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San Diego County

Suicide Prevention Council

An Annual Report on the Status of Suicides & Suicide Prevention Efforts in San Diego



SEPTEMBER 2021

Check Your Mood Day

Check Your Mood Day is an annual event to engage and encourage San Diegans to assess and monitor their emotional well-being and engage in outreach activities.

You can take part in Check Your Mood Day by:

- Taking a free anonymous screening online
<https://screening.mhanational.org/screening-tools/depression>
- Learning more about depression and other types of mental illnesses
<https://up2sd.org/learn/recognizing-symptoms/>
- Learning of mental health resources available in San Diego County
<https://up2sd.org/>
- Being part of the conversation online by using the hashtag, #StigmaFreeSD in your posts

For more information go to:

www.LiveWellSD.org/CheckYourMood

There is no
health without
mental health.

Status of Suicide in San Diego 2020

A Closer Look at Healthcare Coordination & Capacity for Suicide Prevention

The San Diego County Suicide Prevention Council Annual Report to the Community shares prevention resources and local data on suicide and help-seeking behavior. Our goal with this annual report is to raise awareness that suicide is everyone's business, stimulate efforts to connect people to resources and, ultimately, reduce regional suicide rates. Through sharing this information we hope to reduce the stigma associated with suicide and mental illness and connect people with available resources.

This year's report spotlights the strides made by healthcare organizations to improve the quality and accessibility of mental health services across San Diego County. Suicide prevention efforts are bolstered in part by healthcare providers improving treatments, conducting patient safety assessments, and providing greater access to treatment. This network of care was also challenged by the COVID-19 pandemic. Despite experienced difficulties, there were opportunities for innovation through the use of telehealth and other technologies.

The phrase *Healthcare Coordination & Capacity* is one of the strategies in the comprehensive Suicide Prevention Action Plan that was developed in 2018. "Coordination" and "Capacity" refers to the ways healthcare providers meet the mental health needs of community members through the health care delivery system.

Healthcare Coordination targets coordinating patient's care between organizations and/or between levels of care, e.g., emergency department, primary care provider, inpatient treatment, intensive outpatient programming to improve patient outcomes and experiences.

Suicide prevention for the **Coordination** part of the strategy, has a goal of ensuring healthcare providers are educated on "best practices" in suicide risk assessment and treatment including the use of a standardized suicide risk assessment tool supported by research.

The second and equally critical part of the strategy is **Capacity** which refers to the availability of appropriate services at appropriate times for residents across the County.

The COVID-19 pandemic required healthcare providers to modify how they delivered mental healthcare, for many this involved launching telehealth platforms. The inclusion of telehealth services allowed greater access to services. There continues to be numerous opportunities in the realm of healthcare coordination and capacity to strengthen the transition between providers and level of care given. It begins by ensuring that there is a common language in assessing and treating suicide risk. The use of standardized risk assessment tool is one way in which this is accomplished.

Status of Suicide & Suicide Prevention in San Diego County: SPC Report Card 2020

What do the data reveal about suicide? What is being done about it?

This report card brings together the most recent data available from multiple sources (for the years 2016 through 2020) to present a profile of suicides for all ages in San Diego County. Information from the County Medical Examiner, the Access & Crisis Line, hospital emergency departments, student self-reports, suicide prevention awareness campaigns and suicide prevention training programs are presented to provide a more complete understanding of the status of suicide and prevention efforts in San Diego County.

