

ILLINOIS DEPARTMENT OF PUBLIC HEALTH  
Illinois Suicide Prevention Alliance  
Education and Training Workgroup  
*Approved April 10, 2015*

Friday, December 12<sup>th</sup>, 2014

2:00 p.m. – 3:00 p.m. (Conference call)

**Introductions**

Jennifer Martin	Illinois Department of Public Health
Libby Bair	Illinois Department of Public Health
Jessica Gerdes	Illinois State Board of Education
Katie Jones	Molina Healthcare of Illinois

**Minutes from October 10, 2014**

Ms. Jones motioned for the approval of the minutes with a second from Ms. Gerdes, all in favor, motion carried.

**Announcements**

**a. Update on trainings conducted by workgroup members**

Ms. Jones noted there were ASIST training opportunities at Molina over the summer, and she hopes to do at least one other training and make it annual for care coordinators. Additionally, Molina added a training that gives a refresher of ASIST and refresher for those working directly in behavioral health.

Ms. Jones has also been certified as a QPR trainer. If anyone is interested in QPR, Ms. Jones added they are welcome to reach out to her.

Ms. Martin and Ms. Gerdes did a presentation at the Triple I conference in Chicago within the past month. It was panel-style and also offered the perspective of a school board member.

Ms. Jones inquired as to whether trainings on the standing agenda refers to evidence-based trainings or are mainly directed toward ISPA activities. Ms. Martin responded any opportunities apply.

**Review a list of training opportunities in Illinois and identify opportunities to collaborate**

Ms. Jones reported the Illinois Association of School Social Workers is going to do outreach related to acute crisis intervention for children. They have an annual conference at which Molina hopes to present in terms of relation to managed care.

**Reports from ad hoc committees**

**a. Update on planning for the 2015 statewide conference and preconference**

Ms Bair provided an overview of the planning process, including the following items:

- Ms. Angie Wanger from IPHA is still working to secure the venue, Doubletree in Bloomington, for April 30<sup>th</sup>. The date is held for us, we're just waiting to sign the contract. All are confident this will go through as planned. She, Jennifer and IPHA made a site visit to the location.
- The committee released a date saver in the past two weeks to our ISPA email list and injury prevention listserv, as well as individual emails to various entities. Response has been great and indicates the date saver was forwarded on to several additional listservs/contact lists.
- IPHA is finalizing the online Call for Abstracts form. The plan is to get this released to the public next week; there is an outreach email draft ready to go.
- The deadline for breakouts is set for January 17<sup>th</sup>. The committee will review and make a decision (tentatively) by January 31<sup>st</sup>

- The committee decided to go with all CEUs offered last year—most of them can be obtained free of cost
- For keynotes, behavioral/health care integration will for sure be addressed by Mike Hogan. During the last workgroup meeting, this is was still tentative.
- The committee is still working on finding panel participants and decided to seek the following representation:
  - Young adult from a attempter perspective
  - Young adult from a friend/survivor perspective
  - Parent of a youth or young adult who died by or attempted suicide
- Ms. Bair added she reached out to several entities with speakers bureaus but hadn't heard anything to-date. The next step is to follow-up by phone, and the committee would like the panelists identified and secured by the time abstracts are selected.
- Ms. Bair and Ms. Martin constructed a rough sponsorship form draft and will be presenting their ideas to Division Chief Pressley.

Ms. Jones recommended reaching out to Shawn Cole when the call for sponsorships is ready to be distributed, as he would be a good person to forward on our behalf.

Ms. Martin briefed the workgroup regarding the planning of the pre-conference session on April 29<sup>th</sup>, a mini-academy on Zero Suicide. Dr. Hogan will serve as presenter and will be collaborating with Centerstone and SPRC. Centerstone is a national agency that has been actively implementing the ZS initiative in various locations, IL being one of them. Ms. Martin led a planning call with the aforementioned entities as well as Ms. Patricia Reedy from IDHS/DMH and representatives from IDHS/DASA.

