

# Advancing Strategic Planning for Suicide Prevention in California

## Fiscal Years 2018-2020

Outcomes from the Each Mind Matters Learning Collaborative with County Behavioral Health Agencies and their Community Partners

The Suicide Prevention Learning Collaborative was formed in the fall of 2018 to provide Each Mind Matters (CalMHSA) member counties with technical assistance as they embarked on developing or updating a suicide prevention strategic plan and creating or enhancing an existing coalition to inform suicide prevention efforts. The Learning Collaborative promotes sharing of knowledge and experience, and provides resources, information and steps needed to develop a suicide prevention strategic plan.



Based on the Steps of Strategic Planning Framework from the Suicide Prevention Resource Center (SPRC).

### Strategic Planning Framework

The Learning Collaborative utilized a public health approach to suicide prevention. This approach emphasizes preventing problems from occurring or recurring (not just treating problems that have already occurred); focusing on whole populations rather than individuals; and addressing health disparities and access.

The Strategic Planning Framework utilized in the Learning Collaborative was informed by the Suicide Prevention Resource Center (SPRC), Key Elements for the Implementation of Comprehensive Community-Based Suicide Prevention by the Action Alliance for Preventing Suicide, and Preventing Suicide: A Technical Package of Policy, Programs and Practices by the Center for Disease Control. It is aligned with California's Strategic Plan for Suicide Prevention (2020-2025): Striving for Zero.

*It's been very helpful to have one-on-one support on a monthly basis, including technical assistance, resource sharing and someone to bounce ideas off of. The Learning Collaborative webinars have been helpful and I found the retreat in December 2019 to be very helpful in learning about best practices.*

*– Toby Guevin,  
Nevada County Public Health*

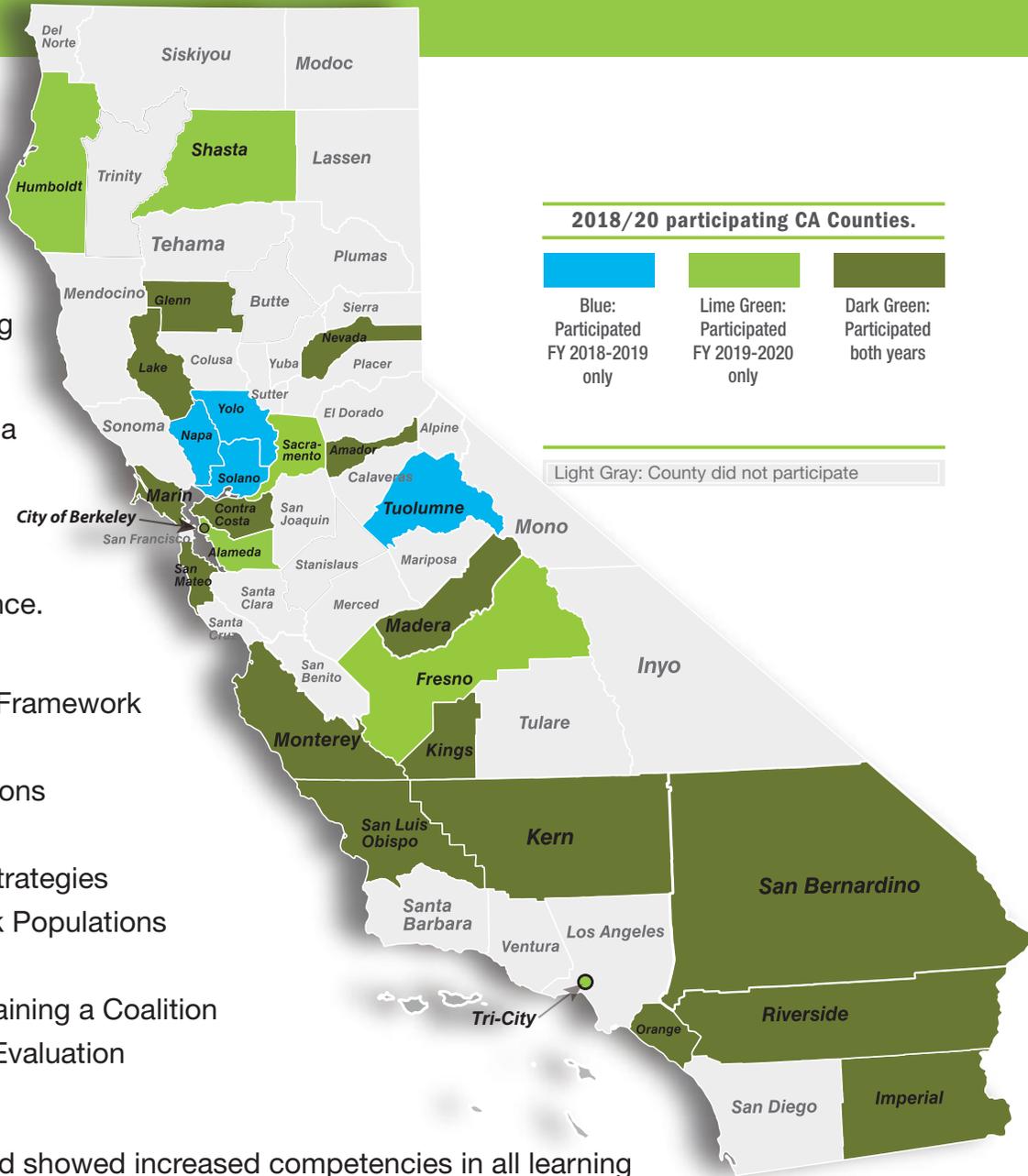
# Each Mind Matters Learning Collaborative Participation 2018-2020

