

Non-Binary or Gender Queer





FL LEADS Project QPR Pre-Survey

Thank you for taking the time to participate in today's training and evaluation as part of the FL LEADS Project. You are being asked to take this survey so that we can determine the usefulness of the QPR program. Please take the time to answer each question honestly and to the best of your ability. Your answers will be kept confidential and will only be seen by evaluators at the University of Central and South Florida (UCF and USF). We value your time and appreciate your feedback.

08/04/2022	
Instruction. Please tell	us a little bit about yourself.
<i>Q2.</i> 2. What are the ini applicable (example: J	tials of your first and last name? Include your middle name initial if ohn H. Smith= JHS)
JCG	
Q3. 3. What year were	you born?
1977 <i>Q4</i> . 4. What is your ge	nder?
1977 <i>Q4</i> . 4. What is your ge	
1977 <i>Q4</i> . 4. What is your ge	nder?
1977 Q4. 4. What is your ge *Cis is described as or	nder?
1977 Q4. 4. What is your ge *Cis is described as or □ Cis Man*	nder?

☐ Agender
Transitioning
Gender Fluid
☐ Prefer not to answer
Prefer to self-describe
Q4other. What is your gender? Please specify.
This question was not displayed to the respondent.
Q5. 5. Which of the following describes your race/ethnicity? Check all that apply.
☐ Asian
Pacific Islander
Native Hawaiian
American Indian
☐ Indigenous
Black
✓ African American
Hispanic
Latin(o/a/x)
White
Middle Eastern
☐ Prefer not to answer
☐ Prefer to self-describe
Q5other. What is your race/ethnicity? Please specify.
Qualitics. What is your raceretimetry: I lease speerly.
This question was not displayed to the respondent.
Q6. 6. Please indicate the <i>highest degree</i> you have completed?
○ Some High School
○ High School
○ Trade School
○ A.A. or 2 year degree
○ B.A./B.S.
M.Ed., M.A., M.S.
O Ph.D., Psy.D., Ed.D.
○ M.D.
○ Other

Q6other. What is the highest degree you have completed? Please specify.

a) Other people like me will expect me to use the QPR skills I am taught.

Q7. 7. In what capacity are you participating in this training?						
Adjunct Therapist (e.g., Activity, Occupational, Physical, Rehabilitation)						
 Business Administrative/Clerical (e.g., Accounting, Reception, Human Resources, Billing, Records, Inform Technology) 	mation					
Care/Case Management (e.g., Social Worker, Discharge Planner)						
Calculation (e.g., Teacher, Health Educator)						
Facility Operations (e.g., Dietary, Housekeeping, Maintenance, Security, Transportation)						
○ First Responder (e.g., Fire, EMT)						
 Legal (e.g., Lawyer, Judge, Probation, Corrections) 						
Management (e.g., Agency Administrators, Supervisors, Managers, Coordinators)						
○ Mental Health Crisis Services (e.g., MRT)						
Mental Health Provider (e.g., MHC, CSW, Psychologist, Counselor, Therapist)						
Nursing (e.g., Nurse, Registered Nurse)						
O Parent/Caregiver						
O Physical Health Care (e.g., Physician, Physician's Assistant)						
O Psychiatry (e.g., Psychiatrist)						
O Support and Outreach (e.g., Volunteer, Faith, Family Support, Peer Support, Advocate)						
Technician (e.g., Mental Health Technician, Behavioral Technician, Patient Care Assistance, Residential	Technician)					
Other (Please Specify)						
general and may include but is not restricted to a "consumer", "patient", or "client" in Q8. 8. Think of your interactions with people and circle the number that best describe your ability to do the following:			you fe	el in		
Not at all	Slightly M	oderately	Very Ext	remely		
a) Identify suicide warning signs.	0	O	0	\circ		
b) Ask questions about suicide.	\bigcirc		\bigcirc	\bigcirc		
c) Listen to a person tell you about their suicidal thoughts.	\bigcirc		\bigcirc	\bigcirc		
d) Talk/persuade a person into seeking help.	\bigcirc		\bigcirc	\bigcirc		
e) Make referrals (i.e., provide information about a crisis hotline, mental health treatment).	\bigcirc	\bigcirc		\bigcirc		
f) Contact emergency support services for a person imminently at risk for suicide (e.g., mobile crisis support, crisis stabilization unit, 911, emergency departments)	\circ		\bigcirc	\circ		
g) Help a person discuss their suicidal thoughts with their loved ones (e.g., family, friends).	0		0	0		
Q9. 9. Rate how much you "Agree" or "Disagree" with the following statements:						
	Strongly Disagree	Disagree	Slightly Disagree	Slightly e Agree	Agree	Strongly Agree

