

## CT Suicide Advisory Board Meeting Minutes

**Meeting Date:** January 12, 2023

**Location:** Zoom Virtual Meeting

**Present:** Gillian Anderson (My Friend Abby), Jeanette Baker, Linda Barton (Mashantucket Pequot Tribal Nation), Scott Barton (Mashantucket Pequot Tribal Nation), Rebekah Behan (CHDI), Torry Bernard (NAMI CT), Romeo Blackmar (GHYMCA), Kevin Borrup (CT Children’s), Dana Bossio (CES), Bill Brassard (NSSF), Brendan Burke (OCA), Jacob Computaro (Health 360), Wendy Caruso (United Way 211), Jessica Casella (VA-CT), Heather Clinger (Wheeler), Carrigan Costello (Wolcott CASA), Adele Cyr (Amplify), Sarah DeFlumeri (Naugatuck Youth Svcs), Ann Irr Dagle (Brian Dagle Fdn), Melissa Demma (United Services), Alice DeMeo (DCF), Anastasia Dominch-Kovalevsky, Andrea Duarte (DMHAS), Sarah Dufresne, Amy Evison (CHR), Jennifer Esposito (Judicial Branch), Taylor Ford (FAVOR), Joanna Fornwalt (Town of Enfield), Frank Gregory (DCF), Grace Grinell (NAMI Farmington Valley), Jo Hawke (GPP), Mark Irons (SERAC), Aaron Jackson (Join Rise Be), Angela Jimenez (DPH), Robert Kanehl (CT Poison Control), Chelsea Kapitancek (McCall Behavioral Health Network), Angelina Karwowski (Bristol-Burlington Health District), Lynn Kelley (Beacon Health Options), Michelle Leibovitz (Rich Wright Productions), Valerie Lepoutre (NAMI CT), Susan Logan (DPH), Justin Lopez (Enfield Social Svcs), Jodi Lott (Gaggle), Cathy Ludlum (Second Thoughts CT), Mollie Machado (DMHAS), Mike Makowski (DPH), Jessica Markure (VA-CT), Tim Marshall (DCF), Kim Myers (CT Ctr for School Safety), Sadiq Naveed, Lucy Orellano (OCA), Shauna Pangilinan (OCME), John Panicek (CT Rivers Scouting BSA), Michelle Peters (ASFP-CT), Jonathan Pohl (CCSU), Kristen Ranciato (VA CT), Donna Redway (City of Hartford), Margy Roberts (Community Health Network of CT), Steve Rogers (CT Children’s), Timothy Schmutte (Yale School of Medicine), Kara Sepulveda (Quinnipiac Valley Health District), Richard Siddall (SMART Recovery), Marissa Sicley-Rogers (IOL), Heather Spada (United Way CT), Tom Steen (Steen Consulting), Jennifer Sussman (UConn Health), Nicole Szilagyi, Ayeska Tilly (DMHAS), Susan Tobenkin (CTARNG), Kelly Tomlinson (Norwalk Health Dept), Robin Tousey-Ayers (DPH), Colleen Violette (DPH), Elsa Ward (DMHAS), Marissa White (CHQIS), LoriBeth Young (DSS), and Kiley Young (CT Ctr for School Safety).

AGENDA ITEM/TOPIC	SUMMARY OF DISCUSSION	OUTCOME/ACTION /RESPONSIBLE
<b>I. Welcome and Introductions</b>	Andrea Duarte and Ann Irr Dagle welcomed attendees.	
<b>Review of Minutes</b>	December minutes approved	
<b>II. Presentation</b>  <i>Geriatric Suicide Risk</i>  Timothy Schmutte, Psy.D. Assistant Professor of Psychiatry Yale School of Medicine	Suicide Prevention in Older Adults <ul style="list-style-type: none"> <li>- Good amount of research reports that overall life satisfaction has curved U shape effect over the lifespan. Paradox of life satisfaction is higher in later life among older adults, while suicide rates also increase over the course of the lifespan</li> <li>- Highest rates of suicide are older white males 65+</li> <li>- This has been the case since suicide statistics have started being collected, and this trend can be seen globally amongst geriatric populations (with some exceptions)</li> <li>- Across the lifespan, thoughts of suicide tend to decrease with age, as do ED visits for non-fatal attempts</li> </ul>	

