

**Tompkins County
Suicide Prevention Coalition**



“How Healthcare Helps Prevent Suicides”

**Greater Ithaca Activities Center
September 28, 2023**

**Town Hall
Information Kit**



How Healthcare Helps Prevent Suicides

A Town Hall on how the **Zero Suicide Model** is being implemented in Tompkins County

Public Town Hall:
Thursday September 28
5:30-7:30 p.m.

Greater Ithaca Activities Center (GIAC)
301 W. Court Street, Ithaca

Panels Featuring:

Local Healthcare Providers
School Officials
Mental Health Advocates
Public Health Experts

*Opportunities to talk one-on-one
with panelists and local experts*

Learn More:

How Zero Suicide works
Challenges for implementation
At-risk populations
988 & other suicide prevention resources

Hosted by:

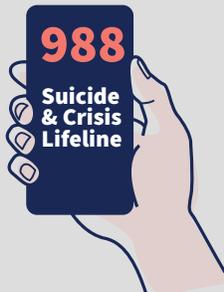
Tompkins County Suicide Prevention Coalition

Our vision is for a community where no lives are lost to suicide.

Need Help Now?

If you or someone you know is in crisis, **dial 988**.

The 988 Suicide & Crisis Lifeline offers **24/7, confidential support** from trained counselors who can help people experiencing mental health-related distress.



About the Zero Suicide model:

The foundational belief of Zero Suicide is that suicide deaths for individuals under the care of health and behavioral health systems are preventable. For systems dedicated to improving patient safety, Zero Suicide presents an aspirational challenge and practical framework for system-wide transformation toward safer suicide care.



© 2020 Zero Suicide Institute at EDC.

Learn More:



Tompkins County Suicide Prevention Coalition



Health agencies, community organizations, and individuals who share a determination to prevent suicide deaths in our community came together in 2017 to create the Coalition. Its 2022-2025 Strategic Plan reads:

"Our vision is for a community where no lives are lost to suicide. Our mission is to use data, science, and collaborations to identify and implement effective suicide prevention strategies for Tompkins County."

Our Goals

Improve the quality and enhance the use of data sources and systems for suicide prevention in Tompkins County.

Advance quality improvement for suicide care in all Tompkins County healthcare and behavioral health settings.

Reduce suicide attempts in the youth population, including students attending colleges in Tompkins County.

Reduce access to lethal means for suicide within high-risk demographic populations as determined by national, state, and local data.

Advocate for policies and practices designed to prevent suicides in the community.

**Get
Involved!**

Health providers, organizations, businesses, and individuals are welcome and encouraged to join the Coalition at any time.



More info →



Tompkins County Suicide Prevention Coalition



September 19, 2023

Message from Jenna Heise, Director of Implementation
Office of Mental Health
Suicide Prevention Center of New York

"I'm delighted to acknowledge and celebrate Tompkins County's outstanding commitment to suicide prevention and the strides made in advancing the Zero Suicide Model locally.

"Tompkins County has proven itself as a strong partner in the ongoing collective efforts to prevent the loss of lives due to suicide and promote mental health for all community members. Tompkins County's persistence and dedication to implementing the Zero Suicide Model has set an important precedent, not only within your community but across the broader suicide prevention landscape.

"It is with the spirit of support that the team and I note the upcoming Town Hall event organized by the Tompkins County Suicide Prevention Coalition. Such events are critical for engaging the general public, raising awareness about suicide prevention, and fostering a platform for meaningful discussions. We believe that engaging the community is paramount and applaud Tompkins County's proactive approach.

"The collaborative nature and passion exhibited by Tompkins County is inspiring. We look forward to continued support and collaboration with Tompkins County on our collective journey to prevent suicide."



Office of
Mental Health





Transforming Systems for Safer Care

Suicide deaths for individuals at risk of suicide in health and behavioral health systems are preventable. For systems dedicated to improving patient care and outcomes, the Zero Suicide framework presents both an aspirational challenge and a way forward.

Zero Suicide Framework

People who die by suicide are often seen within the health care system before their death. Of those who die by suicide, 83% have seen a healthcare provider in the year before their death.¹ Only 19% of those who died in the past year were seen in outpatient behavioral health.²

Across healthcare disciplines and settings, there are many opportunities to identify and provide care to those at risk for suicide; however, suicide prevention must be seen as a core responsibility of healthcare.

The Zero Suicide framework is defined by a system-wide, organizational commitment to safer suicide care in health and behavioral health care systems.

It represents a culture shift from fragmented suicide care toward a holistic and comprehensive approach to patient safety and quality improvement—the most fundamental responsibility of health care— and to the safety and support of staff, who do the demanding work of caring for suicidal individuals.

