Nationwide Children's
When your child needs a hospital, everything matters.

The Ohio State University
College of Medicine

Center for Accelerating Suicide Prevention in Real World Settings (ASPIRES) Annual Pilot Program: Practice-Based Research on Youth Suicide Prevention

Supported by P50 Center grant funding from the National Institute of Mental Health (NIMH) of the National Institutes of Health (NIH), the Center for Accelerating Suicide Prevention in Real-World Settings (ASPIRES) aims to accelerate the development and implementation of effective interventions to reduce suicide in children and adolescents. Jeff Bridge, PhD, director of the Center for Suicide Prevention and Research (CSPR) in the Abigail Wexner Research Institute at Nationwide Children's Hospital, and Cynthia Fontanella, PhD, a principal investigator in CSPR, lead ASPIRES and its investigators as co-directors.

The goal of the ASPIRES pilot program, Practice-Based Research on Youth Suicide Prevention, is to fund small-scale, innovative or exploratory research focused on youth suicide prevention.

Up to two projects will be funded each cycle. For each project, up to $50,000 in direct costs may be budgeted for a one- or two-year project. Indirect costs are allowed.

Applicant Eligibility

The applicant/principal investigator must be affiliated with Nationwide Children's Hospital and/or The Ohio State University. Colleagues at other universities may be co-investigators.

Two applicant tracks are available:

Early-Stage Investigators (e.g., tenure- or research-track assistant professors, clinical scholars, postdoctoral fellows, medical residents, research fellows, research scientists).

Established Investigators (i.e., tenured clinical scholar or research professors at any level with publication and funding history).

Pilot grants for early-stage investigators are designed to facilitate guidance and supervision from an established mentor in a selected area of suicide research. Applicants on this track must select a mentor from Nationwide Children's Hospital or The Ohio State University (see Appendix). The mentor must have an academic rank of associate or full professor and an established record of suicide research and publication relevant to the researcher's proposed study.

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Project Requirements

All funded projects must have youth suicide prevention as their focus, and the target population must be youth and/or young adults. They must have the potential to generate academic publications, and priority will be given to projects with potential to develop pilot data that would lead to applications for extramural federal and foundation funding. **If participants are to be recruited from Nationwide Children's Hospital, approval prior to applying is necessary. Please follow the procedures outlined below and allow a month to receive approval.**

A variety of project types are supported, including:

- Pilot or feasibility studies.
- Secondary analyses of existing data.
- Small, self-contained research projects.
- Research methodology development (e.g., statistical innovations).
- Research technology development.

Consistent with a practice-based research approach, there is also emphasis on:

- Settings where youth suicide risk might be addressed.
    - Health care systems (e.g., outpatient, inpatient, emergency department settings).
    - Mental health or primary care practices
    - Other systems or settings that serve individuals at risk for suicide (e.g., schools, the child welfare system, the juvenile justice system).
- Vulnerable populations.
    - Individuals with mental illness or substance-use disorders.
    - Groups at elevated risk in terms of demographic characteristics (e.g., members in certain racial/ethnic groups, sexual and gender minorities) or social/environmental history and context (e.g., early adversity, economic hardship, geographic locations), or developmental context.
    - Individuals who experience disparities in healthcare access, engagement or quality.

Application Requirements

Applications must include the following components:

Applications must be formatted with the following specifications:

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- Abstract and face page (1 page; abstract must be 30 lines)
- Specific aims section (1 page)
- Research strategy section (6 pages)
- References
- Project timeline
- NIH format biosketches
- Detailed budget
- Budget justification
- Letters of support (if applicable)
- Environment details
- Mentor statement of support
- Protection of human subjects

- Typeface: Arial (11-point font; single-spaced)
- Paper Size: 8.5" x 11" with 0.5" margins

Review

In June, applications will be sent to a minimum of two external reviewers with expertise in the subject matter to evaluate using an NIH-type nine-point scale. All applicants will receive written reviews.

Applications are evaluated based on:

- Significance (i.e., project's potential to contribute to scientific understanding of suicide and/or its prevention).
- Innovation.
- Methodology
- Qualifications, experience and prior productivity of the applicant(s).
- Environment.

Award Requirements

Funds may be used for compensation for investigators or personnel (e.g., graduate student, clinical research coordinator), consultant fees, research supplies, publication expenses, or costs of measures, tests or procedures. Funds may also be used for travel required for the research or to professional conferences to present work from the study. Principal investigators must be funded at 10%.

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Institutional Review Board (IRB) approval is necessary before the project can begin and before funds are released. All award recipients must submit a semi-annual and final progress report (within 90 days of project completion) documenting publications, presentations/posters and subsequent internal/external grant applications resulting from the funded project. All published work must include a statement indicating the work was supported by this grant.

Contact

Jeffrey Bridge, PhD
Co-Director, ASPIRES
Director, Center for Suicide Prevention and Research, Nationwide Children's Hospital
Professor, The Ohio State University College of Medicine

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Email: Jeff.Bridge@NationwideChildrens.org

Cynthia Fontanella, PhD
Co-Director, ASPIRES
Principal Investigator, Center for Suicide Prevention and Research, Nationwide Children's Hospital
Associate Professor, The Ohio State University College of Medicine

Phone: (614) 938-0323
Email: Cynthia.Fontanella@NationwideChildrens.org

See application for additional details. Please direct any questions to both Drs. Fontanella and Bridge.

