

## Suicide Prevention Council

December 14, 2009

1:00 – 3:00 p.m.

In attendance: Jo Moncher, Dr. Bob McLeod, Catrina Watson, Patrick Roberts, Deborah Scott, Aviva Grasso, Deb Samaha, Loren Haberski, Deb Connell, Representative Alida Millham, Connie Young, Elizabeth Fenner Lukaitis, Rhonda Siegel, Ken Norton, Sgt Dale Garrow, Dr. Jim MacKay, Betty Welch and Representative Roger Wells.

### I. Big picture update

Thank you everyone! Great partnerships and initiatives around the state.

There are several changes to membership: SGT Dale Garrow has replaced Major Michael Moranti. SGT Garrow and Caryl Ahern will serve as Co-Chairs of the Military Subcommittee. There are two new Suicide Prevention Coordinators at the VA Medical Centers: Loren Haberski and Debra Scott. Melissa Heinem has left the state; Patrick Roberts will be taking her place as Data Collections Co-Chair. Deb Samaha is replacing Elaine Frank at the Injury Prevention Center, but we hope Elaine will remain involved. Kathi Fortin has replaced Ed George, representing Bi-State Primary Association. Aviva Grasso has agreed to serve as Clerk and will be doing the minutes. Aviva has also agreed to serve as the State Plan Liaison. We still do not have a survivor nominated by the Governor to fill that slot on the council. We have names, but need official nomination.

### II. Chairman's message

We've done a lot in one year. The changes in membership still leave us in a strong position with some returning and some new faces. The conference was outstanding and increased in numbers. This is an issue that doesn't go away, so the work remains important.

### III. Case Review

SPC data since our last meeting (8/10/09-12/14/09):

Four suicides were finalized since our last meeting:

5/09: 57 year old Male by poisoning

6/09: 46 year old Male by OD

7/09: 50 year old Male by OD

58 year old Male by Gun Shot Wound

There were 38 finalized suicides between 8/10/09-12/14/09. Thirty-four were males (aged 16-95); four were females (aged 52-84)

23 Gun Shot Wounds: 22 males (aged 20-95), 1 female (aged 57)

9 Hanged: 8 males (aged 16-68), 1 female (aged 52)

2 OD: 84 year old female and 58 year old male

1 Carbon Monoxide Poisoning: 47 year old male

1 jumped: 52 year old male

1 drowned: 29 year old male

1 asphyxiated: 55 year old female

In response to a request for breakdown of suicides by age and cause of death for 2008 and 2009, we learned that the medical examiner provides more data now than in the past, so report is feasible. In addition, this data is generally in the annual report, available on NAMI's website.

Elizabeth also reviewed a suicide that occurred since the last meeting and noted that these numbers reflect all suicides in NH, not just residents and not counting those who suicide out of state.

#### IV. Brief Updates:

- **Professional Practice** –represents as many professional disciplines as possible around the state: LADACs, EDs, counseling of various sorts, social workers... They conducted a survey re clinicians' understanding and training re suicide prevention. Implemented by survey monkey in June and July. Hard to get buy-in from professional associations, therefore it's hard to get lists. While some people don't hesitate, primary care physicians generally don't like to respond to surveys.

In the end, there was sort of a snowball effect, with committee members using their own distribution lists. **Some preliminary results are attached.** There are plans to look at the data broken down in different ways by field.

Ken recommended that these outcomes should be publicized in some way, particularly to those groups who collaborated on dissemination. The group will share with partners and would like to put a report together. Perhaps this could be a public news service story.

Could publicity put pressure on graduate schools for example, or pressure for better communication between EDs and mental health providers? Publicity might also support policy initiatives.

- **Military** – Next August or September, NH Army National Guard will activate 1100 soldiers (largest group since WWII). 1 company each went to Vietnam and Desert storm. Several companies (800 people) deployed 2003-2005. People will not be serving in exactly the role they were trained for (same was true in '03-'05). Some questions re proportion of regular armed forces personnel from NH.  
Defense Authorization bill includes some of the Connect work that NAMI has been doing with National Guard. The work is described, but not named – so as to avoid problems with bidding process. NAMI didn't want to tie training to deployments, but that's where it ended up (part of Yellow Ribbon). Bill was signed October 30 and is now in appropriations process, maybe not be funded for 2010 but certainly by 2011.
- **Data Collections** – The Annual report was released at the conference. A version is on the NAMI website. A corrected version will be up soon. This week's meeting will establish the workplan for 2010. **See attached meeting schedule for SPC and subcommittees.**
- **NAMI** –
  - **Teleconference** had six host sites this year, spread around the state. Close to 90 people turned out (1/3 more than in the past). We are reaching survivors more quickly than we have in the past. NAMI's survivor liaison is sometimes connected within hours after a death. The teleconference ranged from recent to distant survivors. Some saw ads in papers, newsletter, survivor packets and a lot of unknown "others."
  - **Garrett Lee Smith** – SAMHSA will fund three years at \$500,000 per year, beginning January 1, 2010. The plan will cost more than that, but NAMI is accustomed to seeking additional funds. The idea is to work from top down and bottom up. Deliverables

