



Notes Schools Committee 6/19/19

	Topic		Notes/Attachments
			Attending: Jeremy Welles, Juanita Aniceto, Peggy Holstedt Jonathan Rochelle, Kimberlee, Jones (chair) , Kate O’Donnell, Justin Potts, Emily Morrisey Staff: Annette Marcus
I.	Welcome – Follow Up Action Items		<p>Action: Draft an email to schools re the survey. Give timeline—release the report in August. Get feedback from the Alliance School group on the email before sending it and connect with Jeremy</p> <p>Jon: Sent out an email to schools last week. Have received feedback from several people. There have been questions about the existence of local regions. UO is drafting a report that will be shared w the committee. Report: Identifies Issue of Youth Suicide, Implementation Framework, Identifies key components that schools want to incorporate into a comprehensive plan.</p> <p>Justin: Does this align with Adi’s Act which has fall 2020 implementation deadline.</p> <p>Jon: Notes that this was designed separately from the initiative for that bill, but will highlight best practice and also could link with local resources/coalitions.</p> <p>Action: Annette set up meeting with FERPA workgroup to be scheduled after June 14th.</p> <p>Action: Develop an internal system to communicate what is occurring from each member of the workgroup as a first step to getting a better handle on the wide variety of efforts are occurring in the suicide prevention/intervention field in Oregon. Follow up at next meeting</p>



II.	Legislative Update	-Adi's Act -Postvention Engagement (Update to SB561)	<p>Jeremy: ODE new division: Welcoming, Safe and Inclusive For All Students</p> <p>ODE is working through next steps for the many new legislative initiatives. Jeremy will probably be the point person for implementing it; although this has not been finalized. He, for example, tracked 11 different bills this session. He will work to ensure that key partners including Alliance will be at the table.</p> <p>Peggy: Adi's Act gives authority to ODE to write rules. Rules will be needed by March 2020 for schools to meet their deadline.</p> <p>OSBA will simply use the statute to write policy. Peggy notes that it is the "plan" element that is essential to this effort. She thinks that it will be very helpful for there to be a model plan. Kate notes that having the perspective of advocates and people impacted by the bill.</p> <p>The rules process will be key. We will track closely. Peggy – the State Board will need to see the Rules by January or February.</p> <p>Action: Recommend to ODE participants in the rules process (if/when) it occurs.</p> <p>Juanita would be interested to be part of the group making recommendations. Kimberlee—remember foster care youth and have a clear process for youth input. (Go to Kimberlee with names/recommendations) Shelagh Johnson, Amy is interested, please include teachers/mental health providers from post-high school transition programs and alternative schools (2ndry School). Emily – Youth, Young Adult Engagement is starting YYEA chapters in Lane County and Douglas Counties. They are doing focus groups there and will be recruiting for the YYEA chapters, as well as Healthy Transitions Steering Committee. School Safety Officers.</p>



			<p>Jeremy notes that there will be a lot of collaboration with the new School Safety and emergency operation grant and the regional threat assessment teams.</p> <p>There will be 7 to 9 people hired at the ESD's. (Suicide/Threat Assessment/Bullying Prevention). Jeremy concerned that the amount of money available to provide training for these positions.)</p> <p>Action: Guidance and recommendations regarding qualifications and types of training. It might be helpful for the Alliance to make some recommendations regarding the training needed for suicide pre/inter/postvention. Also develop point people for suicide prevention/intervention.</p> <p>Kate notes that the OHA POP 402 is funded at \$10 million:</p> <p>Three New Positions with HSD at OHA: Adult Suicide --- Prevention Coordinator/Youth Suicide Prevention and Intervention Specialist/School Based Mental Health Youth Engagement-in developing YSIPP Developing the YSIPP SB561 Psychological Autopsy's Youth Led Development on Online Resources Resilience Building in Schools Mental Health Services at Schools Evaluation Around the YSIPP</p> <p>Jeremy-be sure that we meet all the new staff at OHA and ODE that are related to suicide prevention.</p> <p>Annette asked Chris for an update on Sources of Strength in Corvallis: They've trained students and have completed one campaign. She now has more staff than she is able to train and wanting to be a part of it. They are implementing it in both high schools.</p>
III.	Priority for Upcoming Year		Pull down information re new legislation to this section.



