

Suicide Prevention OBHP Activities



DBHDD

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AUGUST 1-3, 2016**

Agenda

DATA ON SUICIDE & SCHOOL-AGE CHILDREN

**POLICY 01-118: SUICIDE PREVENTION,
SCREENING, BRIEF INTERVENTION, AND
MONITORING**

HB 198

**GARRETT LEE SMITH (GLS) YOUTH SUICIDE
PREVENTION GRANT**

RESOURCES

Suicide & School-Age Children

**EPIDEMIOLOGICAL DATA:
GEORGIA AND NATIONALLY**

Georgia Epidemiological Data

- **Between 2012-2014,**
 - 3,593 people died by suicide in Georgia
 - 101 youths ages 5-17 died by suicide in Georgia
 - ❖ 32 deaths in 2012
 - ❖ 39 deaths in 2013
 - ❖ 30 deaths in 2014
 - Youth ages 5-17 who died by suicide in Georgia were
 - ❖ 77% male
 - ❖ 72% white
 - ❖ 23% black or African American
 - ❖ 5% Hispanic/Latino
 - ❖ 4% Asian and multi-racial

(Source: Georgia Online Analytical Statistical Information System OASIS)

Georgia Youth Grades 6-12, 2015-2016

(Source: Georgia Student Health Survey II)

- Anonymous, self-reported responses from youth collected annually
 - 57,677 students reported seriously considering attempting suicide during the past 12 months, representing **8.7%** of all students who responded
 - 27,014 students reported attempting suicide at least once in the past 12 months, representing **4.1%** of all students who responded
 - ❖ 4,731 students reported attempting suicide more than 5 times in the past 12 months, representing **0.7%** of all students who responded
 - 146,889 students reported that they disagreed with the statement “I know an adult at school that I can talk with if I need help,” representing **22.1%** of all students who responded

Georgia Youth Grades 6-12, 2013-2016

(Source: Georgia Student Health Survey II)

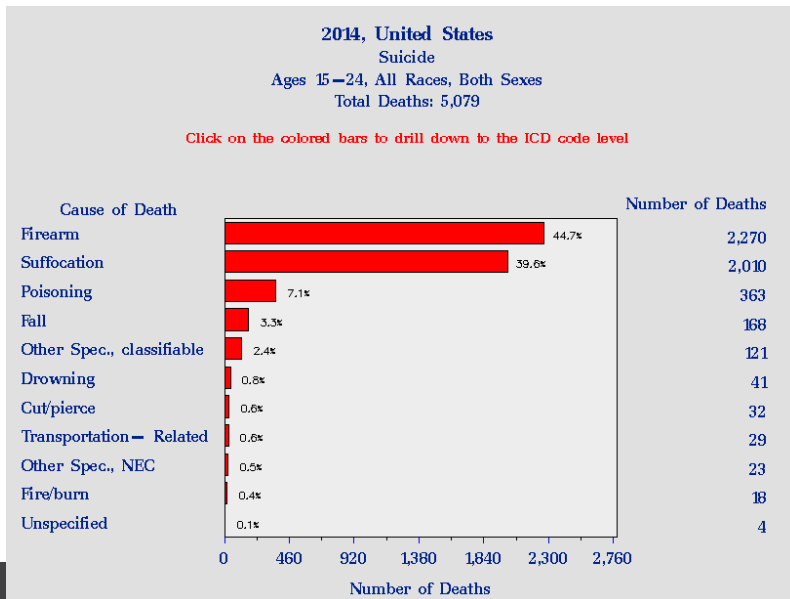
Measures	2013-2014		2014-2015		2015-2016	
	#	%	#	%	#	%
Seriously considered attempting suicide during past 12 months	54,859	9.3%	58,372	9.3%	57,677	8.7%
Attempting suicide at least once in past 12 months	31,346	5.3%	27,985	4.4%	27,014	4.1%
Attempting suicide more than 5 times in past 12 months	--	--	4,905	0.8%	4,731	0.7%
Disagreed with statement "I know an adult at school that I can talk with if I need help"	152,820	26.0%	149,597	23.8%	146,889	22.1%

Means: Firearms

- In 2014, suicide was the 2nd leading cause of death for 10-14, 15-24, and 25-34 year olds nationally