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	<ul style="list-style-type: none"> <li>- Big increase in lethality rate of attempts (% for every suicide attempt, how many are fatal). In those 65+ 1 out of 3 are fatal.</li> <li>- Among individual who go to a hospital for suicidal thoughts or a non-fatal attempt, the rate of suicide within 12 months after leaving (discharged from ED, or inpatient stay) is dramatically higher in older adults. Rate of 1,919 per 100,000 for those 65+ compared to the national average of 691 per 100,000</li> <li>- What are some reasons for this rate?</li> <li>- 1. More physically frail 2. more socially isolated 3. more careful and deliberate plans, as well as use of firearms</li> <li>- Firearms used in 1 in 4 suicidal acts among those 65+, compared to 1 in 45 among those younger than 35 years</li> <li>- Data suggests roughly half of those 65+ own a firearm</li> <li>- The 5 Ds of Late Life Suicide Risk: Depression, Disconnectedness, Disease, Disability, Deadly Means</li> <li>- Age related bias and stigma</li> <li>- 1 in 3 older adults received ED care within 30 days of dying by suicide, but few were recognized as being at risk</li> <li>- ED-SAFE study raises concerns about disparities in ED management of suicide risk in older adults. Found that even in hospitals with policies that every patient who comes to ED should be screened for suicide, those 60+ the percentage of patients screened decreases significantly, only 77-68% compared to 80% in those younger than 50. Additionally, among ED patients who screened positive for suicide risk, the rate of lethal means assessment was only 41% in those 60+ compared to 63%, and rate of referral to follow up care or mental health resources or other type of community for support referral for help was half as common among older adults compared to younger than 60.</li> <li>- Substantial percentage of older adults who died by suicide-- 69% (males) 50% (females)--did not have a known mental illness; most of these individuals were described as not being depressed</li> <li>- Physical health problems most common stressors before death</li> <li>- 82% of men and 50% of women without recognized mental illness used a firearm</li> <li>- Majority of older adults who come to emergency room for suicide attempt or SI, 3 out of 4 get admitted to hospital whereas younger populations about half are sent back home</li> <li>- 48% of older adults were not connected with mental health care shortly before their hospitalization, 52% were</li> </ul>	

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	<ul style="list-style-type: none"> <li>- 30% of older adults were connected to outpatient mental health care within 7 day follow up of being discharged from the hospital, were as this is 50-60% in younger populations.</li> <li>- Those not connected to mental health care before their hospitalization have substantially lower rates of 7 day follow up</li> <li>- Among older adults admitted to hospital for SI or non-fatal attempt 54 died within 7 days, 126 within 30 days, 168 within 60 days, 351 within 360 days (within year of leaving hospital). Places like UK have implemented policies for mandatory follow up within 2 or 3 days.</li> <li>- For those treated in psychiatric facilities as opposed to general hospitals: higher follow up rates</li> <li>- Adding a 6<sup>th</sup> D to the 5 Ds of Late Life Suicide Risk, Dementia.</li> <li>- Those who receive first doctor assigned diagnosis of dementia/ all related dementia, Alzheimer's disease, and all related dimensions have a 53% higher suicide rate compared to the general geriatric population across demographics.</li> <li>- Multiple studies found first year following diagnosis is elevated risk period</li> <li>- First three months for those 65 and older is “critical period”</li> <li>- Men who show signs of severe executive dysfunction have the highest attempt rate for highly lethal medically threatening attempts</li> <li>- Lowest lethality rate show more personality dysfunctions such as BPD rather than depression or executive function issues</li> <li>- Some common factors found in fatal or near fatal attempts: higher income and depression severity</li> <li>- Biggest warning sign for older adult is burdensomeness and having an “upsetting” medical diagnosis (such as dementia)</li> <li>- Optimal prevention is using the Institute of Medicine framework</li> <li>- Universal: finding roles and community engagement and anti-ageism are prominent (cultural views of value of older populations in US is not a helpful system for this population)</li> <li>- With “baby boomer” generation ages into demographic we will need programs and education specific for this issue</li> </ul> <p>To view the presentation, visit: <a href="https://www.ctclearinghouse.org/Customer-Content/www/files/PDFs/CT_Suicide_Advisory_Presentation_copy.pdf">https://www.ctclearinghouse.org/Customer-Content/www/files/PDFs/CT_Suicide_Advisory_Presentation_copy.pdf</a></p>	

