

Illinois Suicide Prevention Illinois Suicide Prevention Alliance (ISPA)
 Summary of Minutes February 19, 2014
 10:00 a.m. – 2:30:p.m.
Approved May 16, 2014

VIDEO CONFERENCE:
 122 S. Michigan Ave., 7th floor, Chicago
 One Natural Resources Way, Lake Level, Springfield
 2309n W. Main St., Marion

Appointed Members in Attendance

		<i>Present</i>	<i>Excused</i>	<i>Un-Excused</i>
Chuck Johnson	Illinois Hospital Association	<i>Springfield</i>		
Mark Walsh (Proxy for Colleen Daley)	Illinois Council Against Handgun Violence	<i>Chicago</i>		
Eric Davidson	Illinois Higher Education Center		X	
Jeff Dill	Representing Fire Service		X	
Jessica Gerdes	Illinois State Board of Education		X	
Judy Ashby	LifeSavers Training Corporation	<i>Phone</i>		
Lora Thomas	NAMI Illinois – National Alliance on Mental Illness	<i>Phone</i>		
Mariann Blaccioniere	Representing service members, veterans, and their families	<i>Chicago</i>		
Nicole Pekovitch	Representing mental health consumers		X	
Paul Fleming	Survivor	<i>Phone</i>		
Peter Mulhall	Center for Prevention Research and Development	<i>Phone</i>		
Steve Moore	American Foundation for Suicide Prevention		X	

Ex-Oficio Members in Attendance

		<i>Present</i>	<i>Excused</i>	<i>Un-Excused</i>
Jennifer Martin	Illinois Department of Public Health	<i>Springfield</i>		
Jessica O’Leary	Office of the Attorney General		X	
Mary Mayes	Illinois Department on Aging	<i>Springfield</i>		
Mary Ratliff	Illinois Criminal Justice Authority	<i>Springfield</i>		
Master Sergeant Ed Petrik	Illinois State Police	<i>Chicago</i>		
Patricia Reedy	Illinois Department of Human Services	<i>Chicago</i>		

Stakeholders in Attendance

		<i>Present</i>
Libby Bair	Illinois Department of Public Health	<i>Springfield</i>
Ben Arbise	Illinois Department of Public Health	<i>Springfield</i>
Nancy Amerson	Illinois Department of Public Health	<i>Springfield</i>
Jordan Litviak		<i>Springfield</i>
Carol Gall	Sarah’s Inn	<i>Chicago</i>
Trina Diedrich	Illinois Department of Human Services	<i>Springfield</i>
Gail Simpson		<i>Phone</i>
Katie Mason	Mental Health America of Illinois	<i>Chicago</i>
Stan Lewy	Suicide Provention Association	<i>Chicago</i>

Meeting was called to order at 10:12 a.m.

Introductions/Welcome

Introductions and a welcome were made by Ms. Ratliff. Quorum is met. Ms. Ratliff also announced the café at the Springfield facility is no longer open for business.

Review and Approval of November 21, 2013 meeting minutes

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

Update from Illinois Department of Public Health (Department)

Ms. Martin reported the Department updates will be given during later workgroup meetings, and most activities are within the Illinois Youth Suicide Prevention Project.

Employees from the Ann & Robert H. Lurie Children's Hospital of Chicago, representing the Illinois Violent Death Reporting System (IVDRS,) were scheduled to attend a National Violent Death Reporting System grantee meeting the week prior; however, the meeting was postponed due to inclement weather. The Department is also planning a webinar with IVDRS representatives and looking to hold it sometime in March. Ms. Martin will work with the tobacco prevention unit within the department to administer the webinar equipment.

a. Presentation of Illinois suicide-related data

Ms. Martin introduced Ms. Amerson and Mr. Arbise from the Division of Chronic Disease Prevention & Control. Ms. Amerson has been working on annual report data, and Mr. Arbise has been working on maps based on suicide hospitalization data.

