

TTC Network Meet & Greet: Suicide Prevention Resource Center

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Marie Cox, MA, CPS
Elly Stout, MS



Funding and Disclaimer



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Roadmap for Today's Meeting

- SPRC broad overview
- SPRC systems-level TA
- Key SPRC clinical workforce products
- SPRC supports for the TTC network
- Questions and conversations



A close-up photograph of two hands, one from a man in a dark suit and one from a woman in a light-colored top, holding two white puzzle pieces together. The background is blurred, showing other people in a professional setting. A blue horizontal bar is overlaid on the bottom half of the image, containing the title text and a decorative spiral graphic on the right side.

SPRC Broad Overview



The national **Suicide Prevention Resource Center (SPRC)** is a one-stop source for information to help develop, deliver, and evaluate evidence-informed suicide prevention programs.

What we offer

- Toolkits
- Online trainings
- Best Practices Registry
- Research summaries
- ...and more!

Who we serve

- Health/ Behavioral Health Systems and Providers
- State/Tribal/Jurisdiction Systems
- Public and Private Partner and Stakeholder Groups

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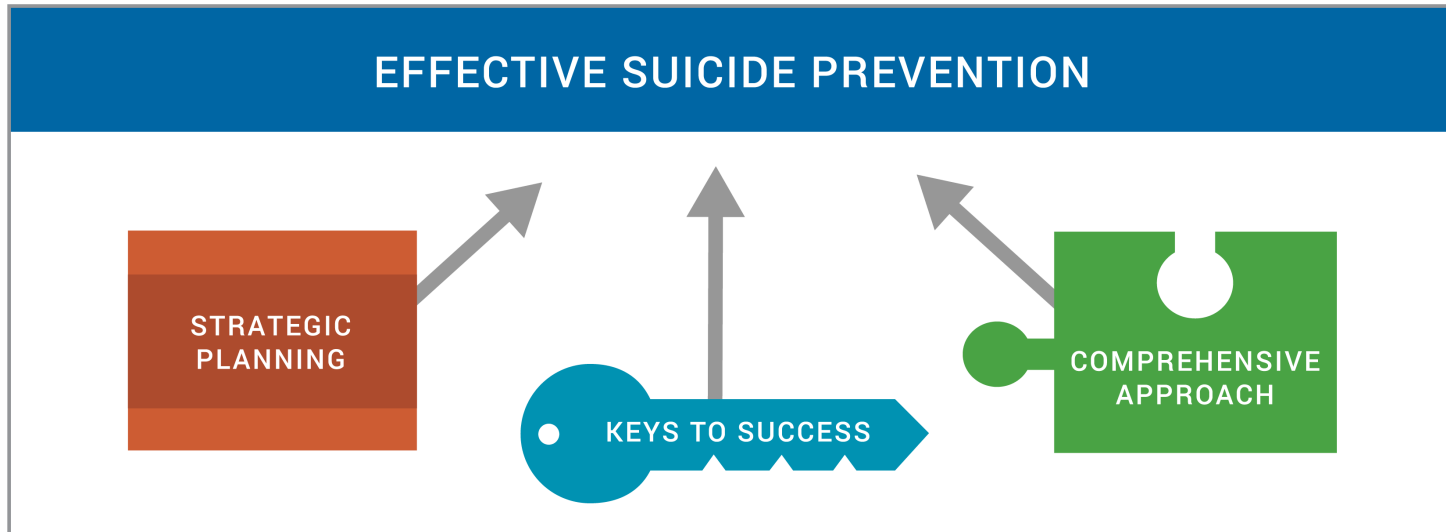


