

## VT SPCoalition Meeting

June 18, 2019

VA Medical Center – *Thank you Megan Snitkin for hosting this meeting!*

**PRESENT:** 27 Coalition members attended

Betty Barret (AFSP), Chris Barrett (AFSP), Dianne Bouchard (Washington County Mental Health), Dillon Burns (Vermont Care Partners), Stephanie Busch (State of VT), Mary Butler (AFSP volunteer), Regina-Anne Cooper (Qualidigm), Ross Farnsworth (SSCF Department of Corrections), Gayle Finkelstein (Northern New England Poison Center and UVM Medical Center), Lori Hoyt (Currently unemployed teacher), Wendy Krapowicz (Family Assistance Program VTARNG), Terri Lavelly (NKHS), Ruth Marquetter (Northeast Kingdom Human Services, Inc.), Sherri Prouty (VTANG Family Assistance Coordinator), Alan-Michael Saltis (Rutland Regional Medical Center), Melissa Southwick (SASH), Sara Vaclavik (Vermont 2-1-1/ United Ways of Vermont), Michelle Warren (Craftsbury Mental Health Resource Group), Heather White (AFSP), Andrea Wicher (Rutland Regional Medical Center), Matt Wolf (VFFCMH/YIT), Laurie Emerson (NAMI VT), Paul Mangeniello (Gunsense VT), Megan Snitkin (VA), Tom Dalaney (UVM VCHIP), Julia Hampton and JoEllen Tarralo (CHL)

### **ANNOUNCEMENTS: *Sharing suicide prevention work around the state***

- Andrea Wicher, Rutland Regional Medical Center – working on a warm hand off tracking system
- Megan Snitkin, VA – Implementing suicide risk screening (Columbia) across all disciplines throughout the whole hospital. The 8 VA medical centers in New England are sponsoring a northern New England Suicide Prevention conference **#BeThere For Service Members, Veterans and Families** being held on Wednesday, June 26<sup>th</sup> at the Double Tree by Hilton in Manchester, NH. This is for the states of VT, NH and ME. There were still openings to attend. [Registration information.](#)
- Regina-Anne Cooper, Derek J. Memorial Foundation – Has started a group called Climbing Mountains that is focused on addressing social isolation and loneliness that meets at the library in West Lebanon, NH. If you are interested in the fall sessions, contact Regie at [12geisel@gmail.com](mailto:12geisel@gmail.com)
- Tom Delaney, UVM- Developing a set of basic suicide prevention competencies for primary care providers and student trainees
- Lori Emerson, NAMI Vermont is [hosting “Almost Sunrise”](#) a documentary film with a panel discussion June 27<sup>th</sup> in Middlebury. They are also offering viewings of “Suicide Ripple Affects” documentary - you can contact them to schedule a viewing in your area. NAMI is starting a group for survivors in Williston. Ending the Silence in greater Burlington area is a 50 minute presentation designed to give students an opportunity to learn about mental illness through information

- and personal testimony given by youth and young adults – they are currently recruiting youth to present (contact [program@namivt.org](mailto:program@namivt.org))
- [Ross Farnsworth, SSCF Department of Corrections](#) – adopted Columbia screening for all intakes and is now working on training staff to use the screening. Open Ears peer support program where inmates can talk with other inmates has been running for 1.5 years now and showing some positive impact.
  - [Heather White, American Foundation Suicide Prevention \(AFSP\)](#) – Going to celebrate the money raised for AFSP with St. Johnsbury middle school, the first school to do an Out of the Darkness Walk. Look for the Out of the Darkness walk near you Sept – Nov. 2019. AFSP VT is working on some joint trainings with the NH chapter.
  - [Mary Butler, AFSP](#) – Sept 7 Newport has their 8<sup>th</sup> annual Out of Darkness walk with a community dinner the night before. Faces of Loved Ones Lost quilt is finished and will be revealed at the event.
  - [Betty and Chris Bartlett, AFSP](#) – Successfully advocated to get safe beds in Newport’s North County Hospital ED
  - [Monique Reil and Michelle Warren, Craftsbury Mental Health Resource Group](#) – This is a grass roots effort began after the community suffered the loss of a young man to suicide in the fall of 2017. The group meets regularly and has developed a community resource guide and website: [nevtsuicide.com](http://nevtsuicide.com)
  - [Melissa Southwick, SASH](#) (Support and Services at Home) – Working to bring [Men Sheds](#) to Vermont. This is a non-profit association “committed to breaking the cycle of social isolation and loneliness facing men.”
  - [Paul Mangeniello, Gunsense VT](#) – The bill to mandate a waiting period was vetoed by the governor, Gunsense plans to work on more robust bill to reduce access to lethal means.
  - Wendy Karpowicz, VT Army and National Guard - Sept 19 & 20 Free ASSIST Training in Rutland; contact Jade Phillips for information and to register [jade.j.phillips.tr@mail.mil](mailto:jade.j.phillips.tr@mail.mil)
  - NCSS will start answering the Lifeline calls from VT