Ms. Amerson provided a review of the annual report data, pointing out the following items:

- An injury pyramid was added to the list of data charts. Hospitalizations and emergency department visits are presented side-by-side because they are mutually exclusive.
- Any hospital discharge data is categorized by E-codes. After consulting with staff from the U.S. Centers for Disease Control and Prevention, staff was advised to prioritize the data by primary E-codes so there is no duplication of those with several E-codes attached to their case.
- A breakdown of poisoning type was added, represented by a pie chart with attached bar chart. Table 2 corresponds to the pie chart and includes detailed demographic information of the sample. The charts are more for General Assembly use, and the detailed graphs are for partner use.
- Ms. Martin added there was a suggestion during the data workgroup to break out poisonings by recreational and medicinal; however, Ms. Amerson discovered the combination of those groups accounts for about 92% of the data. Thus, the story of the data was compromised too much to use that sort in the report.
- For emergency department data, Ms. Amerson was advised to only fully report out 2009 data. In addition, there is trend data included from 2009-2012, and there are currently changes underway of this section. Such changes will help reflect percent changes in the data more clearly.
- Ms. Amerson is checking with hospital discharge data stewards to ensure the data is displayed correctly.

Ms. Amerson opened her presentation to questions and comments, in which the following items were discussed:

- The idea of using veteran status as another demographic within the data will probably require a FOIA request. Post-hospitalization, ER, completion and attempt data were all suggested as potential sets to obtain for those with veteran status.
- Mental Health America of Illinois (MHA) has a staff member, Mark Hireman, who often puts in similar requests. It was suggested coordinating with him to make the request might be the best option to proceed with.

- Mr. Lewy suggested comparing emergency department means to completion means because of the stark difference in firearm percentages within the two. Such a comparison helps highlight which means are not only common, but also lethal. Ms. Amerson will develop a figure to explore this comparison.

Mr. Arbise has been working on hospitalization data maps for three separate age groups: ages 12-14, 15-17, and 18-24. Attendees were provided copies of the maps to view concurrent to his presentation. Mr. Arbise pointed out the following items:

- All three maps follow the same layout pattern. The bottom layer (the colored layer) represents inpatient and outpatient crude rates within each county. The transparent circles that are on top of those base layers are a representation of the actual inpatient and outpatient count within each county. The counties with colored borders represent counties of interest as analyzed by GIS software.
- Low populated counties with relatively low counts might show as high-rate counties. However, situations like such situation won't be recognized as counties of interest; their rates are high due to the count's relationship with a low population.
- Inversely, Cook County's high population doesn't register a high rate, but the circles show high counts. Such is common for a large, urban area.
- It is important to note the highest range on the crude rate key is very large because of Cook County's size.
- The ages 15-17 map will be submitted to a CDC Chronic disease Journal, which is why it looks a bit different than the other two maps.
- Champaign County is a good subject to refer to when looking for examples of significant changes from age group to age group.

The following questions and comments were voiced:

- Ms. Reedy asked why the data is referred to as suppressed, which according to Mr. Arbise is because of the delicacy of the data, anything less than 10 was required to be referred to as such. Counts less than 10 are not large enough to display.
- Mr. Fleming recommended a rephrase of "suppressed"—"insufficient data to draw a conclusion"
- Ms. Martin commented there will be additional discussions with the data workgroup to determine how to disseminate the data.

Update of ISPA leadership positions and member vacancies

Ms. Ratliff recognized Ms. Gall for all of her past efforts as co-chair; she had stepped down from this position due to changing job positions. Ms. Gall was presented with a commemorative gift.

Ms. Ratliff commented the new co-chair to the alliance has to be a non-state agency representative. Ms. Martin has sent out two requests to the group for nominations but had not heard anything up to the time of the meeting. Ms. Reedy voiced her interest in nominating Mr. Lewy if his appointed member application is approved. Nominations will continue to be accepted and Ms. Martin encouraged all to email their nominations to her.

