



SW Regional Suicide Advisory Board Meeting Minutes

Meeting Date: December 10, 2021

Location: Virtual (Zoom)

Present: Yvette Cortez (DCF), Deirdre Ekholdt (Social Worker, Town of Westport), Margaret Watt (Positive Directions), Jeffrey Santo (RSS), Allison Sanko (AmeriCorps Member, NCC), Andrea Duarte (CT DHMAS), Kiersten Naumann (TPAUD), Cornelia Morris (Trumbull Counseling Center), Daniella Arias (The Hub), Stephanie Paulmeno (DNP, RN), Liane Gelman-Wegener (DCF Social Worker), Leigh Goodman (Trumbull EMS), Giovanna Mozzo (The Hub), Victoria O’Neill (The Hub).

AGENDA ITEM/TOPIC	SUMMARY OF DISCUSSION	OUTCOME / ACTION/RESPONSIBLE
CT SAB Updates	<ul style="list-style-type: none"> October Presentation – Sarah Geer – discussion regarding the overlap between suicide and trauma Continuation of 988 promotion and awareness December Presentation - Barbara Ward Zimmerman – discussion regarding the intersection of ADHD and Suicide 	<ul style="list-style-type: none"> Previous minutes and agendas can be reviewed on CT SAB website
Stakeholder Announcements	<ul style="list-style-type: none"> My Friend Abby – September Fundraiser – identified two young adults in the region who will be given one of their grants. Nursing Association – C.E.U for nurses (topics surrounding suicide prevention, PTSD, Depression, Anxiety and Grief Reactions). Programs will begin in January. Upcoming presentations to be offered in the new year – “LGBTQIA+” and “Suicide with the Elderly” (both have C.E.U credits). 	<ul style="list-style-type: none">



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<p>Guest Speaker - Andrea Duarte (CT Department of Mental Health and Addiction Services)</p> <p>“What is 988 and Why is it important for CT”</p>	<ul style="list-style-type: none"> • <u>What is 988?</u> – 988 is a 3-digit number coming to the United States starting July 16th, 2022. (“Someone to Talk To, Someone to Respond, Somewhere to Go”) • 1. 988 is a number that connects to a call center, chat and text service • 2. Purpose – divert unnecessary response from emergency services to behavioral health call. • <u>9-8-8 Key Components</u> (24/7 coverage, financial stability, capacity for high volume coverage, operational and clinical performance, multi-stakeholder coalition, linkage to local crisis services, follow up and consistency in public messaging) • <u>Overview of United Way/2-1-1</u>: Provides free, confidential information, referral and crisis line that connects people to essential health and human services 24/7, 365 online and over the phone. Also serves as statewide entry point for youth mobile crisis • <u>When to call 2-1-1</u> (988 in the future): you are considering sending a person to the emergency room. You cannot reach the person's mental health service provider. You have already called the police but need mental health support. • <u>When to call 9-1-1</u>: Is the person safe? Does this person need medical attention? Do they have access to lethal means with intent? Are they intending to harm someone else? • <u>Additional Discussion</u>: • 1. How best to phase into 9-8-8 from 211, 741741 ect? → refer to state and national messaging regarding advertising • 2. What is DMHAS/DCF planning to do in regards to adding crisis and respite beds, alternatives to the E.R? → Plans to expand mobile crisis hours to be 24/7, increased staffing across the board, addition of peer support components for adult mobile crisis. • 3. Urgent Behavioral Health Centers → Newer initiative, currently requesting community providers to join mission. Once structure is outlined, applications will be sent out. 	<ul style="list-style-type: none"> • See attached for PowerPoint slides.
<p>Updates from The Hub</p>	<ul style="list-style-type: none"> • The Hub has received funding DCF/DMHAS specifically for efforts surrounding suicide prevention and post-vention • Question, Persuade, (QPR) Suicide Gatekeeping Trainings will be taking place every month on the first and third Tuesday mornings from 9:00 – 10:30 AM and open to the general public. Please inform The Hub of any outside QPR or Talk Saves Lives training that occurs for promotional reasons and DCF/DMHAS reporting. • Discussion of Post-Ventation sub-committee → create regional space to share resources, toolkits. Keep post-vention as a point on RSAB agenda as topic of discussion and updates. 	<ul style="list-style-type: none"> • The Hub will continue to collect resources for Post-Ventation private website page and create one in a timely manner.



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Additional Discussion:

- Difference between a “warmline” and “hotline”
 - **Hotline:** “A hotline is a number you dial when there is an immediate threat to your life or safety. The National Suicide Prevention Lifeline is an example of a crisis hotline. They are a network of crisis centers all across the country. They provide emotional support to people who are experiencing suicidal ideations or emotional distress. Most hotlines that give this type of support operate 24 hours a day, seven days a week. Hotlines are also often tied into systems that can dispatch first responders or a mobile crisis team to your location.”
 - **Warmline:** “A warmline is a number you dial when you do not need immediate assistance, or for people whose need is not urgent. A warmline is an excellent option to call when you feel stressed out, depressed, lonely, or need to talk to someone. Warmlines often have specific hours of operation and some are run by volunteers. In Connecticut, we have warmlines staffed by people who have lived . experience with mental health challenges. They are a fantastic resource if you are looking for a friendly ear or some good advice.”
 - Taken from: <http://rockingrecovery.org/warmlines-phone-text/#1614554103906-d707c05a-9544>
 - Courtesy of Jeffrey Santo
- About 2-1-1 (United Way of CT)
 - Call 2-1-1, then press 1 and 2 again when prompted (for **adults**)
 - Call 2-1-1, then press 1 and 1 again when prompted (for **youth**)
 - Or call 1-800-HOPE-135
 - Available 24/7, 365 days
 - Mobile Crisis “Mobile Hours” *
 - 6:00 AM – 10:00 PM (Monday through Friday)
 - 1:00 PM – 10:00 PM (Weekends and Holidays)
 - *goal is to expand these hours to be 24/7
 - Staff includes licensed clinicians, paraprofessionals, an individual with lived experience navigating distress and multilingual staff
 - For more information: <https://uwc.211ct.org/actionline/>
- NAMI in partnership with Andrea Duarte has create an alternative to QPR trainings.
 - Intended to be delivered by people with lived experience
 - Draws from QPR, ASIST, Alternatives to Suicide and TSL