr>
<tr>
<td>Site User</td>
<td></td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>Optional</td>
</tr>
<tr>
<td>Contact User</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>X</td>
<td>Optional</td>
</tr>
<tr>
<td>Contact-No SPDC Access</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

- No information reported with <10 cases
ASSIGNING USER LEVELS

- ICF will create one site administrator account for each grantee
- Site administrators register new users
- Site administrators can also...
  - Assign user security level
  - Provide username and password
  - Edit or delete users
ASSIGNING USER LEVELS
Working with Partners – Direct Entry

SPDC

- Project Director: Admin
- Evaluator: Admin
- Trainer: Contact
- Trainer: Contact
- Trainer: Contact
ASSIGNING USER LEVELS
Working with Partners – Admin Entry

SPDC

Project Director: Admin
Program Director: Admin

Trainer
Trainer
Trainer
Welcome to the SPDC

The Suicide Prevention Data Center (SPDC) is an online data collection and management system to support Garrett Lee Smith (GLS) Youth Suicide Prevention and Early Intervention Program grantees in implementing the cross-site evaluation as required by the Garrett Lee Smith Memorial Act (GLSMA). The SPDC is a mechanism for communicating evaluation activities, managing and storing data, and disseminating evaluation findings. The SPDC provides necessary resources to grantees and supports them in implementing the cross-site evaluation. Additionally, the SPDC is a resource for other GLS project stakeholders.

Background about the GLS program

The GLSMA, signed into law in October 2004, was the first legislation to provide funding specifically for youth suicide prevention programs. Under this legislation, funding was set aside for campuses, states, tribes and US territories to develop, evaluate, and improve early intervention and suicide prevention programs. This funding appropriation authorizes the GLS Suicide Prevention Program, which is administered by SAMHSA’s Center for Mental Health Services (CMHS). There are currently 104 GLS grantees funded: 59 campus grantees and 45 state and tribal grantees.

On this site you can:
- create customizable data summaries,
- review descriptions of evaluation data available by request,
- and request access to the raw data.

“Because of the tragic prevalence of suicidal ideation in American Indian and Alaska Native (AI/AN) communities, SAMHSA awarded a large proportion of GLS grants to AI/AN communities. Many Tribal communities have a history of distrust resulting from the use of their community data to gain media attention and at times grant funding for programs that do not serve their community members. Often community members become opposed to all data gathering activities based on their experiences with how the data was misused in the past. Even when re-assured that funding is being used in certain ways, people may distrust the intent based on past and current experiences in the community. Please use these data carefully and with respect.” – Adapted from Caroline Cruz, EagleCruz Consulting A© by Jannae Parrot, author of the Oregon’s Tribal Needs Assessment Workbook, prepared for the State of Oregon, 2012, with minor changes by the Life is Sacred Native Youth Suicide Prevention Program Evaluation Team.

WWW.SUICIDEPREVENTION-DATACENTER.COM
## ICF Demo Grantee - Campus Cohort 11  Site ID: 9975

<table>
<thead>
<tr>
<th>Instrument</th>
<th>Submission Status</th>
<th>Instrument Details</th>
<th>Data Issues</th>
</tr>
</thead>
<tbody>
<tr>
<td>Training Activities (TASP)</td>
<td>Date of last TASP submission: -</td>
<td>Total number of TASP submitted: 0</td>
<td>Number of data issues to resolve: 0</td>
</tr>
<tr>
<td>Prevention Strategies Inventory (PSI)</td>
<td>Current PSI status: No data submitted</td>
<td>Total number of strategies: 0</td>
<td>Number of data issues to resolve: 0</td>
</tr>
<tr>
<td>Student Behavioral Health Form (SBHF)</td>
<td>Current SBHF status</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

## Announcements

- **Nov 06, 2017:** PSI Data Issues have been refreshed. Please feel free to address these anytime before the next PSI administration window closes.
- **Oct 30, 2017:** Grantee SPDC Administrators can access a new "SPDC Users" report from the Administration tab, to quickly see who has access to the website and what data reporting tasks they have been assigned.
- **Oct 30, 2017:** A new PSI Data Sharing Report has been posted. This can be found under the Reports tab.