Indicator	2016	2017	2018	2019	2020
1. Total Suicide Deaths (ALL AGES)					
a. Number	431	458	465	429	419
b. Rate per 100,000 population	13.1	13.8	13.9	12.8	12.5
2. Emergency Department Discharges: Self-Inflicted Injury/Poisoning					
a. Number	3,098	3,091	3,163	3,029	--
b. Rate per 100,000 population	94.2	93.2	94.8	90.4	--
3. Access & Crisis Line: Percent of All Calls that are Crisis Calls	25.7%	31.4%	47.6%	55.0%	53.0%
4. It's Up to Us Media Campaign					
a. Annual Website Visits	246,273	265,771	265,454	247,000	211,403
b. Total Facebook Fans	16,074	21,602	22,097	21,983	21,902
5. Student Self-Report: Percent of Students who Seriously Considered Suicide	14.5%	--	15.5%	--	14.5%
6. Suicide Prevention Gatekeeper Trainings					
a. Presentations	100	157	207	164	124
b. Participants	1,937	3,627	5,553	3,483	1,977

1. Total number and rate of persons that died by suicide. Source: County of San Diego HHSA, Emergency Medical Services, Medical Examiner Database, 2016-2020. Population Data from SANDAG. Suicide rates for previous years may not reflect values included in prior report cards due to updated population estimates. **2. Total number, rates of persons discharged from emergency department that had self-inflicted harm from 2016-2019.** Source: County of San Diego HHSA, Emergency Medical Services, Medical Examiner Database, 2016-2019. Population Data from SANDAG. **3. Total percentage of self-reported crisis calls to the San Diego County Access & Crisis Line from 2016-2020.** Source: OptumHealth. **4. Total number of persons that visited the It's Up to Us media campaign website and cumulative number of fans of the Facebook campaign website page per year from 2016-2020.** Source: Rescue Agency. **5. Total percent of youth (9th and 11th Grade) that had suicide ideation (surveys conducted every other year from 2016-2020).** Source: California Healthy Kids Survey (CHKS), Developed by WestEd for the California Department of Education, 2016-2020. The total percent is an average of the 9th and 11th grade percentages. **6. Total number of Gatekeeper suicide prevention trainings [Question, Persuade, and Refer (QPR), ASIST, GLSEN, First Responders, Pharmacists] overall held and participants trained as tracked by San Diego County Suicide Prevention Council.** Source: Community Health Improvement Partners, 2016-2020.

Call the San Diego Access & Crisis Line (ACL) at (888) 724-7240 to receive FREE assistance 7 days a week/24 hours a day. For mental health and suicide prevention resources, information about free suicide prevention trainings, or to use chat services with ACL Monday-Friday (4pm-10pm), visit <http://www.Up2SD.org>. For more information on the San Diego County Suicide Prevention Council, visit www.spcsandiego.org.

Suicide Prevention in the Emergency Room Setting

Background

Some individuals experiencing suicide crisis or those who have made a suicide attempt may find themselves seeking support at hospital emergency departments (ED), therefore healthcare professionals working in this setting play a key role in suicide prevention and intervention. Oftentimes when patients who are at higher risk for suicide are discharged from the ED, the treatment typically comes in the form of an out-referral. However, it is estimated that as many as half of those who are referred to follow-up care appointments scheduled do not attend (Knesper, 2010). Coordination in the EDs among staff and referral partners is essential in preventing suicides.

What's the Role of Emergency Departments in Suicide Prevention?

Emergency Departments can play a key role in suicide prevention by providing universal screening, treatment, and follow-up communication to reduce suicide risk. The Suicide Prevention Resource Center (SPRC) highlights certain steps that EDs can take with patients while in the ER that would further help to prevent suicides, such as

- Conducting suicide risk assessments
- Having health professionals trained in effective suicide care
- Conducting brief interventions in the form of safety planning or lethal means counseling
- Focus on discharge planning and safe transitions of care to follow-up services

By taking those steps listed above and having a comprehensive approach to suicide prevention that includes brief intervention steps, EDs can effectively prevent suicides and save lives.

Knesper, D. J., American Association of Suicidology, & Suicide Prevention Resource Center. (2010) Continuity of care for suicide prevention and research: Suicide attempts and suicide deaths subsequent to discharge from the emergency department or psychiatry inpatient unit. Newton, MA: Education Development Center, Inc.