Ms. Martin reported on current member vacancies: she continues to follow up internally for any response to letters sent to agencies inviting them to join the alliance. She also requested letters be sent to state agencies who are members but need to identify a new representative. Non-profit agencies that also need to nominate a new representative were also contacted by Ms. Martin.

Guest Speakers

a. Jordan Litvak – Review draft Suicide Prevention Activity Report (*a collaboration with the Illinois Joining Forces (IJF) Behavior Health Workgroup*)

Mr. Litvak is working with Tom Miller, the chair of Behavioral Health Workgroup of IJF, to contribute to the reduction of suicide within the armed services population. They would like to facilitate partnerships, make connections, increase access and capacity for servicemen, veterans, and their families to services. Ultimately, Mr. Litvak and Mr. Miller decided it would be beneficial to extend this to the whole population, as suicide is an overall public health issue.

The following items were mentioned and discussed during Mr. Litvak's presentation:

- The first draft of the Suicide Prevention Activity Form was shared at the last alliance meeting by Ms. Reedy, and it was since updated with recommendations from that meeting along with added language by Ms. Martin.
- If the form is approved, there will need to be a large-scale communications plan as to how to handle it after submissions are made. Mr. Litvak further recommended compiling the data for a year, seeing what kinds of data it yields, and then modifying or discontinuing the format as appropriate.
- It was recommended by Ms. Gall to remove alliance from the title of the form, changing it to "Suicide Prevention Activity Report Form."
- Ms. Gall will see if there is someone who can adapt the form to an Excel file.
- Ms. Martin pointed out "date" should read "date of activity."
- "Government Agency" will be added to the organizational type line.
- There are some other minor edits that will be amended by MHA, who will be adapting the file to Excel.
- Mr. Litviak requested Ms. Mason forward MHA's edited version of the file back to him; after this, there will be a final conversation about how to move forward with the form.

Presentation about local efforts

a. Chuck Johnson, "Everyone Plays a Role in Suicide Prevention: Turning Strategy into Action"

Mr. Johnson walked members through a handout that represented results from the Adams County public awareness campaign he presented at the August ISPA meeting.

The campaign accomplished many items, including the following:

- Through a partnership with WGEM, 300-400 radio and TV advertisements were aired in the area.
- Local businesses displayed the National Suicide Prevention Lifeline (NSPL) number on electronic signs.
- Local clergy were provided suicide prevention materials to distribute
- The whole back page of *Personal Blessing* magazine was dedicated to the campaign, as well as a front-page article featured in the Quincy Herald-Whig.
- Mr. Johnson has been giving presentations to health classes at local schools in the Adams County area and also encouraged educators to take the online training.
- Mr. Johnson helped to provide lunch and learn sessions at area primary health care clinics.

The campaign has been extended into 2014, starting with clergy training. It is also a goal to develop a survivors of suicide group for Adams County, as well as impacting first responder and law enforcement trainings. They have events planned in June for grief loss and in September for military and suicide prevention.

b. Judy Ashby, LifeSavers Training Corporation – development of a college-level and middle school curriculum

Ms. Ashby gave a brief overview of the program, which is located in Southern Illinois but willing to travel anywhere to present. LifeSavers is a peer support crisis and suicide prevention program that provides 3-day training sessions for 50-

60 young people. These presentations provide them with information and education, as well as real, practical experience as to what to do for one another to keep crises from arising.

There is now college-level curriculum in addition to the standard high school curriculum, which has been implemented at both Southern Illinois University Carbondale and a local community college. Also, a revised 24-hour version of the curriculum, "Links," was most recently done in Litchfield.

There isn't any research completed at the time to demonstrate the impact of the training, but Ms. Ashby noted there is much anecdotal testimonial to its credit.

Roundtable discussion about implications of the section within the concealed carry law requiring school administrators etc., to report clear and present danger including being suicidal

The individual who suggested this as an agenda item was not able to attend the meeting. Some members expressed concern with deliberating over and sharing opinions over a topic they are not entirely familiar with. Ms. Gall suggested a guest educational session at the May ISPA meeting to go over these specific implications, and then resuming discussion at this time. Mr. Ratliff confirmed the discussion will be postponed to next quarter's agenda when the alliance is more prepared to discuss.

