

Suicide Prevention Training Resources for Behavioral Health Clinicians

The first three trainings are available online (CAMS, CALM, C-SSRS). The next two are intermittently available in person here in Utah (CBT for Suicide Prevention, Crisis Response Planning). The remaining in-person trainings must be paid for and requested via a third party as described below. For online links to these and other clinical training resources, visit <https://www.utahsuicideprevention.org/education-training/clinical-training>.

Training Name	Description	Time Requirement	Cost	Contact/ Where To Access Training
Collaborative Assessment and Management of Suicide Risk (CAMS)	<p>Outpatient care is the explicit goal of the Collaborative Assessment and Management of Suicidality (CAMS), which is designed to strengthen the therapeutic alliance and increase patient motivation. CAMS is best understood as a therapeutic framework that emphasizes a collaborative assessment and treatment planning process between the patient at risk of suicide and the clinician.</p> <p>CAMS is supported by six published correlational studies and one randomized feasibility study (Comtois et al., 2011).</p>	Four Hours for the Online Version, or Intensive 9.5 Hour On Site Training with Ongoing Case Consultation	\$135.00/clinician for the online version	https://cams-care.com/cams-online-training/
Counseling on Access to Lethal Means (CALM)	This brief online course explains why means restriction is an important part of a comprehensive approach to suicide prevention. It teaches how to ask suicidal patients/clients about their access to lethal means, and work with them and their families to reduce their access.	Two Hours	None	http://training.sprc.org/enrol/index.php?id=3
Columbia Suicide Severity Rating Scale (C-SSRS)	The C-SSRS is an evidence-based questionnaire used to assess the full range of suicidal ideation and behavior with criteria for next steps. The C-SSRS can be used across various settings including primary care, clinical practice, military setting, correction facilities and more.	Twenty Minutes to Two hours	None	http://cssrs.columbia.edu/training/training-options/ . For additional training or support contact kmyers@utah.gov
Cognitive Behavioral Therapy for Suicide Prevention	<p>This intervention, known as CBT-SP, is theoretically grounded in principles of cognitive behavior therapy (CBT); dialectical behavioral therapy (DBT); and targeted therapies for suicidal, depressed adolescents and adults.</p> <p>CBT-SP can be used with adults and adolescents and includes (Stanley et al., 2009):</p>	Two Full Days In Person	Varies	kmyers@utah.gov . DSAMH offers this training in Utah once or twice per year

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	<p>Cognitive restructuring strategies, such as identifying and evaluating automatic thoughts from cognitive therapy</p> <p>Emotion regulation strategies, such as action urges and choices, emotions thermometer, index cue cards, mindfulness, opposite action, and distress tolerance skills from DBT</p> <p>Other CBT strategies, such as behavioral activation and problem-solving strategies.</p> <p>Because adolescents' suicidal crises occur within an environment that may include problematic relationships, abuse, family dysfunction, or poor school performance, CBT-SP includes family interventions if needed.</p>			
Crisis Response Planning	This full-day workshop is designed to enhance professionals' knowledge about crisis response planning for managing acute suicide risk, and to increase their ability to confidently and competently administer this intervention with at-risk individuals. The second half of the workshop includes clinical demonstrations by the instructor and skills practice by attendees, which are designed for clinicians to acquire skill competency.	Eight Hours	Varies	kmyers@utah.gov . DSAMH offers this training in Utah a few times per year.
Survivors of Suicide Attempt Support Group Facilitation Training	<p>SOSA (Survivors of Suicide Attempt) Support Group Facilitation Training: Didi Hirsch Mental Health Services has created a 2-day training designed to prepare those interested in developing and facilitating the</p> <p>Survivors of Suicide Attempts Support Group. Training participants will learn techniques for assessing and managing risk and will gain a thorough understanding of the structure and content of the group as described in The Manual for Support Groups for Suicide Attempt Survivors.</p>	Two days in person	ssilverstein@didihirsch.org (310) 895-2347	http://www.didihirsch.org/survivors-of-suicide-attempt-support-group
Dialectical Behavioral Therapy	<p>Intensive clinical training with ongoing case consultation.</p> <p>DBT has four components, although these may be adjusted in practice to suit specific circumstances:</p> <p>A skills training group meeting once a week for 24 weeks</p> <p>Individual treatment once a week, running concurrently with the skills group</p> <p>Phone coaching, upon request by the client</p>	40 hours of didactic training, plus clinical experience and certification process	https://behavioraltech.org/training/prepare-for-dbt-certification/#Education	https://behavioraltech.org/training/prepare-for-dbt-certification/#Education

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	<p>Consultation team meetings—a kind of “therapy for the therapists”</p> <p>Numerous research studies, including several randomized control trials, have shown DBT to be effective in reducing suicidal behavior, psychiatric hospitalization, and other behavioral health issues (Linehan et al., 2006).</p>			
Assessing and Managing Suicide Risk	<p>Based on recommendations from a task force of clinician-researchers convened in 2004 by the SPRC and the AAS. The workshop is organized by a sequential presentation of 24 core competencies, with a special focus on 8. The program teaches clinicians to estimate acute and chronic risk by gathering and synthesizing information related to suicidality (past and present), mental disorders, mental status, and other factors known to correlate with suicide risk. The program also focuses on cultural competency in working with individuals at risk for suicide. Program revamped in 2014 to focus on enhanced risk formulation (see Pisani et al., 2015)</p>	7 hrs	Participant training fee is \$115; Trainer fees vary but range from \$1000 to \$2500 per event. Train the Trainers is \$750 per person plus master trainer time and travel	http://www.sprc.org/resources-programs/assessing-and-managing-suicide-risk-core-competencies-mental-health-professionals
Recognizing and Responding to Suicide Risk	<p>An advanced two-day interactive training for mental health clinicians who want to acquire competency-based skills for working with clients at risk for suicide." Directly based on the set of 24 core clinical competencies that the SPRC and AAS developed. "These competencies comprehensively define the knowledge, skills and attitudes required to effectively assess, manage, and treat individuals at risk for suicide. The goal of the training is for clinicians to become more confident, competent, and prepared to meet the needs of distressed clients and their families (SPRC.org).</p>	Two Days	\$1,500 per event (max 50 + participant fee (\$80 per person) + shipping + trainer's fee (\$3,500) + trainer's travel and lodging + 23% indirect fee. Train the trainer also available.	http://www.suicidology.org/training-accreditation/rrsr/training-fees