TRAINING: Preventing Suicide in Emergency Department Patients



This online course teaches healthcare professionals who work in an ED how to conduct screening, assessment, and brief interventions, such as safety planning and lethal means counseling. It also addresses patient-centered care for patients with suicide risk, patient safety during the ED visit, and incorporating suicide prevention into discharge planning.

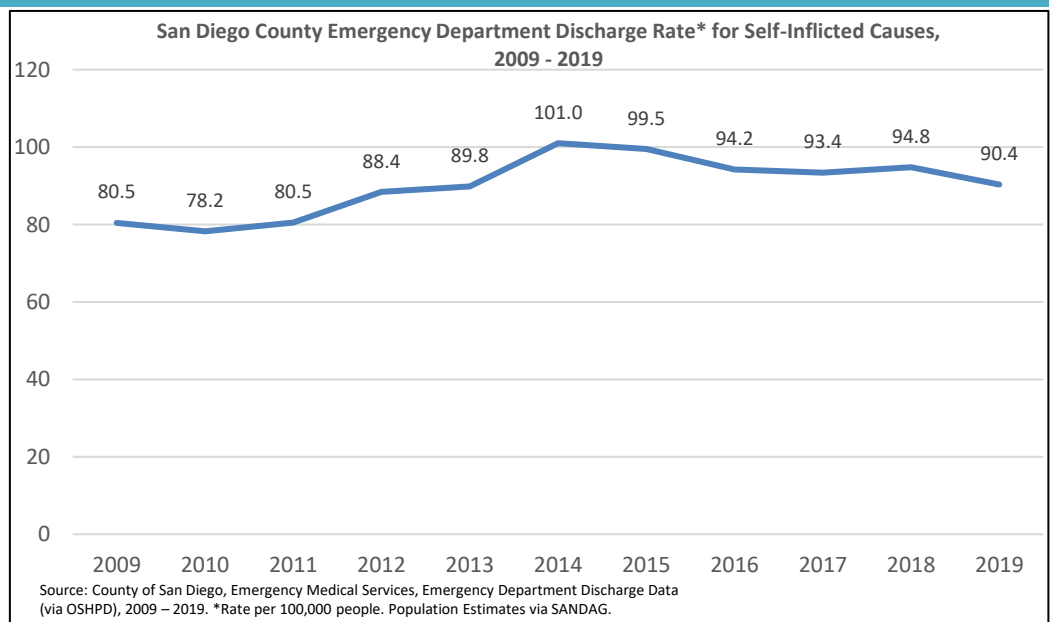
For more information:

<https://zerosuicidetraining.edc.org/enrollment/index.php?id=30>

Emergency Department Discharges in San Diego County for Self-Inflicted Harm

In 2019 there were 3,029 emergency department discharges for self-inflicted causes in San Diego County which is a rate of 90.4 per 100,000 people.

Of these, 976 (32%) were repeat patients, meaning that there was a total of 2,053 people who went to the emergency department with self-inflicted causes in 2019. The San Diego County emergency department discharge rate for self-inflicted causes increased by 25% from 2009 to 2014 and then decreased by 10% from 2014 to 2019.





Rady Children's Hospital San Diego Behavioral Health Services

SERVICES

Behavioral Health Urgent Care

4305 University Avenue, Suite 150

San Diego, CA 92105

Phone: (858) 966-5484

Fax: (619) 795-1228

The Behavioral Health Urgent Care serves children, teens and their families struggling with urgent emotional and/or behavioral concerns that pose a risk to their safety, or the safety of others, or significantly impair their daily lives.

