



Saving Lives
Engaging Communities

Idaho Council on Suicide Prevention

Kathie Garrett, Chair

Report to Governor C.L. "Butch" Otter

December 2013

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Idaho Council on Suicide Prevention

2013 Council Members

Krissy Broncho
Native American
Fort Hall, ID

Pam Catt-Oliason
Commission on Aging
Boise, ID

Dieuwke Dizney-Spencer
Department of Health and Welfare
Boise, ID

Kathie Garrett
NAMI Idaho
Meridian, ID

John Goedde
State Senator
Coeur d'Alene, ID

Jeni Griffin
SPAN Idaho
Idaho Falls, ID

Ann Kirkwood
ISU Institute of Rural Health
Meridian, ID

Heidi Lasser
Department of Health and Welfare
Boise, ID

Matt Olsen
Bannock County Juvenile Justice
Pocatello, ID

Kirby Orme
Survivor Representative
Boise, ID

Mary Pierce
Boise Veterans Affairs
Midvale, ID

Kristie Pogue
Youth Representative
Boise, ID

John Reusser
Idaho Suicide Prevention Hotline
Boise, ID

Neva Santos
Idaho Academy of Family Physicians
Boise, ID

Laura Senderowicz
Ada County Sheriff's Office
Boise, ID

Patricia Stewart
Department of Education
Boise, ID

Amanda Wester
Youth Representative
Boise, ID

Peter Wollheim
Mental Health Professional
Boise, ID

Idaho Council on Suicide Prevention
2281 W Trestle Drive, Meridian ID 83646
(208) 921-8518

Kathie Garrett Chair

December 2013

The Honorable C.L. "Butch" Otter
Governor of Idaho
P.O. Box 83720
Boise, ID 83720

Dear Governor Otter:

The Idaho Council on Suicide Prevention would like to thank you for the opportunity to address the critical issue of deaths by suicide in Idaho. Suicide represents a major public health issue and has a devastating effect on Idaho's families, schools, and our communities.

Large numbers of Idahoans have lost their sense of belonging and hope and see themselves as a burden to others, subsequently taking their own lives. In 2010 (the most recent national data available), Idaho's suicide rate was 6th -- 49 percent higher than the national average. In 2012, 299 Idahoans completed suicide: a slight increase from 2011.

The tragedy of these deaths is that lives lost to suicide may have been saved through increased awareness, education, and prevention and intervention strategies. Therefore, the Idaho Council on Suicide Prevention focused its energy on engaging our communities in suicide awareness and prevention. Some of the Council efforts include:

- The Council held two roundtable discussions with primary care physicians and medical staff to discuss the critical role they play with suicide prevention.
- The Council sponsored a community event and discussion on how everyone has a role to play in suicide prevention.
- The Council included community partners in our annual meeting and engaged them in a discussion of their activities.
- The Council identified statewide QPR gatekeeper trainers and provided them with training materials.
- The Council worked with the Division of Public Health and the Department of Education to review survey information related to suicide in Idaho.

Again, we are pleased to note that there is growing momentum in our Idaho communities to undertake suicide awareness and prevention activities. In accordance with the Governor's Executive Order, the Council works to provide leadership and bring various groups together to mutually plan programs and activities.

The Council is proud to be a part of Idaho's effort to address this critical issue. We hope that this report provides you with some valuable information. On behalf of the Idaho Council on Suicide Prevention, we present this report for your consideration.

Sincerely,



Kathie Garrett
Chairman
Idaho Council on Suicide Prevention



The Office of the Governor

**THE OFFICE OF THE GOVERNOR
EXECUTIVE DEPARTMENT
STATE OF IDAHO
BOISE**

EXECUTIVE ORDER NO. 2010-12

**ESTABLISHING THE IDAHO COUNCIL ON SUICIDE PREVENTION
REPEALING AND REPLACING EXECUTIVE ORDER NO. 2006-35**

WHEREAS, Idaho is consistently among the states with the highest suicide rates. In 2007 Idaho had the 11th highest suicide rate, 28% higher than the national average; and

WHEREAS, Idaho's suicide rate is consistently higher than that of the United States as a whole; and

WHEREAS, Suicide is the 2nd leading cause of death for Idahoans age 15-34 and for males age 10-14; and

WHEREAS, In 2009, 307 people completed suicide in Idaho; a 22% increase over 2008, and a 40% increase over 2007; and

WHEREAS, suicide is particularly devastating in the rural and frontier areas of Idaho where one suicide significantly impacts entire small communities for years, even generations; and

WHEREAS, suicide attempts cost Idaho \$36 million annually; and

WHEREAS, suicide completion in Idaho cost \$861,431 annually in medical care.

NOW, THEREFORE, I, C.L. "BUTCH" OTTER, Governor of the State of Idaho, by the authority vested in me under the Constitution and laws of this state do hereby establish the Idaho Council on Suicide Prevention.

I. The Council's responsibilities shall be:

- A. To oversee the implementation of the Idaho Suicide Prevention Plan;*
- B. To ensure the continued relevance of the Plan by evaluating implementation progress reports and developing changes and new priorities to update the Plan;*
- C. To be a proponent for suicide prevention in Idaho;*
- D. To prepare an annual report on Plan implementation for the Governor and Legislature.*

II. The Governor shall appoint all members of the Council. The Council shall include representatives from:

- A. a representative from the Office of the Governor
- B. representatives from the Idaho State Legislature
- C. a representative from the Department of Health and Welfare
- D. a representative from the Department of Education or School Districts
- E. a representative from juvenile justice
- F. a representative adult corrections
- G. a representative from SPAN Idaho
- H. a mental health professional
- I. a representative for The National Alliance for the Mentally Ill or other mental health advocacy group
- J. Suicide survivors
- K. a representative from the Idaho Tribes
- L. a youth representative
- M. a representative from the Commission on Aging or aging services
- N. a military member, veteran or a representative from Veterans Affairs
- O. other members actively engaged in suicide prevention and awareness activities.

III. Council members shall:

- A. Serve for a term of three (3) years.
- B. The Governor shall appoint the Chair of the Council.
- C. The Council shall meet in person annually.
- D. The Council shall not exceed eighteen (18) members.

IN WITNESS WHEREOF, I have hereunto set my hand and caused to be affixed the Great Seal of the State of Idaho at the Capitol in Boise on this 27th day of September in the year of our Lord two thousand and ten and of the Independence of the United States of America the two hundred thirty-fifth and of the Statehood of Idaho the one hundred twentieth.