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<b>III. Reports</b>	<p><b><u>Grant Initiatives</u></b> <b>988 Update</b></p> <ul style="list-style-type: none"> <li>- Moving forward with requirements under SAMSHA grant</li> <li>- Primary focus is contact center in CT, which is United Way, open 24/7/365</li> <li>- As of now if someone calls they will be connected to local center, if they text or chat they will be routed to national center</li> <li>- Enhanced funding for state child side within last year</li> <li>- Received 988 supplement grant to expand in state text and chat services expansion this year</li> <li>- Youth expansion and implementing four community crisis centers</li> <li>- Short-term youth stabilization beds – 14 days</li> <li>- Focus on increasing funding</li> <li>- There is “no wrong door” in CT. To reach the CT crisis contact center for telephonic support or mobile crisis services, people can call 211 and press 1 for crisis and then 1 for children or 2 for adults, or they can call 988 to be routed to the CT contact center. They will not have to press any other numbers when they call 988 to get services, and call, text and chat services are all functioning. Veterans are still guided to press 1 for the Veterans Crisis Line when they call 988, just as the 800 NSPL line did.</li> </ul> <p>To view the presentation, visit: <a href="https://www.ctclearinghouse.org/Customer-Content/www/files/PDFs/988_update_CTSAB_011223.pdf">https://www.ctclearinghouse.org/Customer-Content/www/files/PDFs/988_update_CTSAB_011223.pdf</a></p> <p><b><u>Regional Suicide Advisory Boards</u></b> <a href="https://www.preventsuicidect.org/about-us/regional-sab-business/">https://www.preventsuicidect.org/about-us/regional-sab-business/</a></p> <p><i>All of the RBHAO/RSABs are currently in the process of gathering information via focus groups for their <u>Priority Report/Community Needs Assessment</u>. Focus topics include: mental health, suicide, substances (ie. illicit drugs, marijuana, cocaine, alcohol) and problem gambling. Any individuals who either work or reside in the region and would like to be involved in this process are encouraged to contact their RSAB.</i></p> <p><b>Region 1/Southwestern</b></p> <ul style="list-style-type: none"> <li>- The Hub continues to hold Question, Persuade, Refer (QPR) and Naloxone trainings twice a month, every month, open to the general public. For more information or to sign up, visit <a href="http://www.thehubct.org/events">www.thehubct.org/events</a></li> </ul>	

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	<ul style="list-style-type: none"> <li>- The Hub also continues to offer QPR trainings to specific agencies or organizations upon request and recently offered a QPR training open specifically to Darien community members on January 10</li> <li>- In the process of connecting with local colleges and universities to bring mental health awareness and training such as QPR to campuses within the region</li> <li>- Hosting a postvention 101 lunch and learn training open to the region; date is still being determined</li> <li>- Following the 101, will be meeting individually with any regional town interested in further developing and implementing their protocols and procedures for a community untimely death</li> <li>- The Hub will be presenting at a region wide presentation “<i>Where to Turn for Help – A Community Guide to Mental Health Resources</i>” on January 26 from 6:00pm-7:30pm</li> <li>- Next meeting: Friday, March 10, 12:00pm-2:00pm</li> <li>- To schedule a training or to be involved in the Region 1 Regional Suicide Advisory Board, contact Victoria O’Neill at <a href="mailto:victoria@ryasap.org">victoria@ryasap.org</a> or <a href="mailto:info@thehubct.org">info@thehubct.org</a></li> </ul> <p><b>Region 2/South Central</b></p> <ul style="list-style-type: none"> <li>- Postvention training 2-part series will be held for Tri-Town (Deep River, Essex and Chester) communities in-person at Essex Town Hall:</li> <li>- Part 1 training date: Wednesday 1/18 9:00am-11:30am</li> <li>- Part 2 training date: Wednesday 1/25 9:00am-10:30am</li> <li>- Community QPR training at Durham’s Community Center on Thursday 1/19 at 12pm</li> <li>- APW will be partnering with Quinnipiack Valley Health District for a pop up tabling event at Moon Rise Café in North Haven on Friday 1/20 from 11am-1pm with both suicide prevention and overdose resources/materials for customers</li> <li>- Next meeting: Tuesday, February 7, 10:30am via zoom. For more information and details, please contact Taylor Gainey at <a href="mailto:tgainey@bhcare.org">tgainey@bhcare.org</a></li> </ul> <p><b>Region 3/Eastern</b></p> <ul style="list-style-type: none"> <li>- Presentation on mobile services for youth at last meeting</li> <li>- Tabling event for exam week for QVCC, formed relationship that will provide trainings to staff</li> <li>- Forming relationship with Michell College for student athletes</li> <li>- Postvention team at Thompson Public Schools</li> <li>- Next meeting: February 7</li> </ul> <p><b>Region 4/North Central</b></p> <ul style="list-style-type: none"> <li>- AFSP came for Talk Saves Lives TforT, all 5 leads now trained</li> </ul>	