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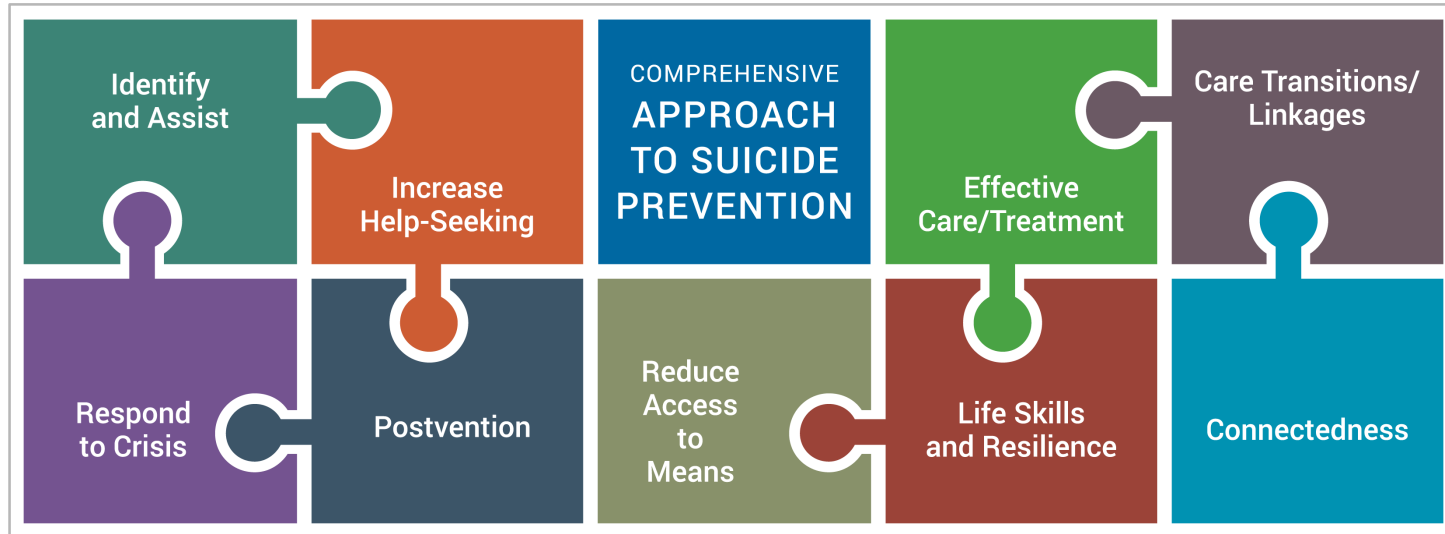


SPRC Systems-Level TA

Effective Prevention



A Comprehensive Approach to Suicide Prevention



State/Jurisdiction Systems TA

- State Suicide Prevention Leads
- Capacity building consultation and outreach
- Needs assessment and online resources

Suicide Prevention Resource Center
About Suicide Effective Prevention Resources & Programs Training News & Highlights Organizations

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States

Suicide prevention efforts can have greater power when they move beyond a single organization to reach a whole community. Find out what's going on in your state and consider ways to join with partners to have a greater impact. Find your state below for information and resources, including:

- Contact information
- Suicide prevention plans
- State and community organizations involved in suicide prevention
- Garrett Lee Smith Suicide Prevention Act and National Strategy for Suicide Prevention (NSSP) grantees
- Current legislation and news updates

Featured Tool

Virtual Learning Lab

Virtual Learning Lab: State Suicide Prevention

This online learning lab can assist state and community leaders to more strategically build partnerships and improve their efforts to prevent suicide and overcome common challenges.

User login

Username *

Password *

[Request new password](#)

[Log in](#)

Alabama
[View Prevention Plan](#)
State Contact: Maegan Ford, Maegan.Ford@mh.alabama.gov

Alaska
[View Prevention Plan](#)
State Contact: Leah Van Kirk, leah.vankirk@alaska.gov

Arizona
[View Prevention Plan](#)
State Contact: Nikki Kontz, nikki@teenlifeline.org

Arkansas
[View Prevention Plan](#)
State Contact: Mandy Thomas, Amanda.Thomas@Arkansas.Gov

California
[View Prevention Plan](#)
State Contact: Denise Galvez, denise.galvez@dhs.ca.gov

Colorado
[View Prevention Plan](#)
State Contact: Sarah Brummett, sarah.brummett@state.co.us

Connecticut
[View Prevention Plan](#)
State Contact: Andrea Duarte, Andrea.Duarte@ct.gov

Delaware
[View Prevention Plan](#)
State Contact: Emily Coggin Vera, ecoggin@mhaide.org

District of Columbia
[View Prevention Plan](#)
State Contact: Lanada Williams, lanada.williams@dc.gov

Florida
[View Prevention Plan](#)
State Contact: Anna Gai, Anna.gai@myfamilies.com

Georgia
[View Prevention Plan](#)
State Contact: Shevon Jones, shevon.jones@dbhdd.ga.gov

Guam
[View Prevention Plan](#)
State Contact: Carissa Pangelinan, carissa.pangelinan@gbhwc.guam.gov

