



Alliance Quarterly Meeting

Date: Friday, December 13, 2019. Time: Orientation: 9:00 – 9:30 Meeting 9:30 a.m. – 12:30 p.m.

Location: Portland State Office Building, 800 NE Oregon St, Room 177, Portland, OR 97232

Attendance: David Westbrook, Donald Erickson, Kate O’Donnell, Ryan Price, Julie Scholz, Stephanie Willard, Jon Rochelle, Amber Ziring, Shane Roberts, Joseph Stepanenko, Ariana Brooks, Frances Purdy, Jill Baker, Jerry Gabay, Laura Chisholm, Meghan Crane, Chelsea Holcomb, Cheryl Ramirez, Suzie Stadelman, Jeremy Wells, Kirk Wolfe, Debra Darmata, Eric Martz, Tatiana Dierwechter, Tara Criscuoio, Sarah Spafford, Elissa Adair, Jazmyne Roeper, Olivia Nilsson, Emma Cooper, Harli Read, Olivia McGuire, Olive Vigna, Maya Bryant, Michelle Owens, Mila Rodriguez-Adair, Sofie Annus, Shelagh Johnson, Victoria Haight. Annette Marcus, Emily Morrissey, Sierra Henderson, Linda Hockman, Sarah Paige

By Conference Call: Tracy Blue, Tanya Pitts, Laura Rose Misaras, Justin Potts, Judah Largent, Corinna Brower, Juanita Aniceto, Frances Purdy, Peggy Holstedt

Agenda and Minutes – Draft for Approval at March 2020 Meeting

9:00 Orientation to the Alliance

Annette Marcus, Staff

Annette provided an overview of the Alliance (background, structure, purpose and goals). Orientation materials on file.

9:30 Welcome, Introductions and Agenda Review

David Westbrook, Alliance Chair
Chief Operating Officer, Lines for Life

9:45 Oregon Health Authority Updates

Jill Baker, Youth Suicide Prevention and Intervention Coordinator

Update on new funding (\$6 million)

Funding will focus on prevention, intervention and postvention efforts; training RFPs have been released. Funding also provides for two new positions at OHA: a second youth suicide prevention coordinator (person starts Jan 8, 2020); hiring for the adult suicide prevention position is in progress.

Jill asked attendees to provide feedback on graphic designs, submitted by youth from Clackamas County. The selected graphic design will be used for materials circulated to mental health service providers.

Meghan Crane, Zero Suicide Program Coordinator

State Health Improvement Plan (SHIP) for SFY 2020-24

Purpose: Identify population-wide priorities and strategies for improving the health of people in Oregon. The SHIP serves as the basis for taking collective action on key health issues in Oregon.

Priority Areas:

- Behavioral health (including mental health and substance use)



- Access to equitable prevention health care
- Economic drivers of health (including issues related to housing, living wage, food security and transportation)
- Adversity, trauma and toxic stress
- Institutional bias

SAMHSA Garrett Lee Smith Grant (GLS)

The 2014 –19 grant focused on youth 10-24 years of age; established the state Zero Suicide program and, 5 counties received funding (Deschutes, Jackson, Josephine (Options for Southern Oregon, Inc.), Umatilla and Washington) to:

- Establish suicide prevention advisory group/coalitions
- Work on continuity of care for youth
- Crisis response planning
- Gatekeeper and clinical training
- Community awareness activities

OHA was awarded GLS funding for 2019-2024. Meghan gave an update on releasing funds:

- Upcoming RFP process for counties (either Local Public Health Agency or Community Mental Health Program may apply) for funding June 30, 2020 – June 29, 2024
- Anticipated release of RFP is mid-January 2020; submission of proposals will be due on March 1st. Awardees will be notified by April 1 and start date for project is July 1, 2020.
- Three to five awards are available. Total funding per year is \$351,010.
- Collaboration between CMHP and LPHA is encouraged and a letter of support from the non-applying entity is highly recommended.
- OHA is working with AOCMHP and CLHO members to develop RFP criteria.

Meghan encouraged attendees to sign-up for **Public Health listserv** and to share the information with others who may be interested. To sign up for the OHA Suicide Prevention Network, go to:

<http://listsmart.osl.state.or.us/mailman/listinfo/yspnetwork>

Laura Chisholm, Section Manager Injury & Violence Prevention

Oregon was one of 10 states to receive a **Centers for Disease Control Emergency Department Surveillance of Non-fatal Suicide-Related Outcomes Grant**. Grant overview:

- 3-year grant
- Approx. \$147,000 per year
- Aim is to pilot and evaluate processes to obtain and report timely suicide attempt and self-harm data to inform prevention by:
 - Tracking suicide attempt & self-harm data using ED data form the ESSENCE syndromic surveillance system
 - Reporting timely data to stakeholders and solicit stakeholders on data elements of key interest
 - Working with stakeholders to support use of data to inform suicide prevention, intervention and postvention

