

**NH SUICIDE PREVENTION COUNCIL**  
**Memo of Understanding**  
**May 2007**

**INTRODUCTION:**

New Hampshire has a long history with suicide prevention efforts starting with a data report showing a significant increase in youth suicide rates particularly firearm-related suicide deaths. This led to a legislative study committee and the formation in 1994 of the Youth Suicide Prevention Assembly (YSPA). YSPA has met on a monthly basis since that time.

New Hampshire has typically had a suicide rate that is slightly above the national average. Twice during the past ten years the rate has dipped below that national average. This includes 2004, the most recent year for which complete data is available. The rate in 2004 was 9.8 (per 100,000) which is below the national average of 10.9.

In 1999 then US Surgeon General issued a report identifying suicide as a major public health problem and one that is preventable. Following that report a national commission was established to identify the best methods of suicide prevention and to develop goals and objectives to promote prevention efforts. As a result, the National Strategy for Suicide Prevention (NSSP) was released in 2001.

**STATE SUICIDE PREVENTION PLAN:**

YSPA examined how to move prevention efforts in NH across the lifespan. A decision was made in 2003 to develop a comprehensive State Suicide Prevention Plan that would be based on the NSSP and would expand NH suicide prevention efforts to all ages. A workgroup was formed, and goals, objectives, and activities emerged into a plan. Department of Health and Human Services Commissioner John Stephen presented the plan to the public in November 2004.

The NH Suicide Prevention Council (SPC) was formed in 2006 to develop leadership, coordinate prevention efforts, and promote accountability and collaboration regarding implementation of the State Suicide Prevention Plan. One of the goals of the SPC was to unite private and public efforts regarding suicide prevention activities.

**MEMORANDUM OF UNDERSTANDING:**

This document is intended to serve as a memorandum of understanding (MOU) to be signed by all participants of the Suicide Prevention Council as a tool to promote agreement and understanding in establishing the composition, role, and function of the Council, as well as to focus the efforts of the council membership on implementing the State Suicide Prevention Plan.

**SUICIDE PREVENTION COUNCIL:**

The Suicide Prevention Council (SPC) is composed of representatives of public and private agencies, citizens and legislators who share a common interest in preventing suicide across the lifespan.

The SPC has two Co-Chairs reflecting the Public/Private partnership. One is appointed by the Commissioner of Health and Human Services. The other is nominated and elected by the participants serving on the SPC.

Based upon suggestions and recommendations of the SPC, the co-chairs will:

- Be responsible for recruiting and appointing members to the council,
- Establish needed committees and recruit co chairs for the committees
- Manage the committee process
- Ensure that Council activities move forward.

The current committee structure of the SPC reflects the goals and objectives of the State Suicide Prevention Plan and includes:

- Education and Training
- Data
- Professional Practice
- Garrett Lee Smith (Advisory Committee to SAMHSA grant)
- Communications
- Public Policy

To the extent possible, committee co-chairs will also reflect a public/private partnership.

The goal of the SPC is to further the implementation of the State Suicide Prevention Plan originally adopted in November of 2004.

The SPC meets on a quarterly basis, or as needed, with meeting dates determined by the co-chairs.

The purpose of the council meetings are to:

- Accomplish the goals and objectives of the State Suicide Prevention Plan
- Improve working relationships between, and among, council members and the systems and agencies they represent.
- Identify and engage key stakeholders whose participation on the SPC is needed to move the State Plan forward
- Identify and promote policy initiatives and/or legislation that can further the implementation of the State Suicide Prevention Plan
- Prioritize implementation efforts related to goals and objectives of the State Suicide Prevention Plan
- Review and update the goals and objectives of the State Suicide Prevention Plan.
- Educate participants and the public about suicide prevention efforts in New Hampshire and elsewhere
- Provide a report to the Governor and Legislature every two years regarding the progress made on implementation of the State Suicide Prevention Plan.
- Identify funding and other resources to promote and sustain suicide prevention efforts in NH.

#### **SUICIDE PREVENTION COUNCIL MEMBERS/PARTICIPANTS:**

There will be two categories of members on the SPC:

- Individuals who are serving as representatives of particular agencies or organizations.
- Individuals who are asked to serve to give voice to a particular key stakeholder group such as suicide survivors, older adults etc.

Both categories will have equal privileges and responsibilities as members of the SPC.

The signature of each SPC council member below indicates that they are the duly appointed person to represent their agency, organization or constituency group on the suicide prevention council. By signing, each member agrees to:

- Act as liaison between the Council and their organization/stakeholder group including informing organization leadership of work of the Council
- Work collaboratively toward the implementation of the goals and objectives of the State Suicide Prevention Plan.
- Be an active participant in the Suicide Prevention Council by:
  - Attending meetings
  - Serving on a Sub Committee
  - Advocating for resources for suicide prevention
  - Promoting State Plan activities, and
  - Collaborating with efforts related to implementation of the State Suicide Prevention Plan