



beacon
health options

**WE NEED
TO
TALK
ABOUT
SUICIDE**

February 2017

Agenda

- Brief introduction to our speakers
 - Emma Stanton, MD
 - Clarence Jordan
 - Erick Messias, MD
 - Lynne Bakalyan, LPC
- Today's objectives
- A personal story
- Epidemiology
- Beacon's Zero Suicide story in Colorado
- The Zero Suicide framework
- Next steps

Today's objectives

Suicidal behavior disorder is a treatable condition in its own right

- Shift the mindset that suicide is the consequence of another co-occurring mental health condition
- Explore the Zero Suicide framework
- Know where to start in applying the Zero Suicide framework

I feel that suicide is the 'dirty little secret' of behavioral health and that we don't like to talk about it or focus on it. This is a mistake.

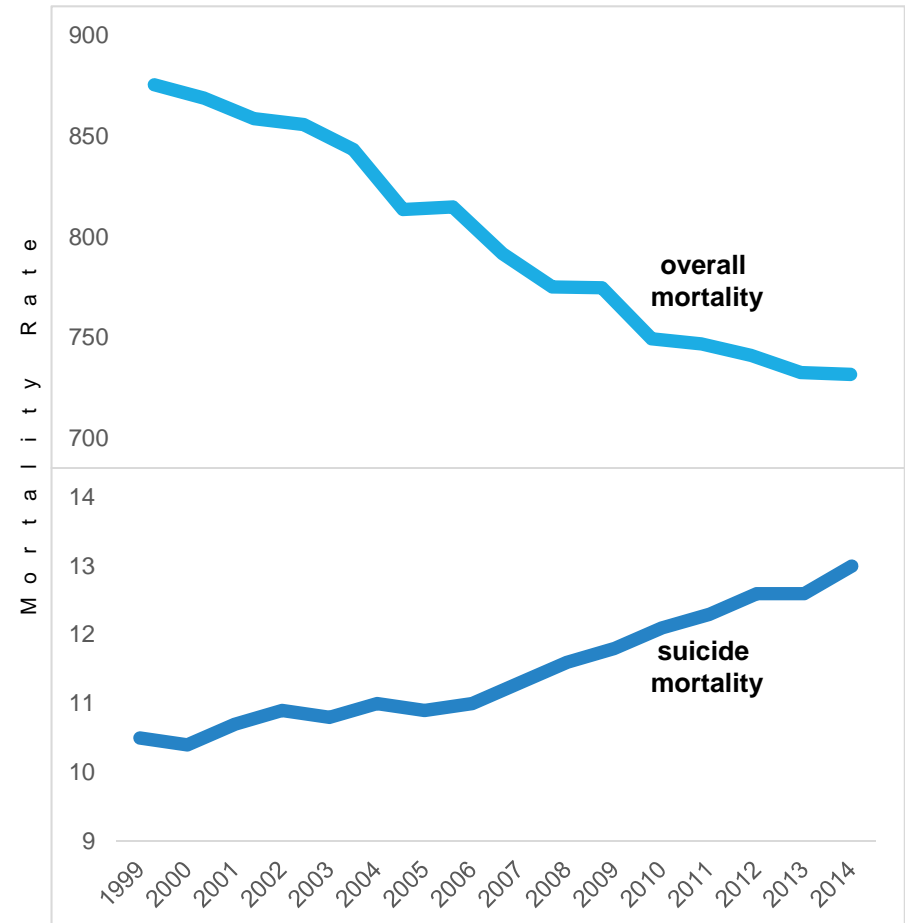
– Surveyed Beacon employee

A personal story



Epidemiology

- Suicide is the **10th leading cause of death** in the United States
- US suicide rate (13.4/100,000) is **above the world average** (11.4/100,000)
- **Age:** Suicide affects peoples of all ages, but it is rarely seen under 5
- **Gender:** Females attempt suicide more frequently than males, but males die by suicide at higher rates
- **Almost half** (45%) of people who die from suicide **visited their PCP in the month prior**, but only a fifth (19%) visited mental health services



