

Meeting Minutes

Pima County Suicide Prevention Task Force

Tuesday, September 27, 2022

3:00-4:00 pm

TEAMS

Attendance

- Julie Mack Arizona Complete Health
- Arisia Lee Pima County Health Department (PCHD)
- Kelly Boyer Arizona Complete Health
- Allison Hephner Arizona Complete Health
- Morgan Phillips Hines Teen Lifeline, Prevention Coordinator
- Robyn Dafoe Pathways of Arizona
- Kimberly Romo Palo Verde Behavioral Health, Director of Business Development and School Liaison

- Karen Ring Pima Council on Aging
- Pam Scott University of Arizona Communications
- Hollie Watson-Smith Community Mental Health & Addiction, PCHD
- Elizabeth Stamm Community Mental Health & Addiction, PCHD
- Mark Person Community Mental Health & Addiction, PCHD
- Jennifer Kent Arizona Complete Health
- Sara Lind Community Mental Health & Addiction, PCHD
- Kimberly Wang Community Mental Health & Addiction, PCHD
- Mayra Jeffery Community Mental Health & Addiction, PCHD
- Erin Gibson Pima County Sheriff's Department
- Gina Gillis American Foundation for Suicide Prevention
- Jason Ground University of Arizona Communications Office

Welcome/Overview of Today's Meeting

- Julie Mack welcomed everyone and gave an overview of the meeting agenda.

Agency Program Updates

Kelly Boyer: Arizona Complete Health, First Responder Liaison

[Crisis System Overview Presentation](#)

- Crisis System Structure
 - AHCCCS gives Arizona Complete Health the marching orders. Arizona Complete Health works with providers and makes sure that they provide services.
 - Health plans are with Banner and United.
 - Arizona Complete Health coordinates crisis community members to get the best care possible.
 - Have now began implementing crisis services.

- AHCCCS RBHA/TRBHA Map
 - There previously were two crisis line vendors. As of October 1, 2022 there will be one vendor - Solari. They will provide for the entire state.
 - The new crisis line number will be released on October 1, 2022. Until then, the 866 number will be used. The 866 number will also be in effect after October 1 as the transition is made.
- Sequential Intercept Model
 - The focus will be on 0 and 1
 - It is ideal to intervene at 0, meaning that the crisis is not criminal or physical. Early intervention is important. We want to get to (intercept) people in crisis before level 2, because once they are at level 2 they are in the justice system.
 - The number can be called instead of 911 and we will work with first responders. There are programs in place before outreach is made to first responders at 911.
- Crisis First Responder Services Team
 - These services are free of charge to the community and are meant to keep people out of detention and the Emergency Department.
- First Responder Liaisons
 - Maria Stengel is the First Responder Liaison for Pima County.
 - However, you can reach out to any liaison in their corresponding area.
- Crisis Services: Our Approach
 - Everyone is eligible, even if they do not have insurance or are not on AHCCCS
- The Crisis System Goals
 - A crisis is “what you believe to be a crisis”, it is a situation that is “beyond your coping skills”
 - For example – In the elderly population. If a husband was the main caretaker of his wife and he has to be in the hospital. The wife now might feel anxiety because her caretaker is in the hospital.
 - There is never a wrong door. This number runs 24/7 and operates 365 days per year.
 - You will never be refused crisis services.
 - We will come to you where you are.
 - Please resolve the problem in real time, not 2 weeks later.
 - Designed for early intervention and assistance, not when person is a danger to themselves or others.
 - We really want to keep people out of the detention centers.
 - Emergency Departments (ED) are not designed to help people with behavioral health needs or issues because medical emergencies come before people in a behavioral. Doctors in EDs are not trained in how to handle a behavioral crisis, so they write a referral to see a Behavioral Specialist.
 - The aim is to provide early intervention and intervene before the title 36 process.
 - No one will be turned away.
 - We are aiming to improve communication and collaboration in the community.
 - A new protocol will be sent out in January.
 - Crisis system meetings are quarterly and everyone is there.
- Who Provides Crisis Services?
 - The new number is coming out October 1, 2022.
 - The 866 number can still be used.

