

**Alliance
Schools Committee Meeting
Third Wednesday of the month
8:30 AM – 10:00 AM**

Alliance Schools Committee Wednesday, May 17, 2023

Topic: Alliance Committee Meeting: Join Zoom Meeting

<https://us02web.zoom.us/j/89796541408?pwd=OGpPRVArcDhTS1MzWml3YUhaZHV3dz09>

Meeting ID: 897 9654 1408 Passcode: 651946

One tap mobile +16699009128,,89796541408#,,,,*651946# US (San Jose)

Committee Members: Co-Chair Claire Kille, Co-Chair Justin Potts, Amy Ruona, Ashley Meilahn, Hunter Moen, Jamie Gunter, Jenn Johnson, Lauren Hval, Lucina Michaud, Mary Massey, Maryanne Mueller, Mila Rodriguez-Adair, Shanda Hochstetler

Committee Members not in Attendance: Angie Foster-Lawson, Angi Meyer, Boston Colton, Caitlin Wentz, Cati Adkins, Fran Pearson, Gabi Colton, Isabella Acevedo, Jill Baker, Jon Rochelle, Shelaswau Crier, Spencer Lewis, Sydney Stringer

Staff: Annette Marcus (AOCMHP), Jenn Fraga (AOCMHP)

Guests: Bethany Kuschel, Caroline Suiter, Connor Lynch, Danielle Stich, Dutch, Gordon Clay, Ishawn Ealy, Kelsey Murray, Nole Kennedy, Sky, Sonam Sherpa, Vivian Koomson

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Time	Agenda Item	What	Notes
8:30	Welcome Members Justin Potts and Claire Kille	Introduction of new members or participants (highlight in chat)	Claire and Justin asked everyone to put their name, introductions, and organization affiliation into the chat.
8:35	Forward Project/Deschutes County Presentation Caroline and Bethany	Presentation followed by Q&A	<p>Slides will be attached in meeting materials.</p> <p>Collaboration for this 3 year project between High Desert ESD, School District, and County Prevention (Healthy Schools Program) , Black Butte, Sisters, Redmond, Crook, Jefferson, Bend LaPine.</p> <p>Key areas of work:</p> <ol style="list-style-type: none"> 1. TA and Expertise in Youth Suicide Prevention 2. Training and Coordination & Facilitation 3. Adi's Act Supports 4. Advisory Board Involvement Every school district develops their own forward project action plan– and receive help facilitating and implementing 5. Curriculum choosing <p>Funding for project received through COHC and provided to COSPA but decided on ESD and county to be managing.</p> <p>This is a 3 year project that started rolling out the '21-'22 school year. During the first year, we focused on getting everyone to the table and understanding the project, continue developing Adi's Act requirements.</p>