	and Quarterly Report		<p>Amy gets calls a couple of times a week that E.D.'s often are not getting collateral perspective on youth in a mental health crisis (schools/therapists). Concerned that hospitals are discharging youth without a good picture of the young person's situation. There's a missed step on sharing the plan. Justin notes that crisis mental health. Jerry Gabay is working on this with Multnomah ESD. PPS worked with the adolescent psychiatric units---have developed releases that are now in the intake packet and are at an 80% completion rate. There currently is no requirement for the hospitals/social workers to do this.</p> <p>Recommendations regarding Student Success Act.</p>
--	----------------------	--	--

Smaller HIPPA/FERPA Workgroup Meeting:

Present: Amy Ruona, Kimberlee Jones, Kate O'Donnell, Justin Potts, Annette Marcus

HIPPA/FERPA Discussion Highlights:

It is helpful to have a quick reference sheet that clarifies that at all times can share non-identifying information; clarity re allowable communication in emergency. Amy reviews HIPPA/FERPA at the beginning of each school session. Amy has a presentation she has put together that highlights some of the nuances. Develop one that is geared towards HIPPA oriented provider and one geared towards Schools staff. Justin notes issue of hospital systems rejecting forms. What specific components do you need that will meet both of our requirements.

Brainstorm regarding the release process. Kate notes that there are cheat sheets, but that really it takes work and willingness to have the conversation. Application in each community is so different.

There was also a break out group from Joint Committee on Student Success that discussed some of these issues. It included the Oregon Association of Hospital and Health Systems (Note: Rebecca Teal is the director of public policy. Sean Colmer sr vp of policy and strategy. Eli from ODE. :

Could Alliance make a recommendation---take a position.

Kimberlee raises the issue that lack of trust, parents, youth etc., is at the core of this issue. How do we build trust? Kimberlee, be sure to thoughtful about this as we think about policies impacting release of information.

Action: Frame this work with the following messaging: "The lack of care coordination between systems (such as hospitals and schools) is increasing the risk of suicide among our youth." The Schools Committee needs to work with Continuity of Care regarding best practice of care coordination between schools and hospitals, Consider developing an issue brief and developing a process to engage key stakeholders such as Systems of Care across the state.

The lack of care coordination between systems is increasing the risk of suicide among our youth.



UPDATED March 2019: Oregon Youth Suicide Intervention and Prevention Plan: Schools Committee Objectives, Actions and Measures

COLORS GUIDE: COMPLETE * ON TRACK * DELAYED * AT RISK * ACTION STEP REVISED



YSIPP Objective	Suicide Prevention Alliance Action	Performance Measure/ Data Source New or Existing?	Status Complete On-Task Stalled Not Started	Timeline
Strategic Direction 1: Health and empowered individuals, families and communities				
Goal 2. Implement research-informed communication efforts designed to prevent suicide by changing knowledge, attitudes and behaviors.				
Objective 2.1: Develop, implement and evaluate communication efforts designed to reach defined segments of the population.				
<p>2.1.a. OHA will identify communication needs, review available local, state and national resources, and collaborate with stakeholders to prepare a communication plan to promote statewide safe suicide prevention messages.</p>	<ul style="list-style-type: none"> Recommend to School Safety Task Force and each ESD in the state to take steps to ensure that students are connected with crisis resources when necessary, and that the School Safety Task Force and ESDs and include the contact information for and appropriate youth crisis 24-hour service, operated by an American Association of Suicidology certified crisis center, on all students' identification cards, grades 6-12. 		<p>AOCMHP Serves on School Safety Task-Force Alliance supported SB52 in 2019 Legislative Session</p>	<p>June 2017 and Ongoing</p>
Strategic Direction 2: Clinical and Community Preventive Services				
Goal 4. Develop, implement and monitor effective programs that promote wellness and prevent suicide and related behaviors.				
Objective 4.2: Encourage community-based settings to implement effective programs and provide education to promote wellness and prevent suicide and related behaviors. (Decrease exposure to violence and adverse experiences.)				
<p>4.2.d. OHA will work with communities to develop a plan to expand universal, evidence-based practices to prevent suicidal behaviors.</p>	<ul style="list-style-type: none"> Recommend the Department of Education make Youth Mental Health First Aid and other evidence-based mental health awareness and suicide prevention training programs available for education staff and students at state in-service training days or other available days for students within and outside of school time. 	<p>Follow up letter to survey to be sent out. Track progress on SB52 requiring plans at each school district.</p>	<p>Trainings scheduled. Pilot of MHFA for teens conducted by AOCMHP.</p>	<p>March 2019</p>