C.L. "BUTCH" OTTER
GOVERNOR

BEN YURSA
SECRETARY OF STATE



**Suicide in Idaho: Fact Sheet
October 2013**

- Suicide is the 2nd leading cause of death for Idahoans age 15-34 and for males age 10-14. (The leading cause of death is accidents.)
- Idaho is consistently among the states with the highest suicide rates. **In 2010 (the most recent year available) Idaho had the 6th highest suicide rate, 49% higher than the national average.**
- In 2012, 299 people completed suicide in Idaho; a slight increase from 2011.
- Between 2008 and 2012, 79% of Idaho suicides were by men.
- In 2012, 59% of Idaho suicides involved a firearm. The national average is 51%.
- 15.8% (1 in 7) of Idaho youth attending regular public and charter high schools reported seriously considering suicide in 2013. 7.0% (1 in 14) reported making at least one attempt.
- Between 2008 and 2012, 83 Idaho school children (age 18 and under) died by suicide. Sixteen of these were age 15 and under.
- It is estimated that suicide attempts in Idaho result in \$36 million in costs annually. Idaho's costs for suicide completions annually is over \$850,000 in medical care alone, and \$343 million in total lifetime productivity lost.
- In 2010, there were 38,400 deaths by suicide in the United States, an average of 1 person every 15 minutes.

Idaho Resident Suicides by Region – 2012

Region	Anchor City	Suicides	Rate (per 100,000)	Population	Tot. # suicides	
					2008-2012	5-yr Avg Rate
1	Coeur d'Alene	43	20.0-	215,460	233	21.8
2	Lewiston	28	26.3*	106,502	99	18.9
3	Nampa	43	16.6-	258,653	204	16.1
4	Boise	79	17.5*	451,664	344	15.7
5	Twin Falls	32	17.1-	187,171	185	20.2
6	Pocatello	34	20.4*	166,747	166	20.1
7	Idaho Falls	40	19.1*	209,531	200	19.5

* increase from 2011, - decrease from 2011

**Idaho Suicides by Age/Gender 2008-12
Over 5 year period**

Age	Total	Male	Rate	Female	Rate
12	16	13	4.6*	3	1.0-
15-19	96	77	27.4*	19	6.5*
20-24	111	92	34.7*	19	6.7*
25-34	179	141	27.4*	38	7.1-
35-44	260	188	39.7*	72	14.8*
45-54	308	238	45.9*	70	13.7*
55-64	240	188	41.4-	52	11.6*
65-74	104	89	31.9-	15	5.6*
75-84	72	68	40.9-	4	2.9*
85+	45	38	46.1-	7	15.1*

**Method 2008-12
(all ages)**

Firearm	59.5%
Poisoning	17.3%
Suffocation	18.4%
Cut/Pierce	.8%
Fall	1.4 %
Other	2.7%

Idaho Suicide Rates 2000 – 2012

Year	Number	ID Rate	US Rate
2000	166	12.8	10.7
2001	213	16.1	10.7
2002	203	15.1	11.0
2003	218	16.0	10.8
2004	239	17.2	10.8
2005	225	15.7	10.7
2006	218	14.9	11.1
2007	220	14.7	11.5
2008	251	16.5	11.8
2009	307	19.9	12.0
2010	290	18.5	12.4
2011	284	17.9	n/a
2012	299	18.7	n/a

Idaho Youth Risk Behavior Survey 2013 – Regular Public and Charter High School Students

<u>Grade</u>	<u>Sad or Hopeless</u>	<u>Suicidal</u>	<u>Plan</u>	<u>Attempt</u>	<u>Medical Care For Attempt</u>
9 th	28.4%	18.2%	12.8%	8.3%	2.8%
10 th	27.8	14.4	12.7	7.6	3.0
11 th	31.	15.3	11.9	6.8	2.0
12 th	29.3	14.9	14.3	5.7	1.9
Idaho Overall	29.4	15.8	13.0	7.0	2.5

Idaho Suicide Rate by County
5-year total number and 5-year average annual rate 2008-2012
 (resident suicides per 100,000 people)

<u>County</u>	<u>Number</u>	<u>Rate</u>	<u>County</u>	<u>Number</u>	<u>Rate</u>
Ada	303	15.4	Gem	17	20.5
Adams	3	15.9	Gooding	14	18.7
Bannock	96	23.2	Idaho	14	17.5
Bear Lake	8	27.1	Jefferson	22	17.2
Benewah	9	19.5	Jerome	29	26.5
Bingham	36	16.0	Kootenai	138	19.7
Blaine	20	18.6	Latah	19	10.2
Boise	10	27.9	Lemhi	19	48.3
Bonner	50	24.4	Lewis	5	26.5
Bonneville	108	20.9	Lincoln	5	20.1
Boundary	17	31.2	Madison	8	4.2
Butte	4	28.6	Minidoka	16	16.3
Camas	2	36.0	Nez Perce	51	26.0
Canyon	150	15.9	Oneida	4	19.0
Caribou	8	23.3	Owyhee	9	15.9
Cassia	14	12.5	Payette	16	14.0
Clark	2	42.9	Power	4	10.3
Clearwater	10	23.7	Shoshone	19	29.8
Custer	10	46.5	Teton	15	30.9
Elmore	23	16.7	Twin Falls	85	22.2
Franklin	10	15.7	Valley	8	17.2
Fremont	12	18.6	Washington	9	17.7
			Idaho (total)	1,431	18.3 (5-year average)

Note: Rates for many counties are based on fewer than 20 deaths. Caution is advised when interpreting rates based on small numbers.

Sources: Idaho Bureau of Vital Records and Health Statistics,
 Idaho Department of Health and Welfare,
 Center for Disease Control and Prevention
 Ann Kirkwood, Idaho Suicide Prevention Hotline Report, Idaho State University, Institute of Rural Health, 2010
 YRBS Idaho, 2013

Compiled by Jeni Griffin, Executive Director, SPAN Idaho
 Special Thanks to Pam Harder, Research Analyst Supervisor, Bureau of Vital Records and Health Statistics



Idaho State Department of Education Suicide Prevention Program Initiatives

The Coordinated School Health Program in the Idaho State Department of Education conducted the 2013 Youth Risk Behavior Survey surveying 1,883 students in Grades 9-12 in public schools across the state. The YRBS survey captures student reported data on intentional injuries (which includes suicidal tendencies) and unintentional injuries, dietary behaviors, physical activity, drug and alcohol use, tobacco use and sexual behavior. Additional questions are asked related to protective factors related school experience/support. Idaho has YRBS trend data from 2001-2013.

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As a result of the School Safety Task Force recommendations Superintendent Luna has requested \$500K in the SDE budget for startup funds to establish an Idaho Center for School Safety. Additionally, the Superintendent included \$2.2 million in dedicated funds for distribution to school districts focused on school safety improvements based on the threat assessment data. These items are requests for the Joint Finance Committee's consideration and represent meaningful initial investments for school safety.

Members of the School Safety Task Force have also been conducting a statewide assessment of school safety procedures. 75 schools, selected through a random sample, were chosen for evaluation and at least 50 school onsite visits have been completed. Future steps for the Task Force will be to review the findings and compile strategies to assist schools in addressing critical safety improvements.

The Idaho Lives Project, collaboration between the SDE and the Suicide Prevention Action Network of Idaho (SPAN Idaho) to address suicide prevention in Idaho, recently released the application for the first project cohort to be trained by the Sources of Strength curriculum. An advisory board will select five to seven schools for participation based on need, the strength of the application, and geographical distribution to maximize statewide impact. These trainings will focus on teaching peer and adult leaders to foster local resources and connect at-risk youth with mental health providers. Sources of Strengths school trainings will begin in the spring of 2014.

