



# Agenda Workforce Committee 3/11/19

Time: 9:00 – 10:30 a.m.

Please join my meeting from your computer, tablet or smartphone.

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Join the conference call:

888-585-9008

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	Topic/Who	How	Notes/Attachments
	Attending	Don, Stephanie, Kristin (OPS), Annette, John,	
I.	Welcome and Agenda Review Don/Annette	Big View/Review/Preview	<p>Notes from Last Meeting Action Plan Update</p> <p>Action Items from Last Meeting:</p> <p><b>Action: Don and John will meet to discuss evaluation and process and share thinking with the workgroup.</b></p> <p><b>Action: Don will share back the information gathered through the surveys.</b></p> <p>Don and John will meet during the OSP to discuss outcome studies of the statewide DHS workforce development plan. John is interested both in doing pre and post testing of DHS folks who are trained.</p>
II.	Legislative Session Annette	HB2813-Behavioral Health SB808	<p>Stephanie – huge proponent of mandatory training for health professionals. She notes that the opposition last time was pretty intense. Reach out to Keny-Guyer and ask her opinion.</p> <p>Don notes that treating suicide prevention as a tertiary effort is missing the mark. Stephanie notes that at the beginning of</p>



			<p>the Opioid Crisis acupuncturists were required to take 3 hours of courses around Opioid Crisis.</p> <p>We discussed coming up with a list of trainings that we recommend and support.</p> <p>We also talked about how to bring the medical profession on board for the 2021 legislative session. Kristin notes that pediatricians who have lost a patient to suicide are potential allies and advocates in this work</p> <p>Action: <b>Kristin will send summary information about who has taken the OPS training to us.</b></p> <p>Stephanie and others may want to write letters in support. Stephanie ask to get information for each bill coming up and an invitation to testify. Kristin would like that as well.</p> <p>Action: <b>Annette, send updates as bills are scheduled to be heard and encourage people to submit letters of support.</b></p>
III.	<p>DHS Workforce Initiative</p> <p>Don</p>		<p>In November and December launched the first sessions with managers. They had 30 people go through ASIST and SafeTalk. Within the first few weeks of January, had 6 participants share that they had engaged in an intervention with a referral. This was with staff.</p> <p>DHS has created a three-year plan for approval—with goal of providing training for all 8500 DHS staff, develop ability to train internally, and include as part of onboarding of new staff.</p> <p>They are beginning to schedule statewide training. Also want to be sure to have resources available to staff.</p> <p>Also working with UO to evaluate</p> <p>ASIST, SAFETALK, LIVING WORKS START (web based, 90 minutes)</p> <p>Child Welfare has trainings scheduled for April—120 staff. Scheduled four staff to go through the Training for Trainers. Will be able to provide ASIST to managerial staff (90) in 2019 and 2020.</p> <p>DHS has strong partnerships with other organizations such as Social Security Administration – will be training 120 staff in ASIST. OHA is also tracking what DHS is doing—and will plan on this in the future.</p>



			<p>Stephanie points to Connect for postvention resources and AFSP for resources for survivors.</p> <p>John shared that a small group met informally to talk about getting an Attempt/Loss Advisory Group for the Alliance. Want to highlight best-practice</p>
III.	<p>Setting Priorities for Ongoing Work Together</p> <p>Don</p>	<p>Review previous action areas identified.</p> <p>Proposal: Making the Case Paper</p> <p>Feedback on outline</p>	<p>Annette asked about loss and attempt survivor groups—which the plan says we are supposed to provide support around.</p> <p>Stephanie notes that there is a training called—AnnMarie Maratulis “A Voice At the Table” – it is designed for family members of people who have attempted suicide. American Association of Suicidology just published impacted family members.</p> <p>Action: Follow up by creating list of support groups. John’s students will do some follow up. Annette will also reach out to Alliance members.</p> <p>Action: Susan Keys—ask her to talk with the workforce committee about her work.</p> <p>Action: Follow up with Kristi Nix regarding how to get ready for proposing medical professions are required to get suicide prevention/intervention/management training.</p>
IV.	<p>Next Steps</p> <p>Don/Annette</p>	<p>Review Discussion, Clarify Next Steps</p>	<p>Second Monday at 9 -10 a.m.</p>



