

Illinois Department of Public Health (IDPH)
 Illinois Suicide Prevention Alliance (ISPA)
 Summary of Minutes May 17, 2013
 10:00 a.m. – 2:30:p.m.
Approved August 19, 2013

Choate Mental Health Center
 1000 N. Main St., Administration Building, Room 117, Conference Room #1, Anna, IL

*with video conferencing available at
 Illinois Department of Public Health, One Natural Resources Way (Lake Level) in Springfield and
 Chicago Read Mental Health Center, 4200 N. Oak Park Avenue, Video Conference Room, Library in Chicago.*

		Present	Excused	Un- excused
<u>Appointed Members in Attendance</u>				
Carol Gall	Mental Health America of Illinois	Chicago		
Chuck Johnson	Illinois Hospital Association	Springfield		
Colleen Daley	Illinois Council Against Handgun Violence		X	
Eric Davidson	Illinois Higher Education Center	Anna		
Jeff Dill	Representing fire service	Phone		
Jessica Gerdes	Illinois State Board of Education	Chicago		
Judy Ashby	LifeSavers Training Corporation	Anna		
Lora Thomas	NAMI Illinois – National Alliance on Mental Illness	Phone		
Mariann Blacconiere	Representing service members, veterans and their families	Anna		
Nicole Pekovitch	Representing mental health consumers	Anna		
Paul Fleming	Survivor	Phone		
Peter Mulhall	Center for Prevention Research and Development	Phone		
Samuel A. Giordano Jr.	Representing emergency medical services		X	
Steve Moore	American Foundation for Suicide Prevention	Chicago		
<u>Ex-Officio Members in Attendance</u>				
Jennifer Martin	Illinois Department of Public Health	Anna		
Jessica O’Leary	Office of the Attorney General		X	
Mary Mayes	Illinois Department on Aging	Springfield		
Mary Ratliff	Illinois Violence Prevention Authority	Anna		
Master Sergeant Ed Petrik	Illinois State Police	Chicago		
Patricia Reedy	Illinois Department of Human Services	Chicago		
<u>Stakeholders in Attendance</u>				
Jenifer Cartland	Lurie Children Hospital	Anna		
Katie Mason	Mental Health America of Illinois	Phone		
Linda Thompson	Zack’s Hope	Anna		
Lizz Cooley	Lurie Children Hospital	Anna		
Rhonda Keck	Illinois Department of Human Services	Anna		
Roberta Allan	Illinois Department of Human Services	Phone		
Shantel High	Illinois Department of Human Services	Springfield		
Sharee Dawn Roberts	Zack’s Hope	Anna		
Tracey Williams	Illinois Department of Human Services	Anna		
Trina Diedrich	Illinois Department of Human Services	Springfield		

Meeting was called to order at 10:10 a.m.

Introductions/Welcome

Introductions and a welcome were made by Ms. Gall. Quorum is met.
A review of conference call etiquette was provided.

Review & Approval of February 27, 2012 Meeting Minutes

Copies of the minutes were distributed to the members prior to the meeting and copies were available during the meeting. Dr. Davidson motioned for the approval of the minutes, with a second from Ms. Blacconiere. All in favor, motion carried.

Update from Illinois Department of Public Health *(Reporting: Jennifer Martin)*

Ms. Martin shared information about the regional event to roll out the national suicide prevention strategic plan on June 27, 2013 in Chicago. The event is entitled "Everyone Plays a Role in Suicide Prevention: Turning Strategy into Action." Members were encouraged to host an echo site in their community if they were unable to attend the event in-person.

Youth suicide prevention project – Ms. Martin provided the following updates:

- The Substance Abuse and Mental Health Administration released a funding opportunity for campus suicide prevention programs. Members were asked to share information about this opportunity with the campuses they work with and to contact Ms. Martin to learn how the youth suicide prevention project could enhance their proposal.
- Several members of the Illinois team will participate in the grantee meeting during the week of June 10 in Washington DC.
- Ms. Martin participated in a round table discussion with chronic disease program staff to identify avenues they could help promote the youth suicide prevention project.
- Graduate intern will start mid-August to assist with this project.
- Ms. Martin has attended several conferences and meetings to help promote the project. Members were asked to forward information about other opportunities.
- Other updates on the project will be shared during the ad hoc committee reports later in the meeting.