The SDE staff are preparing for the 21st Idaho State Prevention and Support conference in Sun Valley, which is focused on fostering supportive environments for youth by addressing: school safety, bullying, substance abuse, suicide, out of school programming, family and community engagement and other areas related to improving school climate. This training is conducted annually for teachers, counselors, school resource officers, law enforcement, and community stakeholders.

The SDE is mandated by the U.S. Department of Education- Guns Free Schools Act to collect data from Idaho schools disciplinary violations related to violence with injuries, violence without injuries, weapons, suspensions and expulsions, and alcohol and drug related incidents. The data continues to be reported by the schools annually to the SDE using the Idaho System for Educational Excellence (ISEE).

Idaho Youth Risk Behavior Survey (YRBS) – Suicide

The 2013 Youth Risk Behavior Survey (YRBS) was administered to 1,883 high school students in Idaho and contained five questions about suicide and suicidal ideation. The results of the 2013 Idaho YRBS represent all 9th through 12th grade traditional public and charter school students in Idaho.

Results of 2013 Idaho YRBS Suicide-related Questions	Total Percent
Percentage of students who felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities during the past 12 months	29.4%
Percentage of students who seriously considered attempting suicide during the past 12 months	15.8%
Percentage of students who made a plan about how they would attempt suicide during the past 12 months	13.0%
Percentage of students who actually attempted suicide one or more times during the past 12 months	7.0%
Percentage of students who made a suicide attempt during the past 12 months that resulted in an injury, poisoning, or overdose that had to be treated by a doctor or nurse	2.5%

Among the five measures related to suicide, female students are significantly at greater risk than male students in all measures except for suicide attempts that resulted in an injury during the past 12 months (see table below). Hispanic students (37.4%) were significantly more likely than White Non-Hispanic students (27.3%) to report feeling so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities during the past 12 months.

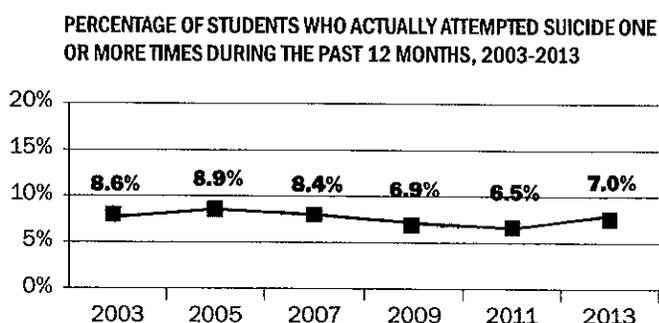
Results of 2013 Idaho YRBS Suicide-related Questions Among Male and Female Students in Idaho Grades 9 through 12	Male Students Percentage (95% C.I.)	Female Students Percentage (95% C.I.)
Percentage of students who felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities during the past 12 months*	20.4% (18.1 - 22.9)	38.8% (36.0 - 41.7)
Percentage of students who seriously considered attempting suicide during the past 12 months*	10.5% (8.7 - 12.7)	21.3% (18.4 - 24.5)
Percentage of students who made a plan about how they would attempt suicide during the past 12 months*	8.9% (7.5 - 10.5)	17.3% (14.9 - 20.0)
Percentage of students who actually attempted suicide one or more times during the past 12 months*	5.1% (3.8 - 6.8)	8.9% (7.0 - 11.2)
Percentage of students who made a suicide attempt during the past 12 months that resulted in an injury, poisoning, or overdose that had to be treated by a doctor or nurse	2.0% (1.3 - 3.1)	3.0% (1.9 - 4.9)

*Differences between male and female student's responses are statistically significant based on non-overlapping 95% confidence intervals.

Change Over Time

The percentage of students who actually attempted suicide one or more times during the past 12 months is the only suicide-related YRBS measure that has changed significantly over time. The percentage of students who actually attempted suicide one or more times during the past 12 months decreased from 8.6% in 2003 to 7.0% in 2013.

Note: the decrease from 2003 to 2013 was statistically significant based on trend analysis using a logistic regression model controlling for sex, race/ethnicity, and grade ($p < 0.05$).



Saving Lives: Engaging Our Communities

Overview and Recommendations

Large numbers of Idahoans have lost their sense of belonging and hope and see themselves as a burden to others -- subsequently taking their own lives. In 2010 (the most recent national data available), Idaho's suicide rate ranked 6th -- 49 percent higher than the national average. In 2012, 299 Idahoans completed suicide, a slight increase from 2011. The tragedy of these deaths is that suicide is preventable if warning signs are identified early and individuals are encouraged to seek mental health care.

The Idaho Council on Suicide Prevention (Council) continues to aggressively distribute the Idaho Suicide Prevention Plan and coordinate with communities to initiate evidence-based and culturally appropriate local projects. The Plan, published in 2011, serves as an Action Guide designed to lead state, regional and local efforts to meet the unique local needs. In accordance with the Governor's Executive Order, the Council works to provide leadership and bring various groups together to mutually plan programs and activities.

2013 Activities

Engaging health care providers.

The Council held two roundtable discussions with primary care physicians and medical staff to discuss the critical role they play with suicide prevention.

Research shows:

- Up to 45% of individuals who die by suicide have visited their primary care physician within the month of their death.
- Up to 25-60% of people contemplating suicide seek attention for a medical problem in the weeks before death, and yet as many as 81% do not seek prior psychiatric help.
- At any given time, between two to four percent of patients in a primary care setting are having thoughts of suicide.
- Additional research suggests that up to 67% of those who attempt suicide receive medical attention as a result of their attempt.

The goal of these roundtables was to discuss challenges and best practices for suicide prevention in primary care settings, how evidence-based risk assessments and safety planning tools could be incorporated into everyday practice, and issues relating to effective referrals to specialty care and community resources, such as the new Idaho Suicide Prevention Hotline. These roundtables helped to develop strategies to share evidence-based programs with primary care physicians across Idaho.

Engaging community members.

In conjunction with the National webcast, Everyone Plays a Role in Suicide Prevention: Turning Strategy into Action, the Council sponsored a community event.

Meeting goals:

- Understand that suicide is a preventable public health issue

- Understand that everyone has a role to play in suicide prevention
- Learn about the Nation Strategy for Suicide Prevention
- Learn about the Idaho Suicide Prevention Plan
- Look at Idaho specific strategies

Engaging partner groups.

As part of the Council's annual meeting, community partners were invited to attend and share their activities. Their reports can be found at the back of this report.

Engaging gatekeepers.

The Idaho Suicide Prevention Plan identified gatekeeper education as one of its ten goals, with a strategy to ensure that ongoing gatekeeper training opportunities are available to people who work with individuals at-risk for suicide.

The Council selected the one-hour best practice training program called QPR. QPR stands for Question, Persuade, and Refer. QPR is a simple educational program that teaches ordinary citizens how to recognize a mental health emergency and how to get a person at-risk the help they need.