Outpatient Psychiatry Clinic and School-Based Services

San Diego

3665 Kearny Villa Road, Suite 101,

San Diego, CA 92123

Phone: (858) 966-5832

Escondido

Palomar Health Outpatient Center

2125 Citracado Parkway, Suite 200,

Escondido, CA 92029

Phone: (760) 294-9270

Oceanside

3605 Vista Way, Suite 258,

Oceanside, CA 92056

Phone: (760) 758-1480

Rady Children's Outpatient Psychiatry Clinic and School-Based Services includes a full range of community-based behavioral health services for children, teenagers and transition-aged youth whose functioning is impaired by symptoms from a psychiatric diagnosis. Based on the individualized needs of each young person and family, these clinical programs can include family, individual or group therapy, case management, substance abuse treatment and rehabilitation, crisis intervention and safety planning, psychiatric evaluation and treatment,

Rady Children's Hospital-San Diego is the region's pediatric medical center serving San Diego, Imperial and southern Riverside counties. Rady Children's Child and Adolescent Psychiatric Services (CAPS) program is an inpatient unit for children and adolescents up to age 18 with psychiatric illness. Our team of highly experienced clinicians from both Rady Children's and the UC San Diego School of Medicine provide comprehensive psychiatric care to treat conditions such as depression, psychosis, anxiety disorders and substance use. Patients receive individualized services based on their needs, which include specialized therapies, recreational therapy, and other behavioral health programs. Our patients also take part in community meetings with their care team that help them to establish positive goals for themselves, review their progress, and learn positive coping strategies.

In addition to CAPS, we also provide other behavioral health services including the Copley Psychiatric Emergency Department, which serves the unique needs of patients requiring immediate and long-term care for mental and behavioral health challenges. We have long been involved with community-based suicide prevention efforts. In partnership with the Ninth District PTA, Rady Children's hosts its annual Suicide Prevention Symposium for parents and guardians to learn, engage, and plan together to address youth suicide through training opportunities and resource sharing. The past two events have been a success with the support of the San Diego County Suicide Prevention Council (SPC) and other community stakeholders all working together to prevent youth suicides in our region.

For more information, please visit: <https://www.rchsd.org/>

Meeting the COVID-19 Challenges by Building Behavioral Health Knowledge Base of Staff

The COVID-19 pandemic greatly impacted many individuals and its effects on youth mental health is evident. Many children's hospitals have adapted to address behavioral concerns by offering telemedicine options. Another way we at Rady Children's addressed this concern was through additional staff training to meet the behavioral health care needs of its patients. In partnership with the National University System, our team developed a 16-hour customized training program designed to build upon employees' knowledge around mental and behavioral health. This included not only our hospital providers, but also front desk, emergency, and non-clinical support staff. Since its launch in 2020, 1,200 staff members have participated in these training efforts.



The customized training not only highlighted behavioral health, but focused on difficulties directly related to the pandemic. Course modules included: reducing mental illness stigma, improving employee resiliency, and coping skills during challenging situations. Through interactive modules and live video sessions, the training provides our staff with tools necessary to better address the needs of those experiencing behavioral health challenges. For more information, please click [HERE](#).

"Behavioral Health Services." Rady Children's Hospital-San Diego, www.rchsd.org/programs-services/behavioral-health-2/.

Build Behavioral Health Knowledge Base of Staff to Meet COVID-19 Challenges, 4 May 2021, www.childrenshospitals.org/Newsroom/Childrens-Hospitals-Today/Articles/2021/04/Build-Behavioral-Health-Knowledge-Base-of-Staff-to-Meet-COVID-19-Challenges?utm_campaign=CHT-Newsletter-Weekly&utm_source=Salesforce-MC&utm_medium=Email&utm_term=May-06-2021&utm_content=Article-1.

