



Meeting Minutes

Pima County Suicide Prevention Task Force

Tuesday, May 31, 2022 3:00-4:30 pm TEAMS

Attendance

• Julie Mack Arizona Complete Health

Arisia Lee Pima County Health Department
 Olivia Holt Dean of Nursing Arizona College

Heather King
 La Frontera Center

Kimberly WangPima County Health DepartmentPima County Health Department

Chrissy Lieberman University of Arizona

Elizabeth Stamm
 Pima County Health Department

Mercedeh Reamer ADHS

Chad Myler University of Arizona, Manager – Employee Health and Wellness

Julia Chavez Arizona Complete Health

Erin Gibson
 Pima County Sheriff's Department

Barney Hilton Murray AZCMF

Mayra Jeffery
 Pima County Health Department

Karen Ring
 Pima Council on Aging

Sara Lind Pima County Health Department

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Welcome/Overview of Today's Meeting/Review Survey + Feedback

- We sent out a survey a couple weeks ago and wanted to begin with the results of the survey.
- We are trying to identify different types of engagement next month.
- We will send out a take home assignment in place of June's meeting and will reconvene in July with information that was shared in June's assignment

Action Plan: Google Doc. Action Plan Overview/Strategy

- The Action Plan was moved from MURAL to a Google Document:
 https://docs.google.com/document/d/1ZTZpUSScp_E97Wpb22hCylkRyearrRw8xxmR0fJt0DI/edit?usp=sharing
- The definition of a strategy and examples of strategies were reviewed. To review the definition and strategy examples please refer pages 4-7 of the document above.
- The group than began filling out the strategy section of the Action Plan Google Document







Pima County Suicide Prevention Task Force Community Action Plan 2022-2025 2022 Annual Work Plan



PLEASE FILL HIGHLIGHTED AREAS IN TABLES 1 & 2 WITH YOUR IDEAS SEE DEFINITIONS AND EXAMPLES IN TABLE 3, FIGURES 1 & 2

TABLE 1

TABLE 1					
ISSUE TO ADDRESS	Increasing postvention knowledge and services hi all				
ROOT CAUSES	Mental health is not seen the same as physical health People don't know what postvention is or how to get this type of care Family culture is not supportive of discussion of feelings/mental health				
Goal 1	Increase postvention knowledge and services				
Objective 1	By September 1, 2022 the Pima County Suicide Prevention Task Force will identify agencies in Arizona that provide postvention care.				
Strategy 1	Educate community about postvention services in Pima County Create a bullet point, brief one page infographic to share with stakeholders Define terms (related to postvention services) for general public Develop a document/infographic (both digital & print) listing out postvention resources to share with community and internal/external stakeholders.				
Policy Change to Accomplish Objective					
Baseline Measurement	Data from 2021 CHNA				
Tactics/ Activities	Responsible Agency/ Person	Expected Outcome	Timeframe	Progress & Updates	Assets/ Resources to Be Used
Invite Suicide Prevention orgranizations to identify agencies that provide outreach and education gather data / research info	Memo with survey link from PCHD	Database to share out/ keep current on MH resource partners Identify gaps -	Send out early June with deadline within the month		Pima Helpline







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TABLE 2

ISSUE TO ADDRESS	Increasing postvention knowledge and services				
ROOT CAUSES	Mental health is not seen the same as physical health People don't know what postvention is or how to get this type of care Family culture is not supportive of discussion of feelings/mental health				
Goal 2	Increase prevention knowledge and services				
Objective 2					
Strategy 2					
Policy Change to Accomplish Objective					
Baseline Measurement					
Tactics/ Activities	Responsible Agency/ Person	Expected Outcome	Timeframe	Progress & Updates	Assets/ Resources to Be Used



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		highlight partners		
Share one page infographic across agencies including EMS/law enforcement that may be first to interact with surviving family/supports	Collective creation, PCHD distribute	Give baseline language on postventio n across agencies	Ideal is developed by mid July for fall K-12 share out	PimaHelplin e.Org







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Goal 2	Increase prevention knowledge and services				
Objective 2					
Strategy 2					
Policy Change to Accomplish Objective					
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Tactics/ Activities	Responsible Agency/ Person	Expected Outcome	Timeframe	Progress & Updates	Assets/ Resources to Be Used

