

I. Data and Evaluation Committee Recommendation

Proposal: Statewide Mental Health Survey with Suicide Prevention Specific Questions

How It Aligns to the 21-25 YSIPP

Strategic Pillars: Healthy and Empowered Individuals, Families, and Communities

Strategic Goal: Integrated and Coordinated Activities

Pathway: Healthy and Empowered Individuals

Initiatives: Collective Impact work to assess and plan based on population data

Rational: Suicide prevention and mental health promotion strategies include population-based approaches related to public policy, public health and health care system design.

At this time, there is insufficient specificity in data from federal and state surveys to identify populations to prioritize for intervention, assure racial, demographic and gender equity, and track progress on outcomes related to public attitudes, help-seeking, service utilization, protective factors, etc. over time across the life course for all Oregonians.

Details of the Ask: For this reason, the Data and Evaluation Committee of the Alliance has identified a statewide representative survey as a priority investment needed to measure the implementation and impact of the Oregon Health Authority’s YSIPP and ASIPP.

Resources Needed for the Ask: It is recommended that funds be identified to support hiring a contract research organization to finalize questions through a stakeholder process, sample (including over-sampling of populations at higher statistical risk), field, analyze and report the survey in a publishable, publicly accessible format.

Community Partners Involved in the Ask: Alliance members/Lines for Life

How does it address Equity? Population level data allows us to get a broad view of Oregon’s mental health needs. The survey design and dissemination should prioritize reaching underserved and historically oppressed communities so that their needs and strengths are addressed in behavioral health, public health, and suicide prevention planning.

Alliance Staff Suggestion re data:

Prioritize funding evaluation of a few key initiatives in the YSIPP so we can assess impact and make informed decisions moving forward regarding investments and strategies. Suggest highlighting Adi’s Act evaluation, shared data re: gatekeeper trainings, continued evaluation of CATS.

Include evaluation support throughout the ASIPP.

Ask Public Health to resurvey hospitals once a biennium regarding compliance with transitions legislation.

Several groups recommended that the Student Wellness Survey become mandatory for districts. This is something we can include as part of our long-term policy vision rather than the POP.

II. Transitions of Care / Executive

Proposal: Provide robust funding to mobile response and crisis stabilization services and for 988 implementation

How It Aligns to the 21-25 YSIPP

Strategic Pillars: Healthy and Empowered Individuals, Families, and Communities

Strategic Goal: Protective Programming, Appropriate Treatment and Management in Suicidality, Healthcare Coordination, Healthcare Capacity

Pathway: “Available support” Oregonians who need immediate access, Equipped and Resourced Communities, Coordinated Transitions, Accessible Services, Available Services **Initiatives:** This links to crisis response and access to services across all initiatives

Rationale: The Alliance recognizes that in Oregon, life lines and county crisis call centers provide invaluable support at critical times and connect individuals to services that can save lives. A growing need to expand financial support of crisis line services, mobile response and support services in the State exists because of the (federal) National Suicide Hotline Designation Act (S.2661). Starting in July 2022, **988** will be the number people dial or text to get access to mental health crisis services – the suicide prevention lifeline as we know it today is being restructured and modernized which will result in an increased volume of calls and texts. Without additional funding, people in crisis will not get the help they need when they need it.

Details of the Ask: The Alliance supports further investment into crisis response services that are beyond the scope of the Lines for Life and county crisis lines such as mobile crisis response units, training for first responders, efforts to partner with historically oppressed communities to ensure access for all and other programs that are proven prevent suicide in Oregon. We believe that significant investment is needed in order to ensure that behavioral health supports, including culturally responsive services and family and youth peer support, are integrated into the crisis system of response. The Alliance recommends that the Oregon Health Authority continue to focus on strengthening the behavioral health crisis response service network in Oregon.

Resources Needed: Adequate funding from diverse sources is needed to ensure that calls can truly be answered 24/7/365 by trained, in-state crisis counselors who can connect callers to in-person crisis response services as needed and other lifesaving follow-up care.

Community Partners Involved in the Ask: This ask comes from the Alliance through our Executive. We have members, including youth and people with lived experience, participating in many of the 988-MRSS planning groups.

Equity: The 988 and Mobile Crisis Response service are intended to be universal services and to ensure that behavioral health crisis are responded to by people with expertise in this area. In many cases, law enforcement are currently responding to these situations which can actually cause harm since they do not have the training or expertise in behavioral health. Additionally, due to historical oppression, many people do not have a trusting relationship with law enforcement and calling them can in itself be a traumatic experience.

III. Workforce Committee

Proposal: Support development of infrastructure to support continuing education training for HB2315 similar to the way that OHA supports cultural competency training.