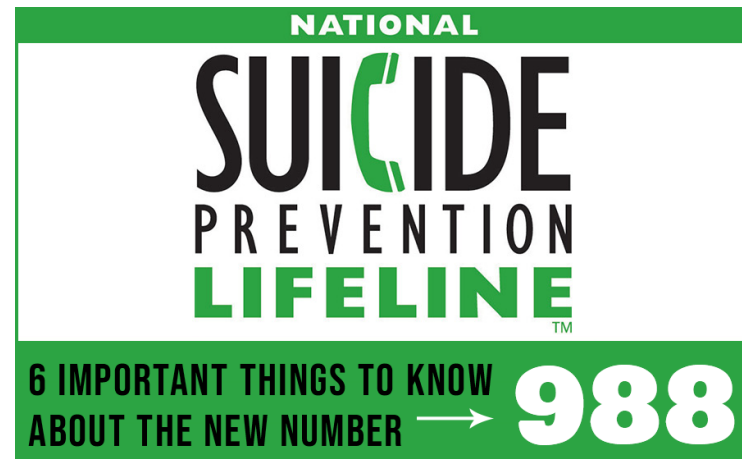


Tribal Systems TA

- Provide technical assistance and subject matter expertise in suicide prevention to tribes and organizations serving tribal populations
- Provide training and technical assistance on data collection and evaluation related to suicide prevention
- Conduct Tribal Needs Assessment related to suicide prevention infrastructure [Fall 2021]
- Foster collaboration between IHS, Tribes, and organizations serving tribal populations to respond to suicide in tribal communities

Current 'Hot Topics' for Systems

- 988: three-digit crisis hotline (July 2022)
 - State infrastructure implications:
 - Policy/funding conversations
 - Crisis line capacity
 - Crisis service transformation
 - Mobile crisis teams
 - Crisis receiving and stabilization
- Surveillance and data infrastructure
- COVID-19 Impacts



Discussion

What “hot topics” in suicide prevention system infrastructure are the TTCs seeing?