Ms. Gall explained the co-chairs would like to proposal the alliance serve as the advisory board to the project. Currently, there is a management team; however, an advisory team was requested. Instead of creating a separate advisory team, it is proposed to integrate this task within the alliance meetings. When Ms. Martin and the ad hoc groups provide updates, the alliance will be asked to have discussion and provide guidance.

Discussion of ISPA leadership positions and member vacancies *(Reporting: Jennifer Martin)*

Vacancies – Ms. Martin reported there is not an update on the letters sent to the state agencies, requesting they join the alliance.

During the last meeting, the alliance developed guidance to fill the vacancy for one of two positions representing "survivors" to serve on the alliance is vacant. Several organizations that work with survivors were asked to nominate people; in addition a couple of alliance members nominated people. After review, the co-chairs announced they will request Stan Lewy represent the spot.

Review of Youth Risk Behavior Surveillance data: Jessica Gerdes *(Reporting: Jessica Gerdes/Jenifer Cartland)*

During the last meeting, the alliance requested that a representative from the Child Health Data Lab be invited to co-present with Ms. Gerdes on the Youth Risk Behavior Surveillance (YRBSS) data. Ms. Gerdes provide an overview of what the YRBS is, how it is collected in addition an overview of the national and state data. There

are over 100 schools in Chicago and Illinois which participate in the survey ~ 62 percent is needed for weighted data. Based on the 2011 findings, there was a statistical difference in Chicago students who answered they attempted suicide one or more times.

Dr. Cartland from the Child Health Data Lab (CHDL) also provided a presentation on the YRBSS data and the Illinois Violent Death Reporting System (IVDRS) as it relates to the same age groups. Their website has several data briefs based on both datasets. The Violent Death Reporting System in Illinois based on the footprint of the national system. Illinois' system is funded by state dollars to implement the system in several counties.

Dr. Cartland reported the trend line for 15-24 year olds has a slight decline; however, if you look only at the 15-19 trend line you'll notice it going slightly up. For the 20-24 year old trend line is a slight decrease. She provided data charts on suicide methods, history of mental health treatment, data on precipitating circumstance, was there a suicide note, if the victim had a history of prior attempt and if the victim disclosed the intent to attempt suicide. The IVDRS also has data on positive blood alcohol test. She mentioned medical examiners and coroners will vary on what they will test. Chicago medical examiner will test for drugs and alcohol that can be tested within 48 hours, if it takes longer to metabolize then it's difficult to say it was a receptor to the suicide. Dr. Cartland mentioned 1/3 of the suicide incidents in the IVDRS had a positive blood alcohol test.

Some of the main findings in the IVDRS, as it relates to youth and young adults:

- Gender - young men have higher number of suicides
- Race - all places but Chicago, more white youth/young adults died of suicide
- Method – Chicago youth were more likely to use firearm; non-Chicago youth more likely to use drugs/strangulation
- Method (poisoning) – 0 percent of youth/young adults died by intentional poisoning. Perhaps because there are so many hospitals in Chicago?
- Age – 60 percent were young adults; 40% were teenagers

Alliance members mentioned it would be interesting to interview the friends of the victim to identify if the victim shared information with them. Members also discussed how African Americans may not be diagnosed with depression instead are diagnosed as conduct disorder. Members believe this is information worth considering putting in prevention materials.

Alliance members also wondered if the VDRS should ask other questions – e.g., childhood trauma and other adverse childhood experience topics.

Ms. Gall asked the ISPA Data Workgroup to identify how the alliance can co-release IVDRS information. She also agreed to post the YRBSS and IVDRS data briefs on the *It Only Takes One* website.

Review of the 2012 Annual Report – the draft annual report is being developed and will be forwarded to the alliance members after the meeting for review.