The Council created a statewide list of existing certified QPR trainers and purchased QPR booklets to be given to QPR trainers willing to provide the training.

Promoting the Idaho Suicide Prevention Hotline.

The Idaho Suicide Prevention Hotline is committed to the prevention of suicide in Idaho. The Hotline provides crisis intervention, emotional support and resource referrals, and follow-up for persons with potential suicide risk factors. The Idaho Suicide Prevention Hotline (ISPH) approaches its first full year of operations ahead of schedule, expanding its hours of operation to Monday thru Friday 9 a.m.-9 p.m., successfully training its third volunteer class and securing additional one-time funding.

Using data to inform our efforts.

The Council reviewed statistics compiled by the Division of Public Health and the State Department of Education in their Behavioral Risk Factor Surveillance System and Youth Risk Behavior Surveys. Work is underway to determine what common data is available across the lifespan from teens to older adults, and how to sort data to reveal the correlation of suicide data to other factors, such as domestic violence, substance use, race/ethnicity, or income. By sorting data in this way, the Council will be able to support prevention efforts by targeting specific areas of concern and identify potential partners for prevention activities. The Council also is working with the Hotline to review data collected about caller needs and concerns.

2014 Proposed Activities

Engaging primary care providers.

The Council is currently working with the Western Interstate Commission for Higher Education (WICHE) to provide training on suicide prevention for Rural Primary Care providers.

Engaging Idaho youth.

The Council is working with youth to identify methods for obtaining input to inform the Council's work. A special youth event will be organized in 2014 to begin gathering information about teens' perceptions of suicide risk, how adults can better meet the needs of at-risk youth, and to solicit recommendations for future activities to prevent child/youth suicides statewide.

Idaho Lives.

The Idaho State Department of Education has been awarded a \$1.29 million grant over the next three years to begin the Idaho Lives Project, a collaboration among the state, the Idaho Suicide Prevention Action Network (SPAN-Idaho) and other partner organizations to reduce the prevalence of suicide among youth ages 10-24 in Idaho.

Over the next three years, the Idaho Lives Project will reach an estimated 31,000 individuals in schools and communities across Idaho, including students in elementary and middle grades, entire school communities and all sub-groups of the population. An advisory board will select a total of 30-42 school communities.

Idaho Suicide Prevention Hotline.

Top goals for the Hotline year two of operation are: an accreditation site visit by Contact USA in December 2013, continuing to develop and pursue sustainable funding strategies, recruiting and training a fourth volunteer cohort in preparation for its next expansion of operating hours, broadening its existing advisory/ fundraising board to include representation from throughout our state, and increasing the breadth and penetration of our marketing efforts.

The Idaho Council on Suicide Prevention acknowledges the tremendous efforts of all our community partners for their effort in suicide awareness and prevention. While much work has been done, there still remains a lot to do. The Idaho Council on Suicide Prevention remains dedicated to **engaging our communities to save lives.**

Idaho Suicide Prevention Goals

Goal 1: Public Awareness

Idahoans understand that suicide is preventable and accept responsibility for their role in suicide prevention.

Goal 2: Anti-Stigma

Idahoans understand and accept that seeking help for mental health issues is to be encouraged and supported.

Goal 3: Gatekeeper Education

The education of professionals and others working with people at-risk for suicide includes effective suicide prevention curricula and ongoing gatekeeper and other suicide prevention training.

Goal 4: Behavioral Health Professional Readiness

Mental health and substance abuse treatment professionals are trained to use current, appropriate, and recommended practices for assessing and treating individuals who show signs of suicide risk.

Goal 5: Community Involvement

Community leaders and stakeholders develop and implement suicide prevention activities that are current, recommended, and culturally appropriate that are specific to their regions and communities.

Goal 6: Access to Care

Crisis intervention and behavioral health services, including mental health and substance abuse treatment, are widely available, culturally appropriate, accessible, and valued by communities.

Goal 7: Survivor Support

Information and services are in place in all regions of Idaho to support survivors and others affected by suicide in a sensitive and culturally appropriate manner.

Goal 8: Suicide Prevention Hotline

An Idaho statewide suicide prevention hotline is established and funded.

Goal 9: Leadership

The Idaho Council on Suicide Prevention oversees suicide prevention activities at all levels, as guided by the Idaho Suicide Prevention Plan, and works in collaboration with a lead Idaho state government agency that is responsible for Idaho's suicide prevention and intervention efforts.

Goal 10: Data

Data is available on which to make decisions regarding suicide prevention services.

Copies of the Idaho Suicide Prevention Plan are available electronically at www.spanidaho.org.

Partner Reports
Accomplishments in Suicide Prevention



ACTIVITIES AND ACCOMPLISHMENTS

October 2013

Overview

SPAN Idaho is a suicide prevention organization founded in 2002 as a 501 (c) (3) nonprofit organization. Our mission is to provide leadership for suicide prevention in Idaho. At the state level, SPAN Idaho comprises a volunteer board of directors and two part-time staff, with established chapters in each of the seven Idaho Department of Health and Welfare (IDHW) regions to carry out statewide suicide prevention awareness activities and to respond at a community level. From its beginning, Span Idaho as a grassroots organization has encouraged and recognized the importance of regional and local involvement to prevent suicide. With the help of our chapters and other organizations, SPAN Idaho works to eradicate suicide in our state.

Just Announced

In partnership with Idaho State Department of Education (SDE), SPAN Idaho received the Garrett Lee Smith Memorial Act (GLSMA) grant administered by the Substance Abuse and Mental Health Services Administration (SAMHSA) to target youth, ages 10-24 in suicide prevention. This month we commence the Idaho Lives Project (ILP), which will reach more than 31,000 individuals over the three-years of the grant, with training for youth, school staff, community adults along with health and mental health providers in effective response to suicidal youth. All goals of the project align with the goals of the Idaho Suicide Prevention Plan (ISPP) and the National Strategy for Suicide Prevention (NSSP).

Training and Awareness

SPAN Idaho and its chapters consistently provide or co-host a variety of community activities to educate the public about suicide and suicide prevention. For instance, we

- Offer training for clinicians, survivors, police/sheriff departments, and anyone interested in suicide prevention. As of September 2013, SPAN Idaho's annual statewide conferences the last twelve years have trained approximately 2,300 participants in suicide prevention skills. Most of these conferences hosted nationally recognized experts.
- Developed and conducted presentations and trainings on suicide and suicide prevention for the Idaho Department of Labor, Idaho National Lab, Idaho Criminal Justice Commission, IDHW Children's Mental Health, Idaho Juvenile Justice, Idaho State Tax Commission, Idaho National Guard, schools, parent groups, clergy, and other community groups.
- Hold regional annual Save-the-One Memorial Walks to raise awareness and support survivors.
- Provide materials at community events and gatherings to share suicide warning signs and other prevention measures.

In addition to the above statewide initiatives, our Chapters have conducted many projects on their own, including providing suicide prevention messages on radio, television, and billboards; joining other agencies to discuss and respond to area suicides; training area school staffs and law enforcement and others in suicide prevention; and meeting monthly to plan and promote suicide prevention activities.