- All calls are started with the crisis line provider.
- A mobile team can be sent out.
- Mobile teams are located at different locations in the county to be able to arrive quickly.
- People experiencing a crisis can be taken to a 23-hour observation unit at any time.
 - During the 23 hours of observation, the person will be stabilized, will receive a higher level of care, or be returned to their natural environment.
- The Crisis Line and CMTs
 - If 911 calls the Crisis Line, their calls are fast tracked.
 - 911 has a dedicated line for them to call without triggering law enforcement or Emergency Medical Services.
 - Crisis Mobile Team
 - If a crisis mobile team is needed call the Crisis Line.
 - The call will be transferred to Crisis Mobile Team dispatch and the mobile unit will be sent out.
 - The mobile team will assess and de-escalate, and coordinate transportation if higher level care is needed.
 - They are not able to do an involuntary transfer.
 - In metro areas, mobile units are contracted to arrive to a crisis within 60 minutes.
 - In rural areas, mobile units are contracted to arrive within 90 minutes.
- Crisis Observation Units
 - Available to adults and children to help with stabilization in both voluntary and involuntary situations.
 - CBI Access Points
 - Available only to adults and in voluntary cases.
- 988 and the AZ Crisis Line
 - Reviewed in past Pima County Suicide Prevention Task Force meeting. See meeting notes from July 2022.
- If you Encounter a Problem
 - Call the crisis line and ask for a lead to resolve the issue then and there.
 - Reach out to leadership and then your liaison, Maria Stengel.
 - Maria will make sure that the issue is directed to the correct department to be investigated.
- 911 and Crisis Call Transfers
 - The 911 diversion program has a special line and can call into the crisis system.

Action Plan Update

- Arisia Lee, PCHD Healthy Pima
 - Announcements
 - Three-Part Series: How to Advocate for Change. Register here: [Meeting Registration - Zoom](#) (see the end of this document for more details)
 - Re-cap of Action Plan: [Pima County Suicide Prevention Task Force Action Plan](#)
 - Baseline data measurement recommendations were presented to the task force in Jamboard. The attendees were then asked to share their baseline data recommendations and then the group voted on the baseline data measurement they wanted to include in the Action Plan.



BASELINE MEASUREMENT

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Baseline Measurement Ideas

DEFINITION: a piece of data that has been taken before any action has been applied to such data.



Narrow Down to 1 Measurement



*You have one green thumbs up to use

*The objective with the highest amount of green thumbs up will be used for the action plan



Suicides by method
firearm, hanging,
overdose (Pima
County Office of the
Medical Examiner)

Reduce the
suicide rate in
Pima County
(Healthy
People 2030)

Suicide by age
group (Pima
County Office
of the Medical
Examiner)