Review of summary report and recommendations from the Youth Suicide Prevention Stakeholder Consensus Meeting

Members were distributed copies of the summary report prior to the meeting. During the last ISPA quarterly meeting, Ms. Toth presented some concepts related to this report. The consensus meeting was based on a youth focus, but did recognize the entire lifespan. Ms. Martin expressed her anticipation to identify opportunities to move forward within the information presented in the summary report, and noted pages 13 and 14 as key pages to refer to.

Mr. Mulhall provided comments on the summary report, including the following:

- Overall, the evaluation team saw positive response to the meeting
- Family support was a common goal among many attendees
- A large number of attendees identified suicide prevention as a part of their organization's mission as a whole (referring to charts on page 8).
- People like the gatekeeper training, but we need to further our local focus, looking at where things happen on the ground.

Ms. Martin inquired as to what specific items the alliance should consider in reference to the recommendations on pages 13 & 14 of the report. The following were discussed:

- Adding attendees to the mailing list
- Finding ways to add youth to the alliance and getting them involved in general
- Work on ensuring schools have policies for standardized referral
- Find ways to get parents involved
- Look into prevention staff training mandates for a number of professions

It was suggested to hold executive workgroup meetings with the alliance co-chairs and workgroup chairs; these meetings will be used to determine tasks to tackle and also how to divide those tasks between the workgroups.

Workgroup Updates

a. Education and Training Workgroup

Ms. Bair briefed the group of new developments in planning the 2014 statewide suicide prevention conference. She provided the following updates:

- Permission was granted to hold a candlelight vigil on University of Illinois Springfield (UIS) campus grounds, and Ms. Sherry Bryant will provide guidance in planning the event.
- University of Illinois Springfield also granted permission to promote the NSPL on campus grounds as a method of support for conference attendees.
- Computers will be available for Kognito training throughout the day of the conference
- Live webcasting will be available for both keynote speakers; broadcasting will be facilitated by Mr. Mark Hayes of the department.
- Dr. John Draper officially accepted our invitation to be a keynote at the conference and Dr. Hasbrouck's office has a copy of our agenda.
- CEU offerings will be extended to a variety of professions: Ms. Bair and Ms. Martin are pursuing credits for RNs, Physical Therapists, Occupational Therapists, substance abuse professionals, among others. These are in addition to the offerings being applied for by Illinois Public Health Association (IPHA).
- The breakout program is divided into four "tracks": panels, prevention programs, contributing factors, and system and community approaches. The ad-hoc planning committee also determined the order of the breakout sessions.
- Poster presentation/program display applications are still being accepted.
- All members of the survivor/attempter panel are finalized and will be reviewing draft objectives and a program description soon.
- Dr. Draper will help facilitate a panel with Crisis Center representatives from throughout the state
- The Meeting for Higher Education is still in the infancy of planning
- Ms. Martin is reaching out to University of Illinois at Urbana Champaign (UIUC) and Palatine School District to provide perspective for the "Successful Implementation of the Online Training" session
- Two additional sessions are being considered: one focused on healthcare financing and the other on care transitions. This item is on the State Agency Workgroup update agenda.
- Both our local mental health center and the UIS Counseling Center will provide on-call mental health support staff throughout the day.
- Registration is near opening, and an updated date saver will be released as an announcement.

Ms. Bair provided a sign-up sheet for both Springfield and Chicago attendees to indicate their interest in volunteering as a breakout session moderator at the conference.

b. Community Awareness Workgroup

Ms. Gall reported all *It Only Takes One* (IOTO) website edits were completed by Ms. Martin, Ms. Bair, and the Market M team. The website is currently awaiting final approval by the Department.

