

Oregon Alliance to Prevent Suicide

Quarterly Meeting

April 12, 2018 – 3:30-6:30 pm

3:30 pm	Gary McConahay	Welcome and Announcement
3:50 pm	Saerom England, OHA	OHA Communication Suicide Prevention and Intervention
	Kimberly	<ul style="list-style-type: none">- Brief presentation and discussion with Alliance Members- Central Oregon news media- Recently lost coordinator for suicide prevention- Would like to set up committee (including 4-5 individuals currently interested)- Prepare talking points for local coalition- Community members connected with Kimberly RE: loss of veteran- Need communication and promotion RE: State-wide efforts and investment in local community members
	Youth Member Saerom	<ul style="list-style-type: none">- Social media is very effective for reaching youth- Social media is part of OHA's agenda for communication
	Emma Kristie	<ul style="list-style-type: none">- Endorses use of Social media- Focus moves from suicide to veteran PTSD or bullying
	Peggy	<ul style="list-style-type: none">- Social media is difficult- Free service from OR school district assoc. – will draft language for communications- Might be a coalition for National School Public Relations Officers for communication ... contact Peggy for more info (endorsed by Jennifer)
	Cheryl	<ul style="list-style-type: none">- New Threat Assessment Bill- Tip Line Implementation- Messages to home and school – should be different than threat assessment- Need help from Alliance – ask to work on communications sub-committee on schools committee – see Cheryl after meeting
	Gordon	<ul style="list-style-type: none">- Suicide is different than attempts (men and women differ)- Male lived experience is not represented in room- May be difficult sharing lived experience- Communication for men and women is different- Encourage us to think about the lens we look through – the lens relates to the men's experience
	Julie	<ul style="list-style-type: none">- Consider role modeling how to talk about it

- When suicide happens ... social media is how people communicate ... we need to role model the material that goes out and how it goes out
 - Normalize communication about suicide to prevent negative outcomes and we're not afraid to talk about
- Gary
- Leverage local efforts and existing resources (e.g., Lines for Life)
- Annette
- Alliance has Communications group – will consult with Schools Committee
 - Communications Committee will develop 1 year plan to address needs
- Saerom
- Contact Saerom to provide feedback on
 - What are the key messages around youth suicide?
 - Local or State-wide organizations that are doing the work – Contact Saerom – she will help be a spokesperson
 - Highlight good work going on
 - OHA and Alliance collaboration is beneficial
- Chelsey
- 4:20 pm Rusha, OHA**
- Standardized Risk Assessment Presentation and Feedback
- Part of broader stakeholder engagement activities – Would like feedback
 - Review of history of adoption of standardized risk assessment
 - For all providers in behavioral health system and those that work with the same individuals
 - Currently in Implementation phase
 - However, gaps in enforcement and lack of communication with providers --- fidelity, usability, and feasibility is uncertain – lack of data
- Peggy
- Challenges in schools --- what do you do with the data once you collect it? How will it help?
 - Committee needs to answer the “So what?”
- Deborah
- Communities of color – Is there access? Who is getting it? So many not being seen.
- Rusha
- Providers are typically Licensed, Certified, or Registered workers
 - Also can be non-licensed worker in behavioral health system (e.g., residential setting)
 - 309 rules: Providers are required to use a research-based assessment
 - 3 options are being explored (could be 1 or a combination)
 1. Single tool - Columbia-Suicide Severity Rating Scale (C-SSRS)
 2. List of evidence-based suicide risk assessment tools
 3. Combination of Option 1 and 2

