

118TH CONGRESS
1ST SESSION

S. 853

To direct the Secretary of Veterans Affairs to establish the Zero Suicide Initiative pilot program of the Department of Veterans Affairs.

IN THE SENATE OF THE UNITED STATES

MARCH 16, 2023

Ms. ROSEN (for herself and Mr. CRAMER) introduced the following bill; which was read twice and referred to the Committee on Veterans' Affairs

A BILL

To direct the Secretary of Veterans Affairs to establish the Zero Suicide Initiative pilot program of the Department of Veterans Affairs.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “VA Zero Suicide Dem-
5 onstration Project Act of 2023”.

6 **SEC. 2. ZERO SUICIDE INITIATIVE PILOT PROGRAM.**

7 (a) ESTABLISHMENT.—Not later than 180 days after
8 the date of the enactment of this Act, the Secretary of
9 Veterans Affairs shall establish a pilot program called the

1 “Zero Suicide Initiative” (referred to in this section as the
2 “program”).

3 (b) CURRICULUM.—The program shall implement the
4 curriculum of the Zero Suicide Institute of the Education
5 Development Center (referred to in this section as the “In-
6 stitute”) to improve safety and suicide care for veterans,
7 thereby significantly reducing rates of suicide.

8 (c) DEVELOPMENT.—

9 (1) IN GENERAL.—The first year of the pro-
10 gram shall be dedicated to program development, in-
11 cluding planning and site selection.

12 (2) CONSULTATION.—In developing the pro-
13 gram, the Secretary shall consult with—

14 (A) the Secretary of Health and Human
15 Services;

16 (B) the National Institutes of Health;

17 (C) public and private institutions of high-
18 er education;

19 (D) educators;

20 (E) experts in suicide assessment, treat-
21 ment, and management;

22 (F) veterans service organizations; and

23 (G) professional associations the Secretary
24 of Veterans Affairs determines relevant to the
25 purposes of the program.

1 (d) STAFF LEADERS; PROGRAM ELEMENTS.—The
2 program shall consist of not less than ten weeks of edu-
3 cation regarding suicide care, beginning with the selection
4 of five to ten staff leaders from each site selected under
5 subsection (e) who shall carry out the following program
6 elements:

7 (1) Complete the organizational self-study of
8 the Institute as a team.

9 (2) Attend the two-day Zero Suicide Academy
10 of the Institute.

11 (3) Formulate a plan to collect data to support
12 evaluation and quality improvement using the data
13 elements worksheet of the Institute.

14 (4) Communicate to staff at the respective site
15 the adoption of a specific suicide care approach.

16 (5) Administer the workforce survey of the In-
17 stitute to all staff at the respective site to learn
18 more about perceived comfort with and competence
19 in caring for patients at risk of suicide.

20 (6) Review, develop, and implement training on
21 processes and policies regarding patients at risk of
22 suicide, including—

23 (A) screening;

24 (B) assessment;

25 (C) use of electronic health records;

1 (D) risk formulation;

2 (E) treatment; and

3 (F) care transition.

4 (e) SITES.—

5 (1) NUMBER.—The Secretary shall carry out
6 the program at five medical centers of the Depart-
7 ment of Veterans Affairs, one of which primarily
8 serves veterans who live in rural and remote areas
9 as determined by the Secretary.

10 (2) TIMELINE.—The Secretary shall select—

11 (A) 15 candidate sites for the program not
12 later than 180 days after the date of the enact-
13 ment of this Act; and

14 (B) the final five sites not later than 270
15 days after the date of the enactment of this
16 Act.

17 (3) CONSULTATION.—In selecting sites at which
18 to carry out the program, the Secretary shall consult
19 with experts including officials of—

20 (A) the National Institute of Mental
21 Health;

22 (B) the Substance Abuse and Mental
23 Health Services Administration of the Depart-
24 ment of Health and Human Services;

1 (C) the Office of Mental Health and Sui-
2 cide Prevention of the Department of Veterans
3 Affairs;

4 (D) the Health Services Research Division
5 of the Department of Veterans Affairs;

6 (E) the Office of Health Care Trans-
7 formation of the Department of Veterans Af-
8 fairs; and

9 (F) the Zero Suicide Institute.