Elements of Zero Suicide

- 1** Lead system-wide culture change committed to reducing suicides
- 2** Train a competent, confident, and caring workforce
- 3** Identify individuals with suicide risk via comprehensive screening and assessment
- 4** Engage all individuals at-risk of suicide using a suicide care management plan
- 5** Treat suicidal thoughts and behaviors using evidence-based treatments
- 6** Transition individuals through care with warm hand-offs and supportive contacts
- 7** Improve policies and procedures through continuous quality improvement

Zero Suicide Results

Zero Suicide fills the gaps that individuals at risk for suicide often fall through using evidence-based tools, systematic practices, training, and embedded workflows. Continuous process improvement drives this framework to ensure organizations deliver quality care, routinely examine outcomes, and remain committed to fidelity. The Zero Suicide approach builds on successes supported by data in healthcare organizations, including Henry Ford Health System and Centerstone.

With a focus on suicide care using such rigorous quality improvement processes, Henry Ford Health System saw a 75% reduction in the suicide rate among their health plan members.³ Centerstone, one of the nation's largest not-for-profit CMHCs, reduced suicide deaths from a baseline of 35 per 100,000 to 13 per 100,000 after implementing Zero Suicide for 3 years.

“ It is critically important to design for zero even when it may not be theoretically possible. When you design for zero, you surface different ideas and approaches that if you're only designing for 90 percent may not materialize. It is about purposefully aiming for a higher level of performance. ”

—Thomas Priselac, CEO
Cedars Sinai Medical Center

Visit the Zero Suicide Toolkit

To assist health and behavioral health agencies in their adoption of the Zero Suicide framework, the Suicide Prevention Resource Center (SPRC), federally funded by the Substance Abuse and Mental Health Services Administration (SAMHSA) offers a free and publicly available evolving online toolkit that includes modules and resources to address each of the elements of Zero Suicide.

 zerosuicide.com



For more information, contact us at:

 zerosuicide@edc.org

 [@ZSIInstitute](https://twitter.com/ZSIInstitute)

Ahmedani, B. K., et al. (2014) Health care contacts in the year before suicide death. *Journal of General Internal Medicine* 29(6):870-7.

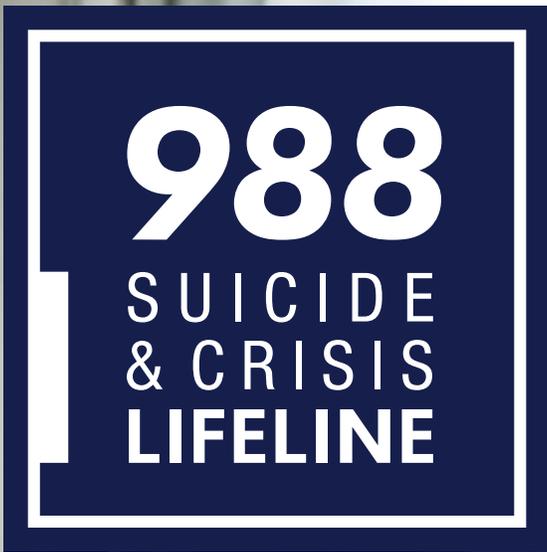
Luoma, et al. (2002) Contact with mental health and primary care providers before suicide: a review of the evidence. *American Journal of Psychiatry* 159(6): 909-916.

Coffey, C.E. (2007). Building a system of perfect depression care in behavioral health. *Joint Commission Journal on Quality and Patient Safety* 33(4):193-9.

Zero Suicide Institute

The Zero Suicide Institute at EDC provides expert consultation and guidance to health and behavioral healthcare organizations implementing the Zero Suicide framework for safer suicide care. Organizations contract with the Zero Suicide Institute for the experience and tools needed to accelerate Zero Suicide adoption.

ZeroSuicideInstitute.com



Whatever time: Day. Night. Weekend.

Whatever the reason: Mental health distress. Substance use crisis. Thoughts of suicide.

The 988 Suicide & Crisis Lifeline is here for you.

Text 988 | Call 988 | Chat 988lifeline.org

Simply calling or texting 988 or chatting 988lifeline.org will connect a person in crisis to compassionate care and support for any mental health or substance use-related distress. Anyone—a person in crisis, or someone supporting a person in crisis—can reach 988 in the United States through any land line, cell phone, and voice-over internet device.

With rising levels of anxiety, depression, emotional distress, and overdose deaths, it is crucial that people have somewhere to turn when they're in crisis. Suicide is a leading cause of death in the United States. The number of people with a substance use disorder continues to increase. The 988 Lifeline is a direct connection to immediate and free support and resources for anyone in crisis.