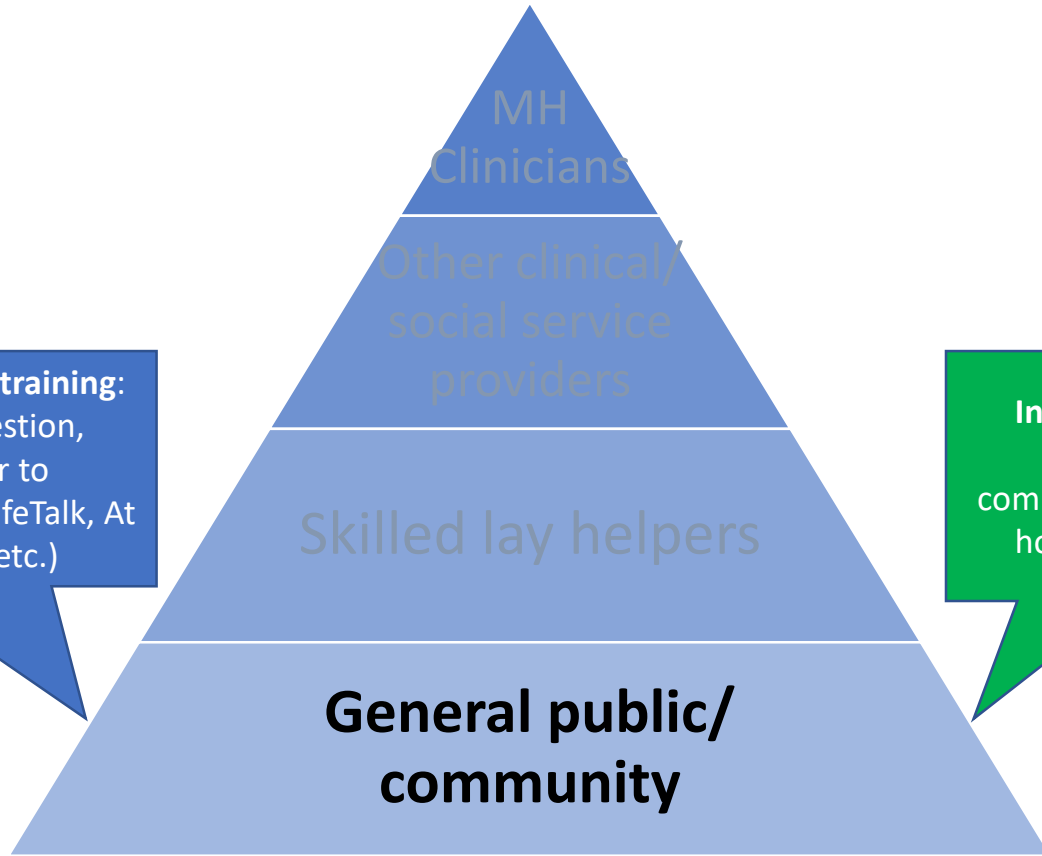




SPRC Clinical and Health Systems Workforce Products

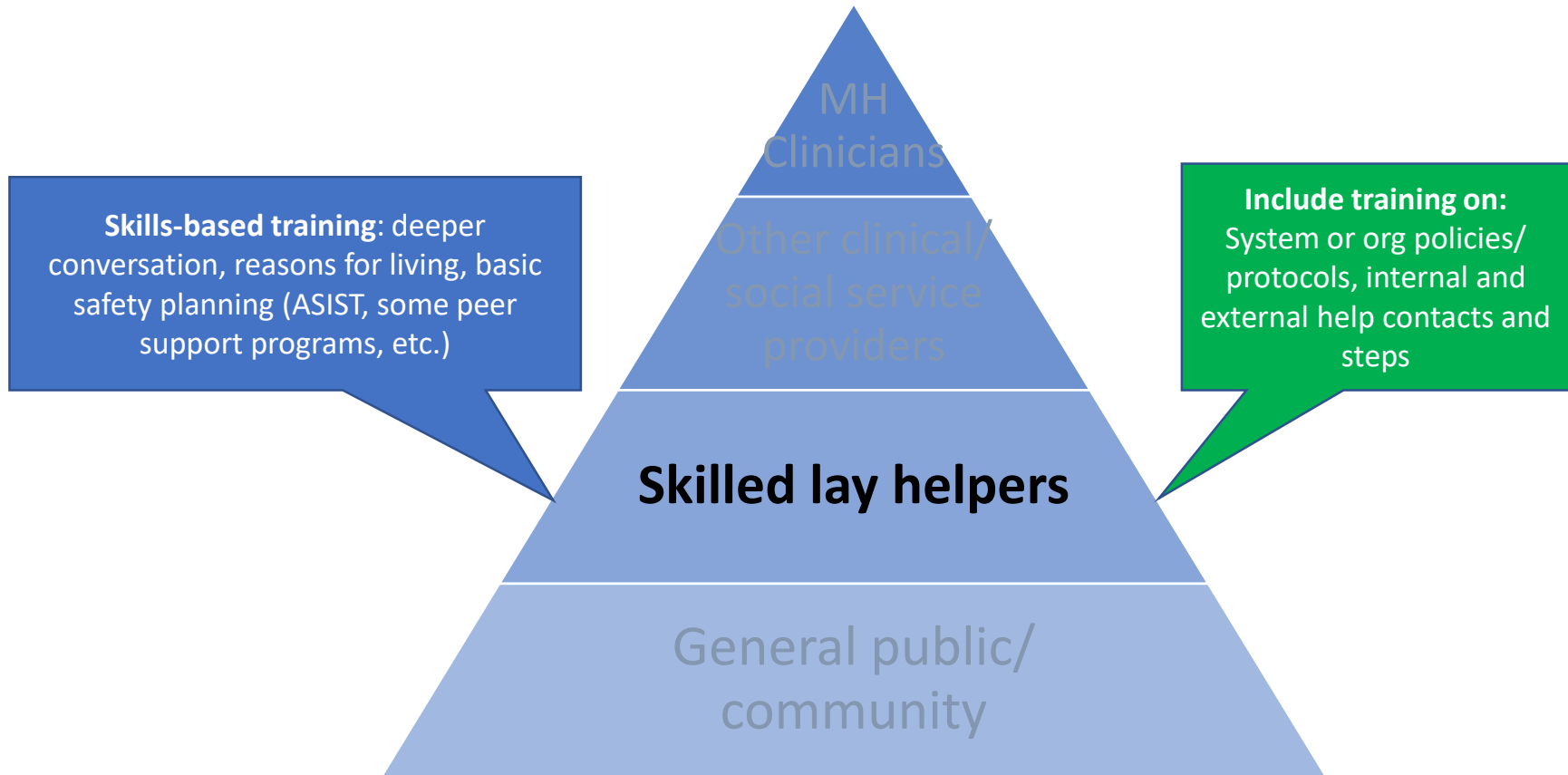
Suicide Prevention Training Audiences

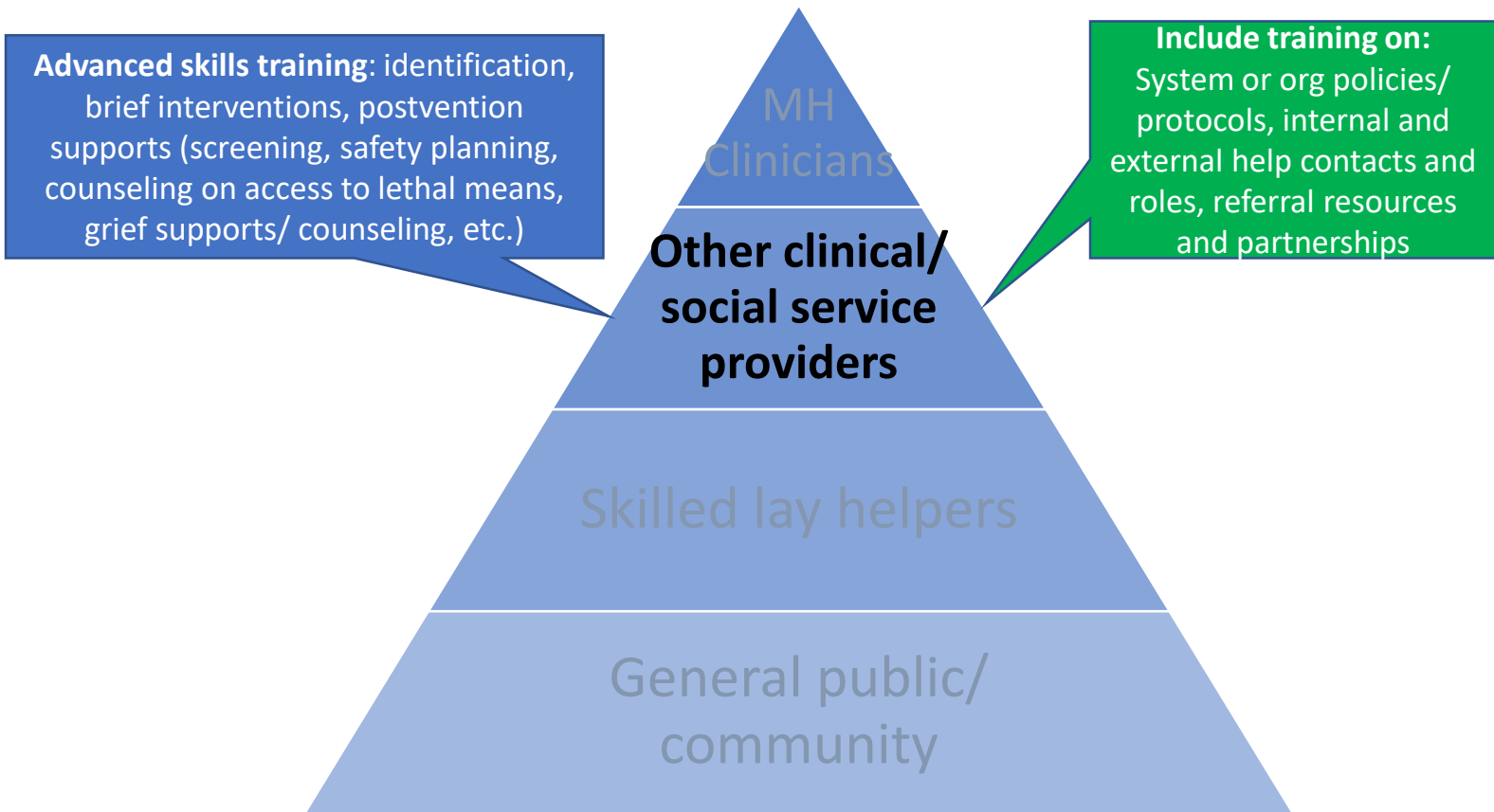


