

Community Partnerships for Suicide Prevention Meeting Minutes

Wednesday October 9, 2024 | 2:00pm-4:00pm | Otter Tail County Government Services Center + Microsoft Teams Meeting

Introductions:

In attendance: Abby Drouillard, Joanna Chua, Sarah Kemp Tabbut, Eric Schwirian, Allen Westby, Dale Hexum, Amber Branca, Shiela Piipo, Rob Emerson, Emily Frustol, Jean Hoskins, Mandi Scheel

Updates

- 3 committees have been formed: Communication, Education, and Postvention.
- KSS Student Survey: Met with a group of students at KSS to gain feedback on our three priority areas.
- Mental Health/Suicide Prevention events in September: KSS Swim Team Chuck a Duck Fundraiser, KSS Mental Health Soccer Game and Ribbons, KSS Community Mental Health Event, Dandelion Day, and Trinity Lutheran Church Suicide Prevention Event.
 - Presentation at Trinity notes:
 - About 60 people in attendance
 - Lessons learned: meet outside of the church building – in a school or local community center to get more attendees and make more people comfortable; keep it to just an hour (30-40 minute presentation; 20-30 minute Q&A/panel discussion).
- Presentations in September and early October: THRIVE presentations at Excel Plastics, First Lutheran Church in Parkers Prairie, and for Human Services of OTC; CredibleMind presentation in NY Mills.
- Abby sent a farm response education class – included in a separate attachment

Upcoming Events

- Amberley Snyder Presentation all this week throughout the county. Our group will be represented at tonight's presentation.
- THRIVE presentation for Early Education.
- Parent QPR training done by Aaron on Oct 24th
- Requests for training opportunities: YoungLife (for staff and volunteers) and KSS (for students).

LRHC Update

Engagement

- MDH Zero *Suicide* Learning Cohort
 - 7 facilities across state are participating
 - Started January 2024 and will span for 2 years
- Ottertail County Suicide Prevention Coalition

- Grant County Substance Use and Suicide Prevention for youth 10-24 years old
- LRHC Suicide Prevention Workgroup
 - Behavioral Health APP, HR, Quality/Safety, Social Work, Case Management, ED, Clinic Peds Nurse
 - Discuss and evaluate internal systems, processes, policies, practice, process improvement
- Promote resources with employees and medical staff



- Overview of the Seven Elements
 - Changing the Narrative
 - Addressing Equity
 - Reducing Access to Lethal Means
 - Ongoing Training Opportunities
 - Suicide Prevention Tool & Resources

Actions

- Reviewed and revised Suicide Assessment and Precautions Policy & Procedure to align with EHR functionality
 - Columbia Screening Tool, Suicide Risk Level and Intervention
 - Hospital Inpatient, Outpatient, Emergency Department
 - Education to staff regarding policy & procedure updates
 - Data collection on suicide screening utilization in the FF ED
- Clinic Tools Utilized
 - PHQ-9 (well child, sport physical, annual wellness visits)
 - GAD-7 (utilized in our behavioral health clinic along with the PHQ-9 for every visit)
- Providers
 - Recruitment for mental health providers – NP in Elbow Lake and Morris
 - Current Providers
 - 2 Psychiatrists
 - 2 Nurse Practitioners
 - 1 LICSW at CCRC
 - 1 Pediatric MD (focus on behavioral health in person and virtual visits)
- Elbow Lake Campus – collaboration with Senior Life Solutions to support Medicare patients

SUICIDE RISKS WITH INTERVENTIONS

Suicide Risk Level	Low and Moderate Risk	High Risk
Interventions	<ul style="list-style-type: none"> • Conduct an initial environmental risk assessment • If able, remove any items in the room which present a self-harm risk • Remove any patient belongings which present a self-harm risk • Perform frequent, staggered visual observations at least every hour • Keep the door/curtain open at all times when staff is not present in the room • Escort the patient to the bathroom, waiting outside of door • 1:1 patient monitoring if Emergency Hold is put in place or per provider order 	<ul style="list-style-type: none"> • Conduct an initial environmental risk assessment • If able, remove any items in the room which present a self-harm risk • Change patient into hospital-issued scrubs, as able • Remove all patient belongings, except cell phone • 1:1 patient monitoring at all times by LRH personnel • Visitors are to check in with staff – no visitor belongings allowed in patient room • Escort the patient to the bathroom, keeping them in direct line of sight • Escort the patient if needing to leave the unit (ex. Radiology exam)
<p>If low or moderate risk level and the situation warrants, 1:1 patient monitoring may be done by a responsible family member or support person once they have been given the family monitoring fact sheet.</p>		

