## Zero Suicide Team Leaders



Beaver County 7/31/2020

## Welcome!!!! ©

- ► Today's meeting
  - A reminder of how this works
- ►Sign-in
- ► Chat box

#### Attendee Report 5/15/2020 Topic Zero Suicide Committee Meeting Boeringer Stephanie Santoro Majors Scott Marcelle McGinnis Flick White Elizabeth Pelesky Abby Opal stocum Tony Rivera Nardone Hughes Jonathan Coakley Daniel McClure Neff McClure Neff Daniel Kaminski Heather Putkoski Jesse Hodovanich Masciantonio prince heather prince Stephanie Hobel Dominic Maloney Palmieri Bonnie Eckley Matt Tomayko Jessica Weller Courtney Dawson-Rainey Barbara Rachel Skal Kneppe Tellish

#### 5.15.2020 PowerPoint

Please use this PowerPoint as minutes from the last meeting.

## Today's Agenda

People Served
Children
Transition Aged
Adults
Clider Adult

- Minutes
- ► Impact of COVID 19
- Partner Updates
- Minority Mental Health Awareness Month
- ▶ Trainings
- September 10, 2020, World Suicide Prevention Day
- ▶ Next Meeting

## Impact of COVID 19

- National Health Council, Mental Health America has been monitoring the mental health impacts of COVID 19
- ► They collected data through the use of screening programs and interviews to uncover broad patterns of anxiety and depression in the wake of the COVID-19 pandemic

#### What did they find?

- Since the beginning of the worry about COVID-19 in mid-to-late February, there have been at least 88,405 additional positive depression and anxiety screening results over what had been expected (using November 2019-January 2020 average as a baseline).
- From February to May:
  - ▶ There have been 54,093 additional moderate to severe depression screening results
  - ► There have been more than 34,312 additional moderate to severe anxiety screening results
- The per day number of anxiety screenings completed in May was 370% higher than in January
- ► The per day number of depression screens was 394% higher in May than in January.
- ► These impacts on mental health are more pronounced in young people: (<25) roughly 9 in 10 are screening with moderate-to-severe depression, and 8 in 10 are screening with moderate-to-severe anxiety.

## Impact of COVID 19

- Loneliness and isolation" is cited as the greatest contributing factor of moderate to severe depression (73%) and anxiety (62%) "right now."
  - ► These percentages have been steady since mid-April.
- In May 2020, 21,165 depression screeners reported thinking of suicide or self-harm on more than half of days to nearly every day, with 11,894 reporting these thoughts nearly every day.
- Special populations are also experiencing high anxiety and depression, including LGBTQ, caregivers, students, veterans/active duty, and people with chronic health conditions.
- This isn't just affecting people with anxiety and depression, but other mental health conditions, too. Among psychosis screeners in May, more than 16,000 were at risk, and the percentage at risk (73%) also increased.

#### Check out the full survey report:

COVID-19 and Mental Health: What We Are Learning from www.mhascreening.org

https://mhanational.org/sites/default/files/Coronavirus%20Mental%20Health%20Presentation%206-1-2020.pdf

To take a free mental health screen: <a href="https://screening.mhanational.org">https://screening.mhanational.org</a>

### **COVID-19 and LGBTQ Youth**

IMPLICATIONS OF COVID-19 FOR LGBTQ YOUTH MENTAL HEALTH AND SUICIDE PREVENTION

- COVID-19 has serious implications for the mental health of LGBTQ youth.
- ► Even prior to the pandemic, LGBTQ youth have been found to be at significant increased risk for depression, anxiety, substance use, and suicidality (Russell & Fish, 2016).
- These risks are even more pronounced among youth who are transgender and/or nonbinary (Price-Feeney, Green, Dorison, 2020). Thus, LGBTQ youth may be particularly vulnerable to negative mental health impacts associated with the COVID-19 pandemic.
- For LGBTQ youth, physical distancing may have additional unintended negative consequences related to being confined to an environment that may be unsupportive or abusive.
- https://www.thetrevorproject.org/2020/04/03/implications-of-covid-19-for-lgbtq-youth-mental-health-and-suicide-prevention/?utm\_source=Weekly+Spark+7%2F17%2F20&utm\_campaign=Weekly+Spark+July+17%2C+2020&utm\_medium=email