Data Sharing

- The use of Sodium Nitrite in attempted or completed suicides.
 - O A trend that has been surfacing in many states across the country.
 - It is still rare at this point, but we are seeing cases of it.
 - The reason that it is important is that it is easy to access, relatively cheap, and there are no age limitations to purchasing it, so young people can buy it.
 - o It is used in restaurants and in the food business to preserve meat.
 - o It can be ordered online.
 - It is feared that with social media and these problematic sites out there that assist in providing information on ways to complete suicide that it will catch on, especially with young people.
 - o If you are a provider, be aware that sodium nitrite is a method that could be used locally, so if you are working with people and if you hear about it or have questions, you can talk to Mark (Mark.Person@pima.gov) and his team.
 - Be cautious about how the information is used because we don't want to unintentionally bring attention to it as another means as to how people can harm themselves.
 - o It is not a raise the alarm kind of thing, but important informationally to know about.
 - O There are so few cases that trends are not emerging yet, but it has been seen with both the young and older adults.





- o PCHD has done a lot of research with this particular drug. They have also talked to poison control and the antidote is known. The plan is to have the antidote more widely available in ambulances and first responders because this is one of those situations where the clock is ticking and similar to a drug overdose every minute counts. If these drugs are not stopped on ambulances, then 20-30 wait times are occurring before someone gets the antidote. If the antidote is available on the scene, then there is a better chance of survival. The antidote works quickly. Research has shown that people who receive the antidote are released from the hospital within a day. It is very treatable as long as it is treated within a certain timeframe (which unfortunately is unknown at this point). However, it does not look like you take it and you are gone in 5 minutes, there is definitely some window, the window is just not known at this point.
- It is concentrated sodium nitrate, it is mixed with water and then people drink it. It looks like salt. It is easy to get (can be bought on amazon). There are more restrictions now than there used to be, but it is still easy to get. There are policy makers out there trying to make it harder to obtain.
- Once oxygen begins to deplete in the blood, that's when it rapidly starts to set in.
- o It prevents oxygen delivery in the blood pretty quickly. If someone loses consciousness, then brain damage begins, and the longer they are out, the worse it gets.
- o EMS has responded to these cases, so they are aware of it.
- There is a good opportunity to prevent death or save a life with simple adjustments with messaging to EMS, hospitals, and the like.



- We just hit 100 suicides for the year.
- It is slightly above last year's average per month.
- We are at 183 overdose deaths for the year.







- There is an increase in intentional overdoses from last year (15 confirmed intentional overdoses in 2021). This year (2022) we are at 16 intentional overdoses.
 - The numbers are not as high as earlier in the year.
- If it was a sodium nitrite death it would fall under overdose and poisonings.
- April has 22 suicides and we are at 15 for May (which is not over yet).
- 60-79 year olds are at 19 (60-69) & 17 (70-79) for the year (2022). Last year (2021) we had 24 (60-69) & 23 (70-79). We are not even half way through the year; these numbers are higher than what we were expecting (even compared to other past years than where it would be at normally).
- If we look at 60-70 year olds have exceeded some of the middle age and younger age groups in the current year (2022).
- Any month where suicides are in the 20's is high.
- There has been a lot of dialogue related to the pandemic around the older age groups and the kind of role isolation may have played. This is a factor, but it can't be measured or quantified how many deaths were related to isolation. The most important factor is that we have the a lot of these suicides over the age of 60, and especially in their 80's & 90's are people who have really debilitating conditions (severe chronic pain, stage 4 cancer, organs shutting down anything that has removed quality of life). This is different from people in their 20-50's, not to say that mental health doesn't play a part in a younger person's life, but it is the declining quality of life and that we don't have death with dignity laws in the state of Arizona that are factors. The message is a little different when we are talking about older age groups.









Wrap Up

• We will not have a Zoom meeting in June, but there will be a take home assignment to do for the month of June.





- If you feel stuck on the homework, please email Julie Mack Julie Mack (JUMACK@azcompletehealth.com) or Arisia Lee (Arisia.Lee@pima.gov) for help.
- If a comment is similar to your comment/idea we can merge them together.
- Our next meeting is July 26th, it will be a 1 hour meeting.
- We are taking everyone's input into consideration and re-visiting the delivery of the information and planning.
- We appreciate your commitment and look forward to everyone's contribution to this work plan.

Next Meeting: Group will have take-home assignment in June

- Complete Action Plan ideas at your own pace in June
- Due date: July 12th by 5:00 PM
- https://docs.google.com/document/d/1ZTZpUSScp_E97Wpb22hCylkRyearrRw8xxmR0fJt0DI/edit?usp=sharing
- Next Teams meeting: July 26th from 3:00-4:00 PM (last Tuesday in July)