27 Attendees representing 20 organizations:

Julia Hampton (CHL), Bard Hill (DAIL), Rita Durgin (VT Army National Guard),
Katherine Johnson (Community Member, DCF), Alison Krompf (DMH), Allie Charron (Pathways VT)
Laurie Emerson (NAMI VT), Debra Lopez (Psychiatrist, Survivor of Suicide Loss), Mark Margolis (Howard Center),
Janet Hussey Monette (NEK Human Services), Sue Miltner (NEK Human Services), Ruth Marquette (NEK Human Services),
Charlotte McCorkel (Howard Center), Matt Wolf (VT Federation of Families),
Sally Kerschner (VDH), Gayle Finkelstein (UVMMC), Christy Andersen (Rutland Regional Medical Center),
Andrea Wich (Rutland Regional Medical Center), Amos Meacham (Pathways),
MaryEllen Mendl (United Way 211), Eva Dayon (VT DMH), Linda Heimerdinger (Social Worker BUHS),
Debby Haskins (CHL), Monique Reil (Lamoile County Mental Health), JoEllen Tarallo (CHL), Kara Berg (Champlain College),
Thea Schlieben (Veterans Administration), Tom Delaney (UVM)

Introductions:

- Shared self care practice
- Talked in small groups regarding how people’s work relates to the 11 goals of the Suicide Prevention Platform (2015, 2nd Edition).

Zero Suicide Overview with Pilot Site examples – JoEllen Tarallo and Monique Reil (Lamoille County Mental Health)

- In relation to high-risk sub-groups, a question was raised about higher rates of suicide among farmers. Sally shared there is an EAP specifically for farm families and the Behavioral Risk Factors Survey will begin gathering data on occupation to help answer this question. It was suggested that the Data and Surveillance Workgroup could focus on this data point.
- It was noted that equity plays a role in the populations at risk for suicide. On Oct. 24th there is an Equity Access Conference. We can look at risk factors by age group and demographic group, but also make the connection with the underlying protective factor that apply across all groups.
- Goals for suicide prevention slide – It was suggested that these goals be framed in the positive (i.e. “increasing protective factors,” “increasing self-awareness and self-care”). Coalition members also found it problematic to single out “self-harming” as this could be misleading since it is interpreted differently by different people and does not always lead to suicidality. Matt and Amos agreed to help craft changes.
- There was discussion around inpatient care and how the quality of care can vary. Data shows that inpatient care does not have consistent outcomes; there is work to be done to improve the quality of care. For some it is so important to have this care, and for others we want to do everything we can to prevent them from needing this level of care.
- Monique presented examples of the work from one of the pilot sites, Lamoille County Mental Health, as it relates to what professionals can do to support Zero Suicide: Lead, Train, Identify and Assess, Engage, Treat, and Follow (see her notes attached).

Zero Suicide Pilot Site Evaluation – Tom Delaney, Evaluation Consultant

- Tom provided an overview
- Issues around data collection were discussed. It was suggested we could look at Dispensation Data to see if people have been diverted from inpatient stays to support anecdotal data
gathered from interviews/surveys. Rutland would like an “arrival mode” for ED data – how were you referred to the emergency room? This could help determine if people know about services like the mental health crisis team coming to them instead of having to go to the ED. Alison shared a story about increased ED visits due to a pediatric practice closing early and referring patience to the ED during closed hours.

Input from the Coalition
Coalition members talked in small groups and wrote down feedback on two key projects related to CHL’s DMH grant:

1) ZS Brochure Dissemination Plan – many groups recommended reaching out to DOE/schools, economic services, Department of Children and Families, public safety and corrections. This particular brochure is designed for health care professionals. Another brochure could be developed in the future for these other audiences.

2) Learning Community

Crisis Text Line - Use of text line has plateaued and we are seeking ways to increase dissemination.
Coalition members were asked to provide suggestions.
- Distribute through the Principal’s Association – add to websites available to parents and students, inform nurses and counselors in the schools as well as School Resource Officers
- Student Assistance Program Professionals
- Post information in schools bathrooms and hand out to families at Open Houses
- Faith Leaders
- Put information on cool give-aways like stress balls
- Front Porch Forum
- Press Release and PSA (put on UTube)
- Coalition member could put posters on community bulletin boards
- NAMI is promoting through exhibits, business cards, website, presentations to students and community members, newsletter, posters

A large stack of posters and wallet cards were provided for coalition members and all were gone by the end of the meeting.

VT SPC is creating a PSA to highlight helpline and text line. A request was made for volunteers (2 consumers and 2 providers) to provide feedback on the script once it is drafted. Julia will follow up with those interested in helping.

AHS Suicide Prevention Policy Committee – Alison Krompf
There is a reinvigoration of an AHS Leadership team related to suicide prevention facilitated by Tracy Dolan, DC, VDH and Alison Krompf, Policy Advisor, DMH. They are interviewing other state leadership and have determined some priorities.

An important question this group is looking at is: What data do we have and what data do we need and want? For example, do patients discharged from Emergency Departments follow up with their plan? The hope is an outcome will be to prioritize important data points and determine how to collect them.

- H 184 Evaluation of Suicide Profiles
 Specifies three deliverables to the legislature: January 25, 2019 and January 15, 2020. The National Violent Death Reporting System grant ends in 2020 and H 184 requires the state agencies to develop a plan for what comes next.

Announcements:
- NAMI VT Walk is September 30 in Burlington [http://namivt.org/walk/](http://namivt.org/walk/)
- VT 211 Website Guided Search for Resources [http://www.navigatoresources.net/211vermont/](http://www.navigatoresources.net/211vermont/)