

## Oregon Youth Suicide Prevention and Intervention Plan Metrics

Commented [BJ1]: HTO data set – where to plug that in?

Strategic Goal: Integrated and Coordinated Activities				
Strategic Pathway:	Possible Metrics	Baseline	Benchmark	Data Sources:
Resourced Coalitions	<ul style="list-style-type: none"> <li>- Number of active coalitions</li> <li>- Participation in learning collaboratives for local coalitions</li> <li>- State agencies regularly attend SPIP meetings</li> <li>- Policy and procedures about SP are strengthened in youth-serving agencies</li> <li>- Improved integration of overall sp programming in state agencies</li> <li>- % of people on the Alliance with lived experience</li> <li>- Amount of \$\$ in stipends</li> <li>- Number of youth engaged in SP activities each year</li> </ul>	18	_____	<ul style="list-style-type: none"> <li>- Attendance rosters at Alliance webinars</li> <li>- Mini-grant applications and reports</li> <li>- Attendance at SPIP meetings</li> <li>- Alliance annual member survey</li> <li>- OHA contract reports</li> </ul>
Equipped Advisories		_____	_____	
Voice of Lived Experience		3	5	
Coordinated Entities				
Suicide Prevention Policies				
Coordinated Activities				
Strategic Goal: Media and Communication				
Strategic Pathway:	Possible Metrics	Baseline	Benchmark	Data Sources:
Informed Leaders	<ul style="list-style-type: none"> <li>- Number of identified legislators who are champions for suicide prevention</li> <li>- Number of media reports about prevention and resources?</li> <li>- Number of identified media champions?</li> <li>- Number of people receiving listserv messages, new subscriptions</li> </ul>			Alliance report to OHA Listserv subscriptions Media – unsure LFL report to OHA
Information Dissemination				
Promoting Wellness				
Safe Messaging				

	<ul style="list-style-type: none"> <li>- Percentage of Suicide Prevention blurbs in monthly Holding Hope newsletter</li> <li>- Increased conference attendance</li> </ul>			
<b>Strategic Goal: Social Determinates of Health</b>				
<b>Strategic Pathway:</b>	<b>Possible Metrics</b>	<b>Baseline</b>	<b>Benchmark</b>	<b>Data Sources:</b>
Clear Links	<i>No named initiatives in 21-22</i>			
Supporting Partners				
<b>Strategic Goal: Coping and Connections</b>				
<b>Strategic Pathway:</b>	<b>Possible Metrics</b>	<b>Baseline</b>	<b>Benchmark</b>	<b>Data Sources:</b>
Positive Connections	<ul style="list-style-type: none"> <li># of elementary schools with Sources</li> <li># of elementary students receiving Sources</li> <li># of adults attending adult advisor trainings</li> <li># of adults attending YMHFA trainings</li> <li>% of students who name trusted adult</li> <li>% of students who say at least one adult cares about them at school</li> </ul>			<ul style="list-style-type: none"> <li>Schools Deep Dive</li> <li>SSPW Scan</li> <li>YMHFA surveys</li> <li>Sources surveys?</li> <li>School implementation plans at Sources</li> <li>Quarterly reports to OHA from Big River</li> <li>Learning Collaborative surveys</li> <li>Student Health Survey</li> </ul>
Coping Strategies				
Adult Roles				
<b>Strategic Goal: Protective Programming</b>				
<b>Strategic Pathway:</b>	<b>Possible Metrics</b>	<b>Baseline</b>	<b>Benchmark</b>	<b>Data Sources:</b>
Available Support	<ul style="list-style-type: none"> <li># of calls to Lifeline</li> <li># and type of texts to Crisis Text Line</li> <li># of volunteers on YouthLine</li> <li># of calls to YouthLine</li> <li># of calls, chats to ReachOut Oregon</li> <li># of calls to other support lines</li> <li>% of schools meeting Div 22</li> <li>% of schools meeting individual Adi's Act requirements</li> </ul>	-	-	<ul style="list-style-type: none"> <li>ESSENCE report</li> <li>Contractor's quarterly reports to OHA</li> <li>Tribal suicide prevention plans and reports</li> <li>ODE's Div 22 report</li> <li>SSPW scan</li> </ul>
Population Focused Programming				
Protective Policies				

**Commented [BJ2]:** What to measure? Wide variety of use of these funds. Culture camps, staffing, Big River implementation, PRIDE parade, mental health care kits.