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b) Other people like me are expected to refer suicidal people to a helping resource (e.g., mental health services).		\bigcirc	\circ	\circ		\circ	(
c) In my family, we do not discuss the topic of suicide.		0	\bigcirc		0	\circ	(
d) In my group of friends, I would be expected to ask about someone's risk for suicide.		0	0	0	•	0	(
Q10. 10. Rate how much you "Agree" or "Disagree" with the following statement	ts:						
	Strongly	Disagree	Slightly Disagree	Slightly Agree	Agree	Strongly Agree	
a) My workplace encourages me to ask people about thoughts of suicide.	O	O	O	O	O	\(\text{O} \)	-
b) My supervisor encourages me to ask people about thoughts of suicide.	0	0	<u> </u>	0	0	0	
c) My organization regularly adapts practices to address new ways of preventing suicide.	\circ	\circ		\circ	\circ	\bigcirc	
d) My organization has not yet built a sufficient network of gatekeepers.	\bigcirc	\bigcirc		\bigcirc	\bigcirc	\bigcirc	
e) Suicide prevention programming can be difficult to implement in my organization.	\bigcirc	\bigcirc		\bigcirc	\bigcirc	\bigcirc	
f) Suicide prevention training aligns with the policies of my organization.	\circ	\circ	\circ		\circ	\bigcirc	
Instruction. For Questions 11 and 12, select the <u>best</u> answer to each situation.							
Q11. 11. You notice a co-worker who is starting to miss work. Your co-worker do up with their normal hygiene and has become very distant and quiet. What is you				eping			
None to low, no statement was made regarding the desire to die.							
Mild, the individual might just be having a bad week.							
O Moderate, the individual could be showing early warning signs of suicide that warrants an immedia	te discussio	on.					
○ High, a referral needs to be made.							
Q12. 12. Asking a sad or upset person if they are having thoughts of death or sa	uicide:						
Should be discouraged.							
Should only be done by a trained counselor.							
May lower the risk of suicide.							
Should have no effect on the risk for suicide.							
Instruction. For Questions 13 and 14, check all of the responses you feel are comultiple correct answers for each question.	orrect ans	swers; ti	here ma <u>'</u>	y be			
Q13. 13. What should you do if you suspect a person may be suicidal? (Select	all that a	pply)					
Tell them not to do it.							
Refer them to a mental health agency.							
Tell them it is not your place to help.							
☐ Encourage them to think of positive thoughts.							
✓ Tell them to seek emergency support services (e.g. mobile crisis support, crisis stabilization unit, 9:	11, emerge	ncy					

department).

	Suggest they seek support from a friend.
	Tell them you're worried and would like to talk.
Q14.	14. What should you say if you suspect a person may be suicidal? (Select all that apply)
	"Don't worry so much, things are going to get better for you."
	"Everything will be okay, try not to think about negative things."
✓	"Have you thought about calling a crisis hotline?"
	"Let's see how you are doing in a couple of days when I follow up with you, okay?"
	"That's not something you should say."
✓	"That concerns me, we should talk to someone."
	"You shouldn't say that, you can scare people."
	"Have you been having thoughts of wanting to die?"
	15. Please read each item listed below. Indicate if you think the statement is a warning sign of su
(WS)	, or a risk factor for suicide (RF). Select one answer per line.
	l we

 $\hfill \square$ Don't bring up the topic as this will only make matters worse.