	Laura Christabelle	<ul style="list-style-type: none"> - Follow up clarification about option 1 use - Question for clarification - If goal is to standardize practice, option 1 makes sense however option 2 and 3 are implicitly not standardizing practice. Can you clarify?
	Julie	<ul style="list-style-type: none"> - Pediatric screening tool and assessment in use - Some already use C-SSRS or PHQ-9 - ASQ tool is more likely to catch suicidality (endorsed by National Institute of Mental Health) - Resistance for new tool if another tool is already being used - Universal screening is most important, not so much the tool (e.g., every adolescent well-visit)
	Kirk	<ul style="list-style-type: none"> - PHQ-9 can be difficult to implement (time constraints) and alone is not as effective (also endorsed by Julie)
	Rusha	<ul style="list-style-type: none"> - Community stakeholder feedback ongoing - Send Rusha follow-up questions and comments, via phone or email
	Gary	<ul style="list-style-type: none"> - 13 references to suicide ... however does not talk about move from screening to accepting help so you can support children and families - Integration happens locally – maximize flexibility (i.e., Option 2)
4:45 pm	Laura Ann Kirkwood, Suicide Intervention Coordinator	<p>Oregon YSIPP Update 2017</p> <ul style="list-style-type: none"> - Avoiding duplication across providers - Presentation (see slides in handouts for more details) - Funding presented in slides is NEW funding (question by Cheryl) - State level implementation would be difficult – several pilot studies ... Good Behavior Game (Ann & Frances Purdy)
5:15 pm	Break (5:35-5:45)	
5:30 pm	Annette Marcus	<p>Logos – Discussion</p> <ul style="list-style-type: none"> - Contracted with graphic designer with advising from the Executive Committee – simple, clear, reproducible, easy to make B&W – designer looked at colors of other national organizations – narrowed down to 3 designs - “Alliance” emphasized - Annette will email out
5:45 pm	Frances Purdy, Oregon Health Authority (CSAC Suicide Prevention Committee)	<p>Emergency Department Resource for Families (Update and Review)</p>

- 5:55 pm Deborah Martin, DHS (Chair, Alliance Workforce Committee)** Advising Child Welfare on Workforce Development
- Ask Alliance about feedback on committee's focus on training around supporting workers (e.g., social workers)
 - What are some resources around training that can be implement with workers (with various degrees of training and expertise)?
 - Is that something that should be worked on?
 - What is the best practice out there?
 - What can we do to provide resources that are evidence-based?
 - Support workers by reducing guilt ... encourage meaningful, intermediating questions.
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- Annette**
- Commended work being done in Workforce Committee and importance of integrating DHS workers
 - Eventually develop roadmap for state-wide implementation and strategies
 - How can we get suicide assessments and procedures into the Child Welfare system?
 - Support child welfare workers to do the good work they do, without the threat of used as a weapon against them (i.e., foster families)
 - OHSU survey - variety of roles of providers.
- Laura Tess**
- Thank you for work in child welfare
 - Glad to hear about work regarding co-workers
 - Suggested Trauma Stewardship program
- 5:55 pm John Seeley** Schools Committee
- Jonathan – School survey in progress
- Communication Committee
- Nicholas & Christabelle – Support development of Communication Plan
 - Website mock ups at next meeting
- Evaluation Team Progress and Updates
- 3 new trainings – collecting more data
 - LGBTQ task force (Nicholas)
 - Tribal working group (Tracy)
 - Data analysis – baseline trends – in progress (prior to YSIPP)
 - Oregon Suicide Prevention Conference presentation – well received – Hexagon tool used to assess evidence-based practices
- 6:00 Julie** Continuity of Care Committee Update
- Public comment – Executive Committee heard Alliance Members (under provision of sensitive issues)
 - Testimony presented

- Steering committee with Hospital Association to draft flyers to target different audiences (youth, adults, older adults, hospital workers, etc.) – including what to do when transferring from hospital setting
- Frances Purdy**
- Presented update on packet “Advocating for your loved one during a crisis: A guide for parents and caregivers at the emergency department”
 - CSAC developed and vetted through various stakeholders (e.g., parents, youth, clinicians)
 - Hospital Association approved!
 - Now working on brochure #2 – companion book for youth
 - Hospital Association said clinicians need one too
 - Send feedback to Fran
- Annette**
- Congratulations!
 - Still need Copy Editor to send final version to for final review
 - Suggest adding to guide: verbiage around “School Counselor needs to know”
 - Julie asked to write a statement to address this need
- Gary**
Annette
- No update on School Committee – Kimberly offline
 - Youth members will meet together as a focus group and will have specific projects
 - Targeted groups at colleges and universities
 - Regular day to meet – more predictability for meetings