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	<ul style="list-style-type: none"> <li>- LPC meeting next week</li> <li>- Amplify open house to be scheduled</li> <li>- Next meeting: Feb 16 with OCME</li> </ul> <p><b>Region 5 /Western</b></p> <ul style="list-style-type: none"> <li>- R5SAB meeting on 12/21 provided updates, reviewed upcoming trainings/meetings, the Torrington Area Health District summarized the work they are doing through their CDC grant, and then the group began discussing components of the regional priority setting process around suicide and mental health.</li> <li>- Continue to host QPR and Naloxone trainings and meeting dates can be found on the main page of the WCTC website. Two staff were recently TOT trained in MHFA and Talk Saves Lives.</li> <li>- Next meeting: March 22, 10:00am</li> </ul> <p><b>Foundations</b></p> <p><b>American Foundation for Suicide Prevention (AFSP) <a href="https://afsp.org/">https://afsp.org/</a></b></p> <ul style="list-style-type: none"> <li>- Talk Saves Lives training for RSAB leads</li> <li>- Talk Saves Lives training in Darien in February</li> <li>- April 1 event Drag Saves Lives tickets \$15</li> <li>- Campus Walks being scheduled</li> <li>- Andover, Marlborough, Columbia areas signed on for Gizmo curriculum</li> <li>- Finalizing state advocacy date – hoping to be in person</li> </ul> <p><b>Brian Dagle Foundation <a href="https://brianshealinghearts.org/">https://brianshealinghearts.org/</a></b></p> <ul style="list-style-type: none"> <li>- New support groups starting: Understanding Your Grief (virtual), Loss to Overdose six-week program in person</li> <li>- Facilitator training program to run Grief Support Programs Feb 11 and 12</li> <li>- 2023 LAX to Live program games, reaching out to schools</li> </ul> <p><b>SAVE <a href="https://save.org/">https://save.org/</a></b></p> <ul style="list-style-type: none"> <li>- No update</li> </ul> <p><b>Jordan Porco Foundation <a href="https://www.rememberingjordan.org/">https://www.rememberingjordan.org/</a></b></p> <ul style="list-style-type: none"> <li>- Close to 160 schools signed up for 2023.</li> <li>- Next big fundraiser is at the Bushnell- we are looking for sponsorships. Here's the link for tickets <a href="http://jftinaturner.funraise.org">jftinaturner.funraise.org</a> and sponsorship info. is attached.</li> </ul> <p><b>My Friend Abby <a href="https://www.myfriendabby.org/">https://www.myfriendabby.org/</a></b></p> <ul style="list-style-type: none"> <li>- Fundraising efforts for new quarter</li> <li>- Grants for youth/ young adults working to make a difference in mental health and suicide prevention</li> </ul>	