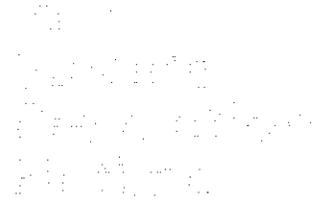
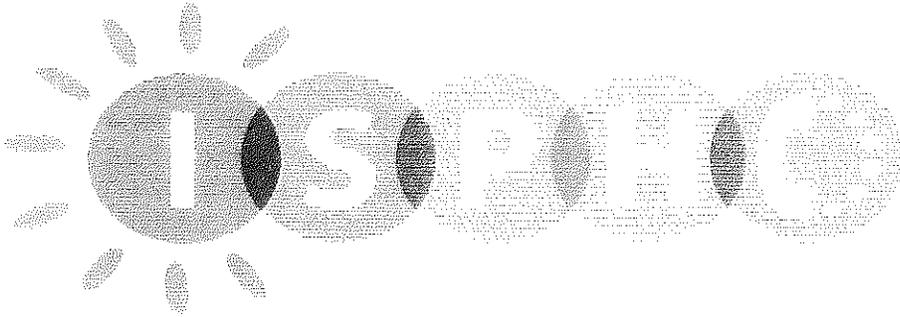
New and Ongoing

- We maintain a highly informative and well-regarded website.
- We fulfill requests for information and resources on-line and on the phone to include highly sensitive calls.
- We continue our partnership with Idaho Farm Bureau (IFB) to write prevention articles for its publications. We have nearly completed a project in the Magic Valley and Canyon County, aimed at educating the area's people on the warning signs and risk behaviors of suicidal people and directing them to appropriate resources.
- In conjunction with IFB, we created suicide prevention posters with the easily removable Lifeline phone number tabs for a variety of community places, including schools, churches, coffee shops, restaurants, and bars.
- We act as a conduit for suicide prevention information locally, statewide, and nationally and engage and collaborate with other groups, including the Veteran's Administration, 211 Careline, the Commission on Aging, RADAR, SDE, IDHW and others. Nationally, SPAN Idaho engages with the major suicide prevention groups, participates in conferences and webinars, and writes articles, to exchange best practice information, data and ideas.
- We provide information packets to suicide survivors through the Idaho Funeral Directors Association and county coroners as well as to suicide survivors on request to support the grieving and healing process.
- We offer suicide survivor support groups regionally.
- We distribute materials to the general public at community events.
- We offer QPR training and specific suicide prevention training to groups upon request.
- We provide information and guidance to high school and college students for their projects.
- We are members of the Idaho Council on Suicide Prevention and collaborate to carry out activities.
- We continually review suicide prevention research and best practices to develop programs and distribute relevant information statewide on a regular basis.
- We continue to foster a relationship with the Idaho Hotline and have provided assistance with the development of a state-wide resource list for its callers. We distribute Hotline information packets with the help of SPAN regional chapters.
- We work to implement the Idaho State Suicide Prevention Plan with the ICSP and coordinate efforts in Idaho communities to introduce the National Suicide Prevention Plan and bring more attention to national and local suicide prevention efforts.

Upcoming

- To implement and evaluate the Idaho Lives Project aimed at identifying, intervening with and referring students at risk for suicide.
- To publish and distribute a statewide newsletter, tailored to communities, to promote suicide prevention awareness and activities.
- To increase suicide awareness activities on college campuses.
- To continue training specific groups in suicide prevention and survivor support including target groups such as first responders, clergy, mental health and health care providers, school personnel, aging services staff, corrections personnel, parents and others.
- To encourage growth in regional chapters.

For more information go to spanidaho.org



Accomplishments and Activities - 2013

The Idaho Suicide Prevention Hotline is committed to the prevention of suicide in Idaho. The Hotline is a program of Mountain States Group, a 501 (c) (3) non-profit organization. The Hotline provides crisis intervention, emotional support and resource referrals, and follow-up for persons with potential suicide risk factors. The Idaho Suicide Prevention Hotline (ISPH) approaches its first full year of operations ahead of schedule, expanding its hours of operation to Monday thru Friday 9 a.m.-9 p.m., successfully training it's 3rd volunteer class and securing additional one-time funding.

Idaho Suicide Prevention Hotline Call Statistics November 25, 2012 to October 31, 2013		
	Quarterly July- Sept, 2013	Since Launch
Total Calls Received	252	819
Military Members Served	22	72
Rescue Calls (approximate)	27	63
Follow Up Activities Completed	152	549
Percentage of Calls Receiving Follow Up Activities	57%	48%
Caller Age:		
10 - 14	7	25
15 - 20	36	88
20 - 24	13	39
25 - 34	31	119
35 - 44	30	68
45 - 54	43	136
55 - 64	13	46
65 - 74	9	19
75 - 84	0	3
85+	1	2
Didn't Report	69	274

Volunteer Recruitment and Training

ISPH in conjunction with the Idaho National guard, has trained approximately 55 volunteers in the ASIST (applied suicide intervention skills training) model and approximately 43 are currently active as hotline Phone responders. Since launch they contributed a total of 5,779 hours, valued at \$110,950). ISPH has trained 55 volunteers since launch with approximately 42 active. We are excited to begin recruiting a separate cohort of non-phone worker volunteers to assist with community outreach and support tasks.

Facilities

Our continued sincere thanks go to Jay Lugo, Executive Director of the Idaho Lions Sight and Hearing Foundation for their donation of their 2,200 square feet of space for an in-kind value since launch of 26,000. The Hotline has begun its planned phone room upgrade project to install 4 distinct Responder stations in its existing space, improving acoustics during increasingly busy shifts and expanding capacity for higher call volume and eventual round the clock service provision.

Hotline Data Capacity

ISPH has now collected nearly a year's worth of data on calls through its *icarol* software package. Responders gather multiple dimensions of demographic info from each caller such as age, zip code, ethnicity, history of military service and insurance information. Requests for statistics related to caller demographics should be directed to jreusser@mtnstatesgroup.org with "request for Hotline statistics" in the subject line. The extensive ISPH resource database is continually updated by volunteers; if your agency receives an email from noreply@icarol.com on behalf of the Hotline it is not junk mail but a request from ISPH volunteers to either confirm or update listing info.

Marketing and Outreach

The Hotline has distributed almost 15,000 tri-fold wallet cards and several hundred bilingual marketing kits containing wallet cards, posters, rack cards, magnets and more recently stickers throughout the state. Materials are available upon request by emailing npounds@mtnstatesgroup.org and including "request for Hotline marketing materials" in the subject line. A video PSA (thanks to the City of Meridian) is available here <http://www.youtube.com/watch?v=HtCtJelcY4> for free distribution, and stylish Hotline logo/ phone number t-shirts are available for sale via the ISPH website: www.idahosuicideprevention.org and the ISPH Facebook page: www.facebook.com/idahosuicideprevention. ISPH staff conducts ongoing outreach and dialogue with representatives from education, law enforcement and other first responders, the medical community, outpatient treatment providers, and advocacy organizations to ensure continuous collaboration and improved service provision.