10:00 Update – SB52 (Adi’s Act) and Student Success Act
Jeremy Wells, School and Community Wellness Advocate
Office of Equity, Diversity and Inclusion



Oregon Department of Education

Before Jeremy's update on **SB52 rule making**, Annette Marcus reminded attendees the Alliance has been active in providing feedback on proposed rules. The Alliance proposed language related to hospitals releasing information to schools when a student was seen in the emergency department. There has been opposition to this proposed language. ¹

Jeremy's updates:

- The State School Board completed round one of the rule-making process at a December public hearing. The round two will be held February 2020. Jeremy will be collecting feedback on rules between now and February. Information will be circulated by email and attendees were encouraged to provide feedback during January 2020.
- Jeremy addressed the concern about adding rules related to hospital's releasing information to schools. Those in opposition questioned whether the requirement should be part of the rules or in the guidance. The rationale is rules cover only what is stated in the legislation. The point in question does not appear in SB52 therefore sharing information between hospitals and schools fits better in the guidelines. A final decision on this matter will be made during round two.
- Guidance that will be put forth will be a packet shared with all 170+ school districts across the state. This purpose is to provide information needed to develop a school plan. Jeremy has been encouraging districts to reach out to the local mental health department and other stakeholders during the plan development process. At the state level, broad feedback from groups such as Basic Rights, YYEA, and others is helping to develop guidance. For example, Basic Rights Oregon is contributing information that will be helpful in developing a plan that is sensitive to specific cultural groups. Jeremy reminded that when submitting suggestions for the guidance document, all suggestions must come through the lens of the youth and are due January 2020.
- Oregon Education Department has a 5-year grant to help school districts write their plans.

Questions and Answers

Where can people find the rules?

Jeremy will send the second draft of rules via email to all on the Alliance email list. The second draft has the revisions the Alliance submitted re: hospital's releasing information to schools.

David clarified that if the Alliance provides a letter of support and/or feedback, it must be submitted in January and it will become an official document in the packet that goes forward to the State School Board for the second round. David also noted that because of the timeline, the full Alliance won't meet before the February rule making meeting. This will go to the Executive Committee for consideration.

What's the difference between rules and guidance?

SB52 is clear and provides solid direction that rules have to be made. Rules are the directives that

¹ Per the September 13, 2019 meeting minutes, the Alliance voted to recommend to OHA and OED language along the lines of: *In order to encourage districts and medical providers to create a process, within state and federal law, that allows for the notification of an appropriate person in the district for the sharing of information to assist students in transitioning back into a school setting be considered in rules for SB 52.*



describe how the law is to be implemented. The Oregon school board will issue guidance based on rules that are adopted. The guidance is the “how to” for all school districts in OR.

Justin Potts commented that rules operationalizes what is in the law. The opposition was based on the hospital sharing of information isn’t in law therefore likely won’t be in the rules. Identify only what is in the law for the rules, save things outside of the law to put in guidance.

Will the Board allow public comment on rules at the board meeting?

Yes, on the agenda under public comment anyone can comment. Comments are limited to 3 minutes per person.

10:20 Lessons from Washington County

Dr. Kim Repp, Epidemiologist
Debra Darmata, MS
Suicide Prevention Coordinator

Presentation: **When Post-vention Becomes Prevention: Suicide Surveillance and Fatality Review Transform Suicide Victims’ Stories into Stronger Community Responses.** Dr. Repp was unable to attend, Debra Darmata provided the presentation and shared how the Suicide Fatality Review Board uses data to inform suicide prevention efforts. The Board is comprised of a broad representation including law enforcement, public health, behavioral, medical examiner, etc. Dr. Repp spearheaded a means for collecting data following a suicide fatality and sharing the data which is helping to shape suicide prevention efforts. Highlights of the information:

- In Washington Co. the epidemiologist, suicide prevention coordinator, and medicolegal death investigator are co-located and all work for the public health department. This facilitates collaboration.
- Dr. Repp, Epidemiologist, developed a surveillance system to collect fatality case related information such as social isolation, substance use/abuse, physical health problems, intimate partner problems and family relationship stress from all involved in the response and investigation process.
- The Suicide Fatality Review Board meets four times a year to review cases. The case review process incorporates team members sharing their case specific information through a risk and protective factor modular approach. In addition to epidemiologist, suicide prevention coordinator and medicolegal members, representatives from a wide range of agencies such as law enforcement, hospitals, veteran administration, Lines for Life and FBI attend and participate in the case review process.
- The matrix filled out during case reviews informs targeted prevention strategies. For example, 15% of suicides are individuals who have lost housing. The sheriff’s department serves eviction notices and has an opportunity to provide crisis line information at that point. Another example is data showed that 26% of suicides occur in motels/hotels. Now suicide prevention training is provided to staff at motels/hotels and through the Question Persuade Refer (QPR) training learn skills to help someone who may be at risk of suicide.
- What is the impact? Detection of clusters by suicide investigators; data driven decision making; and, a combination of efforts including the Garrett Lee Smith grants, has resulted in a 40% drop in rate of suicide since 2012.
- A tool kit is available – Annette Marcus will send out to the full Alliance.