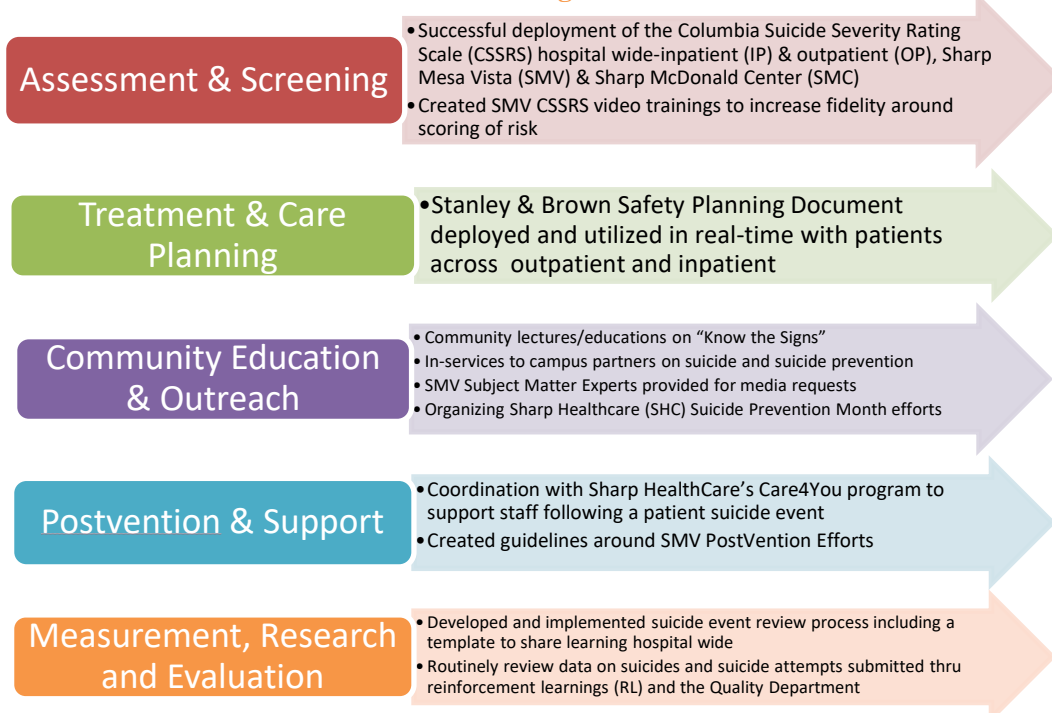
Behavioral Healthcare & Suicide Prevention



This year we continue to see an epidemic within a pandemic –the surging need for mental health services to help our fellow citizens ride the unprecedented wave that is the COVID-19 pandemic. As the largest freestanding behavioral health hospital in San Diego, we were called to action, seeing early on the warnings sign for the coming mental health surge, we quickly pivoted offering telehealth to allow for access and worked to ensure safe in-person protocols were in place to serve patients in our inpatient units and outpatient programs. As people presented with increasing loneliness, fear and despair we knew we could not lose sight of our focus on suicide prevention and our commitment to reach our goal of ZERO suicides.

The Suicide Prevention Steering Committee at Sharp Mesa Vista, a multidisciplinary team of leaders from across the care continuum, had already worked on suicide prevention – identifying 5 strategic imperative areas for the hospital to focus on. This year, we were focused on ensuring advancement across our imperatives. Below is a graphic that highlights these areas and describes the suicide prevention goals attained over the past year.

Suicide Prevention Strategic Imperatives: Zero Suicide advancement during the COVID-19 Pandemic



The COVID-19 pandemic has illuminated the amazing fighting spirit of Sharp Healthcare, and in this case, the staff of Sharp Mesa Vista. Deploying a new technology that would allow us to continue to deliver quality driven care, that would be efficacious, that would be timely and user friendly, that would meet regulatory and insurance standards -- it took an amazing amount of teamwork, dedication and coordination. Never losing sight of our suicide prevention efforts and working to ensure movement and momentum across our strategic imperatives continues to be due to great stewardship and frontline dedication.

Healthcare coordination requires continual innovation, collaboration and commitment to tightening gaps between providers to ensure all San Diegans have access to the care they need when they need it.

If you or someone you know would like to schedule a free telehealth assessment for one of our many outpatient programs call (858) 836-8309 or if you are interested in any inpatient services or more information on detox services call (858) 836-8434. For more information visit our website: [Sharp Mesa Vista Hospital in San Diego - Kearny Mesa.](#)



Safety Planning and Working with Patients at High Risk for Suicide

Developing a Safety Plan can offer coping strategies and sources for patients at risk for suicide. Providers can help patients identify these strategies before or during a suicidal crisis. The plan is brief, is in the patient’s own words, and is easy to read. Read the steps below on how to create this Safety Plan.