#### Natural Disasters and Suicide

Researchers have known that natural disasters have profound effects on mental health. Most people exposed to a natural disaster will have psychological distress and develop mental health disorders. With most of the country under a stay-at-home order, measures taken to reduce sickness like "social distancing" can exacerbate preexisting mental and physical health problems. Suicidal thoughts have been associated with social isolation and ioneliness. There are concerns about increased use of alcohol and abuse among trapped families. The disruption in the medical system may prevent people with chronic mental health conditions from getting the therapy or medications they need. The likelihood of adverse mental health outcomes is augmented in the setting of economic stress. Unemployment alone is likely responsible for thousands of suicides each year. Secondary outcomes of a global pandemic such as economic stress and decreased access to mental health treatment risk colliding with a rising suicide rate to further accelerate the epidemic.

It seems like a perfect storm with many risk factors, including even more access to firearms. Since February 2020, gun sales in the country have risen. In March 2020, more than 2.5 million firearms were sold. During normal periods in our country, increased gun ownership is associated with a heightened risk for firearm-related suicide. The firearm-related suicide crisis was mounting well before this widespread liness. From 2006 to 2018, firearm-related suicide rates increased by more than 25%, and in 2018 alone, there were 23,854 firearm-related suicides in the United States. We need to act now with both population and individual approaches needed to reduce the risk for suicide in the coming months. Programs focusing on economic relief could influence suicide rates. However, perhaps most important is limiting access to firearms, the most lethal means of self-harm to those most at risk.

#### Resources

- https://annais.org/alm/fullarticle/2765237/coronavirus-disease-2019-covid-19-firearms-united-statesepidemic-suicide
- https://www.medpagetoday.com/infectiousdisease/covid19/85916

Beacon Health Options ValueAdded Newsletter July 2020

## What impact are we seeing locally?

- Increased symptoms of anxiety
- Increased symptoms of depression
  - Social isolation
- People who were stable in their recovery are accessing higher levels of care (i.e. inpatient behavioral health treatment)
  - Individuals are being readmitted to inpatient care within 30 days at higher rates
- Increase in substance relapse for consumers
  - ► Individuals in both early stage and late stages of recovery
  - Individuals attributed this to the decrease in support from both the providers, AA/NA and the availability of natural and community supports, such as the drop in center
- Increased difficulty collaborating with partner agencies
  - "Working in silos"

## What impact are we seeing locally?

- Decrease in referrals for services and supports (i.e. case management, D&A case management)
  - ► Individual choice
  - Break down in process due to COVID
- Increased paranoia due to isolation and lack of community resources
- Inability for us to go into the EDs to divert hospitalizations

#### Impact on Service Delivery

- Need to shift the clinical focus to self-care and utilizing support systems during this time.
  - More wellness planning and personal medicine.
- Need for increased appointment frequency
- Decreased productivity
- Less linkages to services/supports due to modifications in programs as a result of the pandemic

## What can we do????

- Educate the community about available resources
  - Mental Health Resources
  - ► Housing, financial, unemployment, etc..
  - Virtual Meetings Spaces
- Encourage social contact
  - Phone
  - On-line
- Promote wellness activities
  - Routine
  - ► Healthy diet
  - Sleep
  - Reducing screen time
  - ► Limit media coverage
- Advise about the harmful affects of alcohol and drug use

## **COVID Resources**

- https://www.cdc.gov/coronavirus/2019-ncov/daily-lifecoping/managing-stress-anxiety.html
- https://www.beaconhealthoptions.com/coronavirus/
- ► <a href="https://afsp.org/mental-health-and-covid-19">https://afsp.org/mental-health-and-covid-19</a>
- https://mhanational.org/covid19
- ► <a href="https://nami.org/Support-Education/NAMI-HelpLine/COVID-19-Information-and-Resources">https://nami.org/Support-Education/NAMI-HelpLine/COVID-19-Information-and-Resources</a>
- https://psychhub.com/covid-19

# ONTHER UPDAY

## **American Foundation for Suicide Prevention**

- August 5th Talk Saves Lives for Firearms Owners: <a href="https://tslfirearms-ecd-805.attendease.com">https://tslfirearms-ecd-805.attendease.com</a>
- August 6th Talk Saves Lives for Seniors: https://tslseniors-ecd-806.attendease.com
- Lawrence County- Out of the Darkness Walk