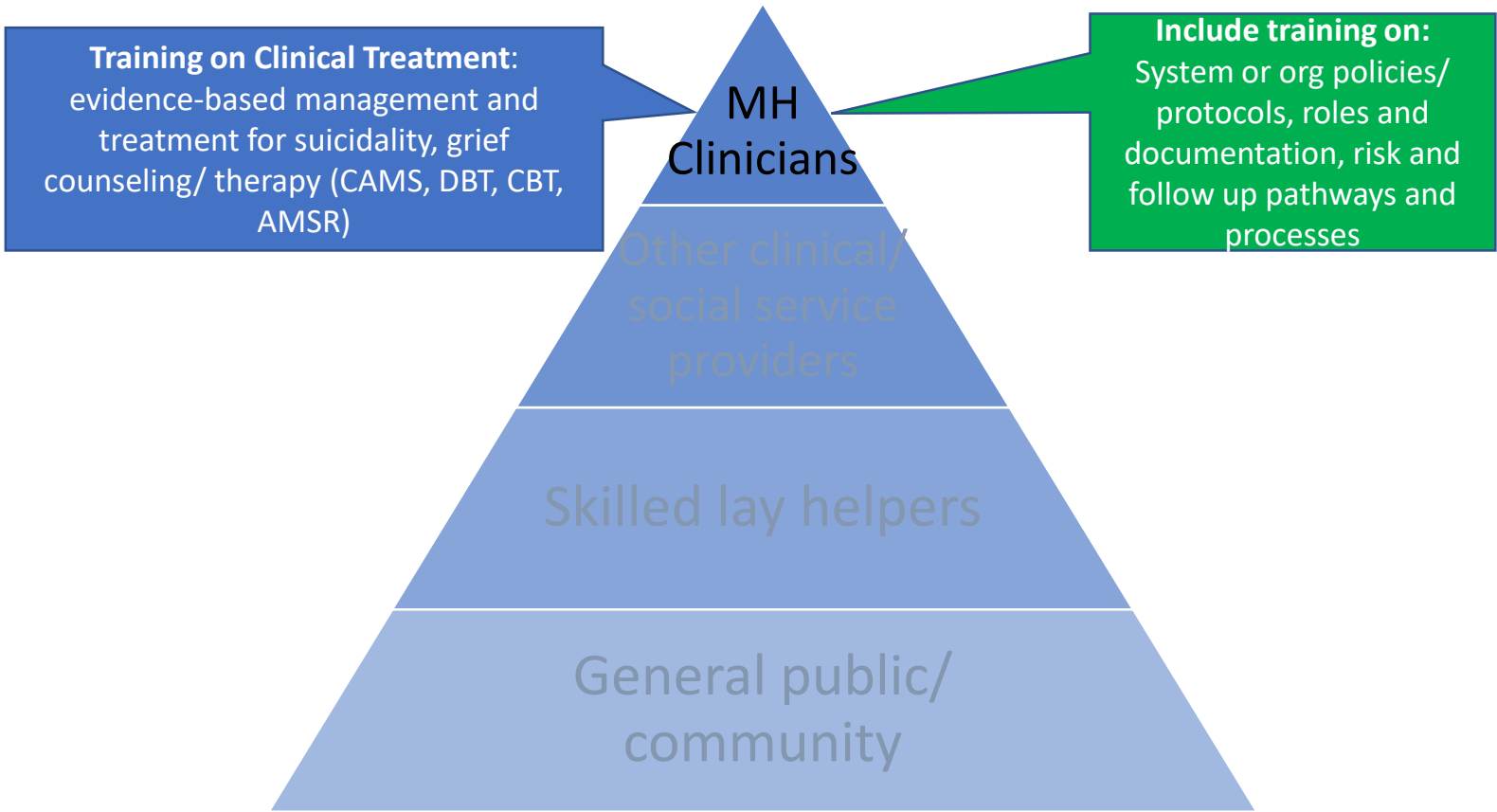


Broad awareness/gatekeeper training:
recognize signs, ask the question,
empathetic support, refer to
appropriate resources (QPR, SafeTalk, At
Risk, MHFA, LOSS Teams, etc.)

Include training on:
help resources,
community supports and
how to access them







Other Key Training Considerations



Tailor to:

- Population
- Setting
- Cultural context
- Related factors (trauma, substance use disorder, etc.)

