UPMC WESTERN PSYCHIATRIC

Effectiveness of QPR and Other Gatekeeper Trainings

Stacey Buettner, LCSW
UPMC Western Behavioral Health at Safe Harbor

Objectives

- Become familiar with different types of Gatekeeper trainings available
- Identify potential limitations of Gatekeeper trainings according to literature
- Propose solutions to improve long term effectiveness of Gatekeeper trainings



Definitions

Gatekeeper

- Someone in a position to recognize a crisis and the warning signs that someone may be contemplating suicide.
 - Anyone parents, friends, neighbors, teachers, ministers, doctors, nurses, office supervisors, squad leaders, foremen, police officers, advisors, caseworkers, firefighters, etc.
- Gatekeeper training programs are designed to improve knowledge, skills and motivation to prevent suicide
- Garrett Lee Smith Memorial Act (2004) prioritizes the training of suicide prevention gatekeepers



- Question, Persuade, Refer (QPR)
 - Emergency mental health intervention for suicidal persons created in 1995 by Paul Quinnett
 - 1-2 hour training
 - Key Components:
 - Recognize the warning signs of suicide
 - Be able to ask if a person is experiencing thoughts of suicide
 - Know how to offer hope
 - Know how to get help and save a life
 - Specialized trainings available (3-8 hours trainings)
 - An estimated one million American citizens have been trained in QPR



- Applied Suicide Intervention Skills Training (ASIST)
 - Developed by Livingworks, 1983
 - 2 day/15 hour training
 - Use of audiovisuals, discussions and simulation
 - Key Components:
 - Recognizing signs of suicide
 - Providing a skilled intervention
 - Developing a safety plan to keep someone alive
 - Over one million people trained in ASIST



- S.A.V.E.
 - Developed by the Education Corps of the VA Center for Excellence for Suicide Prevention
 - 1-2 hour training
 - Key components:
 - Signs of suicidal thinking should be recognized
 - Ask the most important question of all "are you thinking of killing yourself?"
 - Validate the Veteran's experience
 - Encourage treatment and Expedite getting help



Has anyone participated in a gatekeeper training?

Trainers of Gatekeeper trainings?



Research on Effectiveness

- Literature suggests initial effectiveness (trainees reporting higher levels of suicide knowledge, skills, self-efficacy and intent to intervene)
- Pre and post tests often used to determine initial effectiveness
- Effectiveness over time is in question
 - Studies identified significant deterioration after 3 and 6 months in self efficacy
- Limited research on influence on trainees beyond 1 year



Suggestions to Improve Effectiveness

- Qualitative study results:
 - Social Network
 - Continued Learning
 - Community Outreach
 - Accessibility
 - Reminders
 - Program Improvement
 - Certification
- QPR Institute recommends that at least one person per family unit should be trained in QPR
- Considerations for refresher trainings following initial gatekeeper trainings



Questions for Consideration

• If refresher trainings are to be offered, how often would be recommended?

 What benefits and challenges do you see with providing gatekeeper trainings online?



References

- Garrett Lee Memorial Act. https://www.congress.gov/bill/108th-congress/senate-bill/2634. Accessed October 19, 2021.
- Litteken, C., Sale, E. Long-Term Effectiveness of the Question, Persuade, Refer (QPR) Suicide Prevention Gatekeeper Training Program: Lessons from Missouri. Community Mental Health. 2018, 54, 282-292.
- Livingworks. www.livingworks.net. Accessed October 11, 2021.
- QPR Institute. https//qprinstitute.com/about-qpr Accessed October 11, 2021.
- SAVE. <u>www.mentalhealth.va.gov/suicide_prevention/index.asp</u>. Accessed October 19, 2021.
- Shtivelband, Annette et al. Sustaining the Effects of Gatekeeper Suicide Prevention Training: A Qualitative Study. *Crisis*. 2015, Vol 36 (2), 102-109.