## Mental Health Association

- Virtual drop-in center is taking place on Tuesdays (11 AM) and Thursdays (1 PM). For more information, please call 724-775-9507.
- ▶ In-person drop-in center is taking place on Mondays, Wednesdays and Fridays from 10 AM 2 PM. You must make a reservation to attend and can do so by calling 724-775-9507 on Tuesdays or Thursdays.
- ▶ PEERS are back to doing face-to-face visits but only when the weather allows because they are only meeting outside with social distancing and face masks. If this is not possible, they are continuing to make Zoom and phone calls.
- We are working on our ENGAGE program to bring volunteers to connect with folks via our virtual drop-in center. The hope is (at some point) to reestablish a ComPeer program.
- ▶ We still have a few openings in our Rep Payee program and our PEER program is up and running as well.

## **Catholic Charities**

- ▶ When the state-wide shut-down was implemented, our services had to transition to remote, and HIPPA-compliant software was purchased which allows for video sessions.
- ► We have also utilized caseworkers in other county offices within the agency to assist with basic needs assistance, and vice versa.
- We have also offered a Stress Management/Self-Care program for any clients who are interested.

## Big Brother Big Sisters

- Currently recruiting for Bigs and Littles
- ▶ BBBS learned during this pandemic that mentors are more important than ever! Just having a trustworthy person to talk can alleviate a lot of a child or teen's fears.
  - Please note: Fliers included with today's handouts.

## Heritage Valley Health System

- ▶ We have implemented VisuWell, a vast majority of our clients are lacking in terms of accessing technology or the ability to use technology independently. It's a goal for our BSCs to link each client to the appropriate technology and to support with the ability to access telehealth, we feel this is vital at this time due to many physicians using this technology and the ongoing nature of the pandemic precautions.
- ► We have been meeting more frequently outdoors, we provided several resource/food drops throughout the Stay-At-Home orders and during this part of quarantine as well.
- We have had lower productivity, but increased contacts, less linkages to services/supports due to modifications in programs as a result of the pandemic, more wellness planning and personal medicine.

## **Community Alternatives**

- Our clinic and therapy is still continuing until further notice through telehealth.
- ► Our StepUp summer camp session 1 was in person, however, to concur with social distancing and proper health standards StepUp summer camp session 2 was held via zoom. StepUp will conclude this week.
- In order to provide the best possible service to the kids that we serve. We have been researching e-mentoring in order to assist with anything the kids may need.

## Merakey

#### **BCM**

Telehealth services and socially distant face to face encounters are taking place (type of service to be provided is evaluated on a case by case basis considering at risk populations, potential exposure, etc.).

#### **FACT**

- Telehealth has been challenging but FACT consumers have adjusting very well overall despite being vocal about missing the face to face contacts. Staff have daily phone contacts with consumers some twice daily, so although we moved to primarily telehealth, our contacts have increased for all consumers.
- Consumers without phones receive daily face to face contact with social distancing
- Medication delivery frequency was reduced to all consumers unless absolutely necessary, most consumers are on weekly deliveries

## Merakey continued

#### **DACM:**

- We've seen an increase in relapse and mental health symptoms, especially anxiety. We have consumers who haven't had a panic attack in years having extreme anxiety and panic attacks about basic things, like riding in a car.
- Currently accepting referrals. Contact 724.869.2023 for more information. <u>Referral forms</u>: <a href="http://www.bc-systemofcare.org/referral-forms/">http://www.bc-systemofcare.org/referral-forms/</a>

## **Pressley Ridge**

- ► Mobile Crisis is accepting referrals for 14-24 year olds for individuals experiencing a mental health crisis.
- ► The number to contact is 724.630.5189 and/or email <u>jweller@pressleyridge.org</u> and I can answer any questions about the program or determine if a referral would be accepted.
- ► We also have openings for family based referrals. Both programs are providing services in person and telehealth.

## **UPMC-Beaver Crisis**

Has MOVED and is now located at

1020 8<sup>th</sup> Avenue Suite 136 Beaver Falls, PA 15010

Walk-in Services

9a-4p M-F Phone Support

24 hours 7days Mobile Services

10a-6p

M-F

Telehealth Services

7a-10p

7days

724-371-8060



\*Walk-ins: Please ask the Sheriff Deputy for assistance\*



#### **Youth Ambassador Program**

## Talks with Tonette Tuesdays: 12pm to 1:30pm

#### Bi-weekly sessions beginning on August 4, 2020

Tonette Whitted, LPC has over 10 years experience in the mental health field.