Market M is also in the process of redesigning pocket cards for the IOTO campaign. There will be more information added in comparison to the previous version of the cards. They should be available at the April conference and at the next ISPA quarterly meeting. Market M is also developing "It Only Takes One _____" cards for photo opportunity at the April conference.

Ms. Gall also reported there is a draft being circulated for the "Suicide and First Responders" issue paper. The paper was reviewed by both Mr. Jeff Dill of fire service and Mr. Ed Petrik of Illinois State Police. Ms. Gall also shared the new

header developed by IDPH communications that will be placed on all future issue papers. The issue paper will be reviewed and approved at the next ISPA meeting.

c. Data Workgroup

Mr. Mulhall gave a brief overview of data evaluation for the middle and high school Kognito training modules. He and his team focused on those specific groups both had adequate sample sizes for analysis. He covered the following points:

- Some schools saw high numbers of participants (indicating the training may have been mandated at those institutions), whereas others only saw one staff member initiate and complete the training.
- Over 1,000 participants finished the pre and post-test survey at the middle school level; 629 at the high school level.
- Most individuals participating in the training are educators, followed by mental health professionals.
- Two constructs have been identified in terms of gained knowledge from the training: preparedness and efficacy.
- Significant gains were seen in both scaled between pre and post-test findings.

Additionally, Ms. Martin shared Mr. Arbise has access to Nielsen Market Analysis, which refers to advertising data (what kinds of advertisements people are exposed to). He did a trial run of this for advertisements in Adams County and shared those results with Mr. Johnson. Mr. Johnson noted the data is good for determining the best time of day to market messages and which outlets to use based on depressive medication users. Newspapers were found to be the worst media type in the county. Radio and television were both prevalent types, and internet did not show numbers as high as expected.

d. State Agency Support and Review Subcommittee

Ms. Reedy turned discussion to the two potential additions to the conference breakout agenda: sessions on care transitions and healthcare financing. The following thoughts were shared:

- Ms. Reedy noted the conference should always be relevant to the participants. If many providers are in attendance, care transitions would be an important topic to cover. A workshop on financing publically-funded individuals might be relevant as well.
- Ms. Gall commented any healthcare financing discussion should be focused on how the Affordable Care Act (ACA) opens up opportunities for all on the mental health end of the healthcare spectrum. We should speak more broadly, not just for the Medicaid population- something to the effect of an ACA overview specifically related to mental health.
- Ms. Gall further commented the purpose of the conference is suicide prevention, so we would want to look at how to close loopholes in the system and get people the care they need. We want to promote how to be advocates at the community and professional level.
- Ms. Diedrich shared past experiences related to financing issues, as there is a large correlation between suicide risk and substance abuse. County Care does not pay for residential treatment and domiciliary services. If provider agencies do not think they will be able to be reimbursed for suicide prevention, they will not offer it as an official service. Jane Antonocci has been involved in the DHS/DASA merger and was recommended as a potential speaker/facilitator by Ms. Diedrich.
- Ms. Gall added care transitions might be a worthwhile addition to the breakout agenda with a strong facilitator for roundtable; however, healthcare financing would need a speaker. The topic is not suitable for roundtable discussion and the talk needs focus.

The discussion was left with the consensus if either topic is offered for breakout at the conference, healthcare financing should be offered as a lecture session, whereas care transitions could be offered as a breakout.

Announcements

- Ms. Reedy expressed the need to look into the “right to die” movement, as the alliance should potentially develop a stance on the issue. Ms. Reedy added that in Europe, anti-euthanasia and suicide preventionists are working together.
- Mr. Lewy expressed the need to include more attempt survivors in the discussion for suicide prevention, as AAS is opening up a division for attempt survivors. He believes attempt survivors should be included in ISPA thought processes moving forward.
- Ms. Martin reminded members poster presentation/program display applications for the conference are still being accepted. The form will be send out widely again as a reminder.

*Adjourn at 2:31.
Jennifer Martin*

Minutes submitted by Libby Bair, reviewed by