In some reports, people discussed [involving faith based communities](#). Here is a resource for faith communities designed by the National Action Alliance for Suicide Prevention: [Faith.Hope.Life](#)

The power point slides from this meeting can be found on the [VTSPC website](#).

## ADVOCACY

### Suicide Safe Pathways in Health Care Advocacy Day: February 14, 2019

This day of advocacy for suicide prevention was co-sponsored by AFSP and VTSPC. The day consisted of a press conference where health care leaders made a commitment to implementing Zero Suicide, testimony in the House Committee on Health Care, training for volunteers on how to talk with legislators, lunch meetings with legislators,

presentation of flowers in memory of those lost to suicide, and recognition in the House Chamber including the reading of a resolution.

Ripple affects:

- SASH funding was going to be cut by 50%. During testimony given in the House Committee on Health Care, Molly Durgan (SASH Director) emphasized their work around mental health and suicide prevention and specifically asked for their work to be fully funded again. This made an impact with legislators and the committee recommended the funding for SASH and they received it!

- Engaging health care

- Health care organizations across the state are making a commitment to implementing suicide safe pathways of care. They recognize that it is a systems issue and are working on training within their systems
- VT Care Partners- about to send out letter to private practice about ethical and best practice around crisis support

- AFSP of VT has created an Advocacy Committee lead by Chris Allen and Becky Killian  
Goals:

1. Year round outreach efforts to engage legislators in local areas inviting legislators to participate in suicide prevention activities and participating in representative's events
2. Craft legislation to bring to Advocacy Day – need people to be at the table to inform and create this (i.e JoEllen made the case to take up the issue of lethal means as a group – create a formal consensus or resolution about this)
3. Plan annual Advocacy Day

**Advocacy Committee Meeting: Saturday August 10<sup>th</sup> at 10am in Montpelier** (to be confirmed). There will also be a virtual option.

**AAS CONFERENCE RESOURCES**

The American Association of Suicidology brings together many different intersecting organizations and disciplines at its annual conference and presents the latest research and best practice.

JoEllen reported on the workshop she attended on Improving State Suicide Prevention Infrastructure. Key points include:

- The passion of survivors is where the innovation happens in this work at a local and state level
- The funding has not matched the level of this public health issue
- SAHMSA believes that the suicide rate will go up before it goes down. They have been developing an infrastructure and “small islands of excellence,” however, we don't have evidence that we can reduce suicide in a community or a state at this point.

- They are looking at how can we start tracking impact with data to show the difference our work is making.
- They define a State Suicide Prevention Infrastructure as “a state’s concrete, practical foundation or framework that supports suicide prevention-related systems, organization, and efforts including the fundamental parts and organization of parts that are necessary for planning, implementation, evaluation, and sustainability.”
- They presented 6 Elements of such a framework that include authorize, lead, partner, examine, build, and guide.
- The next step is to do an infrastructure assessment for VT.

Julia reported on a few resources she gained from attending the conference which can be accessed on the [VTSPC website blog](#).

## PRESENTATIONS

### Queechee Gorge Bridge Barrier – Regina-Anne Cooper

Regie presented the history of this bridge barrier including the process of getting the bill passed, the support that CHL and the Coalition provided, and the latest meetings and plans for the bridge’s construction. There is a temporary barrier currently and the next public meeting to vote on the final barrier plans will be in October 2019.

Updated information can be found on the [Agency of Transportation website](#)

The slides from Regina-Anne’s presentation are available on the [VTSPC website](#).