She has a Bachelor of Science in Psychology and a Masters of Education with a focus in Counselor Education/Marriage and Family Therapy. Tonette has supported YAP the past several years. The youth are familiar and comfortable with her. These talks will focus on helping our youth maintain wellness in a changing and challenging academic and social environment.

#### Permission & Registration is required prior to the event. Click below:

https://link.zixcentral.com/u/cf8928ce/HgKuQtbR6hGgh9kTh3soMg?u=https%3A%2F%2Fform.jotform.com% 2F201465300253139

#bcyouthvoice
@bcyaprogram/Twitter & Instagram
www.bc-systemofcare.org/website
BC-Youth Ambassador Families/Facebook
bcyaprogram@gmail.com/Contact YAP

## Talks with Tonette are back!

We ask that you please share with Beaver County youth that might benefit from being able to join other youth online for support.

#### **SOC** Website:

- "How's That Working for You?" will be an ongoing "Peers in Recovery" feature of the Beaver County System of Care Website. Currently, it's a scrolling announcement, or Post. It will be converted from a Post to a Page at any time, not losing the work already done. Each month, we will feature someone different on the "How's That Working for You?" Post. The eventual result will be combining it all into a whole gallery of local peers, living a self-directed life in RECOVERY. The reader can click on each person featured in the gallery and visit his/her Page.
- NOTE: A peer does not have to be a CPS/CRS to be featured on "How's That Working for You?"

  Nominations are appreciated at: 724.624.7203 or <a href="mailto:bpalmieri@ahci.org">bpalmieri@ahci.org</a>. Let's build a gallery of HOPE together!
- This title was selected to emphasize that there are many strategies to wellness, no two recovery stories are the same, and taking personal responsibility is important. Hopefully, some common threads will stand out (people who helped, for example).
- And here's more GOOD NEWS!!! We will be able to do ArtAbility 2020 virtually this year. Folks should be encouraged to continue making art and this year, entries will be featured on the System of Care Website! Each artist will submit photos of his/her work and each artist will have his/her own webpage. Instead of "strolling" through the gallery, viewers will be "scrolling" through the gallery!!!! Details are forthcoming.