How It Aligns to the 21-25 YSIPP

Strategic Pillars: Treatment and Support Services, Clinical and Community Prevention Services

Strategic Goal: Appropriate Treatment and Management of Suicidality, Frontline and Gatekeeper Training

Pathway: Equipped Workforce, Supported Training Options **Initiatives:** HB 2315 and Beyond

Rational: In Oregon, HB 2315 passed creating a requirement for behavioral healthcare providers to take continuing education units in suicide treatment, management, and assessment. In order for this legislation to be effective, practitioners should have access to vetted courses that will meet the requirement. Our neighboring state Washington has developed an extensive infrastructure and partnership with a local university to develop and assess suicide prevention training for both the healthcare and behavioral healthcare workforce. This includes different levels of training and a process for trainings to be reviewed and certified for continuing education. Our request is that, similar to Oregon’s requirements for cultural competency training, OHA or a designated contractor provides coordination and quality assurance around HB 2315.

Details of the Ask: Require for suicide intervention, treatment, and management for continuing education for organizations contracted to provide suicide prevention, intervention, postvention work by OHA. Support development of trainings and curriculum to meet Oregon’s peer and behavioral health continuing education requirements. Include developing culturally relevant and / or population specific trainings. Develop a centralized website with a training registry of existing and approved for suicide intervention, treatment, and management continuing education options.

Resources Needed for the Ask: Provide funding to support licensing board implementation of for suicide intervention, treatment, and management education for re-licensure. Either through state staff or via a contract, staff a standing suicide prevention committee for ongoing assessment of continuing education options Recommendations to Oregon’s Health Professional Licensing Boards similar to the OHA Division of Equity and Inclusion Cultural Competency Training board

Community Partners Involved in the Ask : Alliance members, workforce

Equity: A well organized and easily accessible set of suicide assessment, intervention and management trainings will increase the ability of Oregon’s diverse behavioral health workforce to comply with these new requirements. It also will provide a central place for coordination with organizations employing peers and behavioral healthcare workers to ensure they are receiving quality, culturally responsive training.

IV. Executive Committee

Proposal: Fully fund a lifespan approach for suicide prevention, intervention, and postvention including funding for the YSIPP and ASIPP

Rationale: These two plans have been developed with input from 100s of community members and groups to provide comprehensive suicide prevention, intervention and postvention services and community education. These plans layout a comprehensive statewide approach to address the public health crisis of suicide. In 2020, suicide was the second leading cause of death for youth age 10-24 and is the overall 8th leading cause of death in the state however, if appropriately funded and implemented, these plans hold promise to significantly reduce suicides.

Staff Comment: The current YSIPP is funded at \$5million each year. We could consider asking for additional dollars to adjust to inflation and more fully fund efforts. The original estimate for implementing the YSIPP was \$12 million. We could use these numbers as a starting point for determining total request to fund the ASIPP. Since ASIPP covers 18 and older, and youth under 18 comprise about 25% of Oregon population, it may make sense to ask for more than \$12 million for adult services.

V. Outreach & Awareness Committee and Coalition Leaders Network

Proposal: Provide low barrier grants to suicide prevention coalitions across the state with coordination and ta support.

Strategic Pillars: Healthy and Empowered Individuals, Families and Communities

Strategic Goal: Integrated and Coordinated Activities

Pathway: Coordinated Activities, Suicide Prevention Policies, Coordinated Entities, Voices of Lived Experience Equipped Advisories, Resourced Coalitions

Initiatives: Organize the people, staff, and infrastructure of suicide prevention across the state

Rational The Alliance recognizes that state level suicide prevention infrastructure works best when there is a resourced local suicide prevention coalition in place and a statewide structure supporting local efforts. Coalitions across the state have a lifespan approach and, as such, will be essential in implementation of the both the YSIPP and the Adult Suicide Intervention and Prevention Plan (ASIPP) when it is completed.

Suicide prevention coalitions are an essential component of a larger change strategy. Regional and local suicide prevention coalitions (coalitions) are broadly representative of public and private sectors and are strategically positioned as a conduit for the dissemination of resources and best/innovative practices and become a hub for local subject matter expertise. In Oregon, these coalitions have emerged rather organically, and structures vary widely

Details of the Ask Fund local and regional suicide prevention coalition’s suicide activities, engagement in YSIPP/ASIPP initiatives, and support of local implementation of state policy through low barrier grants.

Fund one FTE at a contracted agency such as AOCMHP to support the work of suicide prevention coalitions through technical assistance, a centralized resource and communication mechanism, and management of low barrier grants for local/regional coalitions.

Resources Needed for the Ask Funding for staff: A few coalitions are supported by local suicide prevention coordinators with support from public health departments and/or community mental health programs; however, most counties do not have funding for a full-time suicide prevention coordinator. Other coalitions have emerged as sub-groups of larger mental health promotion efforts or as a result of organizing by passionate community advocates

Community Partners Involved in the Ask

How does it address Equity?

