

Vermont Youth Suicide Prevention Coalition (VYSPC) – September 30, 2009

Osgood Bldg-Waterbury, VT

Minutes

In attendance: Patty Baroudi-ADAP, Robin Pesci-Director of First Call, Howard Center, Eliot Nelson, M.D. Primary Care-Fletcher Allen, VCHIP (Injury Prevention Executive Director), New England Coalition to Prevent Gun Violence., Mercedes Avila-VCHIP, Linda Livendale-American Federation for Suicide Prevention, Mary Ellen Mendl-United Way/211, Courtney Bridges-VT Federation of Families- AHS, Sally Kerschner-Coordinator of Injury Control and Maternal Child Health.

Facilitators: Brian Remer, JoEllen Tarallo-Falk – Center for Health and Learning

Welcome and Opening Activity: Youth Risk Factors for Suicide Prevention

The group introduced themselves to one another and looked at case studies developed for the Umatter training to promote identification of risk and protective factors.

Youth Suicide Prevention Project Update

Public Digital Information

- We began a discussion about how best to disseminate information in the public digital information space – via web links and content.
- Robin asked about whether there would be contact us....Brian responded that the intention is information referral. “This is not a crisis intervention service – for next steps call...211, etc.”
- The three representatives from VDH suggested we talk to the VDH Communications Office who can direct us how to approach other agencies within state government.
- The sentiment was that it would be best to have a quick link to a website that can be updated more easily than the state websites can be .
- People are willing to participate in a short 3-5 question survey on infrastructure
- Forward to community partners.
- The question of translating to other languages was posed. It was recommended we look at the AHS website to determine priority languages. The AHS website has 12 predominant languages.
- We will want to work with the state language translation system for web content.

Vermont Injury Prevention and Control Plan-Suicide Provider Prevention Toolkit

Sally Kerschner

- Presented a resource from the Suicide Prevention Resource – a Toolkit for physicians in rural areas that will be useful in protocol development and Gatekeeper training for medical practitioners
- The Health Dept. is creating an updated 2010 Injury Prevention Plan focusing on both intentional and unintentional injury. It was last done in 2001.
- Suicide is a major issue and they want to highlight suicide of all ages.
- Child and Youth Injury Prevention Symposium, October 7, 2009 will kick off the development of the 2010 Vermont Injury Prevention Plan. – JoEllen will be presenting on the Youth Suicide Prevention project.

- The Action Steps for the Injury Prevention Plan should align with the Strategic Plan for the VYSPC. There will be five year goals for the plan. The plan is birth to death. The VYSPC will be focusing on ages 11-23.
- Robin raised the question about what age in VT a death may be ruled a suicide. No one was certain about this. People have inquired to CHL about training for elementary ages.
- Tracy Dolan at VDH oversees the development of Healthy Vermonters 2020. Sally said that she would check in to see what the process is for the development of the plan and how they are gathering input on the next ten years. We would like to impact how mental health and suicide will be addressed.
- The schools rely heavily on EPSDT/Medicaid Administrative Funding for health in their plans. Schools come up with plans every year for how to use that money.
- We will want to think about pursuing general fund matching money for federal Maternal Child Health funding to continue sustainable training efforts.

Update: National Suicide Prevention Lifeline and Vermont 2-1-1

Mary Ellen Mendl, Director

- In 2006 VT 211 was approached by Dept. of Mental Health and the National Suicide Prevention Lifeline to become trained to respond to suicide calls. They spent two years preparing and became the 131st center to begin taking these calls. Vermont 211 operates 24 hours per day seven days per week, but calls about suicide are forwarded on to the national Lifeline starting at 4:30 PM daily. In a review of data from August and September, 28 calls were received related to mental health and three were dispatched. There are more calls from females.
- Last year the call volume was 25,000 calls. They are anticipating a call volume for 2009 of 30,000 calls.
- They have done some minimal advertising. A lot of the exposure is from partnerships. Other agencies are the major source of referrals. There are many repeat callers. Family and friends also refer.
- Most calls are for basic needs – transportation, food, etc.
- They issue reports monthly and she can add people to the report distribution list.
- Robin asked about what we recommend for referral at the Gatekeeper trainings – mental health agencies, 211, or Lifelines. The school based and professional trainings focus on connecting schools with mental health agencies. Information for the general public is referred to 211.

Evaluation Update: Baseline Assessment of Vermont Resources and Data Survey

Mercedes presented initial findings from the first cohort to attend the Umatter Youth Suicide Prevention training held in Killington September 15-16. There were 25 participants from six schools representing teachers, Mental Health Clinicians, Social Workers, Home School Coordinators and School Nurses. 80% of the participants were satisfied with the overall training experience. 76% of attendees had responded to a youth suicide or an attempt or threat.

Participants indicated they intended to use what they learned during the training:

Strategic Planning Process: Developing Our Initial Ideas

Process, Issue Identification, and Prioritization:

The group was in agreement that it makes sense to return to the VT Suicide Prevention Platform to reorient to the goals and objectives established in 2004, update it, and prioritize issues from it.

When we select strategies, we will need to think strategically about timelines for sustainability.

Representatives:

Pursue representatives from:

- Veteran community
- Vermont Family Services within the Dept. of Children and Families
- Organizations that serve gay, lesbian, bisexual and transgender youth
- Clientèle we will be working with

Social and Political Factors:

- There will be an election coming up in November 2010 and we should be thinking in terms of what opportunities that might present. For example, we know there will be a new governor.
- We should plan radio and television advertising scheduling with cost and competition (e.g., electioneering) in mind.
- Including Umatter on Facebook and other social networking sites

Announcements:

Out of the Darkness Walk – October 3 in Burlington. We are hoping for 125 people.

Next meeting: To be scheduled asap via Meeting Wizard for early November 2009.

Future topics:

- Statewide Injury Control Planning and how it relates to the VYSPC strategic planning.
- Lethal means restriction and Screening and Assessment as priority issues.

Submitted by:

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Note:

Sustainability- families of survivors as funders