And it works. About 98 percent of people who call, chat, or text the 988 Lifeline get the crisis support they need and do not require additional services in that moment. The 988 Lifeline is a key part of a broader vision for reimagined crisis care in the United States. Through federal, state, local, and community partnerships,



SAMHSA is working towards a vision where everyone has:

- Someone to talk to
- Someone to respond
- A safe place for help



Frequently Asked Questions

What support is available through the 988 Lifeline?

The 988 Lifeline offers free and confidential support for anyone in crisis. That includes people who need support for a suicidal, mental health and/or substance use crisis, or who are in emotional distress.

What happens when a person calls, texts, or chats?

When a person calls or texts 988 or chats 988lifeline.org, they are connected with a crisis counselor who listens, tries to understand how the problem is affecting the person, provides support, and shares resources. 988 Lifeline crisis counselors are trained to help reduce the intensity of a situation for the person seeking help and connect them to additional local resources to support their wellbeing.

How does the 988 Lifeline protect the privacy of those who call, text, or chat?

When a person contacts the 988 Lifeline, they don't have to say who or where they are to get support. The 988 Lifeline crisis counselor knows only the person's phone number if they call or text, or their IP address if they use chat. No one is required to provide any personal information to receive the help from the 988 Lifeline.

How is 988 different from 911?

The 988 Lifeline was established to improve access to immediate support to meet the nation's growing mental health, suicide, and substance use distress needs. The 988 Lifeline provides easy access to emotional distress care, which is distinct from 911, where the focus is on dispatching emergency medical services, fire, and police, as needed.

Only a small percent of 988 Lifeline calls require activation of the 911 system. Most of those are done with the consent and cooperation of the caller. This occurs when there is imminent risk to someone's life that cannot be reduced during the call. In these cases, the crisis counselor shares information with 911 that is crucial to saving the caller's life.

SAMHSA is working towards a long-term vision of strong coordination between 988 and 911 so people in crisis get to the most appropriate care needed in that moment. SAMHSA is actively working with 911 counterparts at federal, state, and local levels as our country continues to improve response.

Urgent realities.



The United States is experiencing a suicidal, mental health, and substance use crisis:

- In 2021, a person died by suicide every 11 minutes.
- Suicide was the second-leading cause of death for people ages 10–14 and 25–34.
- Suicide rates increased significantly among non-Hispanic Black & American Indian and Alaska Native people.
- Nearly 900,000 youth ages 12–17 and 1.7 million adults attempted suicide.
- 46.3 million people ages 12 or older had a substance use disorder in the past year.
- In 2021, nearly 107,000 people died from a drug overdose.

Easier access.



988 is an easy-to-remember number that is providing greater access to life-saving services.

There is hope.



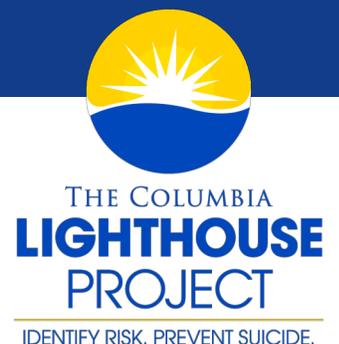
Whether you're experiencing thoughts of suicide, a mental health or substance use crisis, or any other kind of emotional distress, there is compassionate support available through the 988 Lifeline.

Email 988 questions to:
**988Team@
samhsa.hhs.gov**



ASK FRIENDS & FAMILY
CARE FOR FRIENDS & FAMILY
EMBRACE FRIENDS & FAMILY

**See Reverse Side for
Questions that Can Save a Life**



Always ask questions 1 and 2.	Past Month	
1) Have you wished you were dead or wished you could go to sleep and not wake up?		
2) Have you actually had any thoughts about killing yourself?		
If YES to 2, ask questions 3, 4, 5 and 6. If NO to 2, skip to question 6.		
3) Have you been thinking about how you might do this?		
4) Have you had these thoughts and had some intention of acting on them?	High Risk	
5) Have you started to work out or worked out the details of how to kill yourself? Did you intend to carry out this plan?	High Risk	
Always Ask Question 6	Life-time	Past 3 Months
6) Have you done anything, started to do anything, or prepared to do anything to end your life? <i>Examples:</i> Took pills, tried to shoot yourself, cut yourself, tried to hang yourself, took out pills but didn't swallow any, held a gun but changed your mind or it was grabbed from your hand, went to the roof but didn't jump, collected pills, obtained a gun, gave away valuables, wrote a will or suicide note, etc. If yes, was this within the past 3 months?		High Risk



If YES to 2 or 3, seek behavioral healthcare for further evaluation.
If the answer to 4, 5 or 6 is YES, get **immediate help: Call or text 988, call 911 or go to the emergency room.**
STAY WITH THEM until they can be evaluated.