VI. Lethal Means Advisory Group

Recommendations

- a. Create off site storage options for firearm owners: Lockers - so firearm owners can maintain ownership of firearm; Gun Shops willing to hold firearm temporarily; Create an offsite storage map for Oregon
 - a. Funding: fund offsite storage options? Fund person to coordinate effort (consider OFSC) and create map
 - b. YSIPP Framework – Clinical and Prevention Services; Means Reduction / Safe Storage Access
- b. Coordinate, understand existing efforts through state and county overdose prevention efforts to get Narcan and testing strips to schools to ensure we are not duplicating efforts.
 - a. Free and readily available Narcan: to be in all schools, with all staff trained on how to administer; handed out at community events; statewide campaigns on where to get free Narcan and why everyone should be trained and carried at all times.
 - b. Free and readily available Fentanyl test strips: made available to high school students; handed out at community events; statewide campaign on the lethality of fentanyl, where to get free test strips, and how to use them.
 - c. Funding: point person / group to see existing efforts on both state and county levels; provide education to suicide prevention coalitions and public health agencies on Narcan distribution and link to suicide prevention
 - d. YSIPP Framework – Clinical and Prevention Services; Means Reduction / Safe Storage Access
- c. Create App such as 'Step First' - <https://www.firststeporegon.org/>: Make it mandatory to be preloaded on all school devices; Statewide campaign with Oregon PTA to have all youths and families download the app
 - a. YSIPP Framework – Clinical and Prevention Services; Means Reduction / Safe Storage Access

Staff Comment: Lethal Means Advisory Group provided a series of recommendations which would fit well under a strategic plan. This strategic plan is one of the initiatives from the 2021-2025 YSIPP assigned to Lethal Means. They are included here for your reference but believe that they do not belong as part of the POP. Instead, we recommend that a position and supports to coordinate these activities and engage with firearm owners be included in the POP for 2023.



Executive Meeting Oregon Alliance to Prevent Suicide

January 3, 2022



Land Acknowledgement.

Vision

In Oregon all young people have hope, feel safe asking for help, can find access to the right help at the right time to prevent suicide, and live in communities that foster healing, connection, and wellness.

Mission

The Alliance advocates and works to inform and strengthen Oregon's suicide prevention, intervention and postvention policies, services and supports to prevent youth and young adults from dying by suicide.

**Legislative
Concepts
Due Fall
2022
Alliance
votes on
legislative
priorities
June 2022**

POLICY OPTION PACKAGE FOR 2023 LEGISLATIVE SESSION – RECOMMENDATION PROCESS

Nov/December

**Staff and Chairs
Collect POP
requests from
committees**

**Staff collate
requests and share
with executive**

Early January

**Executive
Committee
reviews requests**

**Executive Reviews
and Forwards
Recommendations
to Membership**

**3rd Week of
January**

**Special Meeting to
Vote on
Recommendations
for POP**

**Staff share the
Alliance's POP
recommendations
with OHA**



Feedback Polls - at end
we will vote on full POP
package to forward

1) Forward to POP

2) Consider for other longterm
policy work or next legislative
session

3) Great idea—not a priority for
us

4) Some other group is more
well suited to advocate for this.



Proposal: Statewide Mental Health Survey with Suicide Prevention Specific Questions (Data/Eval)

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Staff Comments Re Data

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Provide robust funding to mobile response and crisis stabilization services and for 988 implementation

- **Rationale:** The Alliance recognizes that in Oregon, life lines and county crisis call centers provide invaluable support at critical times and connect individuals to services that can save lives. A growing need to expand financial support of crisis line services, mobile response and support services in the State exists because of the (federal) National Suicide Hotline Designation Act (S.2661). Starting in July 2022, **988** will be the number people dial or text to get access to mental health crisis services – the suicide prevention lifeline as we know it today is being restructured and modernized which will result in an increased volume of calls and texts. Without additional funding, people in crisis will not get the help they need when they need it.
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Fund Coalitions with Low Barrier Grants and TA Support – Outreach/Awareness and Network Leaders

- **Rational** The Alliance recognizes that state level suicide prevention infrastructure works best when there is a resourced local suicide prevention coalition in place and a statewide structure supporting local efforts. Coalitions across the state have a lifespan approach and, as such, will be essential in implementation of the both the YSIPP and the Adult Suicide Intervention and Prevention Plan (ASIPP) when it is completed.
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Lethal Means Advisory Group: Strategic Recommendations

- a. Create off site storage options for firearm owners: Lockers - so firearm owners can maintain ownership of firearm; Gun Shops willing to hold firearm temporarily; Create an offsite storage map for Oregon
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