YSIPP Objective	Suicide Prevention Alliance Action	Performance Measure/ Data Source New or Existing?	Responsible Committee	Timeline
Strategic direction 2: Clinical and community preventive services				
Goal 6. Provide training to community and clinical service providers on the prevention of suicide and related behaviors.				
Objective 6.1: Provide training on suicide prevention to community groups with a role in the prevention of suicide and related behaviors.				
<p>6.1a The Oregon Department of Education will collaborate with schools to identify gaps and opportunities for staff training and protocol development on suicide prevention and intervention</p>	<ul style="list-style-type: none"> Survey schools to assess current landscape regarding staff training and opportunities for protocol development. Survey athletic staff at schools regarding their role in suicide prevention. 	<p>Survey Results</p>	<p>Two surveys have been distributed. Data analyzed by UO. Follow up with schools</p>	<p>May – July 2018</p> <p>Schools/ UO Team</p>
<p>6.1b OHA will collaborate with partners to expand and fund additional in-person and online training opportunities for school staff in best practice programs, such as Applied Suicide Intervention Skills Training (ASIST), Kognito, RESPONSE, QPR (Question, Persuade, Refer) and Mental Health First Aid, and others as the evidence base is established.</p>	<ul style="list-style-type: none"> Mental Health First Aid will be promoted and presented at the COSA meetings. Youth Mental Health First Aid trainings will occur throughout the state and annual summit. Support distribution of school suicide prevention guides such as the one developed by Public Health and the one developed by Lines for Life 	<p>Evaluations from MHFA</p> <p>Posted on ODE web page and noted on listserv</p>	<p>Coordinated by AOCMHP- On Track</p>	<p>Ongoing</p>



YSIPP Objective	Suicide Prevention Alliance Action	Performance Measure/ Data Source New or Existing?	Status Committee	Timeline
<p>6.1c By December 2019, OHA Health Systems Division will collaborate with school districts to pilot the best-practice Sources of Strength program for building positive social connections and norms among middle/high school students in at least three regionally diverse school districts to encourage peer-to-peer support and relationships with supportive adults.</p>	<ul style="list-style-type: none"> • Pilot two Sources of Strength in FY 17-18. Bring training for trainers to Oregon • Expand pilot to 3 or more school districts in FY 18-19 	<p>Number of Schools Implementing. Peer leaders and adult advisors trained.</p>	<p>Implemented in Albany and Clackamas FY17-18 OHA provided funding and Alliance will coordinate Training for Trainers held for August 2018</p>	<p>June 2019</p>