Strategic Goal: Means Reduction				
Strategic Pathway:	Possible Metrics	Baseline:	Benchmark:	Data Sources:
Safe Storage Access	<ul style="list-style-type: none"> <li>- # of medicine lock boxes requested by LMHAs</li> <li>- # of gun safes requested by LMHAs</li> <li>- # of safe storage items distributed by Suicide Rapid Response program</li> <li>- # of Oregon CALM trainings, people trained</li> <li>- # of providers taking the online</li> <li>- # trained in Rural Firearms owners course</li> <li>- % of students who can access loaded firearm in less than 24 hrs</li> </ul>			AOCMHP quarterly reports
Means Reduction Education				SRR reports
Means Reduction Promotion				Student Health Survey
Strategic Goal: Frontline and Gatekeeper Training				
Strategic Pathway:	Possible Metrics	Baseline:	Benchmark:	Data Sources:
Appropriately Trained Communities	<ul style="list-style-type: none"> <li>- Big River Trainers (#, per capita, per county, representative of population)</li> <li>- # of T4T's held</li> <li>- # of active trainers / how many trainings per year per trainer / by region</li> <li>- # of people trained in each Big River program</li> <li>- # of school districts training all staff</li> <li>- % of OHA contractors complying with cultural agility or anti-racism trainings</li> </ul>			SSPW scan
Supported Training Options				UO evaluation surveys
Representative Trainers				Big River quarterly reports
Culturally Relevant Trainings				Forward Project
Strategic Goal: Healthcare Capacity				
Strategic Pathway:	Possible Metrics	Baseline:	Benchmark:	Data Sources:
Accessible Services	<i>No named initiatives in 21-22</i>			MMIS survey?
Right-Sized Workforce				System of Care dashboard? Workforce unit in OHA?
Strategic Goal: Healthcare Coordination				

**Commented [BJ3]:** Also need to understand what is different because of this programming. Effectiveness measures? Intended result?

- Things like:
- did they acquire the skills?
  - did they use the skills?
  - do we see a difference because they used the skills?
  - referrals for suicide ideation increasing
  - youth reporting more trusted adults
  - do people receiving services think its culturally appropriate (OHA Medicaid survey data)

Strategic Pathway:	Possible Metrics	Baseline:	Benchmark:	Data Sources:
Integrated Care	Billing code for Caring Contacts activated – Medicaid  Billing code for Caring Contacts activated – private insurance  Frequency at which billing code for Caring Contacts used			CATS data (until Jan 2023)  MMIS data?
Substance Use Services				
Appropriate Communication				
Coordinated Transitions				
<b>Strategic Goal: Appropriate Treatment and Management of Suicidality</b>				
Strategic Pathway:	Possible Metrics	Baseline:	Benchmark:	Data Sources:
Whole-Person Approaches	# of advanced skills offerings # of providers taking Advanced Skills % of providers taking suicide prevention CE # of sites taking OPS trainings Amount of culturally relevant treatment options	-	-	SB 48 report HB2315 report AOCMHP quarterly reports OPS quarterly reports Tribal reports Big River reports
Voice and Choice				
Equipped and Well Workforce				
<b>Strategic Goal: Postvention Services</b>				
Strategic Pathway:	Possible Metrics	Baseline:	Benchmark:	Data Sources:
Equipped and Resourced Communities	# of counties participating in Connect: Postvention # of youth-serving entities served in SRR Satisfaction of SRR recipients # of PRLs attending Qtrly meetings			AOCMHP quarterly report SRR reports SRR eval report
Postvention Response Leads				
Fatality Data				

## Oregon Suicide Surveillance Data

### Data Updated in Annual Report – Public Facing

- Hospitalization (fatal and non-fatal)
- Student Health Survey
  - o % seriously considered suicide
  - o % attempted suicide
  - o % meet basic criteria for depression
  - o % loaded firearm within 24 hours
- Finalized CDC fatality data
- Firearm data from ODVRS
- Mechanism of means data from ODVRS
- CATS data

### Surveillance Data – Public Facing

#### Non-fatal Data:

- Monthly - ESSENCE report – suicide related activity in ED, UCC, Poison Control, Lifeline Calls
  - o Soon to be a dashboard
- Crisis Text Line data

#### Fatality Data:

- Vital Statistics death data

### Surveillance Data – Issued to Public Health Authorities, Suicide Prevention Coordinators

- ORVDRS – quarterly
- ESSENCE data alerts – if applicable
- Jill contacts PRLs if a report is missing from the ME's report

## Surveillance Data – Internal to OHA

- Medical Examiner’s weekly fatality report
- SB561 reports to OHA
- ORVDRS
- ESSENCE data alerts
- Monthly MDR: Suicide Focus meeting
- CATS reports (qtrly to OHA, annually published) – will transition to MRSS reporting in Jan 2023.

