Alliance Data & Evaluation Subcommittee Meeting

Thursday, November 7, 2025

Notes:

Be more intentional in specific settings where we evaluate the trainings with respect to specific settings, rather than track those who've been trained and provide guidance to OHA for requirement, This group could help inform on the data repository on where the trainings are occurring and design query reports. Their building a system without talking about how to use the system.

Gordon—our goal is to get to zero suicide. Only dealing with programs and situations that OHA has already decided on and not going anywhere beyond that bailiwick. What is going on in our state right now looking at the dashboard through September is scary. Can we use the current data for real time response.

Ask for regional heatmaps. OHA has prioritized adult gatekeeper training, recent data analysis shows that there is more uptake with skill acquisition directly with youth; we're neglecting direct interventions with our youth rather than adult gatekeeper training and work more directly with youth.

It's an indicator that Oregon could be looking at the data points and look at some of the factors that shows a way in to approaching. Use the resource.

All counties are doing it, Ballmer students recently received ASIST training and manage the crisis lines. Sonny Bai—CSSR-S—first cohort of 20 students and Balmer has its own evaluation activities and students primarily work in PPS. John, Mavis and Sunny submitted a proposal to work with school based health centers for CAMS for teens—an adaptation and it's a one to one intervention and behavioral health clinicians to make the intervention work in their settings

A landscape analysis for the Firearm Suicide Prevention Task Force and how to integrate and the task force is aware of what is going on.....Two proposals one from OHSU. Leverage work with Galli Murray. Be part of the task force activities.

Choose some key indicators.

What data should we be getting on LGBTQ data. Karen and Sandy—the data justice project, demographics on death