Over two years, 23 county teams were supported in creating strategic plans for suicide prevention using national models and aligning with the newly released California Strategic Plan for Suicide Prevention through a combination of an in-person meetings in Sacramento, online learning modules, and individual technical assistance. Modules included:

- Strategic Planning Framework
- Using Data
- Selecting Interventions
- Means Safety
- Population-Level Strategies
- Reaching High Risk Populations
- Postvention
- Building and Maintaining a Coalition
- Logic Models and Evaluation
- Messaging

Pre- and post-data collected showed increased competencies in all learning objectives, with several counties completing drafts of their plan.

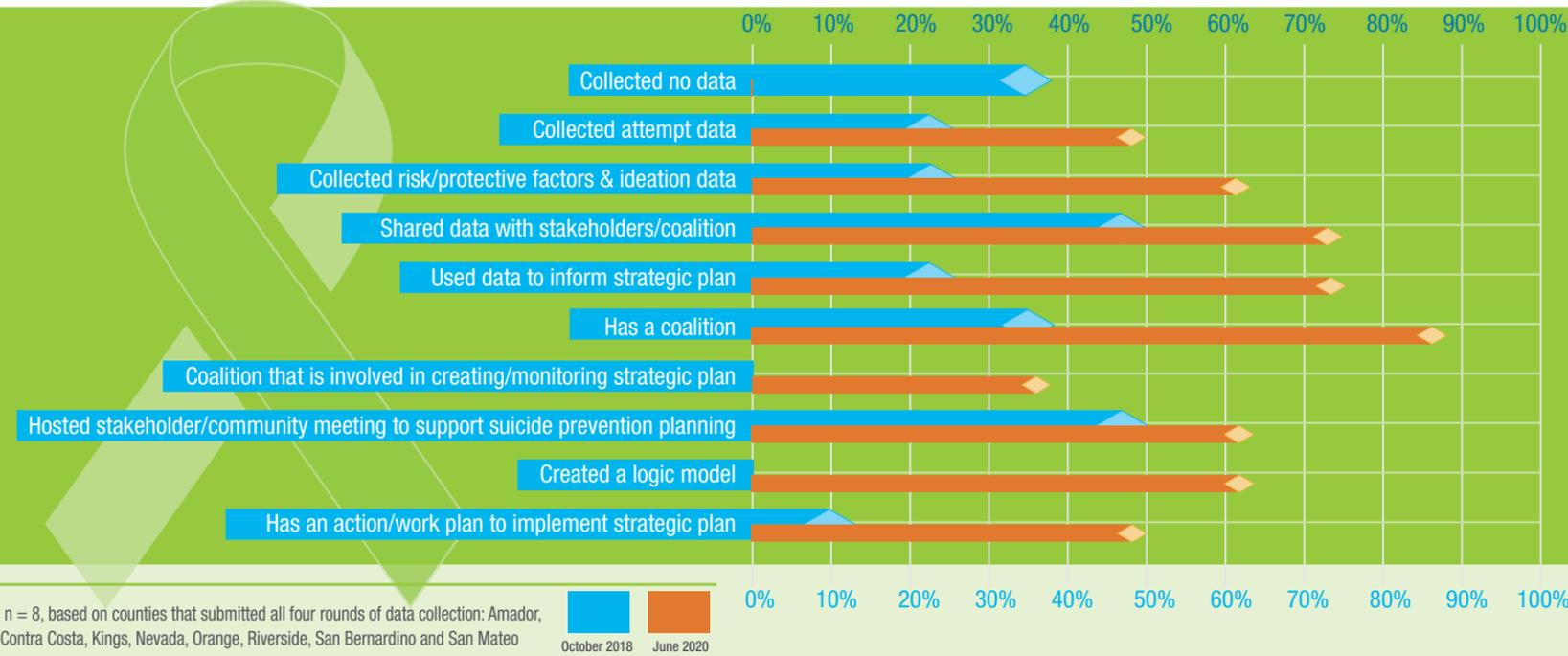
Principles of the Learning Collaborative included staff time dedicated to writing a strategic plan, participation in online modules, collaboration through sharing of local challenges and successes with other counties, as well as participation in pre and post assessments.