ALL should include training **on available help resources and organizational/systems policies/protocols and roles** relevant to support for those at risk for suicide

Care Transitions

**Best Practices in Care Transitions
for Individuals with Suicide Risk:
INPATIENT CARE TO OUTPATIENT CARE**





Suicide Prevention Resource Center

[About Suicide](#) [Effective Prevention](#) [Resources & Programs](#) [Training](#) [News & Highlights](#) [Organizations](#)



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Also in This Section

- [Virtual Learning Labs](#)
- [Care Transitions](#)
- [Collaboration](#)
- [Crisis Protocols](#)
- [Mental Health Resources](#)
- [Prevention Planning](#)
- [Statewide Partnerships](#)

Care Transitions

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Start Planning for Discharge and Transitions Early On
← Back to steps

Most patients who leave an inpatient hospital will have a referral to an outpatient clinician as well as medication to continue the patient's recovery. However, this is often not nearly enough support to avert another attempt. Although the initial crisis is over and the patient may seem better, the road to recovery is often long and rocky.

Establishing a variety of internal and external supports to help patients recover is an essential part of planning the transition after an inpatient stay.

Select any of these common questions about this topic to learn more.

- ? What does a transition or discharge plan include?
- ? Why is it best to start planning early on?
- ? What about the time pressure on staff?



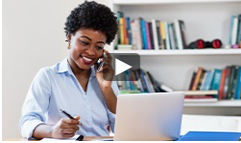
SPRC | VIRTUAL LEARNING LAB | CARE TRANSITIONS
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[Download a text version of this module: Care Transitions](#)

TTC Network Meet & Greet

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Telehealth



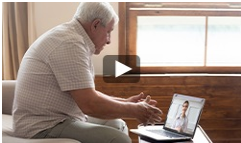
Initiating and Maintaining Remote Contact

Hear recommendations for initiating and maintaining remote contact with clients who may be at risk for suicide, with an emphasis on gathering specific information to access the client and their supports in the event of an emergency, preparing for technology interruptions, and best practices to include at every visit.



Assessing Suicide Risk

Learn tips for assessing the suicide risk of clients remotely.



Developing a Safety Plan Remotely

Listen to guidance on developing a safety plan remotely, highlighting how the process is the same—and different—from safety planning in person.



THE NATION'S PUBLIC-PRIVATE
PARTNERSHIP FOR SUICIDE PREVENTION

COVID GUIDANCE: Screening for Suicide Risk during Telehealth Visits

An Addendum to the 2018 Recommended Standard Care for People with Suicide Risk: Making Health Care Suicide Safe

Background

The COVID-19 pandemic has prompted a rapid shift from traditional face-to-face health care encounters to various forms of virtual care, including telephone encounters, video encounters, asynchronous or “chat” meetings, and mHealth or eHealth tools. In 2018, the National Action Alliance for Suicide Prevention (Action Alliance) published *Recommended Standard Care for People with Suicide Risk: Making Health Care Suicide Safe*. The report suggested suicide screening, with indicated care as needed, for all individuals receiving care for behavioral health conditions as a core responsibility for health care organizations. In 2019, both CARF and The Joint Commission included these recommendations in their accreditation requirements. Increasingly, more health care systems have worked to improve suicide risk detection and consequent workflows to reduce patients’ suicide risk. However, with the pandemic, screening for or assessment of suicide risk must now occur virtually in addition to face-to-face interactions. Some of this shift to virtual or online care will likely persist after the pandemic subsides, based on expanded access to care and patient preferences.

As health care organizations work to adapt their practices to telehealth, continuing to screen for suicide risk in the same manner as face-to-face visits has raised some concerns. For example, some health system leaders have expressed concern that screening for or assessment of suicide risk outside of a face-to-face encounter might create liability risk. The perceived concern is greatest for asynchronous screening, such as a questionnaire including questions related to suicidal ideation sent in advance of a telephone or video visit.