iicide

	WS	or RF
	WS	RF
A history of harming oneself, such as cutting, scratching or burning.	O	\circ
Losing a friend or family member to suicide.	0	
Avoiding social activities, such as hanging out with peers, going to work, and attending events with family or friends.	•	\circ
Telling you there is no reason to live.		\circ
Feeling trapped or hopeless.		\bigcirc
A previous suicide attempt.		\circ
Having access to a gun(s).	0	
Being reckless, such as driving too fast, driving drunk, or careless sex.	0	
Getting very angry over everything, not able to control one's anger, rage, or temper.		\circ
Increasing use of drugs and/or alcohol.		\circ
Having a history of depression.	0	

Q16. 16. Rate how much you "Agree" or "Disagree" with the following statements:

	Strongly Disagree	Disagree	Slightly Disagree	Slightly Agree	Agree	Strongly Agree
a) It is not likely that suicidal people can be helped if they do not recognize their situation.	0	\circ	\circ		\circ	\circ
b) It's appropriate for me to discuss suicide with other people.	0	\bigcirc	\bigcirc		\bigcirc	\bigcirc
c) If a person contemplating suicide refuses to seek help, it should not be forced upon them.	0	\bigcirc		\bigcirc	\bigcirc	\bigcirc
d) A suicide prevention program in my organization will give people unwanted ideas about suicide.	0		\bigcirc	\bigcirc	\bigcirc	\bigcirc
e) Asking people about suicide should replace other topics that I had planned to discuss with them.	0	\circ		\circ	\circ	\circ
f) I cannot understand why a person would contemplate suicide.	0	\bigcirc	\bigcirc		\bigcirc	\bigcirc

Q18. In the last 3 months, select how many people you know, either personally or professionally, that displayed the following emotions or behaviors:

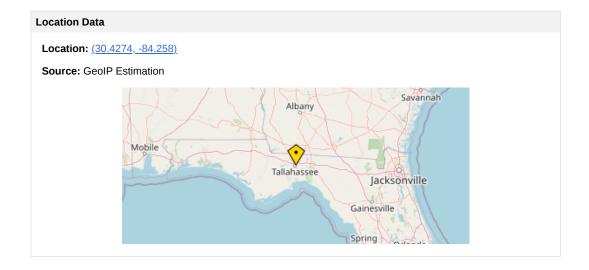
	None	One	Two	Three	Four or more
a) Sadness or depression.	0		0	0	0
b) Withdrawal from friends or family.	\circ		\bigcirc	\bigcirc	\bigcirc
c) Had drastic changes in behavior or mood.	\circ		\bigcirc	\bigcirc	\bigcirc
d) Suicidal thoughts.	\circ		\circ	\bigcirc	\circ
e) Anger or irritability.		\circ	\circ	\circ	\circ

Q19. Next, please indicate the number of people you helped by doing the following, either personally or professionally:

	None	One	Two	Three	Four or more
a) Asked a person if they were thinking about suicide.	0	\circ	\circ	\circ	0
b) Encouraged a person to seek help because of their risk for suicide.	0	\bigcirc		\bigcirc	\bigcirc
c) Took a person at risk for suicide to see a counselor or other mental health resource.	0		\circ	\bigcirc	\bigcirc
d) Called the National Suicide Prevention Lifeline (NSPL) for help.	O	\bigcirc	\bigcirc	\bigcirc	\bigcirc
e) Called a non-NSPL crisis line for help.	O	\bigcirc	\circ	\bigcirc	\bigcirc
f) Called emergency support services for a person imminently at risk for suicide (e.g. mobile crisis support, crisis stabilization unit, 911, emergency department)	•	\circ	\circ	\circ	\circ

Q36. For the people that you referred to other providers (e.g., counselors, mental health resources) either personally or professionally, do you know how many of those people went for a follow-up appointment?

No









FL LEADS Project QPR Post-Survey
Thank you for taking the time to participate in today's training and evaluation. You are being asked to take this survey so that we can determine the usefulness of the QPR program. Please take the time to answer each question honestly and to the best of your ability. Your answers will be kept confidential and will only be seen by evaluators at the University of Central and South Florida (UCF and USF). We value your time and appreciate your feedback.