10:45 Alliance Business: By-laws Vote

David Westbrook, Alliance Chair
Chief Operating Officer, Lines for Life

David reminded members that the proposed revisions made by the by-laws workgroup and reviewed by the Executive Committee are primarily focused on bringing the Alliance into alignment with the public meeting law. Kirk Wolfe moved to approve; Julie Scholz seconded. David called for the vote. The bylaws were approved as presented; no nays, no abstentions.

10:55 Advocacy Days

Ryan Price, Area Director
American Foundation for Suicide Prevention (AFSP)

Ryan announced AFSP is hosting a State Capitol Days training on February 18, 2020. State Capitol Days are a chance to meet in person with state legislators. It is an opportunity to let them know why suicide prevention is important to you and to advocate for public policies that can reduce the number of people who take their lives. Sharing a personal story/experience can make a difference - it helps legislators make laws more reasonable

Break

11:15 Exploring Youth Engagement Strategies – Hart’s Ladder

Juanita Aniceto, Young Adult
Executive Committee Representative
Emily Morrissey, Project Specialist
Youth and Young Adults Engagement Advisory (YYEA)

Emily Morrissey reminded attendees that the youth engagement paper (presented at the September 13, 2019 meeting) has three objectives:

- Elevate and integrate authentic, relevant youth voice across all alliance projects and priorities
- Promote mental health and well-being of those participating by using suicide safer messaging and honoring lived experience
- Youth engaged with the Alliance feel supported by adult allies to be effective advocates

The paper is based on Hart’s Ladder of Youth Voice, a tool for how to meaningfully engage youth. Emily reviewed the various steps of the ladder and encouraged the Alliance to use the tool to assess how the group is doing as well as inform future efforts on youth engagement. Juanita shared her assessment of how the Alliance is currently doing and sees the group at the 3rd or 4th step. Ideally the Alliance should achieve the 5th step or above.

Juanita’s tips on how the Alliance could improve on the youth engagement front:

- Brief us on the bigger picture, catch us up so we can jump in
- Provide and review materials with us beforehand
- Involve us in projects and conversations, give clear pathways to participate
- Ask us specific questions
- Let us know expectations and give us feedback as things progress
- We need open and frequent communication with Alliance members. Not just with Annette, she’s great. However, it would be great to get to know Alliance members.



- Attend the Youth and Young Adult Engagement (YYEA) meetings with specific things you want youth/young adult perspective on

Emily introduced a table exercise and discussions were based on the following questions. Emily collected written suggestions/comments and will pass them along to Annette.

1. Looking at Alliance current priorities, where would it be most beneficial and feasible to involve Youth Voice?
2. Youth/Young Adults want to be involved in meaningful work for the Alliance. What are some short and long terms tasks or projects that they could work on in partnership with Alliance members, or could lead with adult support?
3. How can the Alliance progress to the top rungs of Hart's ladder where young people lead change and share decision making? What needs to change?

12:00 Healthy Teens Survey
Meghan Crane, MPH
Zero Suicide Coordinator
Public Health Division, Oregon Health Authority

Meghan shared that historically the healthy teen survey is conducted every other year (odd years), however, it is being moved to fall of 2020 and will now include 6th graders. The survey provides both state level and county level data and 27,000 students at 600 schools participated in 2019. The survey is being updated and youth, school administrators and youth serving organizations are participating in the process. The goal is to build a system for collecting and sharing data from youth that has buy-in from all partners, is easy to understand and use, is reliable and consistent, better links education and public health, and is valid and representative of the population(s). See the attached slide presentation (2019 Oregon Healthy Teens Data Results and Information on Student Health Survey) for data related to adolescent suicide. For the full report as well as county level data go to:

<https://www.oregon.gov/oha/PH/BIRTHDEATHCERTIFICATES/SURVEYS/OREGONHEALTHYTEENS/Pages/2019.aspx>

12:30 Public Comment
Stephanie Willard
The 53rd annual American Association of Suicidology conference will take place April 22-25, 2020 in Portland. For more information: <https://suicidology.org/conference/>

12:32 Meeting adjourned by David Westbrook, Chair