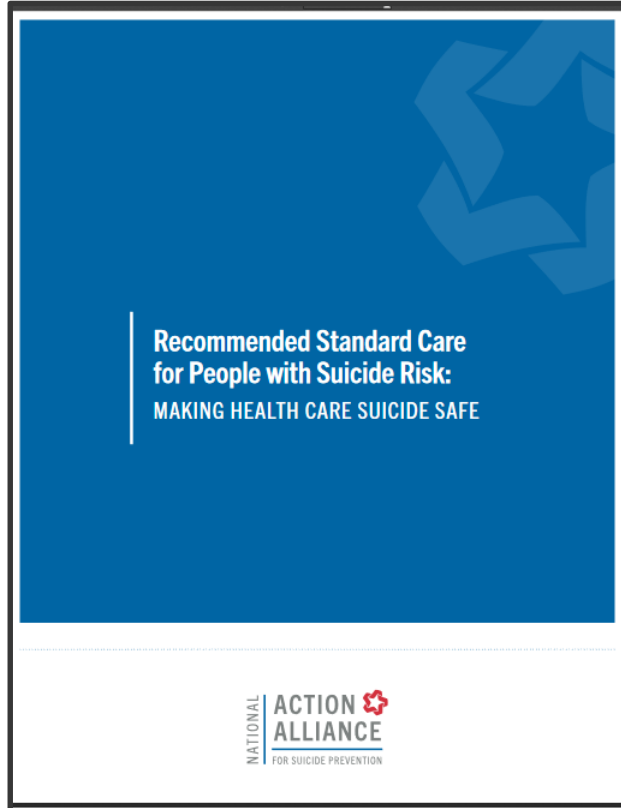
Principles

According to [SAMHSA survey data](#),¹ 12 million adult Americans had serious suicidal ideation in 2019.⁷ Recent [CDC data](#) indicated that 40% of Americans reported mental health or behavioral health problems, and 15% seriously considered suicide in the past 30 days.⁸ Given the mental health impacts of the COVID-19 pandemic, identifying people at increased risk of self-harm or suicide is a higher priority than ever. More people are at risk, and those who have been under care may find their care interrupted or altered.

1. Substance Abuse and Mental Health Services Administration. (2020). Key substance use and mental health indicators in the United States: Results from the 2019 National Survey on Drug Use and Health (NHIS Publication No. PEPS20-07-01-001, NSDUH Series H-563). Rockville, MD: Center for Behavioral Health Statistics and Quality, Substance Abuse and Mental Health Services Administration. Retrieved from <https://www.samhsa.gov/data/>

2. Crossler, M. E., et al. (2020). Mental health, substance use, and suicidal ideation during COVID-19 pandemic – United States, June 24–30, 2020. *Morbidity and Mortality Weekly Report*, 69, 1049–1057. DOI: <https://dx.doi.org/10.15585/mmwr.mm6903a1>

Every Health System Has a Role



Primary Care	Outpatient Beh. Health	Emergency Department	Beh. Health Inpatient Care
Identify suicide risk in MI/SUD patients	Identify/assess suicide risk at each visit	Identify patients who have harmed selves or have MI/SUD conditions	Identify/assess suicide risk at admission and daily
Safety planning and lethal means counseling/safety	Safety planning and lethal means counseling/safety	Safety planning and lethal means counseling/safety	Safety planning and lethal means counseling for post-discharge; involve family
Refer to specialized care; make MH appt	Provide treatment and support for those at risk	Refer to specialized care; make MH appt	Make MH apt
Caring contact within 48 hours	Caring contacts for care transitions or missed appts.	Caring contact within 48 hours Second caring contact in 7 days	Caring contact within 48 hours Second caring contact in 7 days

Simulation Best Practices

- Guidelines for using simulation for professional development in suicide prevention
- Suicide prevention simulation materials and toolkits
- Technical assistance in developing simulation related suicide prevention training

Discussion

What resource gaps do you see in each level of the suicide prevention training audiences pyramid? Where is the most need to adapt or develop new resources?





SPRC support for TTC work

SPRC can help!

- Provide resources to support TTC work plans
- Participate in Regional/ Center Advisory Board Meetings
- Feature TTC resources and promote TTC events in our communications
- Contribute to SAMHSA info requests
- Collaborate on specific cross regional/ national projects
- Other Ideas?

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Sign up for SPRC's *Weekly Spark* newsletter for the latest news, research, and announcements.



Discover how to develop and implement prevention efforts in any setting with SPRC's Effective Suicide Prevention Model.



Explore a library of suicide prevention programs with evidence of effectiveness.



Learn at your own pace with online courses, learning labs, and brief videos.



Access a wealth of resources, including toolkits, fact sheets, success stories, and more!



Find information on suicide prevention efforts in your state.



Thank you!

Marie Cox
mariecox@ou.edu

Elly Stout
estout@edc.org

Suicide Prevention Resource Center

940 N.E. 13th Street
Nicholson Tower, 4N, 4900
Oklahoma City, OK 73104

sprc.org