Plans for the Next Quarter

Top goals for the Hotline year 2 of operation are: an accreditation site visit by Contact USA in December 2013, continuing to develop and pursue sustainable funding strategies, recruiting and training a fourth volunteer cohort in preparation for its next expansion of operating hours, broadening its existing advisory/ fundraising board to include representation from throughout our state, and increasing the breadth and penetration of our marketing efforts.

Special thanks goes out to our funders and partners, with whom this vital program would not have been possible: Idaho Department of Health and Welfare, Idaho Division of Veteran's Services, the Idaho State Legislature, SPAN-Idaho, U.S. Veterans Affairs, United Way of Treasure Valley, United Way of Kootenai County, United Way of Southeast Idaho, The Speedy Foundation, Idaho National Guard, Saint Alphonsus Regional Medical Center, Wells Fargo, Saint Luke's Regional Medical Center, Idaho Academy for Lawyers in Leadership, Idaho Emergency Medical Services Bureau, Ada County EMS, Meridian and Boise Police departments, and numerous other donors and supporters.



United States Department of Veterans Affairs

Boise Veterans Affairs Medical Center

Suicide Prevention Program

The Veterans Affairs' basic strategy for suicide prevention is to provide ready access to high quality mental health (and other health care) services supplemented by programs designed to help individuals and families engage in care and to address suicide prevention in high risk patients. Outreach, education and participation on community boards are also critical aspects of the Boise VAMC suicide prevention program.

- The Suicide Prevention Coordinator ensures suicidal Veterans receive the appropriate services. In the last 12 months 157 Idaho Veterans were connected to the Suicide Prevention Coordinator by Veterans Crisis Line consults, community hospitals, various social welfare agencies, families and friends, and have been connected with VA Services.
- Screening and assessment processes have been set up throughout the system to assist in the identification of Veterans at risk for suicide. A chart "flagging" system has been developed to assure continuity of care and provide awareness among providers. Veterans who have been identified as being at high risk receive an enhanced level of care, including missed appointment follow-ups, safety planning, weekly follow-up visits and care plans that directly address their suicidality. In the last 12 months 61 Idaho Veterans have been identified as High Risk for Suicide with two High Risk Veteran suicides.

- The Suicide Prevention Coordinator and VA Mental Health staff provide community outreach that includes education on Veterans mental health issues as well as suicide prevention and intervention. *The Boise VAMC Suicide Prevention efforts included:*
 - 129 community outreach activities, including 54 presentations on the topics of suicide prevention, working with suicidal veterans, suicide risk assessment and intervention strategies.
 - Outreach Highlights
 - “Suicide Prevention In Action.” One day conference on 9/4/2013 in Boise, Idaho. 280 mental health professionals, educators, nurses, law enforcement, and social service providers attended and received 6.5 continuing education credits.
 - Training on Suicide Risk Assessment and Intervention given to over 100 statewide emergency service dispatchers at their annual PSAP conference in Nampa, October 2012.
 - Presented on Working with Suicidal Veterans at the “Issues Surrounding Military Suicides: Making the Connection” workshop in April, 2013.
 - Presented on Suicide and the Elderly for the Justice Alliance for Vulnerable Adults members, October, 2013.
 - Presented on Suicide Risk Assessment and Working with Suicidal Clients for Bright Star Continuing Education Series in April and July, 2013. Approximately 130 social workers attended.

- The Suicide Prevention Coordinator is a current member of Governor’s Council on Suicide Prevention; Board member for the Idaho Suicide Prevention Action Network; and on the Advisory Board for the Idaho Suicide Prevention Hotline.

Idaho Army National Guard Suicide Prevention Program

The Idaho Army National Guard's strategy for suicide prevention is to create a multilayer system that promotes both Guard and community based resources that reach Service Members, families and their communities. It is our goal to create a suicide safe community in which help-seeking behavior is encouraged, and part of this process is building resilience within our Service Members and families. We have a multidimensional approach in which we have developed a foundation of services that are supported through curriculums such as resilience programs, peer support, family readiness groups and crisis response education. IDARNG believes in taking care of our Service Members and their families. We understand that our Service Members are citizen warriors and through strong community partnerships we will be able to obtain our goals.

Goal 1: Public Awareness Idahoans understand that suicide is preventable and accept responsibility for their role in suicide prevention.

- Awareness campaign with providers
- Yellow Ribbon: Pre-Mobilization, Sustainment Events and Post Mobilization
- Psycho-educational workshops for Access to Recovery providers
- Youth Events/Month of the Military Child

2013 Updates:

- Substance Abuse & Mental Health Services Administration Partnership with multiple agencies to erect the Veterans, Service Members and Families Governors Council

Goal 2: Anti-Stigma Idahoans understand and accept that seeking help for mental health issues is to be encouraged and supported.

- Warrior-to-Warrior (W2W) Peer Support Program
- Command emphasis on Anti-Stigma Policy
- Resilience Training

2013 Updates:

- W2W implemented in every unit in the state and training program accessed by Non-Commissioned Officers

- Resilience Trainers located in every unit statewide providing self-awareness skills to Service Members and families across the state

Goal 3: Gatekeeper Education The education of professionals and others working with people at risk for suicide includes effective suicide prevention curricula and ongoing gatekeeper and other suicide prevention training.

- ISU Rural Health training with all Idaho Military Division Family Programs Offices
- Applied Suicide Intervention Skills Training (ASIST) for Gatekeepers and First Line Leaders
- Question, Persuade, Refer (QPR) training with Family Readiness Groups

2013 Updates:

- Resilient Leader Courses: leaders trained in ASIST, Resilience and Peer Support
- Military Cultural Awareness Education with Department of Health & Welfare
- Education with Local Police Departments and Critical Incident Teams

Goal 4: Behavioral Health Professional Readiness Mental health and substance abuse treatment professionals are trained to use current, appropriate, and recommended practices for assessing and treating individuals who show signs of suicide risk.

- National Conference attendance specialized training attendance, regional training events
- Military Family Life Consultants (MFLC) and Director of Psychological Health (DPH) efforts in community capacity building to engage and educate other professionals
- Army One Source web trainings provided to community clinicians

2013 Updates:

- Participation with Idaho Coalition Against Sexual & Domestic Violence Annual Symposium
- Continuing education in the Applied Suicide Intervention Skills Training program

Goal 5: Community Involvement Community leaders and stakeholders develop and implement suicide prevention activities that are current, recommended and culturally appropriate that are specific to their regions and communities.

- Involvement with community organizations
- Ongoing development of activities related to Suicide Prevention Month and state policy

2013 Updates:

- Partnerships with multiple state, local and private agencies to develop Veterans, Service Members, and their Families (VSMF) Governor's Council

Goal 6: Access to Care Crisis intervention and behavioral health services, including mental health and substance abuse treatment, are widely available, culturally appropriate, accessible, and valued by communities.