UPDATED March 11, 2019: Oregon Youth Suicide Intervention and Prevention Plan: **WORKFORCE** 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?	Notes	Timeline/Status
<b>Strategic direction 2: Clinical and community preventive services</b>				
<b>Goal 5. Promote efforts to address means safety among individuals with identified suicide risk.</b>				
<b>Objective 5.1: Gather information needed to implement means safety programs as research becomes available.</b>				
<p><b>5.1.a.</b> The Alliance will oversee a strategic plan for developing, implementing and evaluating means safety counseling and other programs that are research-informed, culturally relevant and respectful of community values.</p>	<ul style="list-style-type: none"> <li>Support HB 2526 means safety and suicide prevention education bill. <i>Died (Support SB 719?)</i></li> </ul>	Bill enacted	SB 719 passed re: access to lethal means for person at suicide risk	<p><b>Means Access January 2019</b> <b>HB 2526</b></p>
	<ul style="list-style-type: none"> <li>Determine a standard of practice for means counseling and anyone who comes into contact with suicidal individuals or who are at risk are trained in CALM or another best practice.</li> </ul>		No progress on this yet; assess whether this is still priority for Workforce Committee	<p><b>March 2018</b></p>
	<ul style="list-style-type: none"> <li>Recommend that OHA create a clearinghouse of means safety educational materials and training resources, using information gathered and endorsed by the Workforce Development committee of the Alliance. <i>(and distribute?)</i></li> </ul>	Resource on websites	Pamphlet for gun owners developed and distributed by Susan Keys and Public Health. Resources will be on websites. No clearinghouse yet.	<p><b>Committee needs to assess priority and timeline for clearinghouse.</b></p>



YSIPP Objective	Suicide Prevention Alliance Action	Performance Measure/ Data Source New or Existing?	Notes	Timeline/Status
<b>Strategic direction 2: Clinical and community preventive services</b>				
<b>Goal 6. Provide training to community and clinical service providers on the prevention of suicide and related behaviors.</b>				
<b>Objective 6.1: Provide training on suicide prevention to community groups with a role in the prevention of suicide and related behaviors.</b>				
<p><b>6.1.d.</b> Funding options will be explored for ongoing sustainability of best practice gatekeeper training programs to increase early recognition and build awareness of warning signs, risk and protective factors and to improve response to at-risk children, youth and young adults. Trainings should be held for a wide array of community groups and gatekeepers.</p>	<ul style="list-style-type: none"> <li>Expand MHFA trainings statewide.</li> <li>Recommend and support trainings for facilitators of support groups.</li> </ul> <hr/> <ul style="list-style-type: none"> <li>Recommend that OHA create a clearinghouse of evidence based trainings for facilitators of support groups and for behavioral health clinicians and other health care providers to help assess for suicide risk, intervene in suicide prevention, and promote safety among people at risk for suicide, using information gathered and endorsed by the Workforce Development committee of the Alliance. Further recommend that OHA invest in certain evidence based</li> </ul>	<p>Data statewide rollout of Mental Health First Aid</p> <hr/>	<p>Mental Health First Aid training expands. SAMSHA proposal in.</p> <p>AFSP has groups around state. Committee has not prioritized this item. It needs additional attention.</p> <hr/> <p>Working with DHS to develop an approach for training child welfare workers.</p> <hr/> <p>List of SB48 courses on OHA website</p> <hr/> <p>Committee needs better understanding of OHA</p>	<p>January 2017 June 2018 June 2019</p> <p>Determine priority. Explore partnerships to achieve.</p> <hr/> <p>Timeline To Be Determined</p> <hr/> <p>November 2017 November 2018 November 2019</p>