(Source: CDC vital statistics

http://www.cdc.gov/injury/wisqars/leading_causes_death.html)



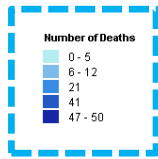
- Between 2011-2013,
 - 39.2% of youth aged 5-17 who died by suicide nationally used firearms
 - 50.3% of youth aged 5-17 who died by suicide in Georgia used firearms

(Source: CDC National Violent Death Reporting System)

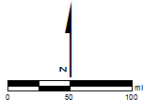
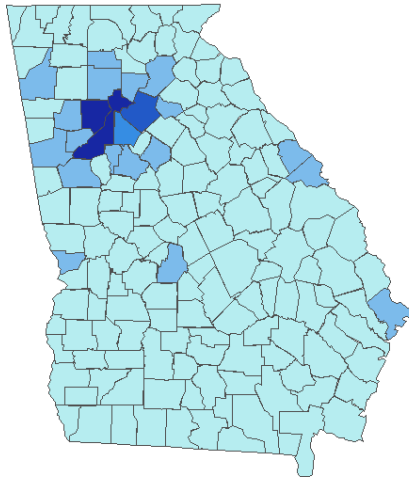
Suicide Deaths and Death Rates, 2005-2014

(Source: Georgia Online Analytical Statistical Information System OASIS)

Number of Deaths by County of Residence, Suicide, 5-19 Years of Age, 2005-2014



Legend
— County

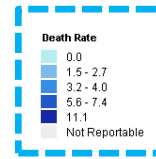


Georgia Department of Public Health
Office of Health Indicators for Planning (OHIP)

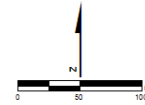
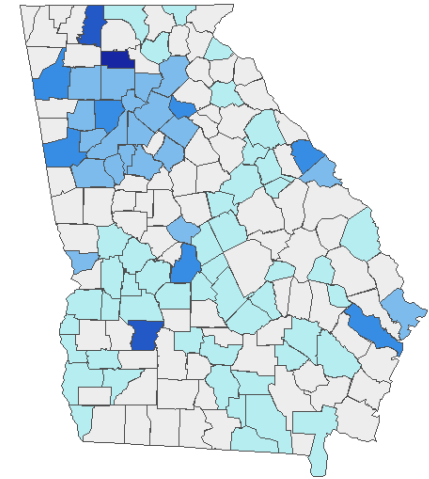
Map Created: 7/26/2016 9:45:17 AM
Data Classification Method: Natural Breaks (Jenks)

Note: This is a color map.

Death Rate by County of Residence, Suicide, 5-19 Years of Age, 2005-2014



Legend
— County



Georgia Department of Public Health
Office of Health Indicators for Planning (OHIP)

Map Created: 7/26/2016 2:24:18 PM
Data Classification Method: Natural Breaks (Jenks)

Note: This is a color map.

Suicide Prevention, Screening, Brief Intervention and Monitoring, 01-118

**DBHDD POLICY FOR ALL TIER 1 AND TIER 2+
BEHAVIORAL HEALTH COMMUNITY PROVIDERS
REGARDING THE USE OF EVIDENCE-BASED
SUICIDE PREVENTION STRATEGIES AND
PRACTICES FOR CONSUMERS IN CARE**

**FULL IMPLEMENTATION DATE
JULY 1, 2016**

Zero Suicide

- A commitment to suicide prevention in health and behavioral health care systems
- Specific set of tools and strategies
- Concept and practice
- Toolkit:
<http://www.zerosuicide.sprc.org>

- LEAD
- TRAIN
- IDENTIFY
- ENGAGE
- TREAT
- TRANSITION
- IMPROVE

Suicide Prevention Planning Strategy

- Use of approved suicide screening tools
- Screening results and planning
- Assessment
- Monitoring
- Documenting screening, safety plan intervention, and treatment planning
- Care coordination
- Training
- Quality assurance