Committee Overview and Updates

Each committee will oversee the action and evaluation planning process

Committee One: Communication Committee - Emily Frustol, Melissa Dahl, Beth Rader

- **Objective One:** Establish formal partnerships with at least three local community groups, taskforces, organizations, and/or businesses to enhance collaboration on coalition efforts and initiatives by June 30th, 2025.
 - Create a speaking template that can be followed by all coalition members when sharing coalition work with others.
 - Create a one-pager of resources that can be provided to various organizations.
- **Objective Two:** Provide weekly, monthly, and quarterly updates to community members on suicide prevention initiatives through a variety of media efforts.
 - Create a template for media efforts to go out. These media efforts may be shared by other coalition members.
- **Objective Three:** Attend at least four community-led events to represent the coalition and to engage members of the public in discussions and activities related to suicide prevention and mental wellbeing by June 30th, 2025.
 - Create a template of upcoming community events that the coalition can participate in.
 - Decide on coalition “swag” to create (i.e. t-shirts, stickers, etc).

Committee Two: Education Committee - Josie Ahlers, Sarah Kemp Tabbut, Sheila Piippo, Robb Emerson

- **Objective One:** Provide at least one in-person and two virtual suicide prevention trainings for the Otter Tail County community by June 30th, 2025.
 - Create a template of when these trainings will be offered.
 - Find local events, partners, and support groups to work with and to host these trainings.
- **Objective Two:** Provide at least two lethal means talks to local providers and distribute safety equipment to community members through tabling events to promote safe storage and handling of potentially lethal items by June 30th, 2025.
 - Partner with at least two of the local providers to put on lethal means talks to their staff.
 - Find local tabling events to distribute safety equipment.
- **Objective Three:** Provide at least two presentations on mental health and suicide prevention to engage and educate the community by June 30th, 2025.
 - Create a template and timeline for presentations.
 - Find local community events and partner with these events to put on the presentations.

Committee Three: Postvention Committee - Jess Steinbrenner, Anne Lafrinier-Ritchie, Lorrie Carlson

- **Objective One:** Reach out to at least five national or statewide organizations to get evidence-based postvention resources.
 - Pick at least 5 national and/or statewide organizations to review and reach out to regarding their postvention-specific resources.
 - Review the list of resources provided by these organizations.
 - Compile a list of the top evidence-based resources provided by these organizations.
- **Objective Two:** Communicate and coordinate with local groups and individuals that provide technical assistance to communities that experience suicide loss.
 - Reach out to local organizations and people who work specifically in postvention.
 - Gather a list of local resources, support groups, and technical assistance.
- **Objective Three:** Provide support resource packets with information on local and virtual support groups and training opportunities for first responders who handle suicide losses in our community.
 - Reach out to EMS and other first responders to gather information on the support they receive.
 - Vet the support and resources they are provided and do a gap analysis.
 - Create a list of other support and resource options that can be provided to these first responders.

**Packets should be made available in different languages*

**American Foundation for Suicide Prevention may have a template*

**Reach out to LCSC about their crisis response and what they already do*

KSS Student Survey Review

Communication

1. What are some of the best ways to interact with students, specifically to talk about mental health?
 - a. Wellness room in the school is a good start.
 - b. Rather than a table with handouts or pamphlets, have a self-led activity for students to stop by and do as they can (example: at the mental health soccer game, there was a “create a ribbon” table for students that went over well).
 - c. Preferably not in the classrooms (NOT mandatory)
 - d. Preferably not events that include both students and parents, as parents response to mental health topics can affect a student’s ability to enjoy the topic
 - e. Other options:
 - i. Parent education night – something just for the parents
 - ii. Inviting or bringing together all Otter Tail County schools for an event (they’ve heard from students at other schools that mental health is NOT talked about).
 - f. **In the midst of talking about mental health (specifically anxiety or depression), it seems that the school and community have lost sight of other aspects of mental health like eating disorders and bullying.
2. Is there a good way to engage students via social media or other media efforts?
 - a. Instagram pages and posts would be the most viewed (utilize school social media to engage students).
 - b. Some students aren’t allowed on social media – so going through students emails (google classroom).
3. Would there be any interest in having presentations put on at school?
 - a. Presentations can be good, but to make it better:
 - i. Could make it optional (for example: students get a description of the speaker and the topic to see if it would be applicable or relatable to them before making them attend the presentation).
 - ii. Could get more club-specific speakers to talk with smaller groups (for example: someone to talk to the volleyball team at the beginning or end of a practice; some else to talk with the theatre club, etc)
 - b. More interactive! Listening to another presentation can be long and boring, so making it more interactive or for smaller groups (like the last point) could make it easier to follow.

Education

1. Would students enjoy and benefit from suicide prevention trainings?
 - a. Yes: suicide prevention trainings for peer-to-peer intervention could be really helpful. These trainings would include how to talk with a friend about mental health, their struggles, and what to do to help.