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	<ul style="list-style-type: none"> <li>- Postvention group in Trumbull meeting on January 25</li> </ul> <p><b>Committees</b></p> <p><b>Attempt Survivors/Lived Experience</b></p> <ul style="list-style-type: none"> <li>- Submitted proposal to American Association of Suicidology to give presentation at their National Conference and submitted to NAMI as well</li> <li>- Hopefully will also present at a play therapy conference in May, if it goes well could present at national conference</li> </ul> <p><b>Data to Action</b></p> <ul style="list-style-type: none"> <li>- Developing formalized workplan for year aligned with State Plan and Communities of Practice Priorities and want to be more collaborative with other committees</li> <li>- Next meeting: March 8, 9:30am (meetings on second Monday of the month)</li> </ul> <p><b>Education &amp; Advocacy Committee</b></p> <ul style="list-style-type: none"> <li>- Narrowing focus on one-pager and other materials to develop to build a “toolkit” of universal documents for advocacy and education efforts</li> <li>- Working to create a CTSAB one-pager</li> <li>- Next meeting: January 26, 1pm (4<sup>th</sup> Thursday of every month at 1pm)</li> </ul> <p><b>Intervention-Postvention Response</b></p> <ul style="list-style-type: none"> <li>- Spoke to people from Ohio regarding loss team model – will share with larger group at next meeting</li> <li>- Next meeting: January 19 (3<sup>rd</sup> Thursday of the month)</li> </ul> <p><b>Lethal Means</b></p> <ul style="list-style-type: none"> <li>- Creating materials to reach out to older adult population as well as their adult kids and caregivers</li> <li>- Two of the blue signs are up at railways in Clinton and Westbrook</li> <li>- Trying to get suicide prevention component in required firearm safety classes for new owners</li> <li>- Looking for new co-chair; if interested, contact Cathy Sisco csisco@wheelerclinic.org</li> </ul> <p><b>Zero Suicide and Clinical Workgroup</b></p> <ul style="list-style-type: none"> <li>- Six meetings with some great presentations coming up</li> <li>- Looking forward to collaborations this year</li> <li>- Next meeting: January 25, 9:00am</li> </ul>	

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	<p><b><u>Awareness Campaign</u></b> <a href="https://www.preventsuicidect.org/">https://www.preventsuicidect.org/</a>                      Outreach</p> <ul style="list-style-type: none"> <li>- Looking to do targeted mailing twice a year to schools regarding the mobile crisis program and to police departments around both the adult mobile crisis and 988 and separate presentation to family resource centers about suicide prevention number</li> <li>- Gizmo social media campaign via United Way Feb-March</li> </ul>	
<b>IV. Member Updates</b>	<ul style="list-style-type: none"> <li>- Cathy Ludlum: Assisted suicide bill is coming up in session again this year please reach out if interested in collaborating</li> <li>- Ann Dagle: reminding people to take care of themselves “you can't pour from an empty cup”</li> </ul>	
	Meeting adjourned 10:54am	
<p><b>2021-2022 Meeting Schedule</b></p> <p>Meetings are the second Thursday of the month, 9:00am—11:00am</p> <p>Meetings are currently scheduled virtually. Please refer to the monthly meeting announcement for meeting information.</p>	<p><b>2023 meeting planning</b></p> <ul style="list-style-type: none"> <li>- Special populations, particular strategies, people to connect with, what you'd like to learn more about, can bring speakers outside of CT</li> <li>- Let the tri-chairs know if you have any ideas</li> <li>- <a href="mailto:Andrea.Duarte@ct.gov">Andrea.Duarte@ct.gov</a> <a href="mailto:Alice.Demeo2@ct.gov">Alice.Demeo2@ct.gov</a> <a href="mailto:Ann@brianshealinghearts.org">Ann@brianshealinghearts.org</a></li> </ul> <p><b>Dates/Presentations</b>  <u>2021-2022 Meeting Dates/Presentations:</u></p> <ul style="list-style-type: none"> <li>- 2/9/23: Chuck Klevgaard, Richard Fournier, Shawn Hite-Jones, Education Development Center, MTSS-Suicide Prevention in Schools</li> <li>- 3/9/23: CTSAB Business Meeting</li> <li>- 4/13/23: Ann Dagle, Brian Dagle Foundation, Surviving Suicide Loss Grief</li> <li>- 6/8/23: Cheryl Weinstock, SAVE-Awarded Journalist, Responsible Reporting on Suicide</li> <li>- 9/14/23: National Suicide Prevention Month Event</li> <li>- 10/12/23: CTSAB Business Meeting</li> <li>- 11/9/23: CTSAB Lived Experience Committee, Recovery After Surviving An Attempt</li> <li>- 12/14/23: Marissa Sicely-Rogers, Melissa Morgera, Sara Jones, Erica Moura, Hartford Healthcare/Institute of Living, Suicide Postvention: Providing Care for the Caregivers</li> <li>- TBD: 5/11, 7/13, 8/10</li> <li>- <b>Subcommittee meetings are listed in the monthly meeting announcement sent on the CTSAB listserv.</b></li> </ul>	