Data Source: Centers for Disease Control and Prevention

Suicide rates have increased by 24% from 1999 to 2014 compared to a decline in overall mortality for that same time period








Turning tragedy into action - Beacon Colorado

- In 2016, four teens died by suicide in a two-week period at a local high school in Colorado Springs
- Personally affected by these tragedies, four Beacon employees chose to attend the Zero Suicide Academy to learn best practices around suicidal behavior disorder
- Within three months, the Colorado office formed a Zero Suicide Implementation Strategy
 - Included IT, Quality, Administrative and Clinical departments










The power of Zero in Beacon's Colorado office

Team action items

-  1. Created a weekly discharge report per mental health center with member information, suicide rating scale at time of admit, and member contact information as well as a quarterly meeting with MHCs
-  2. Hosted a staff/community kick-off event to explain ZS principles
-  3. Implemented Lunch-and-Learns to train staff on what to do if someone answers YES to questions about feeling suicidal
-  4. Taught Mental Health First Aid to community and internal staff members
-  5. Developed a standardized screening tool
-  6. Created a Zero Suicide Office365 shared workspace
-  7. Circulated weekly research articles to internal staff members








The seven pillars of the Zero Suicide framework

Element	Description
Lead 	Create a leadership-driven, safety-oriented culture committed to reducing suicide <ul style="list-style-type: none"> • Assess organizational capacity • Improve access to care through follow-up • Promote a climate of continuous improvement
Train 	Develop a competent and caring workforce <ul style="list-style-type: none"> • Promote 100% completion of annual training on suicide • Change the conversation about suicide from the negative to positive stories of survival
Identify 	Systematically identify and assess suicide risk among people receiving care <ul style="list-style-type: none"> • Develop policies around the assessment of suicidal risk • Provide tools for assessment and screening (PHQ-9, C-SSRS) • Improve coding for suicidal behavior disorder
Engage 	Ensure every individual has a pathway to care that is both timely and adequate <ul style="list-style-type: none"> • Promote safety and wellness planning • Improve access to 24/7 crisis services • Restrict access to lethal means
Treat 	Use evidence-based treatments that directly target suicidal thoughts and behaviors <ul style="list-style-type: none"> • Identify those providers who excel in treating suicidal behavior disorder • Promote evidence-based clinical practices • Encourage use of CAMS and leading interventions such as as DBT and CBT-SP
Transition 	Provide continuous contact and support, especially after acute care <ul style="list-style-type: none"> • Promote the continuity of care through technology and integration of BH and physical health care • Support transitions through non-demand caring contacts; unscheduled same-day access etc.
Improve 	Apply a data-driven quality improvement approach to inform system changes <ul style="list-style-type: none"> • Establish protocols to collect and review suicide-related data for a PDSA cycle • Conduct ongoing surveillance throughout care continuum; reassess aftercare requirements








