

SUICIDE MORTALITY REVIEW COMMITTEE TEAM COMPOSITION

Recommended Team Members

Each state/territory/tribe/community should select team suicide mortality review committee members with a long-term commitment to developing and enhancing suicide mortality reviews (SMR). Team composition recommendations below include recommended and suggested lists of members with the understanding that each team will tailor their composition to meet the needs of their unique community, state, territory, or tribe. Examples include Team Members from:

- State/Territory/Tribal-Level Team Leader(s) and Community-Level Team Leader(s)
- State/Territory/Tribal Agency Lead responsible for mental health and substance abuse (e.g., Single State Authority)
- Representative from State/Territory/Tribal Death Investigator's Office and specific community Death Investigator's Offices
- Crisis response system lead or Emergency Medical Services Representative
- Medical Provider Representative
- Behavioral Health Provider Representative
- Epidemiologist or Public Health Professional with qualitative data analysis experience
- State/Territory/Tribe Suicide Prevention Coordinator
- Suicide Prevention Coordinator(s)

Recommended Federal Representatives

Suicide prevention professionals that represent federal agencies often have access to information not widely available otherwise, as well as have a process for reviewing and evaluating suicide deaths within their respective agencies. Examples include Federal Representatives from:

- VA Veterans Integrated Services Network (VISN) Suicide Prevention Lead, as applicable
- VA Community Engagement and Partnership Program Manager or VA Community Engagement and Partnership Coordinator(s), as applicable
- VA Suicide Prevention Coordinator(s) (SPC)
- Department of Defense Suicide Prevention or Violence Prevention Program Representatives
- Substance Abuse and Mental Health Services Administration (SAMHSA) Regional Director/Assistant Regional Director

Additional Suggested Team Members

Committees are encouraged to consider the needs of the state/territory/tribe/community Service members, Veterans, and their families when selecting other members of your committees. Examples include leadership from:

- County-level behavioral health and suicide prevention coordinators, as applicable
- State/local health department
- Tribal leaders
- National Guard Suicide Prevention Coordinator
- Reserve Affairs
- Law enforcement representative
- Academic partners: colleges and universities
- SMVF advocacy groups and social/public health organizations or coalitions
- Faith-based community leaders
- Public school systems
- State and local legislators
- State Hospital Association
- Community-based suicide prevention organizations

Team Size and Composition

Up to 15 - 25 people are recommended for teams to conduct their planning and implementation. However, a team may grow as the work evolves, new partnerships are made, and workgroups are established.