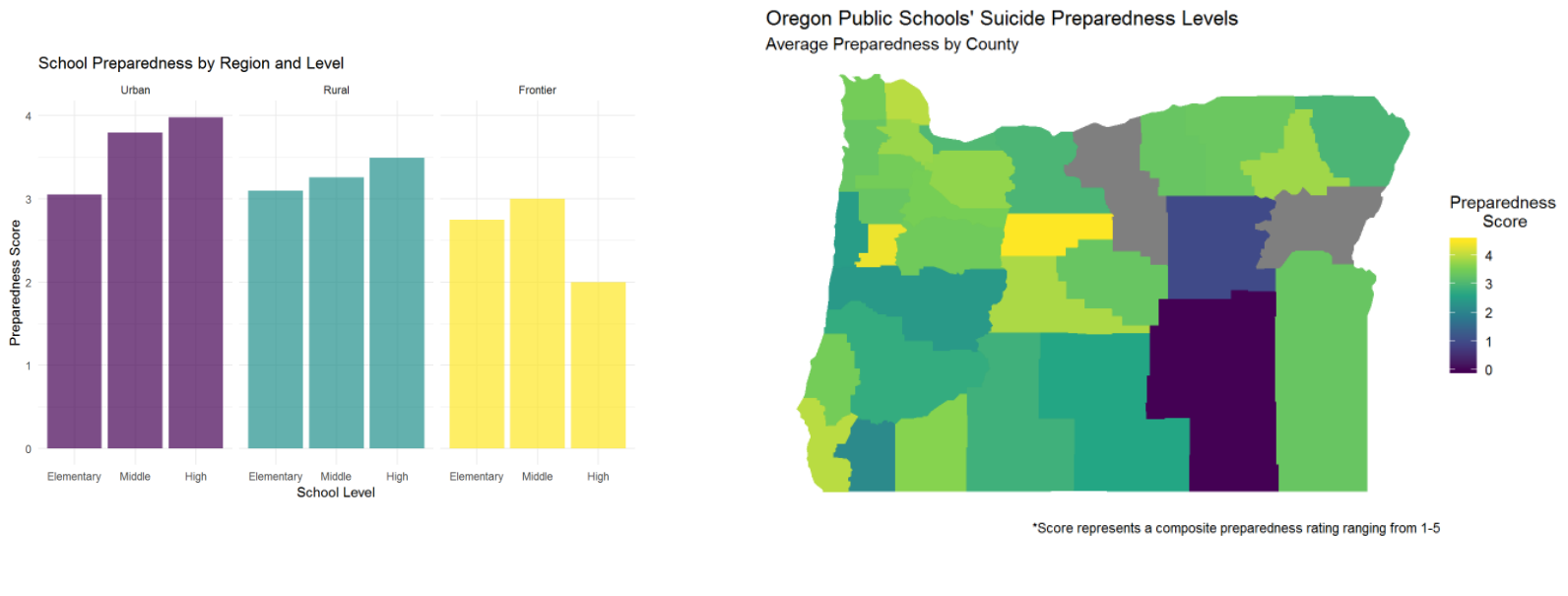


Quarterly Report - Schools Committee 06-26-19

<p>2018 YSIPP Report</p>	<p>https://www.oregon.gov/oha/PH/PREVENTIONWELLNESS/SAFELIVING/SUICIDEPREVENTION/Documents/2018YouthSuicideAnnualReport.pdf</p> <p>Adult information can be found at: OHA Data Dashboards</p>
<p>Schools Survey</p>	<p>Jonathan Rochelle – Survey: Last week, U of O emailed schools with an update, informing them that we were creating a comprehensive guide, and have already received feedback and questions from recipients. There were questions whether there were regional suicide prevention coalitions.</p> <ul style="list-style-type: none"> I. Define the Problem: Status of social issue <ul style="list-style-type: none"> a. What is the national landscape of youth suicide b. Transition to youth suicide in Oregon. Define and outline the problem using Oregon Health Authority Report c. Use Oregon Healthy Teens report to give overview of mental health in schools. II. Share survey results: What prevention looks like now in Oregon III. School wide suicide prevention: Solution <ul style="list-style-type: none"> a. MTSS model <ul style="list-style-type: none"> i. How to weave essential components into a system b. Essential Components <ul style="list-style-type: none"> i. Care Team ii. Awareness Campaign iii. Screening iv. Identification and Refer Protocol v. Suicide Prevention EBP vi. Postvention

- c. MTSS revisited
- d. Resources Overview (with links)

This effort came out of the school survey and has aligned pretty well with the 2020 Plan. Schools can pull and use what they need. Thoughts are to connect schools with their local coalitions to build capacity.



Communication

Developing an internal system to communicate the wide variety of efforts that are occurring in suicide prevention, intervention, and postvention in Oregon:

Website; building closer relationships with local coalitions, ODE's Superlistserv and Counseling Listserve



<p>New Funding and Legislation</p>	<p>Adi’s Act passed, requiring every school district to have a suicide prevention plan. Galli was at the signing Ceremony on behalf of the Alliance. Our hope is to provide information and suggestions during rule writing and implementation. If ODE is preparing to write anything significant, they will need proposed rules by March 2020 so that schools can read. The most critical part is the “how”. Needs to be reflective of research.</p> <p>ODE has been having meetings regarding the huge tidal wave of legislation. ODE is establishing a new division called: Welcoming, Safe and Inclusive For All Students. The Alliance will want to work closely with them to assure that there are diverse voices at the table and people with expertise in suicide prevention/intervention. A next step for the committee will be to</p> <p>While it is anticipated that there will be 7 to 9 new hires at ODE who have training in suicide prevention, suicide postvention, bullying and school threats, there is concern that there will be a shortage of training funding for these positions. The Schools Committee would like to make some recommendations regarding specific training needed for the positions.</p> <p>The most hopeful piece of this is that it provides the opportunity for people who are affected to weigh in.</p>
<p>FERPA Workgroup</p>	<p>Referring to an element of the YSIPP directing ODE to issue a policy. How can we be supportive of schools in consideration of the barriers between schools and larger health systems?</p> <p>Welcoming, Safe, and Inclusive for All Students – interesting implications for our work.</p> <p>Full policy option package was not funded through OHA but \$10m did for suicide prevention & school-based mental health services.</p>