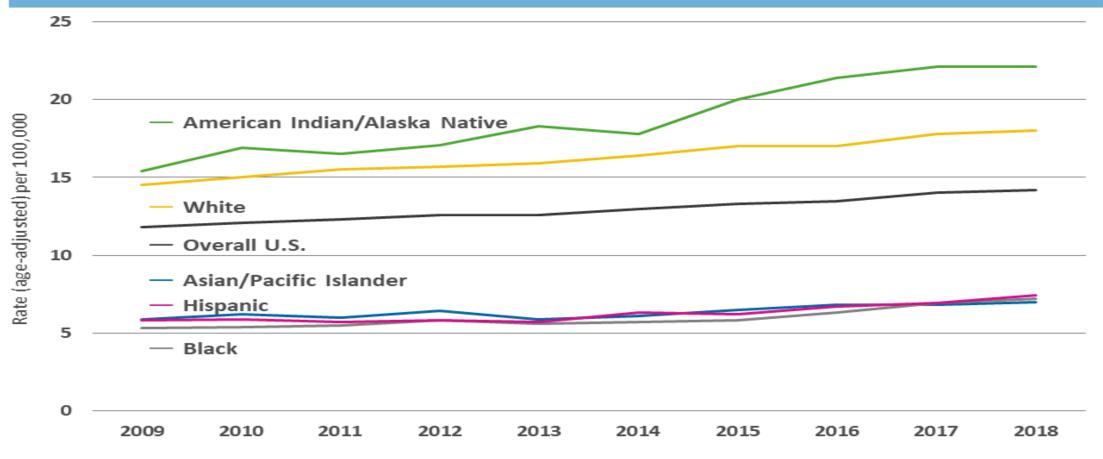


## Minority Mental Health Awareness Month

July was Minority Mental Health Awareness Month

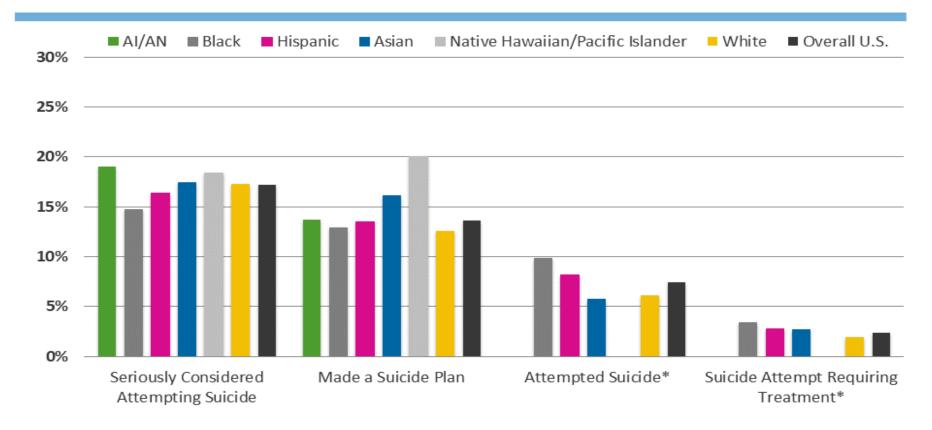


## Rate of Suicide by Race/Ethnicity, United States 2009-2018



www.sprc.org Source: CDC, 2020

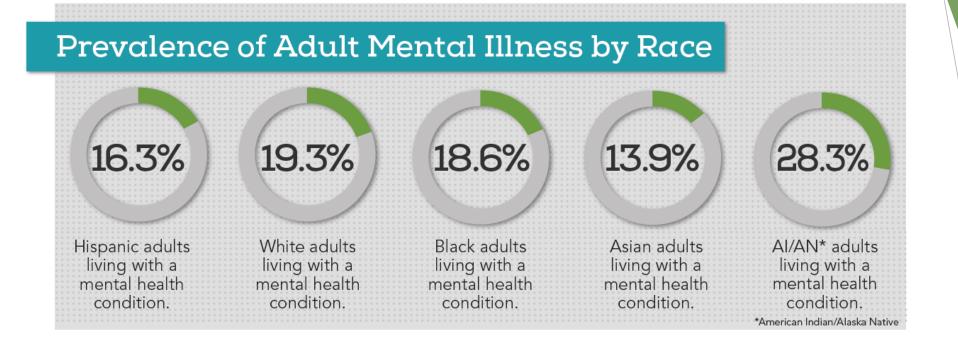
## Past-Year Suicidal Thoughts and Behaviors for High School Youth, United States 2017



\*Percentage estimates for AI/AN youth and Native Hawaiian/Pacific Islander youth who had a past-year suicide attempt or whose suicide attempt resulted in an injury, poisoning, or overdose that had to be treated by a doctor or nurse were too small to be reliable and are not included in this chart.

www.sprc.org

Source: CDC, 2017



What can we do to address the barriers and to better engage people from different races and ethnicities into services?

## What is your agency doing?

## Heritage Valley Health System

▶ We are conducting open discussions and education with staff surrounding health disparities and the effects of systemic racism/ongoing trauma, we have changed the focus of our Culture Committee to develop educational and discussion opportunities, and we are having discussions within supervision to support caseload needs/education as well.

# Youth Ambassador's Program

Check out what our youth are doing to raise awareness and reduce stigma!



## World Suicide Prevention Day: September 10, 2020

- ▶ Virtual Event
  - ▶ Planning
- ► Send us your ideas and feedback

► What is your agency going to do to raise awareness during the month of September?