Q1. 1. Today's Date:
08/04/2022
Q2. 2. What are the initials of your first and last name? Include your middle name initial if applicable (example: John H. Smith= JHS)
JCG
Q3. 3. What year were you born?
1977
Q4. 4. Please select "Yes" or "No" based on the training you just attended.

	Select "Ye	s" or "No"
	YES	NO
a) We discussed suicide statistics.	•	\circ
b) We discussed ways to persuade someone to stay alive.		\bigcirc
c) We learned what the letters in the acronym "STAY" stand for.		\bigcirc
d) We learned the warning signs of suicide (i.e., direct verbal, indirect verbal, behavioral, situational).		\bigcirc
e) We watched the QPR video.		\bigcirc
f) We learned tips for asking the suicide question.		\bigcirc
g) We watched a CNN video clip about suicide.		\bigcirc
h) We learned the common myths and misconceptions about suicide.		\circ

k) We discussed tips for referring a suicidal person for treatment.							\cup	
k) We discussed tips for referring a suicidal person for treatment.							\bigcirc	
I) We practiced QPR skills in a role play or in breakout rooms							0	
Q5. 5. Rate how much you "Agree" or "Disagree" with the	ao following	etatomonte:						
Q3. 3. Rate now inden you Agree of Disagree with the	ie ioliowing	sialemenis.						
				Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
a) The trainer seemed like they cared if I learned the skills being taught.				\bigcirc	\circ	\circ		\circ
b) I felt like the trainer understood my learning needs relative to the skills be	eing taught.			\bigcirc	\circ	\bigcirc		\bigcirc
c) I felt some degree of discomfort during the training.				\bigcirc	\bigcirc	\bigcirc		\bigcirc
d) I felt like the trainer and I had similar learning goals throughout the training	ng.			\bigcirc	\bigcirc	\bigcirc		\bigcirc
e) I would recommend this trainer to my colleagues who are interested in le	earning about su	icide preventior	۱.	\bigcirc	\bigcirc	\bigcirc		\bigcirc
f) I wish the trainer had conducted the training in a different way.				\bigcirc		\bigcirc	\bigcirc	\bigcirc
Q7. 7. Rate how much you "Agree" or "Disagree" with the	ne following Strongly Disagree	statements: Disagree	Neutral	Agre		Strongly Agree		
Q7. 7. Rate how much you "Agree" or "Disagree" with the a) I was impressed by how the trainer showed us how to ask about suicide.	Strongly			Agre	e .		_	
a) I was impressed by how the trainer showed us how to ask about	Strongly	Disagree	Neutral	•	ee .		_	
a) I was impressed by how the trainer showed us how to ask about suicide.	Strongly	Disagree	Neutral		e		_	
a) I was impressed by how the trainer showed us how to ask about suicide. b) The trainer seemed to know what they were talking about.	Strongly	Disagree	Neutral	•	e	Agree	_	
a) I was impressed by how the trainer showed us how to ask about suicide.b) The trainer seemed to know what they were talking about.c) The trainer easily answered questions.d) The trainer was effective at modeling (showing examples) on ways to	Strongly	Disagree	Neutral	•	ee .	Agree	_	

at all

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Slightly Moderately Very Extremely

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i) We were shown slides about suicide prevention.

a) Identify suicide warning signs.

b) Ask questions about suicide.

c) Listen to a person tell you about their suicidal thoughts.

support, crisis stabilization unit, 911, emergency departments)

e) Make referrals (i.e., provide information about a crisis hotline, mental health treatment).

g) Help a person discuss their suicidal thoughts with their loved ones (e.g. , family, friends) $\,$

f) Contact emergency support services for a person imminently at risk for suicide (e.g. mobile crisis

d) Talk/persuade a person into seeking help.