Implementation Outcome	Definition
Acceptability	The level of satisfaction with various parts of an intervention, as perceived by an individual provider and/or consumer
Adoption	The spectrum of uptake, from intention to action, to try an intervention
Appropriateness	The perceived relevance or fit of an intervention to an individual, organization, or setting
Cost	A quantified measure of cost, cost-effectiveness, or cost/benefit ratio for an individual provider or service-providing institution
Feasibility	The extent to which an intervention can be successfully carried out in a particular setting or organization
Fidelity	The degree to which an intervention is implemented as it was designed in an original study, plan, or policy
Penetration	The extent to which the intervention is actually used or delivered within an organization or setting
Sustainability	The extent to which the administrators, organization, or setting are able to maintain broad use of the intervention

## Summary of Conversation:

A good portion of the conversation was spent re-framing/re-focusing. The group found it helpful to go back to the spreadsheet and refresh as to what the activities were AND to understand the importance of doing our work at a level above program evaluation (not trying to tie an outcome to an effort directly).

An approach that focused on what questions are we hoping to answer seemed to work.

A discussion as to how we might frame our recommendation (that is – we see gender as a priority to collect because male-identified do not access services).

Knowledge from the programs about what is important/realistic to measure is helpful (example: Elissa explaining de-escalation, abandonment – discussion of active responses).

Complexity added by system changes – for example 988 – coming up with measures that are sufficiently robust, high-level that they don't get changed with every program change

## Protective Programs

Possible questions to answer:

Was the support right time right place accessible?

Did the support provided have impact? (pathway specific)

Strategies we are measuring

2.3.1.1 Crisis Text Line is available 24/7, and data is tracked using code "Oregon"

2.3.1.2 LifeLine through Lines for Life is available 24/7.

2.3.1.3 Teen-to-teen text and phone support is available through YouthLine from 4pm-10pm PST

2.3.1.4 Emotional Support Lines are widely available (David Romprey Warmline, ReachOut Oregon Parent Warmline, COVID19 and wildfire support lines, Behavioral Health Access support lines)

2.3.1.5 A comprehensive website to identify behavioral health needs, supports, and providers called "Here For You Oregon" to launch in 2021.

2.3.1.6 New: A federally mandated project to transition the National Suicide Prevention Lifeline number to "9-8-8" will be ready to implement by July 2022.

2.3.1.7 New: Mobile Response and Support Services (MRSS) system is being developed in Oregon, including a children's specific system.

#### Available support

Crisis Intervention – Oregonians who need immediate support have access to it

What supports are available and to whom? Are people getting connected to those supports? Are services missing from the comprehensive list? What are remaining service gaps? What are wait times?

In-school monitoring, assessment and intervention

Example: Data collection at the district level (number of screenings and number of interventions)

#### Protective policies

# of calls to Lifeline, times of day

# and type of texts to Crisis Text Line – this metric is historic

# of volunteers on YouthLine

# of calls to YouthLine

# of calls, chats to ReachOut Oregon

# of calls to other support lines

% of schools meeting Div 22 (policy)

% of schools meeting individual Adi's Act requirements (policy)

Breakout by gender!!! Very important!

De-escalation rates (monthly basis)

Active rescues

Abandonment rates (by week, month, day, time?)

Getting feedback from affected communities as to the availability, accessibility and appropriateness of crisis support and intervention (Coalition of Communities of Color data one example)

Change in use over time by target populations

## **Protective Programs Strategies we are measuring**

Available support

Population focused programming

Protective policies (SSA's?)

- Upstream prevention (protective factors that prevent crisis; SEL; basic needs & access to these things)
- What does this look like across sectors?
- Access to providers
- Look at IMMh

### **# of calls to Lifeline**

- Topics/categories of calls
- Active rescues
- Outcomes
- Length of call
- Wait time
- Reporting time frames
- Mandatory reports filed
- Impact of 988
- Repeat caller info

### **# and type of texts to Crisis Text Line**

- Location of texters
- Languages?
- Accessibility

### **# of volunteers on YouthLine**

- Bilingual options?
- Accessibility
- Demographics (identities?)
- Personal experiences of volunteers
- Turnover

### **# of calls to YouthLine**

- Topics/categories of calls
- Active rescues
- Outcomes
- Length of call
- Wait time
- Reporting time frames
- Mandatory reports filed
- Impact of 988
- Demographics of callers

- Escalation to adult intervention/monitoring
- Repeat caller info

#### **# of calls, chats to ReachOut Oregon**

- Referrals? (types)
- Breakdown of who is utilizing this service (youth, caregivers, etc.?)
- Locality (urban vs. rural)

#### **# of calls to other support lines**

- Lines for Life options
- Trevor Project
- How calls get routed
- Hours that services are offered

#### **% of schools meeting Div 22**

- Impact of lack of behavioral health support
- Clear definition of standards?
- Aggregation of regions needing support

#### **% of schools meeting individual Adi's Act requirements**

- Number of schools in compliance
- Number of plans that are accessible
- Rubric from LFL
- District-level scan
- How do school-level scan?
- Awareness of Adi's Act
- How to use
- Champions
- Succession planning and sustainment