YSIPP Objective	Suicide Prevention Alliance Action	Performance Measure/ Data Source New or Existing?	Notes	Timeline/Status
<b>Strategic direction 2: Clinical and community preventive services</b>				
	trainings with exemplary outcomes identified by the Workforce Development committee of the Alliance.		current investment in this. Currently using the recommendations of NREPP.	
<b>Objective 6.2: Provide training to mental health and substance abuse providers on the recognition, assessment and management of at-risk behavior, and the delivery of effective clinical care for people with suicide risk.</b>				
<p><b>6.2.b.</b> OHA will develop a plan to meet the training needs for behavioral and health care providers, including an analysis of Washington State statutes, to identify, intervene, assess, provide means safety counseling, treat and manage patients with suicidal thoughts and behaviors.</p>	<ul style="list-style-type: none"> <li>Recommend standardized means safety counseling behavioral and other health care providers – CALM or other best practice.</li> </ul>		Check in re OHA progress on this. Alliance working with legislators to amend SB48 to require training.	January 2017
<p><b>6.2.c.</b> OHA will assess the needs of publicly funded health systems, clinics and hospitals to require training for health care workers to identify suicide risk, conduct means safety counseling, refer to care, treat and follow up with patients at risk of suicide.</p>	<ul style="list-style-type: none"> <li>Support SB 0048 (CEUs for suicide risk assessment and intervention and offer revisions. (done)</li> <li>Develop training list to help behavioral and other health workforce to complete CEU requirements and recommend requirements to OHA.</li> </ul>	<p><b>*List on web page</b> <b>*Data collected for SB 48</b></p>	<p>SB48 Passed List of trainings posted on OHA web page.</p> <p>Legislative action in FY18-19 to add requirement for behavioral health workforce to be trained.</p>	December 2019



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<b>Strategic direction 2: Clinical and community preventive services</b>				
			To be updated annually	
<b>Strategic direction 3: Treatment and support services</b>				
<b>Goal 8. Promote and implement effective clinical and professional practices for assessing and treating those identified as being at risk for suicidal behaviors.</b>				
<b><i>Objective 8.1: Adopt and implement guidelines to effectively engage families and concerned others, when appropriate, throughout entire episodes of care for persons with suicide risk.</i></b>				
8.1a OHA, in collaboration with CSAC, will work with behavioral health and primary care health providers, peers, prevention specialists, faith-based communities and suicide prevention advocates to identify and establish model guidelines to provide peer support for parents, family of choice and siblings of persons with suicidal	CSAC suicide prevention committee will develop a guidebook for families in the E.R.	Resource posted on website/printing and distribution	CSAC Suicide Prevention committee wrote guide. Alliance reviewed and will post on the website and promote distribution.	<b>July 2018</b>



YSIPP Objective	Suicide Prevention Alliance Action	Performance Measure/ Data Source New or Existing?	Notes	Timeline/Status
<b>Strategic direction 2: Clinical and community preventive services</b>				
<p>ideation or who attempt suicide. OHA will identify or develop a guidebook to assist families, families of choice, friends and siblings of children/youth/young adults who are experiencing suicidal ideation or who attempt suicide.</p>	<p>Develop and promote half-day meeting with faith-leaders to address these issues.</p>	<p>Half-Day Conducted Evaluations Collected</p>	<p>Alliance meeting conducted.</p>	<p>June 2019</p>
<p><b>Objective 8.2: Collaborate with behavioral health providers to identify policies and procedures to assess suicide risk and intervene to promote safety and reduce suicidal behaviors among patients receiving care for mental health and/or substance use conditions.</b></p>				
<p><b>8.2.b.</b> OHA will identify best practices and existing resources, and convene a group of behavioral health and primary care providers to identify, develop and disseminate model Oregon policies, procedures and training programs that define how to assess for suicide risk, intervene and treat suicidal patients aged 10-24 years, and to promote safety among children, youth and young adults receiving care for mental health and substance use disorders.</p>	<ul style="list-style-type: none"> <li>Review trainings for behavioral health and other workforce and make recommendations to invest in specified trainings.</li> </ul>		<p>Committee revised timeline on this. OHA Behavioral Health Collaborative worked on this and the Alliance provided feedback. .</p>	<p>June 2020</p>