Workgroup Updates

Data Workgroup – (Reporting: Peter Mulhall)

Dr. Mulhall shared the administrator for the Kendall County Health Department reviews suicide incidents similar to how the Illinois Violent Death Reporting System reviews incidents. Dr. Mulhall explained there is data but how are going to get to the communities. He shared information about another data set, the Illinois Youth Survey, which his center conducts and a large number of students participates. Another data set is IQueary. Some of the questions the alliance should consider are ~ What data should communities use to

identify burden of suicide, prevention strategies, protective and risk factors? Ms. Martin report the data unit in her office will assign a person to the ISPA Data Workgroup to offer assistance. Dr. Mulhall wants to identify audiences which would benefit from the data (e.g., law enforcement, substance abuse, juvenile justice.) He also mentioned Washington added adverse childhood events to the Behavior Risk Factor Surveillance Survey.

The next Data Workgroup meeting is Monday, June 10, 2013 at 2p.

Community Awareness Workgroup – (Reporting: Carol Gall)

Issue paper – the data unit in Office of Health Promotion revised the data charts in the issue paper on access to means, per the request of the alliance. While revising the charts to be reader friendly, the content of the paper was reviewed to ensure the content complemented the charts. Ms. Martin shared the revisions. The workgroup is still looking for avenues to e.g., Facebook, press releases) and organizations to help distribute the issue paper.

As a result of the last ISPA meeting, several people agreed to outreach to their contacts within higher education about assigning issue papers as a class assignment. Some of higher education staff was interested but wanted more information about the audience and length of the papers.

Ad hoc committee to expand *the It Only Takes One* campaign – the committee wants to make this more interactive; “living” website – which will bring people back to the website. They are looking at where to embed the new topics into the website – e.g., new webpages and thread through other subsets. The ad hoc committee met with the marketing firm twice to brainstorm on ideas. Members are providing links to content to the marketing firm can sort through it and draft content for the website. Alliance members were asked if there were certain sections they’d like to review. Ms. Gerdes and Ms. Mayes volunteered. Ms. Gall also mentioned it was proposed to link the online gatekeeper training resource page to the IOTO resource page. She concluded that year 1 was a rebuilding phase and Year 2 will focus on promotion, which they will need help from stakeholders.

Proposal to add a suicide prevention page – Ms. Martin resubmitted the request and provided copies of each document/web page that was linked from the page.

The next Community Awareness Workgroup meeting is Thursday, June 13, 2013 at 2p.

Education and Training Workgroup – (Reporting: Jennifer Martin)

Ad hoc committee planning the statewide conference in 2014 – the committee was asked to hold each conference in Springfield. Ms. Martin outreached to staff at the University of Illinois at Springfield to see if they’d be interested in collaborating; which they were very interested. Ms. Martin regrouped with the committee and they would like to reconsider and still have the next conference in northern Illinois. They believe different people will attend at different locations; some people are unable to travel, since the last conference was in Springfield, they’d like to see the next one in Chicago then back in Springfield in 2015.

Ad hoc committee planning webinar to train substance abuse preventionists – the committee met once since the last ISPA meeting. They discussed the various grantees/programs that we have the potential of reaching. They reviewed the topic areas to cover – e.g., reinforce the training should be basic and broad arching; need to discuss 1) signs and symptoms and 2) steps to action. They wondered if cultural relevancy was something that should be addressed. They discussed various CEU to consider offering - e.g., LCSW, certified preventionist, certified addition counselor.) They also discussed possible presenters.

Ad hoc committee planning a webinar to train healthcare professionals – the committee provided an overview of research collected to date (e.g., discussion with department staff, list of existing resources.) Each member

reviewed the various webinars, pamphlets, posters, toolkits available for healthcare professionals to identify common themes, which we want to ensure is part of the webinar. They found majority of materials are for emergency departments; so the committee decided to focus on this population first. The committee drafted an agenda that was based on the stages of change in public and behavioral health care environments (core values/beliefs and attitudes; evidence-based clinical care practice; and system management/implementation and action.) They started to identify possible speakers for the various components (e.g., EMS staff talks about data, ED doc talk about why it's important.) Ms. Martin spoke with two staff from the Suicide Prevention Resource Center (SPRC) to see if the committee was on the right track and if they had ideas for speakers. SPRC staff mentioned if a broad approach is taken then it could serve as a starting point to learn more about the staff's concerns; otherwise, specific trainings could be done with staff. The committee is reminded to keep their expectation for webinars realistic (what can you accomplish in an hour.) What can we do to build upon the webinar? Are there follow up activities we can do? SPRC staff also recommended picking one area of the visit to focus on. For example, if we really are interested in referral – then focus on follow up efforts (the period after discharge is the highest risk.) We could use this as a way to promote collaboration between emergency departments and crisis centers. It was recommended to survey the audience to see what they want. Next step is to regroup with the EMS/trauma staff to provide an update on the information gathered

