If you want to get further with Zero Suicide implementation here are some questions to contemplate and suggestions to help you in your Zero Suicide journey.

**1** Review the progress that you’ve made by looking back at your organizational self-study and your workforce survey.

Celebrate those successes! And use the self-study and survey answers to focus on the areas to work on next.

- What elements need focused attention?
- What things couldn’t you do six months ago that you might be able to work on now?

**2** Review your goals. Have you reached some goals but not others?

Scaffold out the steps you need to take to reach those goals.

- What do you need to do first, second, next, to eventually reach one of your goals?

What barriers continue to prevent you from reaching one (or all) of your goals?

- Do you need to engage leadership more? (What does engaged leadership look like?)
- Do you need some creative brainstorming to solve remaining barriers?

Do you need to adjust your goal(s)?

- Do you need to change your goals to meet your capacity instead of thinking you don’t have the capacity to reach your goal?

**3** How are you checking fidelity for the different Zero Suicide policies, procedures, and interventions you’ve implemented?
If you haven’t started fidelity checking, it’s a good idea to get a plan in place. This work is under the Improve element.

If you’re seeing low levels of fidelity, ask staff about the barriers they are experiencing. They could struggle with remembering, not feel confident enough, or not have the resources they need.

Some examples of solutions might be:

- Extra supervision focused on this topic.
- Creating a one-pager to help remind staff:
  - How to do it to fidelity (e.g., the steps to take for a warm hand off)
  - Why it’s important to do it to fidelity (e.g., why it’s important to screen everyone at each encounter).
- Shadowing a role model (e.g., to watch how they assess someone at risk of suicide).
- Group supervision to brainstorm solutions.

Communication is an important element for effective and sustained change. Do you need to refocus your communication efforts?

Some questions to reflect on might be:

- How are you talking about Zero Suicide at your organization and how often?
- What channels are you using to communicate (e.g., email, newsletter, committee meetings, team meetings, during supervision)? Do you need different channels?
- What are you communicating about Zero Suicide and the importance of suicide prevention?
- How do you get feedback from staff about their thoughts, feelings, and concerns about the work connected to Zero Suicide?

Consider refreshing your Zero Suicide implementation team members.

Some questions to reflect on might be:

- Do some people need a break to focus on other things?
- Are there new staff/supervisors who are passionate about suicide prevention that could be included?
- Do people need to reconnect with their “why”? 
6 How much Just Culture have you been able to infuse into your organization?

Do you have a review process (e.g., root cause analysis) for adverse events like a suicide death?

- If you have one, how does it look at the clinician’s role and responsibility in the event?
- How are staff involved in the review process? Are they expected to attend the review?

Does the process and language focus blame on the individual or does it focus on organizational changes?

- Have you asked staff how they feel about the process?
- Do you have a postvention policy that sets out ways staff are supported after the death of a client?

7 Check your organization’s capacity. Do you need a refresh on your implementation capacity?

It is difficult to have long-term, robust implementation capacity when there are staff and other resource shortages. You can adjust your implementation based on your capacity instead of waiting for an influx of resources to continue.

- What small things can you do, whether they are steps toward a larger goal, or smaller goals on their own?
- Can you make your implementation team meetings working meetings?
- Can leadership help increase implementation capacity? Help set priorities?

8 Have you implemented some new policies, procedures, or practices related to Zero Suicide but are having trouble sustaining them?

First you want to figure out where the roadblocks to sustainability are. Barriers aren’t always easy to overcome, but there are strategies that can help reduce them. The key is understanding the type of barrier and then digging deep enough to understand the actual root of it rather than what might be on the surface.

- Is it a staff level barrier? (i.e., I don’t have the time to do this. I don’t think it’s a good idea.)
- Is it an organizational barrier? (i.e., Our grant money ran out. Our technology doesn’t support this.)
- A system-level barrier? (i.e., This isn’t a payable service.)
Including people with lived experience can be a sticking point for many organizations. Involving people with lived experience in implementation is important but it can also be difficult to accomplish. Here are some ideas:

- Can you include staff members who identify as having lived experience with suicide? They don’t have to identify how if they don’t want to.
- You can include clinicians who have lost a client to suicide.
- You could send out surveys to current clients and ask for anonymous feedback about what is helpful or unhelpful regarding the suicide care they received/are receiving.

Looking for more Zero Suicide support? If you haven’t already, join and use the Zero Suicide Listserv—you can post questions, obstacles, successes, and outcomes with the larger Zero Suicide community. And you can always contact Zero Suicide Institute to learn about available training and consultation.