- Family Assistance Coordinators in 7 regions/VA/Vet Center/ Tricare /Access to Recovery/Director of Psychological Health /Military Family Life Consultants/Military One Source/Chaplains

2013 Updates:

- Partners with Northwest Nazarene University and Idaho State University to provide free counseling services to Service Members and their families
- Utilizing the Idaho Guard and Reserve Family Support Fund to sponsor counseling sessions for Service Members in need

Goal 7: Survivor Support Information and services are in place in all regions of Idaho to support survivors and others affected by suicide in a sensitive and culturally appropriate manner.

- Survivor Outreach Services (SOS)
- Casualty Assistance Officers
- Chaplains
- Director of Psychological Health (DPH) and Military Family Life Counselor (MFLC) Services

2013 Updates:

- SOS Coordinator established support groups for Gold Star Families (families who have lost a Service Member)
- Utilized Vet Center, MFLCs, and DPH to provide free counseling to survivors
- Provided post incident response services for families and military units who lost Service Members to suicide

- Provided suicide incident response and resources for Mountain Home High School following student suicide

Goal 8: Suicide Prevention Hotline An Idaho statewide suicide prevention hotline is established and funded.

- Provide support for ASIST trainings.

2013 Updates:

- Supported the Idaho Suicide Prevention Hotline in training the first three all volunteer cohorts

Goal 9: Leadership The Idaho Council on Suicide Prevention oversees suicide prevention activities at all levels, as guided by the Idaho Suicide Prevention Plan, and works in collaboration with a lead Idaho state government agency that is responsible for Idaho's suicide prevention and intervention efforts.

- The Idaho National Guard Command Group has placed considerable emphasis on the development of programs and policy to better serve the needs of our Guard Members

2013 Updates:

- Initiated development of the Crisis Response Team Plan for the Idaho Army National Guard

Goal 10: Data

Data are available on which to make decisions regarding suicide prevention services.

- Gathering DPH and MFLC data on contacts, crises, prevention activities
- Monitoring national data

2013 Updates:

- Implemented and gathered Unit Risk Inventory data regarding high risk behaviors among the Idaho Army National Guard population which directs allocation of services and training amongst Soldiers.



STATE DEPARTMENT OF EDUCATION

P.O. BOX 83720
BOISE, IDAHO 83720-0027

TOM LUNA
STATE SUPERINTENDENT
PUBLIC INSTRUCTION

IDAHO RECEIVES \$1.3 MILLION GRANT FOR YOUTH SUICIDE PREVENTION

October 7, 2013- The Idaho State Department of Education has been awarded a \$1.29 million grant over the next three years to begin the Idaho Lives Project, a collaboration among the state, the Idaho Suicide Prevention Action Network (SPAN-Idaho) and other partner organizations to reduce the prevalence of suicide among youth ages 10-24 in Idaho.

Today, Idaho ranks among the top five states for teen suicides and in the top ten states for overall suicides. Because of Idaho's rural geography, many students and families have faced barriers in accessing prevention and mental health services.

"This is a unique opportunity for our state and local communities. The tragedy of suicide is beyond measure, and unfortunately, Idaho is not immune to this tragedy. With the right knowledge and support, suicide is the most preventable form of death," Superintendent of Public Instruction Tom Luna said. "Through this grant, the State Department of Education as well as state and local partners will work together to equip our schools and communities with the training and resources necessary to prevent teen suicide now and in the future."

Over the next three years, the Idaho Lives Project will reach an estimated 31,000 individuals in schools and communities across Idaho, including students in elementary and middle grades, entire school communities and all sub-groups of the population. An advisory board will select a total of 30-42 school communities to participate in this project based upon need, interest and readiness to benefit.

Specifically, the project will focus on training school staff and community adults in effectively responding to at-risk youth, equipping students to reach out to trusted adults when peers exhibit suicidal tendencies, and fostering local resources to connect at-risk youth with mental health providers.

"Implementing the Idaho Lives Project with the curriculum 'Sources of Strength' is going to be a significant boost to the suicide prevention efforts for the youth in Idaho," said Jeni Griffin, Executive Director of SPAN-Idaho. "With this grant, Idaho can address youth suicide with a program proven to reduce suicide in our youth as well as giving them key tools as protective factors for them as adults. SPAN Idaho is pleased to be a part of this collaborative project."

The Idaho Lives Project will evaluate and document strategies used so effective practices can be shared across the state.

The Project is federally funded by the State and Tribal Youth Suicide Prevention Grant awarded through the Substance Abuse and Mental Health Services Administration (SAMHSA) to support states and tribes in developing and implementing suicide prevention strategies.

For more information about the Idaho Lives Project, please contact Matt McCarter at the Idaho State Department of Education at mamccarter@sde.idaho or (208) 332-6961, or contact Jeni Griffin at SPAN-Idaho at jgriffin@spanidaho.org or (208) 860-1703.

YOUTH SUICIDE PREVENTION AND EDUCATION RURAL OUTREACH PROGRAM

A collaborative effort between the Idaho Rural Health Association, The Jason Foundation and the Family Medicine Residency of Idaho.

Report November 2013

Contacts:

Shannon Schmitz, OTR/L
Idaho Rural Health Association, Executive Director
Jason Foundation Representative
Co Chair SPAN Idaho Region 4
idahorha@gmail.com

David Schmitz, MD, FAAFP
Program Director Rural Training Tracks, Chief Rural Officer at the Family Medicine Residency of Idaho
Ex-officio Board Member, Idaho Rural Health Association
dave.schmitz@fmridaho.org

Introduction

This innovative program format developed here in Idaho provides rural communities with information addressing youth suicide awareness and prevention education through a power point presentation followed by a facilitated discussion with a local leadership panel. This program is geared towards educating adults and is offered at no cost to the community. Educational materials are provided via the Jason Foundation and continuing education credits are available for attendees. Local multimedia including both radio and newspaper is generally engaged to assist with advertising.

Content

1. Awareness
2. Signs of Concern
3. Risk Factors
4. Where to go for help (state and local options)
5. Resources (state and local options)

Communities

January 8, 2013
Suicide Prevention Action Network Southwest Regional Meeting (Boise, Idaho)

January 26, 2013
Idaho Suicide Prevention Hotline Special Topics (Boise, Idaho)

April 9, 2013
Suicide Prevention in a Healthcare Setting Roundtable (Boise, Idaho)

May 7, 2013
Suicide Prevention in a Healthcare Setting Roundtable (Boise, Idaho)

May 17, 2013
Annual Conference of the Idaho Academy of Family Physicians (Boise, Idaho)

September 10, 2013

Suicide Prevention Action Network Southwest Region Memorial Walk (Boise, Idaho)

November 2013

Two community outreaches are currently in the planning stages.

Team Building and Collaboration

1. Idaho Department of Education
2. Kathie Garrett, Co-chair Idaho Council On Suicide Prevention
3. Suicide Prevention Action Network of Idaho
4. Boise State University
5. Idaho State University Institute of Rural Health
6. Maine Youth Suicide Prevention Program
7. Family Medicine Residency of Idaho
8. The Jason Foundation
9. University of Washington Psychiatry Residency Program, Idaho Advanced Clinician Track

Program Recognition

The Idaho Rural Outreach Program which projects have included Youth Suicide Prevention and Meth Use Prevention (in conjunction with the Idaho Meth Project) was accepted for presentation at the Annual Spring Meeting of the Society of Teachers of Family Medicine, Vancouver, B.C. 2010.