Ad hoc committee planning a system's change meeting with higher education campuses – the committee is working with the Illinois Public Health Association with regards to meeting logistics. The national presenter is inviting other speakers to participate. The meeting will either be held in Springfield or Bloomington. The agenda will include - scope of problem; explore problems the participants see on their individual campuses; overview of the Jed Foundation/EDC "Campus Mental Health Action Planning" framework; discuss forms of collaboration; learn from current/past GLS campus grantees; and strategic planning. The committee has outreached to our stakeholders in higher education to help us identify avenues for promoting the event.

Next Education and Training Workgroup meeting is Friday, June 14, 2013 at 2p.

State Agency Review and Support Subcommittee – (Reporting: Patricia Reedy)

Ad hoc committee looking at professional competency – after researching several ideas, members met with staff from the Suicide Prevention Resource Center about different strategies, one building upon the previous one – e.g., outreach to schools of social work, explore interest in legislative requirement; and build suicide prevention requirement into licensure. Several new members were added to ad hoc committee; representing directors of mental health centers, academia, consumers and education. Ms. Reedy and Ms. Martin set a time to meet with colleagues in Boston to learn about their experience. The larger ad hoc committee met and developed a list of stakeholders. Alliance members provided suggestions and recommended looking at the Illinois Department of Professional Regulation's website for additional ideas. The ad hoc committee also discussed the importance of developing a similar message to share with stakeholders. Ms. Reedy started to create a spreadsheet various stakeholders.

Online survey to inventory suicide prevention activities – the results of the survey have been collected. The next steps are to summarize the results and review at the next subcommittee meeting; identify areas to follow up on and decide if state agencies should forward the survey to their programs.

2013 stakeholder's consensus meeting – The meeting will be held on June 20, 2013 from 10-3 in Springfield. Fifty people are anticipated. The invitation list includes representatives from state and local level programs within health, human services, education, juvenile justice, non-profit, youth/survivors and alliance members. Currently, invitees are receiving phone calls followed up will receive an official letter of invitation. Center for Prevention Research and Development staff will contact invitees over the next week to conduct stakeholder surveys.

Next State Agency Review and Support Subcommittee meeting is Monday, June 10, 2013 at 3p.

Set FY14 meeting dates – alliance members decided to continue to meet by video conferencing. Conference call capabilities still will be offered but members are encouraged to meet in-person. The meetings will remain from 10a-3p; however, there will be a shorten lunch (15 minute break.) Members are asked to make a commitment to be back after the 15-20 minute lunch.

A variety of facility options were discussed. In Chicago – the state building has a food court and discount parking. The IDPH office in Chicago is closer for people in Chicago; however, the parking is more expensive in downtown Chicago than at Chicago Read. In Springfield – members preferred to stay at the training center. In southern Illinois – Carbondale, Marion or Mt. Vernon would be convenient.

The alliance members narrowed down possible meeting dates for the 3rd week of each quarter:

- August (Springfield) – either Augusts 19-23 – preferably Monday, August 19th or Friday, August 23rd – but not Aug 22nd
- November (Chicago) – preferably Tuesday, November 19th or Thursday, November 21st – but not Monday or Friday
- February (Springfield) – week of 17th – preferably February 19th or 20th – but not 17th which is Presidents Day
- May (Southern Illinois) – preferably on a Friday – e.g., May 16th

Agency Announcements

- Ms. Martin shared information about data released from the U.S. Centers for Disease Control and Prevention regarding middle age men.

The meeting was adjourned at 2:30p.m.

Minutes prepared by Jennifer Martin