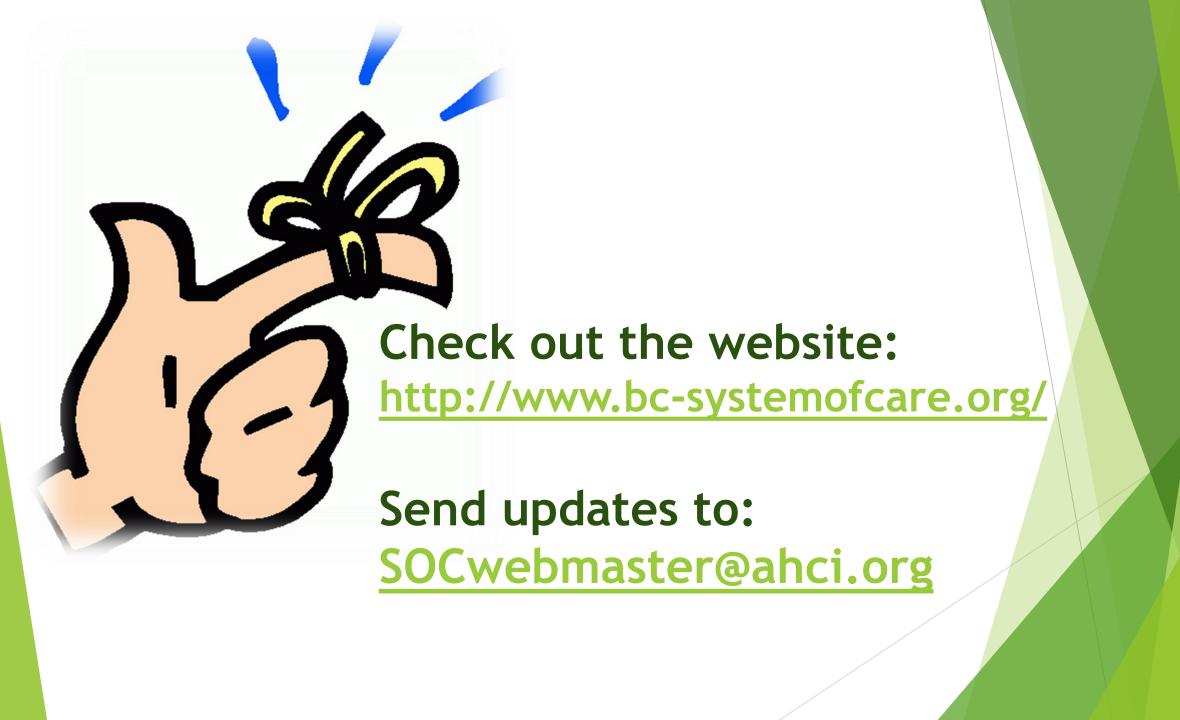
## **Trainings**

Lots of virtual trainings are available:

- American Foundation for Suicide Prevention
- ► VA Pittsburgh Healthcare System
- ▶ JED Foundation
- Suicide Prevention Resource Center
- ► Beaver County System of Care
- Zero Suicide:
  - Applying Zero Suicide in the Pediatric Setting
  - ► Treating Suicidal Patients During Covid 19-Best Practices and Telehealth
  - ► 18 different ones listed—Check them out!! http://zerosuicide.edc.org/resources?type\_1%5B%5D=webinar

Keep an eye out!!
There are a TON of virtual trainings available!!





What can we do to help?

## E-mail us:

- Elisia Majors
- emajors@bcbh.org
- Stephanie Santoro
- ssantoro@ahci.org
- Bonnie Palmieri
- bpalmieri@ahci.org



## Resources

#### The Mental Health Support Line

- Developed on April 1st
- Can be reached toll-free, 24/7 at 1-855-284-2494 from anywhere in PA.

#### **Crisis Text Line**

Text PA to 741-741

#### PA Get Help Now Helpline

- Can be reached toll-free at 1-800-662-HELP (4357).
- ► A live chat option is also available online or via text message at 717-216-0905

#### **Warmline of Beaver County**

- Can be reached at 1-877-775-WARM (9276)
- Hours of operation were extended:
  - Monday through Friday, 12pm until 9pm
  - Saturday through Sunday, 6pm until 9pm

#### **UPMC Beaver County Crisis**

Can be reached toll-free, 24/7 at 1-800-400-6180

## PA Resources

Many other resources also remain available to Pennsylvanians in need of support, including:

- National Suicide Prevention Lifeline: 1-800-273-TALK (8255)
- Línea Nacional de Prevención del Suicidio: 1-888-628-9454
- Crisis Text Line: Text "PA" to 741-741
- ► Safe2Say: 1-844-723-2729 or <u>www.safe2saypa.org</u>
- ► Veteran Crisis Line: 1-800-273-TALK (8255)
- ▶ Disaster Distress Helpline: 1-800-985-5990
- ► Get Help Now Hotline (for substance use disorders):
- 1-800-662-4357

The state of the s NATIONAL PREVENTION 1-800-273-TALK (8255) suicidepreventionlifeline.org