Boise Police Department

Michael F. Masterson
Police Chief

Boise Police Dept.
333 N. Mark Stall Place
Boise, ID 83704-0644

Phone
208/570-6000

Fax
208/570-6049

TDD/TTY
800/377-3529

Web
www.cityofboise.org/police
www.boisepolice.org



Mayor
David H. Bieter

City Council
President
Maryanne Jordan

Council Pro Tem
David Eberle

Elaine Clegg
Lauren McLean
TJ Thomson
Ben Quintana

Saving Lives; Engaging our Communities Boise Police Department

Leadership in problem solving partnerships is a model the Boise Police Department has used for a variety of community issues, now including those in mental or emotional crisis. When officers saw an increase in calls regarding people threatening to hurt themselves or hurt others due to a downward spiral of mental health, and recognized the increasing danger of those calls to citizens and to officers, police department leadership searched for best practices to address the problem. And where best practice didn't exist – they created it. Chief Mike Masterson uses the analogy of a “Crisis River”. His officers are called 20 times per day to save “floaters”, or people in some form of mental health crisis calling 911 needing rescue from the rapids. Of those, about five people per day in region four are rescued in “critical condition” and placed on mental holds by police and hospital-based doctors. Yet despite best efforts, in Boise alone, one person a week falls victim to “the rapids” and dies by suicide.

Police are being called with greater frequency to intervene downstream, when individuals have reached crisis, and whose unpredictable, potentially violent behavior poses an immediate threat to officer and public safety. This has prompted the Boise Police Department to lead efforts toward upstream, proactive solutions, to prevent individuals from falling into the crisis river.

Chief Masterson and his officers deal with these crisis situations daily. In addition to working toward increased and improved training for officers, the Chief has become a leader in greater community collaboration and speaks out as an advocate for better treatment and programs including an increase in services and funding to help those in or headed for crisis. Arrest and incarceration are not the best solutions to addressing mental health crisis. Chief Masterson leads an increasing number of law enforcement leaders who agree that more programs and services are needed on the front end where those in crisis can be directed for immediate counseling and appropriate treatment by trained mental health professionals.

The City of Boise and the Boise Police Department strongly advocated for creation of the Idaho Suicide Prevention Hotline. The ISPH has handled more than 170 local calls since November 2012 and is a best practice solution addressing immediate crisis situations by providing effective counseling and referrals to community resources that can best address the long term needs of the individual.

Other examples of what the Boise Police Department is doing to address this issue in their community include the development of a Crisis Intervention Team. The team of officers specially trained in crisis response began in 2007 based on a nationally recognized model, the “Memphis model.” This program has grown and now involves discussions and activities regarding other ways in which police officers can coordinate and connect citizens with mental illness to helpful community-based resources.

Chief Masterson helps lead the Veteran's Network, composed of a variety of stakeholders who meet monthly to provide a forum for discussion, training and networking on veterans issues including mental health. This group connects veterans and their families with employment, housing, legal assistance, medical care and peer to peer mentoring services. The group is currently working to develop communication protocols and information sharing within existing personal privacy laws to avoid duplication and identify potential safety issues regarding those in crisis.

The Veteran's Intercept Program was created by the Boise Police Department to help train law enforcement officers to better recognize signs that a person in crisis may be a veteran and to connect the veteran or their family to appropriate support and treatment services. This program has been shared across the country including presentations at the Pentagon and the last two Crisis Intervention Team International Conferences. The training comes with a DVD, also produced by the Boise Police Department and now being used across the country by both law enforcement and mental health professionals.

The Suicide Prevention Collaboration also includes police officers and other professionals with the goal of examining suicide prevention programs and bringing those deemed most effective to Boise. The group has provided training in these practices, including training for law enforcement and media on how best to speak of suicides in order to send an appropriate message of help and hope. The group is also working on bringing other promising practices, like 23-hour crisis counseling centers to Boise and Idaho.

Finally, the Boise Police Department created the Mental Health Sequential Intercept Model, fashioned similar to a model created by the National Alliance for the Mental Illness where a multi-discipline group examines a variety of issues surrounding how community resources may be used and improved to better handle citizens in crisis. One specific area this group is addressing is a program being advocated by Idaho Department of Health and Welfare; Crisis Counseling Centers. Other cities across the country have found it more helpful for individuals and more cost effective for taxpayers to take people in crisis directly to a counselor in a Crisis Counseling Center than to follow the current model which is a forced mental hold. The latter does little to connect the person in crisis with services and is an extremely expensive, yet temporary solution.

The Boise Police Department recognizes the importance of educating citizens and their elected leaders on the practical and very personal impact mental health crisis poses in our community, as well as the promising programs and partnerships working to address those critical needs. The department's goal is a safer, healthier community. Chief Masterson believes that will only happen when community partners work together, develop best practices and support effective program funding to direct those in crisis to beneficial treatment. The city's vision "to make Boise the most livable city in the country" must, like all cities in Idaho, include those in need of mental health services.

Boise State University QPR Program

As of October 10, 2013, 334 individuals have been trained as Gatekeepers. This includes medical staff, students, counselors, psychologists, peer advisors, community members, etc...

There have been 14 individuals trained to provide trainers as instructors at Boise State University and 8 individuals trained from the Northwest Portland area Indian Health Board.

What Is QPR?

QPR is an internationally-recognized suicide prevention program that stands for **Question, Persuade, and Refer**. QPR Gatekeeper Training provides the knowledge needed to reach out to a friend, peer, student, family member, or colleague who may be experiencing suicidality and connect them to resources that will help.

How can QPR help prevent suicide?

Suicide is preventable. QPR acts as an emergency mental health intervention designed to save lives much like CPR, which is an emergency medical intervention.

QPR is designed to save lives by increasing awareness of suicide risk factors and warning signs, as well as teaching how to talk to someone who is exhibiting warning signs and persuade them to seek appropriate mental health services. In this way, QPR increases the likelihood that someone who is experiencing suicidality, will be noticed and assisted in getting the help they need.

What will you learn as a QPR Gatekeeper?

Gatekeepers: QPR Gatekeepers are those in a position to recognize the warning signs that someone may be contemplating suicide. Once trained, Gatekeepers will have the knowledge needed to assist someone in distress by helping them seek the appropriate mental health services.

The goals of QPR Gatekeeper Training are to enhance general awareness about suicide, teach the warning signs of suicidal thinking and behavior, and teach basic intervention skills that can help avert suicide.

In QPR Gatekeeper Training, participants learn about:

- The nature of suicide communication.
- What forms suicide communications take and how they may be used to identify someone who may be at risk for suicide.
- How to reach out to someone who is exhibiting signs of risk.
- How to facilitate referral to mental health resources.
- What resources to refer to.

To learn how to become a QPR Gatekeeper Instructor, go to the QPR Institute Website: www.qprinstitute.com