Download Columbia Protocol app



MENTAL HEALTH SUPPORT AND CRISIS SERVICES ²⁰²³ TOMPKINS COUNTY, NY

Suicide Prevention

988 Suicide & Crisis Lifeline Dial or text 988 (Dial 911 if imminent danger)

Free and confidential support for people in distress

Suicide Prevention & Crisis Service (607) 272-1616

Ithaca area's local crisisline and resource for community education

Veterans Crisis Line 988 then press 1 or text 838-255

Confidential crisis support for veterans and their loved ones

The Trevor Project (866) 488-7386 or text START to 678-678

Counseling for LGBTQ youth who are struggling or searching for answers and information

Cayuga Medical Center (607) 274-4011

Emergency Department and inpatient Behavioral Services

Guthrie Cortland Medical Center (607) 756-3500

Emergency Department and inpatient Behavioral Services

**"Hope is being able
to see that there is light
despite all of the darkness."**

Desmond Tutu

Psychotherapy

Tompkins County Mental Health Services (607) 274-6200

Therapy for individuals, families, youth, and children; integrated care for mental health and substance use disorders

Family & Children's Service of Ithaca (607) 273-7494

In-person mental health and tele-mental health counseling and related social services

Mindwell Center (607) 260-3100

Outpatient mental health care for children, youth, families, and adults

Ithaca Therapists

Listing of 150+ local practices from Psychology Today

For Students on Campus 

Cornell University

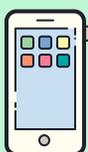
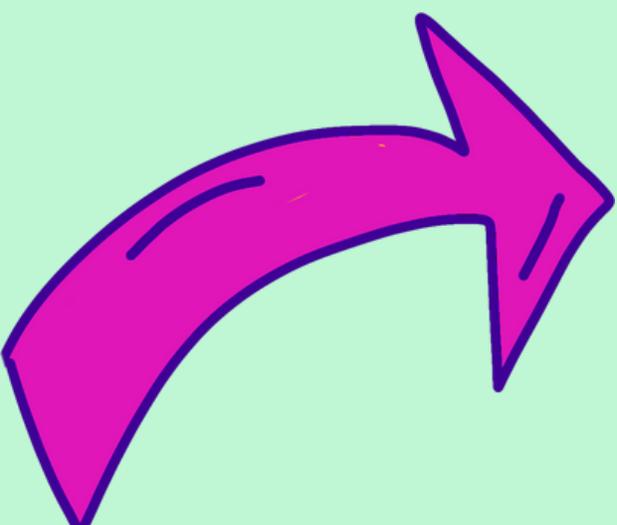
Counseling and Psychological Services (607) 255-5155

Ithaca College

Center for Counseling and Psychological Services (607) 274-3136

Tompkins Cortland Community College

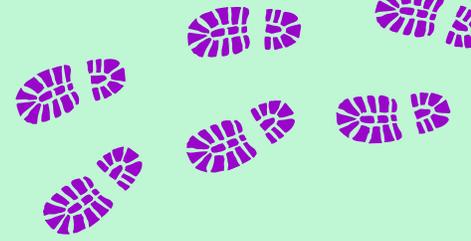
Health and Wellness Services (607) 844-8222 x4487



Scan to
download



**"Love is the capacity
to take care,
to protect, to nourish."
Thích Nhất Hạnh**



Support Services



Mental Health Association in Tompkins County (607) 273-9250
In-person and online support groups for youth and families
Peer Warm Line (non-crisis support) (607) 277-7337

National Alliance on Mental Illness—Finger Lakes (607) 288-2460
Family and partner/spouse support groups

NY Project Hope (844) 863-9314
Emotional support helpline and referral information

Addiction Recovery



Alcohol & Drug Council of Tompkins County (607) 274-6288
Counseling and referral services to support sobriety and good health

Cayuga Addiction Recovery Services (607) 273-5500
Outpatient, residential, and tele-health treatment and rehabilitation services

The Reach Project (607) 273-7000
*Harm reduction medical practice with
addiction and other services*

Sexual Assault and Domestic Violence



Advocacy Center of Tompkins County (607) 277-3203
Hotline (607) 277-5000
*Support for survivors, friends, and families
of domestic violence and sexual assault*

Health and Social Services



Cayuga Health Find a Medical Provider (607) 274-4615
Directory of physicians

Guthrie Find a Medical Provider (866) 488-4743
Directory of physicians

Racker (607) 272-5891
*Wide range of community programs including
family and behavior support services*

"211 Tompkins Cortland" 211 or (877) 211-8667
*Hotline providing information and connections
to health and social services*

**PEOPLE I CAN ASK FOR
HELP IN A CRISIS**



Name / Phone