PROTOCOL FOR CONDUCTING CLINICAL PRACTICE-BASED RESEARCH WITHIN NCH-BH

Review Process

Submit your protocol to the Institute for Mental and Behavioral Health Research (IMBHR) Protocol Review Committee (submit to rachel.incerpi@nationwidechildrens.org). Core members of the committee include Drs. Axelson, Butter, Fristad, and Ms. Aileen Hoffman. Based on the clinical setting(s) in which the study is proposed, the relevant clinic manager and/or medical director will be invited to join the review. **Approval must be obtained prior to commencing the study. Give yourself sufficient time for this review (plan on one month).**

Principal Investigator

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Must be on NCH Medical Staff (Category 2) if the study involves assessment or treatment within an NCH-BH site or have an MPI who is on the NCH Medical Staff.

If the PI is not an NCH Employee
Medical Staff privileges must be obtained prior to commencing the study (or the MPI must be on NCH Medical Staff). Note, this will take several months. Contact the person below to initiate the request:
Courtney Palermini
Medical Staff Services Specialist
Medical Staff Services
Phone: (614)722-3171
Fax: (614)355–4433

The NCH-BH MPI must obtain **Research Collaborator** status, see link below.
Index (nationwidechildrens.org)

Clinical Trials

Study review: Contact John Psurny/Debbie Barrett-they will register your study with clinicaltrials.gov for you if required. JP will review all non-monitored clinical trials (investigator initiated) prior to commencing the study.

FDA Products-Drugs and Devices (Including apps): Contact Kevin Bosse, he will either exempt your protocol (likely for an app) or request the IND.

IRB

Must either be approved through NCH eIRB2 or through another institution to which NCH cedes review. Review the eIRB2 library (documents) to **review relevant policies**. Review the eIRB2 General tab to **review the Investigator Manual**.

EPIC Considerations

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Ensure Visit Type is arranged: Contact Debby Molino/Gina McDowell to ensure the appropriate visit type is available.

Billing: either directly to the grant OR if staff have release time to cover study visits, no charge.
All assessment/treatment sessions for patients must be documented. You can create templates to block schedules for research visits and smartphrases for standardized research visits.

Sample Smartphrases

SPI INITIAL SMARTPHRASE

SPI new visit

Interim History
This is @FPREFNAME@ and family's first visit in the ASSIST trial. Pt presented to *** with concerns regarding suicidal ideation and concerns for ***. Pt was then referred to the clinic for crisis care and engagement in SPI+.

Intervention and Response
Evidence-based practice: Safety Planning Intervention with Structured Follow Up (SPI+)

Interventions provided today:
Met with Pt and caregiver to orient to SPI+ in the context of the ASSIST study, including structure of meetings and confidentiality. Pt and caregiver agreed to the goals laid out by this provider.

Met with Pt individually to elicit crisis narrative and develop a safety plan through psychoeducation. Completed safety plan can be found under the Media tab. Reviewed how to use safety plan and assisted Pt in identifying coping strategies, social supports, and crisis resources to utilize in case of crisis.

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Met with Pt and caregiver to review the safety plan and potential barriers to using the safety plan. Reviewed how caregiver will support Pt in implementing the individualized safety plan over the coming week. Discussed steps that the caregiver will take to make Pt's environment safer, including ***. Clinician reviewed next steps for continued care and time of next scheduled session.

Met with caregiver alone to review any questions or concerns. Caregiver reported ***.

Assessment
Assessed for safety concerns since Pt was discharged from the hospital. Pt reported ***. Caregiver reported ***.

@SUICIDETOOLKIT@

Pt and caregivers would benefit from follow up visits to assess risk and use of the safety plan and promote connection to an outpatient mental health provider.

@BHMSE@

Plan
Pt has been referred to: ***
Status of referral: ***

Steps for Pt and caregiver to take: ***
Steps for Clinician to take: ***

Pt and caregiver will return to appointment in one week for further assessment and brief intervention.

Research visit - suicide assessed via study protocol. See Media tab for most recent suicide safety documentation.

SPI follow-up visits

Interim History

This is @FPREFNAME@ and caregiver's *** visit in the ASSIST trial. Caregiver reports ***. Pt reports ***.

Intervention and Response
Evidence-based practice: Safety Planning Intervention with Structured Follow Up (SPI+)

Met with caregiver to review any safety concerns and assess actions taken to make the home safe. Caregiver reported ***.

Met with Pt individually to check current mood. Pt reports their mood as a *** out of 10 (1=poor, 10=great), which is *** from last visit. Assessed for suicidal thoughts or behaviors since last visit. Pt reported ***. Reviewed Pt's safety plan. Pt reports that they *** used their safety plan since last visit. Assessed for whether changes are needed to Pt's safety plan. Pt reports ***.

Met with caregiver and Pt together to review next steps for Pt's care. Discussed status of Pt's referral for ongoing counseling services and potential barriers to treatment. Reviewed time of next scheduled session with this clinician.

Assessment

@SUICIDETOOLKIT@

Pt and caregivers would benefit from follow up visits to assess risk and use of the safety plan and promote connection to an outpatient mental health provider.

@BHMSE@

Plan
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Status of referral: ***

Steps for Pt and caregiver to take: ***
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