a) It is not likely that suicidal people can be helped if they do not recognize their situation. b) It's appropriate for me to discuss suicide with other people. c) If a person contemplating suicide refuses to seek help, it should not be forced upon them. d) A suicide prevention program in my organization will give people unwanted ideas about suicide. e) Asking people about suicide should replace other topics that I had planned to discuss with them. f) I cannot understand why a person would contemplate suicide. Q10. 10. Do you feel you can connect a suicidal person to resources in your configuration. No – Resources are not available. No – Resources are not receptive to referrals. Unsure. Q11. 11. Rate how much you "Agree" or "Disagree" with the following statement all participated in discussions in today's training. b) The training made me think about suicide prevention. c) I asked questions during the suicide prevention presentation. d) The trainer stopped to check if there were any questions that needed to be answered. e) The trainer provided individual attention to those who needed it. f) The trainer made some comments that I found insensitive. g) The trainer explained the reasoning behind the skills we were taught. h) The trainer offered to be available to talk after the training for those that wanted more information.	nmunity	/?	y e Disa	Agree	Agree O O O O O O O O O O O O O O O O O O	Agree Agree Agree Agree
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f) The trainer made some comments that I found insensitive. g) The trainer explained the reasoning behind the skills we were taught.						
g) The trainer explained the reasoning behind the skills we were taught.						
				0	0	
.,				0	0	<u> </u>
i) The trainer could have been more understanding of my level of comfort with the topic of suicide.				O	0	
Instruction. For Questions 12 and 13, select the <u>best</u> answer to each situation.						
Q12. 12. Asking a sad or upset person if he or she is having thoughts of death of	r suicid	le:				
Should be discouraged.						
Should only be done by a trained counselor.						
May lower the risk of suicide.						
Should have no effect on the risk for suicide.						

Q9. 9. Rate how much you "Agree" or "Disagree" with the following statements:

Q13. 13. You notice a co-worker who is starting to miss work. Your co-worker does not appear to be keeping up with their normal hygiene and has become very distant and quiet. What is your level of concern?

Mild, the individual might just be having a bad week.		
 Moderate, the individual could be showing early warning signs of suicide that warrants an immediate discussion. 		
○ High, a referral needs to be made.		
Q14. 14. Please read each item listed below. Indicate if you think the statement is a warning sign of sui (WS), or a risk factor for suicide (RF). Select one answer per line.	cide	
(WS), of a fisk factor for suicide (KF). Select one answer per line.		
	WS	or RF
	WS	RF
a) A history of harming oneself, such as cutting, scratching or burning.	•	0
b) Losing a friend or family member to suicide.	0	
c) Avoiding social activities, such as hanging out with peers, going to work, and attending events with family or friends.		\bigcirc
d) Telling you there is no reason to live.		\circ
e) Feeling trapped or hopeless.		\circ
f) A previous suicide attempt.		\circ
g) Having access to a gun(s).		\circ
h) Being reckless, such as driving too fast, driving drunk, or careless sex.	0	
i) Getting very angry over everything, not able to control one's anger, rage, or temper.		0
j) Increasing use of drugs and/or alcohol.		0
k) Having a history of depression.		
Q15. 15. What should you do if you suspect a person may be suicidal? (Select all that apply)		
Tell them not to do it.		
✓ Refer them to a mental health agency.		
Tell them it is not your place to help.		
Encourage them to think of positive thoughts.		
Encourage them to seek emergency support services (e.g., mobile crisis support, crisis stabilization unit, 911, emergency department)		
Don't bring up the topic as this will only make matters worse.		
✓ Suggest they seek support from a friend.		
Tell them you're worried and would like to talk.		
Q16. 16. What should you say if you suspect a person may be suicidal? (Select all that apply)		
"Don't worry so much, things are going to get better for you."		
"Everything will be okay, try not to think about negative things."		
✓ "Have you thought about calling a crisis hotline?"		
"Let's see how you are doing in a couple of days when I follow up with you, okay?"		
"That's not something you should say."		
✓ "That concerns me, we should talk to someone."		

 $\hfill \bigcirc$ None to low, no statement was made regarding the desire to die.

"You shouldn't say that, you can scare people."
☐ "Have you been having thoughts of wanting to die?"

End. Thank you for taking the time to complete this survey!