### Suicide Attempt Data from the New England Poison Control Center – Gayle Finkelstein

The Poison Control Center has a wealth of data and they are willing to break out data specific data sets for presentation/testimony, or to create targeted prevention efforts.

Gayle can be reached at [gayle.finkelstein@uvmhealth.org](mailto:gayle.finkelstein@uvmhealth.org)

The slides from Gayle’s presentation are available on the [VTSPC website](#).

## INPUT

### Messaging for Suicide Prevention Month

Reviewed two resources that can be used to inform media reporting on suicide:

[Recommendations for Reporting on Suicide](#) – best practice for reporting after a suicide has occurred to reduce contagion.

[National Recommendations for Depicting Suicide](#) – a resource to help craft stories about survival, hope and healing. We went over this in detail in small groups and came up with the following ideas for Suicide Prevention Month Messaging:

**Convey that suicide is complex and often caused by a range of factors, rather than by a single event.**

Ex. of this done well are within trainings: Assist, Umatter, QPR, Gatekeeper

Asking directly is the way to know; we can look at data, risk factors etc., but we won't actually know without asking. Speak with attempt survivors and get a full and thoughtful explanation of their situation. This can be an important aspect of dispelling myths.

**Show that hope is available.**

Family member who lost someone to suicide share their story  
Person who survived suicide attempt tell their story in a video can give hope to others with thoughts of suicide that they can make it through and offer to be contacted for support, that they are not alone.  
Film "suicide-the ripple effect" to be shown at schools/ community forums.  
Front Porch forums to explain mental health concerns and suicide prevention.  
Local small-town newspaper articles with general mental health awareness and individual suicide prevention  
Activities/information re: language, seize the opportunities that come up!  
Free trainings in community for Umatter, MHFA, etc.  
PSA on TV, radio

**Portray characters with suicidal thoughts who do not go on to die by suicide.**

Ex. Of a person who attempted, experienced long depression, therapy, began working on OOTD walk-support of the work group led to self love and love.  
Strengthening the attempter and giving them hope, along with their faith and love.  
Theme song "Don't stop thinking about, tomorrow!"  
Attempters-Betty Barrett willing to be resource

**Portray everyday characters who can be a lifeline.**

Ex. Police on Quechee Bridge who saved young man driving home off duty "see something, say something"- Valley News policeman decorated for not ignorant if everyone is in a position to help time sensitive issue.  
Administrators giving handouts to media members "it takes a community"-reach out to local business "barber shop"  
Every day characters could include: Parents/siblings, VPR broadcaster Adi (lost her brother to suicide and is a good person to speak out).

**Avoid showing or describing the details of suicide methods.**

Ex. Video Seize the Awkward.

**Consult with suicide prevention messaging experts and people with lived experience.**

Incorporating media education as part of public event.  
Refer media to media toolkit.  
Messages of hope  
Movie screening  with facilitated discussion

**Depict the grieving and healing process of people who lose someone to suicide.**

- Different individual experiences (acknowledging)
- Providing options for support (opportunity)

- There is no one solution that will work for everyone (options)
- Use a variety of media outlets available - Radio, events, video (listening, hearing, seeing)

Survivors often wonder why didn't I notice? and why didn't I do more?

- It takes time to coming to terms with what happened.
- People need: Individual support, Family/friends/community
- Grieving is different for everyone - Provide a variety of personal experience

**Use non-judgmental language.**

Ex. Attempt survivors-positive outcomes:

- Kerin Hines in "The Ripple Effect"
- Rumble strip: "They Are Us" - Sarah (WCMHS board member)
- Keith Clark - Widham Country Sheriff who opened up about his experience suicidality after PTSD, the positive treatment experience of the Brattleboro Retreat and community.

**INPUT**

Survivor Support

JoEllen gave an update on the online Survivor Support Resource Packet that VTSPC keeps up to date. A post card is going out to Funeral Directors this summer and we are developing a generic post card for providers to give clients and/or have on display.

**NEXT MEETING – September 12, 2019 at Capital Plaza in Montpelier**

If you have any items you want to see on a future Coalition agenda, please contact Julia Hampton. At the September meeting, we will continue our conversation regarding survivor supports and address the issue of increased risk of suicide for those who have had sepsis (Rutland Medical Center – Andrea).