1. List the warning signs

Ask: “What do you experience when you start to think about suicide or feel extremely depressed?”

2. Determine internal coping strategies

Ask: “What can you do, on your own, if you become suicidal again, to help yourself not to act on your thoughts or urges?”

3. Identify social contacts who may support them.

Ask: “Who helps you feel better when you socialize with them?”

4. Identify family members or friends who may offer help.

Ask: “Among your family or friends, who do you think you could contact for help during a crisis?”

5. Determine professionals, programs, and agencies to contact for help.

Ask: “Who are the mental health professionals that we should identify to be on your safety plan?”

6. Make the environment safe.

Ask: “Do you own a firearm, such as a gun or rifle?” and “What other means do you have access to and may use to attempt to kill yourself?”

“Safety Planning Guide: A Quick Guide for Clinicians.” *Safety Planning Guide: A Quick Guide for Clinicians | Suicide Prevention Resource Center.* [www.sprc.org/resources-programs/safety-planning-guide-quick-guide-clinicians.](http://www.sprc.org/resources-programs/safety-planning-guide-quick-guide-clinicians)

Integration of Behavioral Health & Primary Care



Education Opportunities for Hospitals and Healthcare Organizations

Counseling on Access to Lethal Means (CALM)

Reducing access to lethal means, such as firearms and medication, can determine whether a person at risk for suicide lives or dies. This **FREE** online course focuses on how to reduce access to the methods people use to kill themselves. It covers how to: (1) identify people who could benefit from lethal means counseling, (2) ask about their access to lethal methods, and (3) work with them—and their families—to reduce access.

To learn more please visit:

<https://zerosuicidetraining.edc.org/enrol/index.php?id=20>

Question Persuade Refer (QPR)

Suicide Prevention Gatekeeper Training

QPR stands for Question, Persuade, and Refer — the 3 simple steps anyone can learn to help save a life from suicide. Just as people trained in CPR and the Heimlich maneuver help save thousands of lives each year, people trained in QPR learn how to recognize the warning signs of a suicide crisis and how to question, persuade, and refer someone to help. Trainings are available at **NO COST** virtually and in-person in San Diego County through the SPC. To schedule a QPR Training, please contact Lora Cayanan at lcayanan@sdchip.org.

Suicide Postvention – Support After a Suicide Presentations

Survivors of Suicide Loss or SOSL San Diego offers presentations to mental health professionals to help support survivors of suicide loss and for those who have lost clients to suicide.

Presentations cover the topics of postvention, trauma-informed care, and effective resources.

To learn more please visit:

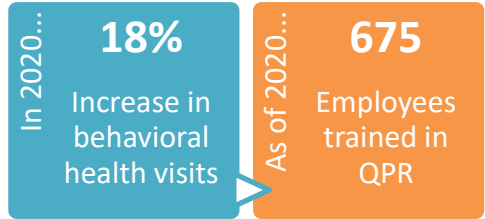
<https://www.soslsd.org/speakers/suicide-postvention-presentations-support-after-a-suicide/>



TrueCare™ offers quality services in 11 state-of-the-art health centers in San Diego and Riverside counties. Our mission is to improve the health status of our diverse communities by providing quality healthcare that is comprehensive, affordable, and culturally sensitive. The need for behavioral health services at TrueCare has soared during the COVID-19 pandemic. In fact, we saw an 18% increase in behavioral health visits in 2020. TrueCare is committed to raising awareness of the impact of stress and trauma on the brain as well as reducing the stigma surrounding mental health.

TrueCare recognizes the importance of integrating behavioral health services into primary care. In the United States approximately 50% of people who die by suicide are seen in primary care within one month of their death. This staggering percentage is one that can change by revising the way primary care is delivered and that's why we already integrate behavioral health providers to serve as consultants in all primary care departments. The adjustment served to enhance access to behavioral health services and facilitate a path to whole-person wellness. This framework would not have been effective without the integration of behavioral health consultants (BHC's) to help solidify the practice of trauma-informed care and champion the reduction of stigma while promoting behavioral health awareness.