- i. Include 988 training (or have the trainer call 988 and show the students how it works to lessen their “fear” of calling).
 - ii. Not JUST provide the standard response of “tell an adult”. Even if that is the answer, providing some clarification on how to do that without the kids feeling like they are getting punished for venting.
 - b. Provide trainings for parents too! Many parents are either very dismissive of mental health issues OR they over-react.
- 2. What would be the ideal “set up” for this? (Meaning: would it be best for the trainings to be during school hours or after school, mandatory or optional, etc).
 - a. During school hours BUT make it optional (some students won’t benefit from it because they don’t want to do it, so they go in already thinking it doesn’t apply to them).
 - i. Otter time (even if it’s over a few days)
 - ii. Blocking off a longer period of time so students don’t have to make up a class (many won’t do it if they have to make up a class or extra work); students that choose to not participate can have a study hall

Postvention

- 1. What do students need from the school and community after experiencing a loss?
 - a. Students need to have time to heal and need patience from the teachers and staff.
 - i. Many teachers went straight back into giving homework/tests as if nothing happened.
 - ii. Losing a student to suicide, whether or not you were close to them, is traumatic, and should be addressed by the teachers.
 - b. Teachers should understand the perspective that students may not just be sad because it happened but could be thinking “wow, that could have been me” because they may be struggling with the same thing.

Break

Action Plan Activity

Communication Goals

- 1. Create a list of potential community partners to meet with. *As you review this list, please think about your own connections and if you’d be able to reach out to any on this list.*
 - a. YoungLife
 - b. Pelican Rapids Youths
 - c. Boys and Girls Club (Perham, and coming to FF)
 - d. Otter Tail Power
 - e. Lund
 - f. West Central Turkey
 - g. LRHC
 - h. Youth Pastors/Pastor Meetings

- i. Zion Luther Church – November 7th from 9-10 am
- i. Schools – specifically coaches and club leaders
- j. YMCA
- k. PACC
- l. 4-H
- m. Fire Department
- n. Bowling Alley
- o. RDO
- p. Titan
- q. Seed Companies – CHS
- r. Farm Financial Companies
- s. Any Bank/Financial Institutions
- t. Farmer Co-Ops
- u. Minnesota Farm Bureau
- v. VFW and American Legions
- w. Bars
- x. Someplace Safe
- y. Food shelf
- z. United Way
- aa. Salvation Army

Communication and Education Goals

2. Start a list of known community events (at least general months they occur and where).
 - a. Any summer festival or fair (OTC East and West, Friendship Festival, Pelican Days, etc – all in the summer typically June or July).
 - b. Ronald McDonald Ride – New York Mills
 - c. Dough for Joe Ride – Fergus Falls, end of July
 - d. Blessing of the Seeds – Pelican Rapids, end of March
 - e. Back to School – OTC schools, August
 - f. M State Back to School – Fergus Falls, mid-August
 - g. Turkey Days
 - h. Runs/Triathlons
 - i. LRHC (run and triathlon)
 - i. Rally/Kickoff Sundays for Churches – September
 - j. Annual meetings of large companies
 - i. Lake Region in Pelican Rapids
 - ii. LRHC
 - iii. Park Region Telephone
 - iv. OTP (?)
 - k. School events, like homecoming
 - l. Speedway (Wissota100)
 - m. Food Shelf Month
 - n. HITs
 - o. Golf events

- p. Dalton's threshers – Dalton, weekend after labor day
- 3. Start a list of potential "swag" that the group could make
 - a. Silicone bracelets
 - b. Water bottles
 - c. Squishy
 - d. Crossbody/fanny pack
 - e. T-shirts
 - f. Stickers (nice ones for water bottles)
 - g. Color changing pencils
 - h. Color changing cups (partner with local breweries)
 - i. Coffee sleeves (paper ones could be provided to local coffee shops)
 - j. Magnets
 - k. Chip clips
 - l. Pens
 - m. Lanyards
 - n. Sensory items
 - o. Fake tattoos

*Check with SAMHSA website before picking. We can order what they offer and then pick things to make based on what they don't offer.

Postvention Goals

- 4. Create a list of national, statewide, and local organizations that may provide evidence-based postvention resources or technical support.
 - a. NAMI
 - b. MDH
 - c. VA (Specific for vets)
 - d. American Foundation for Suicide Prevention
 - e. TAPS
 - f. Aaron/Regional Suicide Prevention Coordinators
 - g. Funeral homes (for grief support)
 - h. United Way
 - i. Suicide Prevention Resource Center
 - j. HOPE Coalitions (and ask MDH about other coalitions).
- 5. Create a list of first responders to reach out to regarding the support and resources they are provided to cope with their job.
 - a. EMS
 - b. Law Enforcement
 - c. School Admin
 - d. Faith Leaders
 - e. Emergency Department
 - f. Funeral Homes
 - g. Fire Departments (especially thinking of volunteers who don't have built in support like employees do)