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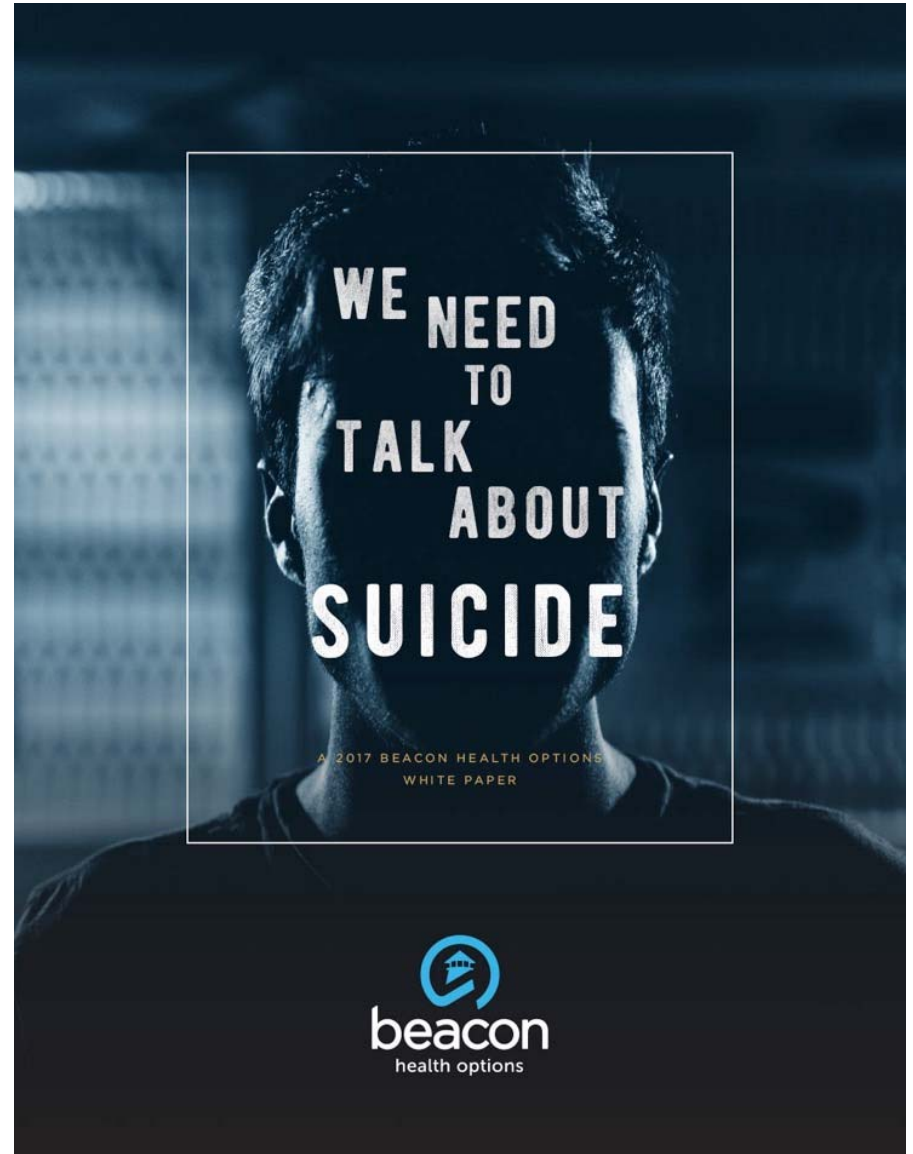
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Next steps

- Encourage leadership to get on board with a Zero Suicide campaign
- Promote a culture of proactively identifying and treating suicide
- Focus training efforts on how to identify at-risk patients, such as role-playing in asking about suicidal thoughts
- Use the C-SSRS and PHQ-9 across the care continuum and not just in inpatient psychiatric care
- Establish protocols to collect and review suicide-related data
- To promote continuity of care, reassess your post-discharge aftercare requirements
- Use non-demand caring contacts during transitions of care



Other resources

- Download Beacon's white paper at <http://beaconlens.com/white-papers/>
- Zero Suicide Website: <http://zerosuicide.sprc.org/>
- Suicide Prevention Resource Center: <http://www.sprc.org/>
- National Action Alliance for Suicide Prevention:
<http://actionallianceforsuicideprevention.org/>
- SAMHSA Website: <http://www.samhsa.gov/tribal-ttac/resources/suicide-prevention>
- *CALM: Counseling on Access to Lethal Means: Suicide Prevention Resource Center website:* <http://www.sprc.org/resources-programs/calm-counseling-access-lethal-means>
- National Suicide Prevention Lifeline: <https://suicidepreventionlifeline.org/>
- Mental Health Awareness: Suicide or Survive
<http://www.suicideorsurvive.ie/?gclid=CNqK0pLqhdICFcmIswod6MoO6g>

For more information, contact Dale Seamans at
dale.seamans@beaconhealthoptions.com

Thank you