include consulting with various SPC subcommittees and providing statewide training. Also focusing in Coos County and Seacoast area (which isn't in the grant b/c new emergence) and focusing on high risk/special populations. CONNECT (prevention, intervention, and post-vention) is the core, but will be accompanied by training in assessing and managing suicide risk. CALM training will also continue as will training with disaster behavioral response team. NAMI will provide some funding to Headrest, the agency that answers the suicide prevention line. Suicide Prevention planning is also included in the grant. This may result in a retreat since the revisions are already complete. GLS will also feed Public News Service and support Community Health and Healing Fund. NAMI is seeking a [project coordinator](#).

- **State Plan Update** – Two sections have been removed: Garrett Lee Smith & Education and Training. Communications became Communications and Public Education, absorbing some of Education and Training. Professional Practice also absorbed some other parts of Education and Training. The Military section is entirely new. In the interest of continuing to raise awareness of the efforts around suicide prevention, press release is in development. It is intended to be distributed in January, after approval from DHHS Public Information Office and the Governor's Office (for his quote).

#### V. Update and Discussion Items

- Conference – congratulations to Elizabeth and everyone else who worked on the conference. It was great to have so many people there from so many different fields. We were expecting no more than 150 people; 195 people attended. Looking for location and other logistics for next year. People are invited to get involved, with seeking sponsorship, working on the brochure, collating packets or even the monthly meeting. Evaluations revealed networking, ethics, Eric Hipple, the Wells's story, and Survivor stories as the most valuable sessions. Least valuable: nothing, too many awards, food quality and quantity, AV, lack of handouts. Comments always need to be considered carefully, for their worth or not. There will always be some criticism of just about everything. There were also related events – 2 featuring Eric Hipple.  
**Conference planning committee should include addictions (Aviva will ask at New Futures and Providers' Association) and mental health representatives (Dr. MacKay will look into this).** Need people who will really *work* with members of the committee. Could even be just someone doing the LADC or Nursing CEUs. Members suggest working with the AHECs for CEUs, so that we'll be able to attract a broader group of participants. Deb can promote through the NH Emergency Nurse's Association. November 5<sup>th</sup> 2009 tentatively. Also discussed Higher Education connection – UNH, or Antioch involvement in planning would help. People can serve as contact for a specific workshop, rather than attending regular meetings. Perhaps subcommittees could each contribute/support/recommend a workshop. **All SPC members are encouraged to touch base with Elizabeth to find a match for your interests.** Based on the evaluations, organizers are looking at women, youth and survivors; there is room for more topics. Perhaps we can target areas in the state plan to avoid “preaching to the choir.”
- **Communications** –
  - Thank you to wonderful committee, particularly Catrina who wrote a grant to Humanities Council to screen a couple of movies in two communities (Derry and Portsmouth) with a discussion led by a Humanist who deals with faith-based arts

among other things. *Ordinary People* and *Sensations of Sight* are the selected movies. The latter movie was produced by NH survivors who will be working with communications group.

- Thank you letters are going to the media very regularly these days, thanking reporters for well-done articles. Rhonda would like to know how we compare to other states – Suicide prevention center, nationally, may be able to do this.
- Becky McEnany/NAMI has been very helpful in getting in touch with media in a timely fashion. Ken Norton has been asked to serve on a national committee to update media guidelines. He will be joining a team of mostly media researchers.
- Catrina put the recognition event in the medical society newsletter and got good feedback.
- Letterhead was distributed. NH Hospital Association was omitted. Some discussion re whether the list should include everyone around the table or what the legislation says. No one can dispute it if we list what's in the statute. But, we have a lot of people at the table who are not legislated (AKA the are lost). **Letterhead will be distributed for further comment.**
- Public Policy – committee is meeting on an irregular date this month (12/17). Participation with this subcommittee is open and input welcome. Both bills that have been introduced require additional details to clearly define intended structure. There is still time to do that and to take suggestions from SPC members.  
HB 1436 requiring a report on participation in National Violent Death Reporting System.  
HB 1384 establishing a Suicide Fatality Review Committee

Representative Wells noted that the suicide survivor support group that he and his son Dan facilitate is outgrowing its space. Recent additions reflect both recent and long-past suicides. Word is clearly getting out.

#### VI. 2010 Schedule

Distributed – **will be emailed again** because there were two changes due to holidays

#### VII. Chairman's Close

Dr MacKay is taping a TV show as part of a mental health council series. Today is supported housing. The host is open to topics, so he'd like to see a suicide prevention episode. Recording at Concord High School.