TrueCare trains physicians, providers and staff at all service lines (Pediatrics, Family and Adult Medicine, Women's Health, Dental Services, Pharmacy, and Chiropractic) in the finer points of behavioral health, including connecting the brain to chronic medical conditions throughout the life cycle, toxic stress and epigenetics.



The first and most important step, now recommended by the Adverse Childhood Experience's (ACEs) Aware initiative, is to ensure the understanding of toxic stress science and the importance of screening for ACEs as well as other traumatic life events. In addition to ACEs Aware training, over 675 employees are certified in **Question, Persuade, Refer** or QPR suicide prevention gatekeeper trainings to enhance knowledge on recognizing the signs of suicide and how to use these three steps to help save a life.

The final component of the organization's effort to improve access to behavioral health services, which was developed simultaneously with the Integrated Behavioral Health (IBH) team, is the anchor of the larger Behavioral Health Department. TrueCare's Mental Health services department is comprised of Psychiatric providers and specialty therapists that, pre-pandemic, provided Neurofeedback, EMDR, Substance Use Disorder groups and individual therapy, Eating Disorder Groups, ADHD testing, Chronic pain therapy and a variety of trauma and other counseling services. The support and encouragement of the Suicide Prevention Council and Community Health Improvement Partners has helped us with our continued efforts to raise awareness and confidence in detecting suicidal thoughts in patients.

To learn more about TrueCare's available services, please visit <https://truecare.org> or call or text (760) 736-6767.

The San Diego County Suicide Prevention Council (SPC)

The SPC is a community-wide collaborative focused on realizing a vision of zero suicides in San Diego County. Our mission is to prevent suicide and its devastating consequences. On April 1, 2010, the County of San Diego Health and Human Services Agency (HHSA) awarded Community Health Improvement Partners (CHIP) a contract to form and establish an interagency council to create, introduce, and drive implementation of a Suicide Prevention Action Plan (SPAP) for the entire County—and the first of its kind in California.

In 2016, after five years of successfully growing the SPC efforts, HHSA awarded CHIP a second contract to update the SPAP. The SPAP Update 2018 extends the work of the SPC with 9 strategies designed to expand the coalition’s membership and engage community in a comprehensive approach to reduce suicide in the region. Today, with continued support from the County of San Diego and its members, the council provides oversight, guidance, and collective support to implement the recommendations of the SPAP Update 2018. For more information, please visit www.spcsandiego.org.

WHAT YOU CAN DO

- If you or someone you know needs help, call the *Access & Crisis Line* for support at (888) 724-724 (7 days a week/24 hours a day and multiple languages available).
- Learn the signs and what to do next by hosting or attending a free QPR Suicide Prevention Gatekeeper training by visiting <https://www.sdchip.org/initiatives/suicide-prevention-council/trainings/>.
- Find more resources at the *It's Up to Us* website www.up2sd.org; you can also join the Facebook page at www.facebook.com/up2sd.
- Reach out to someone you think is struggling or if you are struggling try to connect to help.
- Volunteer your time and/or donate to suicide prevention efforts and organizations.
- Suicide is complicated so if you need additional support you can call 2-1-1, it is a resource and information hub for community, health and disaster services or visit <https://211sandiego.org/>.
- Take a Mental Health First Aid Training to learn more about mental health and how you can help yourself and others by visiting <https://www.mentalhealthfirstaidsandiego.com/>.
- For K-12 school suicide prevention resources, view our resource guide [HERE](#).
- Learn more about the San Diego County Suicide Prevention Action Plan Update 2018 at www.spcsandiego.org.
- Learn more and participate with the San Diego County Suicide Prevention Council at www.spcsandiego.org and/or join our mailing list by emailing info@sdchip.org.

Notable Suicide Prevention Milestones Timeline