*The Learning Collaborative has provided an in-depth and comprehensive framework for addressing suicide along a continuum of care that is very beneficial to counties in strategic planning for suicide prevention. It has also highlighted the importance of having a data driven process along with practical tools and suggested use of data. It has also provided opportunities for networking between counties and shared learning.*

– Dana Edgull, Monterey County Behavioral Health

## Learning Collaborative Outcomes (Pre and Post, FY 2018-2020)



## Snapshot of Suicide Prevention Strategic Planning Readiness, June 2020

### Describing the Problem of Suicide Prevention

- Collected no data: **0%**
- Collected death data: **61%**
- Collected attempt data: **46%**
- Collected risk/protective factors and ideation data: **54%**
- Partner with other agencies in county to review/collect data relevant to suicide prevention: **54%**
- Collected data on help seeking (e.g. calls to crisis lines): **69%**
- Collected data on suicide prevention activities (e.g. trainings): **69%**
- Shared data with stakeholders and/or coalition: **77%**
- Used data to inform strategic planning for suicide prevention: **54%**

### Suicide Prevention Coalitions

- Started the process to form a coalition: **38%**
- Have a coalition that meets for networking and information sharing: **61%**
- Coalition is involved in creating / monitoring suicide strategic plan: **23%**

### Strategic Planning

- Created a logic model to support selected suicide prevention interventions: **46%**
- Have a strategic plan for suicide prevention: **30%**
- Have an action or work plan to implement the strategic plan: **30%**

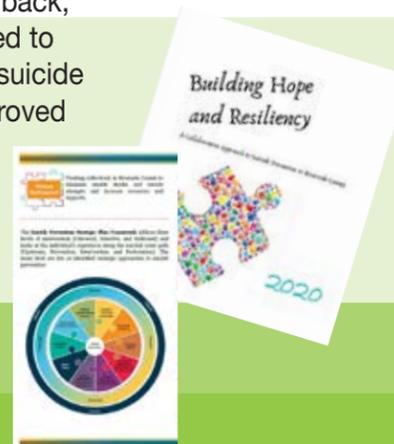
n=13, based on counties that submitted October 2019 – June 2020 surveys: Amador, City of Berkeley, Contra Costa, Imperial, Kern, Kings, Monterey, Nevada, Orange, Riverside, San Bernardino, San Luis Obispo and San Mateo.

## Learning Collaborative County Highlights

**Marin County Behavioral Health and Recovery Services (BHRS)** contracted with a local research firm to collect data, host a series of community and stakeholder meetings, and draft a strategic plan for suicide prevention. By participation in the Learning Collaborative, BHRS and their contracted partner were able to align the work that was being done with best practices. BHRS also received technical assistance with editing and writing of their final plan. The final plan was approved in January 2020.



**Riverside University Health System – Behavioral Health** joined the Learning Collaborative in October 2018. In collaboration with the department of Public Health, they collected and analyzed data related to suicide (mortality, morbidity and ideation) resulting in a shared data presentation and framework in which to address suicide prevention efforts that was presented to community stakeholders during two regional meetings in July 2019. During this meeting, a comprehensive resource mapping resulted in identifying strengths and gaps in comprehensive suicide prevention services in the county. Best practices, stakeholder feedback, and data were all considered to write the strategic plan for suicide prevention, which was approved by the Behavioral Health and Public Health departments and presented to a group of stakeholders in June 2020.



**Amador County Behavioral Health** joined the Learning Collaborative in 2018 following a series of tragic losses in the community as well as the recent completion of a story on rural suicide conducted by Capital Public Radio, that focused on Amador County. They built on the momentum of public engagement and interest to launch the first suicide prevention coalition in the county. Their initial year of participation was focused on coalition-building and finding and using data. In the second year, they continued to focus on building a broad-based coalition and to draft the county's first suicide prevention plan. They are taking the unique approach of keeping their plan a draft that is dynamic, flexible, responsive to community needs, and updated monthly, as they build the foundation of relationships, connections, and engagement that will ultimately lead to lasting change.

**Nevada County Behavioral Health/Public Health** joined the Learning Collaborative in 2019. County staff elected to leverage an existing group of behavioral health and community-based providers that had the expertise and community connections to engage in the work of developing the county's first strategic suicide prevention plan. Utilizing the strategic framework and guidance shared in the Learning Collaborative the county through the Nevada County of Nevada Suicide Prevention Task Force—is in the process of finalizing a strategic suicide prevention plan for approval; however, have put it on pause due to urgent needs in response to COVID-19.