Those attending the session will be encouraged to “do their homework” and be prepared before they attend, The general consensus of the planning committee was that they would rather see 30-40 highly prepared attendees rather than a room full of people who are hearing about Zero Suicide for the first time.

### **Other projects**

**a. Review guidelines for training clinical workforce – document by the National Action Alliance for Suicide Prevention (collaboration with ISPA State Agency Review and Support Subcommittee)**

Ms. Martin reported the State Agency group is working on this project. Ms. Jones is involved, as well as Ms. Patricia Reedy and Mr. Steve Moore. Ms. Jones reported a meeting will be taking place next Friday, December 19<sup>th</sup>.

Ms. Jones added any healthcare provider funded by State of IL should have a minimum amount of training, however, this is not a reality. This group will be working to start this initiative as soon as possible, though the process may take multiple years to complete.

**b. Summary of plans to enhance professional capacity to implement suicide prevention strategies (trainings overseen by the ISPA State Agency Review and Support Subcommittee)**

Ms. Martin reported Ms. Lora Thomas was taking the lead on this project in terms of outreaching to professional organizations and determining the roles they were taking for training. Ms. Martin also added that some of the conversations Ms. Jones and the aforementioned workgroup have may address parts of this particular issue.

**c. Continued communication with participants from the meeting for higher education campuses to enhance their capacity to implement suicide prevention strategies**

Ms. Bair updated the group on the status of the survey draft to be sent to institutions of higher education. She noted the former survey draft was arranged by way of the 9 factors of the Jed/Clinton Foundation approach,

however Dr. Eric Davidson suggested arranging it in more of a continuum of care order so as it was easier for a campus point person to determine what questions to forward to whom. Such “point people” for each school would be contacted so there are not multiple responses to the survey that might not be necessarily relevant. Dr. Davidson provided Ms. Bair with a college contact listing, and also recommended reaching out to Dr. Sandy Colbs to see if we could obtain the addresses on the IL College Counseling Center Directors’ listserv. Dr. Colbs provided this information, and Ms. Bair is currently working to merge both lists. Dr. Davidson’s listing is much larger with many more schools represented so she would like to take advantage of that data for the missing schools and combine it with what Dr. Colbs provided.

Since that conversation with Dr. Davidson, Ms. Bair reported she worked on a new rough restructure of the survey. With this draft she tried to move the existing questions into primary, secondary, or tertiary prevention categories. She also added planning/policy as a category.

Ms. Bair also attempted to indicate the appropriate campus area our point person might find the best/most relevant response to the question (such as student life, campus housing, counseling center). She noted these are intended to be advisory, above all, as each campus is different. She added some questions are harder to categorize than others and will seek opinions on the flow of this particular version of the draft.

**Review recommendations from the final report from the Youth Suicide Prevention Consensus Building Meeting**

Ms. Martin stated the workgroup looked at the first and last sections of these recommendations during previous meetings. Ms. Martin continued that the workgroup still needs to address the following recommendations:

**Recommendations survey question 12: Recommendations for improving/enhancing collaboration among individuals and organizations for referral and follow-up of youth at risk for suicide:**

- Middle and high school are the only institution that offers broad contact with youth and adults in contact with each other. School administrators, teachers, and counseling staff must be brought around to accept suicide prevention with open arms.
- Remember to include entire school health team—including the credentialed school nurse.

Ms. Martin added to keep in mind these recommendations were picked from survey results and are not from an actual consensus.

Ms. Martin asked the workgroup if anyone saw an opportunity to pursue a specific strategy. Ms. Jones added including school nurses in this project is a good idea. She also noted she would extend the argument that the recommendation should specifically address school social workers and counselors as well. Ms. Jones continued the more non-healthcare professionals in schools we can train in the core components of suicide prevention, the better. Ms. Martin noted the workgroup will try not to limit their focus.

**New business** - none

**Set agenda items for next meeting** - same standing agenda items