

Meeting Highlights (notes in blue below)

Suicide Prevention Coalition -Tuesday, March 16, 2021 - 4:30 to 6:00 pm

<https://clackamascounty.zoom.us/j/84854577613?pwd=Q28xYoRuL2lwNThkWkdpaogBVnU4UT09>

Meeting ID: 848 5457 7613 Passcode: 352620 One tap mobile: +16699006833

#	Agenda Item	Facilitator(s)	Time
1.	<p>Welcome, Agenda Overview, Intros</p> <p>Galli welcomed participants to the meeting and gave an overview of the agenda.</p>	Galli	4:30 pm
2.	<p>Blueprint: Suicide Prevention Strategies</p> <p>a. Background -- Susan Berns-Norman & Molly Mew, Public Health & Galli Murray (15 minutes)</p> <p>Susan shared background on the Blueprint for a Healthy Clackamas County and asked the Coalition to brainstorm strategy implementation to increase suicide prevention.</p> <p>Molly and Galli gave a high-level discussion around data and noted that firearms are used in the majority of cases in Clackamas; they also shared data showing the roles of people who had taken prevention classes – this data relates to the strategy discussions</p> <p>b. Small group discussions on strategy questions (20 minutes)</p> <p>Here are the topics that participants discussed in small groups:</p> <ol style="list-style-type: none"> 1. Reduce fire-arm related deaths 2. Follow-up after emergency department visit for mental health 3. Increase participation in Get Trained To Help as well as other resources like the Crisis Line, 211, etc. <p>They were asked to brainstorm as follows:</p> <ul style="list-style-type: none"> • What could individuals do? • What could systems and system partners do? <p>c. Report Backs (15 minutes)</p> <p>Each group shared their ideas and submitted written notes – see notes at end of this document.</p> <p>Many thanks to small group facilitators and scribes: Molly Mew, Monica Parmley-Frutiger, Michael Ralls, Carlos Benson Martinez, and Brian McCrady</p>	various	4:40 pm
3.	<p>Presentation: Intersectionality between Domestic Violence and Suicide (15 minutes)</p> <p>Deb and Cat presented the results of a short term emergency suicide prevention grant. The grant has been used to start and enhance cross sector collaboration to better support survivors of domestic violence with mental health and suicide prevention supports.</p> <p>Features of implementation include cross training between agencies, suicide assessments followed by appropriate clinical treatments and supports, and enhanced services to survivors and their dependents, including a safe place to stay if individuals are unable to remain safely in</p>	Debra Darmata, Oregon Health Authority Adult Suicide Prevention Coordinator; Catherine Koch, Clackamas Women's Services	5:30 pm

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	the home setting. See power point for more details. Thank you Deb and Cat!	Program Director	
5.	<p>Thank you and next meeting date and time</p> <p style="text-align: center;">Suicide Prevention Coalition Tuesday, April 13, 2021 - 4:30 to 5:30 pm</p> <p style="text-align: center;">https://clackamascounty.zoom.us/j/84854577613?pwd=Q28xYoRuL2lwNThkWkdpaogBVnU4UT09</p> <p style="text-align: center;">Meeting ID: 848 5457 7613 Passcode: 352620 One tap mobile: +16699006833</p>	Galli	5:45 pm

Suicide Prevention Coalition of Clackamas County

March 16, 2021

Community Health Improvement Plan/Blueprint Discussion

Emergency Room Follow-Up

What could individuals do?

- Additional training around coming from a place of empathy and non-judgement

What could systems and system partners do?

- Becky Wilkinson Providence-Peer support teams follow up telephonically, some in person services
 - Pilot programs for peer support in inpatient units
 - ED outreach team – follows up with folks, helps connect to services
- E.R. doctors should be educated about getting family and natural/chosen supports involved (when appropriate- when families aren't causing or exacerbating the problem)
 - Individuals need help navigating forms, appointments, medications
- Having the different systems connecting with each other. I think when multiple systems are working with the same person there is opportunity to support each other and the person we are serving. For example: Someone comes out of the emergency room that is an older individuals that is receive long term services and they have an ongoing Case Manager, that Case Manager can support after the 30 day with check in's, providing resource or can do a warm hand off as they have already been working with that professional.
- Case Managers could use training on how best to support or have those resources to connect.
- Working on how to build a relationship with primary doctors and mental health providers when they are working with the same person. I feel there is a divide between

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Emergency Room Follow Up Small Group Notes (continued)

the primary and the mental health. Like there is a doctor for the physical and a doctor for the mental and there is no connection. When you are an older adult sometimes those needs crossover or are happening at the same time, get fused together.

- As a former K-12 school social worker, I know there was confusion about how to best support youth coming out of the ED or inpatient care and back into school. Some of the youth would come back with established safety plans and clear communication about their mental health needs while other youth would return to school with no notification of their suicidal ideation or attempts. I wonder if something could be added here about offering more education to school districts about this transition and the time following discharge.

Increase participation in Get Trained to Help as well as other resources like the Crisis Line, 211, etc.

What could individuals do?

- Provide incentives to come to groups to complete assessments and joining groups. (NWFS). T-shirts, gift cards. Share with individuals groups.
- Use social media to get resources, trainings out.
- Creating sharable information that will fit on Instagram.

What could systems and system partners do?

- Name of "*Senior Loneliness Line*" could be a deterrent. People are using it.
- Faith communities – reach out to them.
- Follow up with E.R. visits after suicide attempts.
- Social workers follow up with discharged people from E.R.
- Pull systems together. Get message out to parents about "Get Trained to Help."
- Have agencies have resources to go out in the summer when youth aren't in school. North Clackamas does this.
- Sandy Matthewson - Community Collaborative with school counselors. Messaging through this group is a great way to get the messages out to the school staff and families of that school.

Reduce Fire Arm Deaths

1. What could individuals do?

- Secure firearms in a safe and/or with trigger locks
- Keep ammunition separate from firearms
- Talk to other family and friends about gun safety

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Reduce Fire Arm Deaths Small Group Notes (continued)

- Temporarily relinquish firearms if a household member was experiencing thoughts of suicide or an severe emotional crisis
- Share suicide prevention resources with friends and family
- Get trained in suicide prevention and access to lethal means
- Encourage others to get trained.

2. What could systems and system partners do?

- Communicate clearly about how to remove access to firearms when people are actively thinking about suicide
 - What happens when you surrender a gun to law enforcement, for example? Currently, there are different answers depending on who you speak with.
 - What are other options if you want to get a gun out of the home?
- Increase education opportunities about gun safety and suicide prevention
 - Countywide firearm safety information through neighborhood associations, city and county newsletters, etc.
 - Offer education about keeping ammunition somewhere else away from the gun
 - Offer training for those who purchase firearms
 - Work in partnership with shooting ranges
 - Connect with local NRA Chapter
 - Education materials that accompany hunting tags (contact hunting and wildlife division)
- Increase access to gun locks
 - Outreach at sporting goods stores that sell guns and offer locks, education about gun safety; outreach at gun shows; education about gun safety and suicide prevention
 - Hand out gun locks and suicide prevention resources at county events, farmers' markets, etc.
 - Explore advocacy around House Bill 2510: Requires owner to secure with trigger cable or lock and a safe; fines associated with youth accessing guns (<https://olis.oregonlegislature.gov/liz/2021R1/Measures/Overview/HB2510>)
- Build relationships with folx that sell, train and use firearms for sport
 - Build multi-interest stakeholder group
 - Create network
 - Encourage fire arm users to become suicide prevention trainers
 - Employ group to share resources and messaging