## **Action Alliance for Suicide Prevention (AASP)**

Date: January 10, 2018, 10:00-12:00pm

In-person with webinar option: Department of Health Tumwater office, TC1, Room 164



Attendees: John Wiesman, Alfie Alvarado-Ramos, Colbie Caughlan, Ian Corbridge, Chestina Dominguez, Edward Esparza, Julie Garver, Camille Goldy, Therese Hansen, Michael Itti, Pama Joyner, Matthew Layton, Soyeon Lippman, Terry Mail, Donn Marshall, Aurelie McKinstry, Daniel Overton, Karie Rainer, Jeff Rochon, Peter Schmidt, Diane Sekaquaptewa, Jennifer Stuber, Roy Walker, David Windom, Denece Thomas, Neetha Mony

## **Meeting Notes**

| Topic   | Lead  | Notes  | Discussion  |
|---|---|--|---|
| Welcome and agenda review                               | Sec. John Wiesman, DOH  |  |   |
| Introductions   | ALL   |  |   |
| Tribal epidemiology                                     | Soyeon Lippman, DOH   | Soyeon is a tribal epidemiologist at DOH. She provided an overview on WA tribal epidemiology.  • Tribal leaders have mentioned that state data needs to be more focused on resiliency and that American Indian Alaska Native (AIAN) data is often inaccurate. Insufficient, or missing.  • The Urban Indian Health Institute and Northwest Tribal Epidemiology Center do record linkages every 1-2 years for racial misclassification.  Errors usually occur below 10% in death records but higher for hospitalizations.  • Council of State and Territorial Epidemiologists tribal epidemiology suicide workgroup began last year. Centers across the US are participating and are working on a data resource guide that AIAN communities can use for data sovereignty. | <ul> <li>Comment: Look at AIAN veteran data and AIAN student data.</li> <li>Comment: Through NW tribal epi center, the data misclassification project works on birth records, death records, and the cancer registry.</li> <li>Comment: Good conversation to have with coroners/MEs working with NVDRS.</li> </ul>  |
| Tribal Health – Reaching out InVolves Everyone (THRIVE) | Colbie Caughlan, Northwest<br>Portland Area Indian Health<br>Board (NPAIHB) | <ul> <li>NPAIHB wants to help with policies across the tribes and coordinate with other agencies.</li> <li>Programs include         <ul> <li>Healing of the Canoe curriculum</li> <li>Healthy Native Youth curricula</li> <li>Campaigns</li> <li>Two Spirit Campaign (LGBTQ)</li> <li>You Protected Us, Let US Walk with You (veterans)</li> <li>We Are Connected (across generations)</li> </ul> </li> </ul>  | <ul> <li>Comment: WSU has a med school pipeline project for minority students.</li> <li>Question: What trainings do you use?         <ul> <li>Answer: Mainly ASIST and QPR. If unavailable, link with other partners.</li> </ul> </li> <li>Question: Do folks on the ground have protocols and systems in place for suicide, especially when to contact Designated Mental Health Professionals (DMHPs) at treatment facilities? If</li> </ul> |

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|--|--------------------|--|--|
|  |                    | <ul> <li>2017 Accomplishments</li> <li>THRIVE focused on outreach and communication with tribes.</li> <li>Zero Suicide in 3 tribal communities, including Puyallup Tribal Health Authority</li> <li>Veterans campaign reached over 55,000 social media views in in November</li> <li>THRIVE conference for 13-19 year olds</li> <li>4 workshop tracks to build resiliency and protective factors</li> <li>At Oregon Science University, youth met a panel of health professionals and talked about ways to channel positivity when facing challenges. They also had the opportunity to use simulations for surgeries and delivering babies.</li> <li>Save the Date: Next conference is June 25-29</li> <li>Created a webinar with text roleplays to help youth respond to concerning social media posts.</li> <li>Text "Native" to 97779 to get hopeful messages and information.</li> </ul> | they also have a chemical dependency issue, where can they go?  Answer: The Native American Rehabilitation Association is one resource. Many agencies don't have protocols.  Comment: If someone mentions thoughts of suicide and a first responder takes them to a hospital, the patient must admit ideation to the hospital too or else they can't get help.  Suggestions  Bree Collaborative will have a suicide workgroup this year and AIAN representation would be great.  Culturally-adapted QPR trainings have been helpful.  Possibility of linking THRIVE with college campus conferences.  WDVA would like to be work with ID and OR on THRIVE's veteran materials.  Question: Is the PHQ-9 mainly used? Are schools informed of higher suicide rates? Any information on safe storage?  Answer: PHQ-9 is recommended. Tribal schools work with the behavioral health department to offer resiliency screening and ACEs education. Don't know what's done at other schools. Firearm safety is addressed differently by each tribe. Some have partnered with Seattle Children's for a safe storage event. Hangings are more common in some tribes.  Question: Is telemedicine offered?  Answer: Will check and report back.  Comment: Discussions are happening about payment concerns and where the provider is licensed. |
| Family and Military Suicide Prevention and Care Workshop | Peter Schmidt, DVA | <ul> <li>Great partners came together to discuss suicide prevention for active service members, veterans, and their families.</li> <li>Attendees brainstormed existing resources, gaps, and priorities.</li> <li>Family suicides are high and priority for DVA.</li> </ul>   | See attached notes   |

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| DOH updates              | Neetha Mony, DOH | <ul> <li>Finishing up the report to the Governor's Office on the 2017 activities related to Executive Order 16-02. Aiming to submit the report in February.</li> <li>Neetha will be on a panel at the American Association of Suicidology conference in April. The topic is "Public-private partnerships" and Neetha will share about the Action Alliance.</li> <li>The National Suicide Prevention Lifeline is working on technical issues and hoping to have the proposed WA virtual call center up soon.</li> <li>The deadline for the youth suicide prevention minigrants was Jan. 8 and we'll hear about some of the awardees at the next meeting.</li> <li>The Enterprise Suicide Prevention Workgroup will work on a charter next week and present to AASP at the next meeting.</li> </ul> | On Jan. 31, Crisis Clinic and Volunteers of America of Western WA started taking calls from counties without a National Suicide Prevention Lifeline-affiliated crisis center.   |
| Announcements            | ALL              |   | OSPI put their decision package into a bill (SB6141). Money for a 1 year partnership with the Crisis Text Line and an online teachers' module are included in the governor's budget.  |
| Summary and Path Forward | Sec. Wiesman     | The next meeting will be a webinar meeting with an in-person option 1:00-3:00pm on April 3 at the DOH Kent office.  | <ul> <li>Summary         <ul> <li>Will cover more in-depth data at the next meeting.</li> </ul> </li> <li>Quality Improvement – what worked well         <ul> <li>Start on time, get materials out sooner</li> <li>No phone issues</li> </ul> </li> </ul> |