10 (4) FACTORS.—In selecting sites for the pro-
11 gram, the Secretary shall consider the following fac-
12 tors:

13 (A) Interest in, and capacity of, the staff
14 of the medical centers to implement the pro-
15 gram.

16 (B) Geographic variation.

17 (C) Variations in size of medical centers.

18 (D) Regional suicide rates of veterans.

19 (E) Demographic and health characteris-
20 tics of populations served by each medical cen-
21 ter.

22 (f) ANNUAL PROGRESS REPORT.—

23 (1) IN GENERAL.—Not later than two years
24 after the date on which the Secretary establishes the
25 program, and annually thereafter until termination

1 of the program, the Secretary shall submit to the
2 Committee on Veterans' Affairs of the Senate and
3 the Committee on Veterans' Affairs of the House of
4 Representatives a report on the program.

5 (2) ELEMENTS.—Each report under paragraph
6 (1) shall include the following:

7 (A) Progress of staff leaders at each site
8 in carrying out tasks under paragraphs (1)
9 through (5) of subsection (d).

10 (B) The percentage of staff at each site
11 trained under paragraph (6) of subsection (d).

12 (C) An assessment of whether policies and
13 procedures implemented at each site align with
14 standards of the Institute with regards to—

15 (i) suicide screening;

16 (ii) lethal means counseling;

17 (iii) referrals for comprehensive as-
18 sessment of suicidality;

19 (iv) safety planning for patients re-
20 ceiving referrals under clause (iii);

21 (v) risk management during care
22 transitions; and

23 (vi) outreach to high-risk patients.

24 (D) A comparison of the suicide-related
25 outcomes at program sites and those of other

1 medical centers of the Department of Veterans
2 Affairs, including—

3 (i) the percentage of patients screened
4 for suicide risk;

5 (ii) the percentage of patients coun-
6 seled in lethal means safety;

7 (iii) the percentage of patients
8 screened for suicide risk referred for com-
9 prehensive assessment of suicidality;

10 (iv) the percentage of patients re-
11 ferred for comprehensive assessment who
12 complete safety planning;

13 (v) emergency department utilization;

14 (vi) inpatient psychiatric hospitaliza-
15 tions;

16 (vii) the number of suicide attempts
17 among all patients and among patients re-
18 ferred for comprehensive assessment of
19 suicidality; and

20 (viii) the number of suicide deaths
21 among all patients and among patients re-
22 ferred for comprehensive assessment of
23 suicidality.

24 (g) FINAL REPORT.—

1 (1) IN GENERAL.—Not later than one year
2 after the termination of the program, the Secretary
3 shall submit to the Committee on Veterans' Affairs
4 of the Senate and the Committee on Veterans' Af-
5 fairs of the House of Representatives a final report.

6 (2) ELEMENTS.—The report under paragraph
7 (1) shall include the following:

8 (A) A detailed analysis of information in
9 the annual reports under subsection (f).

10 (B) An evaluation of the effectiveness and
11 outcomes of the program, including an evalua-
12 tion of all data collected during the program.

13 (C) The determination of the Secretary
14 whether it is feasible to continue the program.

15 (D) The recommendations of the Secretary
16 whether to expand the program to additional
17 sites, extend the program, or make the program
18 permanent.

19 (h) TERMINATION; EXTENSION.—

20 (1) IN GENERAL.—Subject to paragraph (2),
21 the program shall terminate on the date that is five
22 years after the date on which the Secretary estab-
23 lishes the program under subsection (a).

24 (2) AUTHORITY TO EXTEND.—The Secretary
25 may extend the program for not more than two

1 years if the Secretary notifies Congress in writing of
2 such extension not less than 180 days before the ter-
3 mination date under paragraph (1).

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