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			<p>Key goal this year: how do districts sustain their prevention activities?</p> <p>How the schools have benefited from both the project and activities: Funding for high schools was based on student count; Data informed strategies, including OHT</p> <ol style="list-style-type: none">1. Strategy #1- Suicide Prevention Coordinator (.2 FTE = 1 day/wk) paid with stipend to do that additional work2. Strategy #2- increase access to healthcare = Care Solace3. Strategy #3- Sources of strength, puts public health specialists in school buildings4. Strategy #4 - Gender affirming practices, this is starting next school year '23-'255. Strategy #5 - Case Management Solution; currently unable to track suicide screenings that happen in the district and they are trying to find a way to address this gap. One resource mentioned. <p>More information about Care Solace: or students, staff, and all families. "Care Solace connects people in the U.S. to the support they need, anytime, anywhere." They manage referrals and the intake process. School providers can do a warm handoff to a mental health provider who will reach out to the family.</p> <p>Feedback: slow to rollout at first but has taken off the longer it is in use. As</p>
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			<p>providers have become more comfortable with the program, it is being used more. They have had 330 families attend sessions through this service. They also help families to navigate systems.</p> <p>Q&A: Question from Amy Rouna: do you train teachers on pd days? staff meetings? or do you pay them to stay after contract hours? this has been a pps challenge. A: On staff PD days, but for longer trainings such as ASIST the districts have utilized forward project funds to pay for subs.</p> <p>Question from Annette: Caroline--did you mention what the funding level was for this project? Seems like an amazing model to promote to CCO's and Health Equity Coalitions etc. A: County funds– unsure where they received it</p> <p>Question from Justin: Is there any area you would have prioritized if you had the funds to do so? A: Have more suicide prevention coordinators in the school system. This would allow them to prioritize the work and accomplish more. Example, they need to know how many suicide screenings the district completes.</p> <p>Unanswered questions: -What does progress reporting look like and how it is utilized for a school district? -Are the “action plans” being written into Adi’s Act plans or separate?</p>
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9:00	QPR in Schools Presentation Hunter Moen	Presentation followed by Q&A	<p>Lines for Life holds the QPR Coordination for Oregon.</p> <p>As QPR is the primary training program for schools given cost & time, hearing from Hunter as a form of monitoring (Adi's Act requirement in trainings all staff on suicide warning signs and intervention).</p> <p>Hunter and Elissa with Lines for Life have held focus groups to receive feedback from trainers on being a trainer, needs, and gaps. Focus Group Feedback - a lot of trainers are alone in their district to offer trainings and some have branched out to offer trainings to students. Trainers have said that having a team of trainers would be helpful to co-train and have general support.</p> <p>The SSPW team helps the QPR training program to expand and serves as a great resource to the training program.</p> <p>Challenges: T4T interest vs availability, finding the right time (school staff), teen curriculum needs updating, expectations for staff,</p> <p>Teen curriculum - work in progress with the team for the past year. Started with focus groups with teens and they have encouraged curriculum changes. This is still in progress.</p> <p>A challenge in schools when it comes to trainings is competing interests.</p>
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			<ul style="list-style-type: none"> - Could this committee work on guidance on how to address this for a district to consider? - Roughly 30% staff turnover - training staff and then they leave the district
9:20	Adi's Act Monitoring Discussion	<p>What is the easiest requirement in Adi's Act to monitor? Why?</p> <p>What is the most challenging and why?</p> <p>What information does the schools committee need in order to advise?</p>	<p>Previous meeting, we reviewed current methods of monitoring.</p> <p>Today, we would like to look at what is missing from what the schools committee is monitoring moving forward. We will then take these suggestions and give them to ODE.</p> <p>If schools are found non-compliant, they either have to complete waivers or corrective actions.</p> <p>What are the barriers you're experiencing in monitoring Adi's Act?</p> <ul style="list-style-type: none"> - Amy shared <p>They have 90+ programs / schools</p> <p>Data tracking piece - hoping that those who require data would have a system for us to report our data through. Create a uniform system for schools to report their data. This includes school staff that are trained.</p> <p>Would like to know what data is being used and how the data is being used. This would help with advocacy.</p> <p>Scan that was completed - they can't have a suicide prevention plan for the whole district but their individual policy says that each school has to have a suicide prevention plan. This is difficult to track and where the policy should live isn't clear in Adi's Act language.</p>

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			<p>Child fatality review boards - no consistency and needs coordination across districts. Who should be on fatality review boards? How do they talk about the information?</p> <p>- Ishawn shared Within large districts, the work is siloed and trying to bring all of that together to connect and coordinate can be challenging. Our district allows our principal to be the one who makes the decision on whether or not they utilize postvention response services which is a barrier. There is nothing that says they “have to do something” so even when the community says they want more supports, often that need is not met because it’s not mandatory or required. Language of “recommended” and “required” is very different and really impacts what people follow through on. When district leadership changes, support for suicide prevention resources and services can change. “We rely on people, not on the system in place”</p> <p>Shanda shared - Currently every county is required to have a Postvention plan and a person who reports youth suicide deaths to OHA. Those are the Postvention Response Leads and the list of those people are on our website. I'll link it here.</p>
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	Any legislative updates		Not discussed today due to time.
10:00	Questions, requests, announcements		<p> Screeners Project- Oregon Healing Collective Oregon Healing Collective will host two focus groups to learn from folx (e.g admin, teachers, students, school counselors, parents) about their relevant lived experience around suicide screening and safety planning at schools. Dates of the Focus Group: Friday, June 9th 2023 at 12pm – 1:30pm Friday, June 16th 2023 at 12pm – 1:30pm All participants will receive \$100 for their focus group participation. Please fill out this brief survey to indicate your interest in participating in these focus groups: https://forms.gle/DMN7QY479ZET4MaS6 Your feedback and perspectives are vital to the effectiveness and usefulness of this Universal Screening Toolkit. Thank you for your participation! </p> <p> Shanda announcement: I wanted to share that Oregon was invited by SAMHSA to participate in the Black Youth Suicide Prevention Policy Academy in July and the team we send will be getting TA from SAMHSA to build a plan for Black Youth Suicide Prevention in Oregon. Just a very exciting opportunity and something I wanted you all to be aware of. </p>