## Most Recent Reports

- PSI Data Sharing Report - State and Tribal Sites
- PSI Data Sharing Report - Campus Sites
### NAVIGATION

**Garrett Lee Smith**  
**Memorial Suicide Prevention Evaluation**

<table>
<thead>
<tr>
<th>Instrument</th>
<th>Submission Status</th>
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<td></td>
<td></td>
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</tbody>
</table>

### ANOUNCEMENTS

**Nov 06, 2017**: PSI Data Issues have been refreshed. Please feel free to address these anytime before the next PSI administration window closes.

**Oct 30, 2017**: Grantee SPDC Administrators can access a new "SPDC Users" report from the Administration tab, to quickly see who has access to the website and what data...
EVALUATION TRAINING
AND TECHNICAL
ASSISTANCE
EVALUATION TRAINING AND TECHNICAL ASSISTANCE

Technical Assistance Liaison (TAL)
- Support data collection and submission
- Attend initial GPO calls
- Overall NOE guidance

Data Collection Liaison (DCL)
- Support data collection and submission
- NOE instrument specific guidance

Evaluation and Reporting
## TECHNICAL ASSISTANCE LIAISONS

<table>
<thead>
<tr>
<th>Grantees</th>
<th>Technical Assistance Liaisons (TALs)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Johns Hopkins University • La Salle University • Providence College •</td>
<td>Connie Maples</td>
</tr>
<tr>
<td>Wayne State University • University of Northern Iowa • University of</td>
<td><a href="mailto:Connie.Maples@icf.com">Connie.Maples@icf.com</a></td>
</tr>
<tr>
<td>Texas-Rio Grande Valley</td>
<td>956-722-0474 (CST)</td>
</tr>
<tr>
<td>Clark Atlanta University • University of the South California State</td>
<td>Taylor Moore</td>
</tr>
<tr>
<td>University Monterey Bay • College of Muscogee Nation • Humboldt State</td>
<td><a href="mailto:Taylor.Moore@icf.com">Taylor.Moore@icf.com</a></td>
</tr>
<tr>
<td>University • Montclair State University • North Carolina Central</td>
<td>404-320-4425 (EST)</td>
</tr>
<tr>
<td>University</td>
<td>Sophia Zanakos</td>
</tr>
<tr>
<td>Carleton College • East Central University • Southeast Community College</td>
<td><a href="mailto:Sophia.Zanakos@icf.com">Sophia.Zanakos@icf.com</a></td>
</tr>
<tr>
<td>• Western Oregon University</td>
<td>301-572-0239 (EST)</td>
</tr>
</tbody>
</table>
## DATA COLLECTION LIAISON CONTACTS

<table>
<thead>
<tr>
<th>NOE Instrument</th>
<th>Data Collection Liaisons (DCLs)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prevention Strategies Inventory (PSI)</td>
<td>Nora Kuiper</td>
</tr>
<tr>
<td></td>
<td><a href="mailto:gls-psi@icf.com">gls-psi@icf.com</a></td>
</tr>
<tr>
<td></td>
<td>646-695-8128 (EST)</td>
</tr>
<tr>
<td>Student Behavioral Health Form (SBHF)</td>
<td>Jessie Rouder</td>
</tr>
<tr>
<td></td>
<td><a href="mailto:Jessie.Rouder@icf.com">Jessie.Rouder@icf.com</a> or <a href="mailto:gls-sbhf@icf.com">gls-sbhf@icf.com</a></td>
</tr>
<tr>
<td></td>
<td>516-887-3201 (EST)</td>
</tr>
<tr>
<td>Training Activity Summary Page (TASP)</td>
<td>Brandee Hicks</td>
</tr>
<tr>
<td></td>
<td><a href="mailto:gls-tasp@icf.com">gls-tasp@icf.com</a></td>
</tr>
<tr>
<td></td>
<td>404-592-2198 (EST)</td>
</tr>
</tbody>
</table>
GRANTEE ROLES AND RESPONSIBILITIES

- Obtain appropriate local approvals including IRB approval
- Participate in training and technical assistance activities
- Participate in data collection and submission activities
- Send monthly call agenda/updates to your TAL
MARK YOUR CALENDAR!

National Outcomes Evaluation Data Collection Instruments and Data Submission Processes

December 7, 2017
3:00-4:30pm ET
QUESTIONS?
Thank you