Policy 01-118 Trainings

- Gatekeeper Trainings

- QPR
- SAFETALK
- Mental Health First Aid

- Assessing and Managing Suicide Risk (AMSR)
- Columbia Suicide Severity Rating Scale (C-SSRS) / Suicide Risk Assessment
- Safety Plan Intervention (SPI)
- Counseling on Access to Lethal Means (CALM)
- Child and Adolescent Needs and Strengths Assessment (CANS)
- Adult Needs and Strengths Assessment (ANSA)

House Bill 198

“Jason Flatt Act – Georgia”

EFFECTIVE DATE

JULY 1, 2015

Suicide Safer Schools

A “SUICIDE SAFER SCHOOL/SCHOOL SYSTEM” IS ONE THAT HAS DEMONSTRATED A COMMITMENT TO SUICIDE PREVENTION, INTERVENTION, AND POSTVENTION BY PROVIDING A VARIETY OF EDUCATION AND SUPPORT TO ALL THE MEMBERS OF THE SCHOOL COMMUNITY.

HB 198: Implementing Suicide Safer Schools

- Requires annual suicide prevention training for all certificated personnel
- Requires that all training have a component that shares how to access behavioral health treatment
- Requires each school district to have a Suicide Prevention Policy that includes prevention, intervention and postvention
- Requires a state committee of the Department of Education
- Each school district is responsible for developing their own policy, protocols, training, and action planning

Garrett Lee Smith (GLS) Youth Suicide Prevention Grant

**SUBSTANCE ABUSE AND MENTAL HEALTH
SERVICES ADMINISTRATION (SAMHSA) 5-YEAR
GRANT SUPPORTING SUICIDE PREVENTION
WORK WITH YOUTH AGES 10-24 IN CAMPUS,
STATE, OR TRIBAL COMMUNITIES**

**COHORT X:
SEPTEMBER 1, 2015 –
SEPTEMBER 29, 2020**

GLS Goals

- Develop, implement, and monitor effective programs that promote wellness and prevent suicide related behaviors
- Provide training to 3,500 community and clinical service providers on prevention of suicide and related behaviors
- Promote Suicide Prevention as a core component of health related behaviors
- Promote and implement effective clinical and professional practices for assessing and treating 1,500 youth identified as being at risk for suicidal behaviors
- Provide care and support to individuals affected by suicide deaths and attempts to promote healing and implement community strategies to help prevent further suicides

GLS Outcomes

- Decrease number of suicide deaths among youth ages 10-24
- Decrease rate of suicide deaths among youth ages 10-24
- Decrease number of non-fatal suicide attempts among youth ages 10-24
- Decrease rate of non-fatal suicide attempts among youth ages 10-24

Other Suicide Prevention Activities

- **SURVEILLANCE**
- **COMMUNITY COALITION BUILDING**
- **COMMUNITY AND PROFESSIONAL TRAININGS**
- **CONSULTATION TO GEORGIA PUBLIC SERVICES**

Suicide Prevention Resources

THE SUICIDE PREVENTION RESOURCE CENTER
[HTTP://SPRC.ORG](http://SPRC.ORG)

GEORGIA CRISIS & ACCESS LINE 1-800-715-4225
[HTTP://MYGCAL.COM](http://MYGCAL.COM)

NATIONAL SUICIDE PREVENTION LIFELINE 1-800-273-TALK
[HTTP://WWW.SUICIDEPREVENTIONLIFELINE.ORG](http://WWW.SUICIDEPREVENTIONLIFELINE.ORG)

**GEORGIA SUICIDE PREVENTION INFORMATION NETWORK
(GSPIN)**
[HTTP://WWW.GSPIN.ORG](http://WWW.GSPIN.ORG)

ACTION ALLIANCE FOR SUICIDE PREVENTION
[HTTP://WWW.ACTIONALLIANCEFORSUICIDEPREVENTION.ORG](http://WWW.ACTIONALLIANCEFORSUICIDEPREVENTION.ORG)

Upcoming Suicide Prevention Events

**SEPTEMBER:
SUICIDE PREVENTION AWARENESS MONTH**

**SEPTEMBER 19-20:
GEORGIA COLLEGE & UNIVERSITY SUICIDE
PREVENTION CONFERENCE
“TOWARD ZERO SUICIDE”**

**SIGN UP FOR MONTHLY UPDATES ON
UPCOMING EVENTS ON GSPIN.ORG!**

Questions?