number of
crisis
team CISD
calls

Data Sharing



Community Mental Health and Addiction

Summary

Fatal Overdoses

Suicides

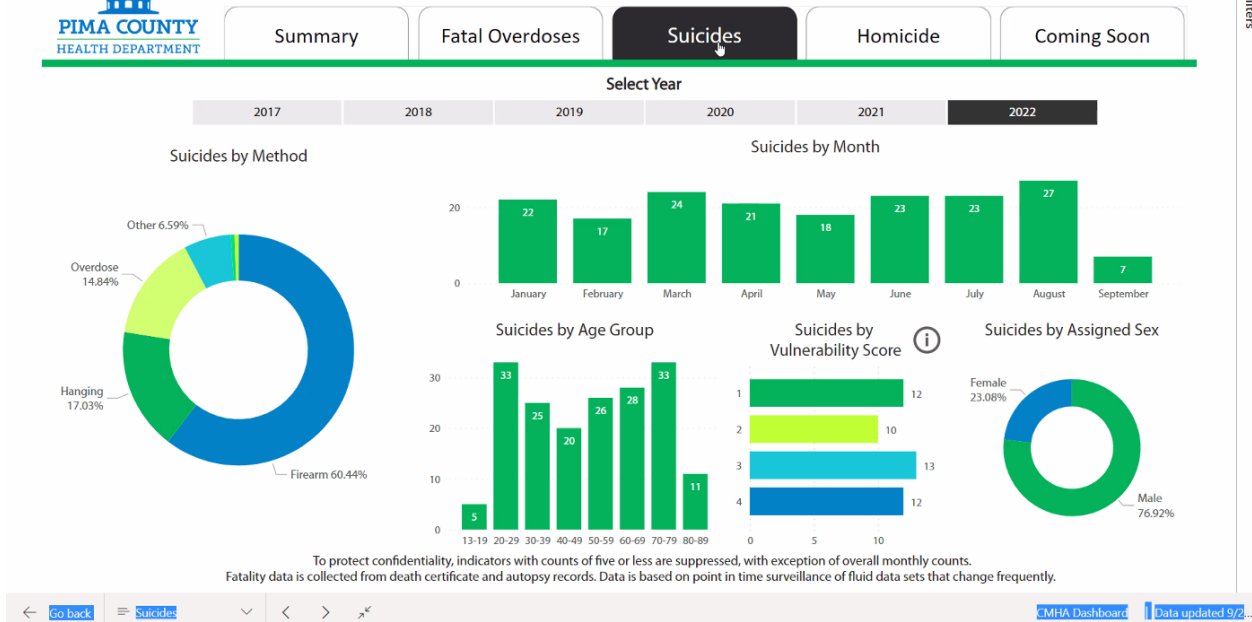
Homicide

Coming Soon



Fatality data is collected from death certificate and autopsy records. Data is based on point in time surveillance of fluid data sets that change frequently. To protect confidentiality, indicators with counts of five or less are suppressed.

Community Mental Health and Addiction



- **Suicides by Month**
 - There were 27 suicides in August. A suicide alert was sent out. September is not looking to be near 27. For September, the number of deaths by suicide is at 7, but this number was reported before the middle of the month and is expected to increase.
- The Medical Examiner now has their own dashboard. If you want the link, please reach out to Hollie at Hollie.Watson-Smith@pima.gov.
- Is there any explanation why the rise in death by suicide in the elderly population is occurring?
 - As of right now, we are not sure. However, we are working on categorizing if the person was experiencing a chronic illness, a death of a loved one, etc...

Community Updates

- Morgan Philips Hines, Teen Lifeline
 - Teen Lifeline is in the process of expanding into Pima County and is currently conducting a needs assessment to be helpful and intentional. To complete the needs assessment, Teen Lifeline is conducting a survey, one for schools and one for community members.
 - Please **take** and **share** the Teen Lifeline Tucson [Survey](#) for community members.

Next Meeting:

- Next Zoom meeting: **November 29th from 3:00-4:00 PM** (last Tuesday in November)

Three-Part Series: How to Advocate For Change

Behavioral Health Coalition & PIH-US Pima County

Thursday 9/15, 9/29, & 10/13 at 11am-12pm MST

Registration Link: https://pih.zoom.us/join/zoom/register/tJlud-ChpzoIGtRA0_osvFib0Lb1T6FJoCzU

Brief Description:

A key skill of partners in the Behavioral Health Coalition is to understand and advocate for the needs of the individuals and communities they serve. Partners In Health's 3-part training series "How to Advocate for Change" will provide partners with an opportunity to sharpen their advocacy skills and learn how to best leverage influences of power to drive change that reflects their community's needs. In the first training, participants will learn the five components of power as they relate to advocacy and will be guided through constructing an advocacy strategy using a provided template. Each strategy will be designed to meet specific goals outlined by each partner and will include a power mapping exercise to identify stakeholders—including potential allies and opponents—and decision makers to target. We will expand on this in the second training. Going into the third training, participants will have a strong framework to finish outlining their strategy and think through effective actions.

- 9/15 - Module 1: Introduction to Advocacy
 - What is advocacy
 - Misconceptions around advocacy
 - POWER!
 - Strategy chart (provided as a tool to use throughout the series, and beyond)
 - Campaign Goals
 - Organizational considerations
 - Lobbying rules
 - Campaign considerations during an election year
- 9/29 - Module 2: Targets, Allies, Constituents, Opponents
- 10/13 - Module 3: Tactics, messaging, and strategy – real world examples

Objectives for the Presentation:

1. Partners will be able to build out and workshop an advocacy strategy plan using a template provided in the presentation.
2. Partners will be able to identify stakeholders, including allies and opponents, to incorporate in their advocacy strategy plan.
3. Partners will be able to name ways that advocacy should be rooted in power, and begin mapping power for effective strategy, messaging, and tactics for change that is representative of community needs.

How will you engage the audience?

In this training series, we would like to engage the audience through the polling feature, the chat box, and by encouraging participants to unmute themselves when prompted, if they feel comfortable doing