Health Care Coordination

Partnering with caregivers, caseworkers, providers, parents and youth to ensure our members get the care they need. Our team is here to help you with changes and barriers that come your way. Visit **CoordinatedCareHealth.com/benefits**, Call **1-877-644-4613 (TTY: 711)**, or Email <u>AHCCTeam@coordinatedcarehealth.com</u>

coordinated care.

CARE FOR THE WHOLE YOU.





- New or replacement ID card
- Help with a healthcare bill
- Parent support scheduling appointments
- Child/youth moving homes
- Child/youth returning from out of state
- Need medical equipment for new placement
- Help replacing lost or broken glasses



- Need a doctor, specialist, therapist or other providers
- A record of the doctors the child has seen
- Help to see a specialist



- Plan for child/youth discharging from ER or hospital
- Medication/pharmacy issues
- Support for child/youth with multiple or complex needs



- Support/education for health conditions (like asthma, anxiety, diabetes)
- School support for special needs



coordinated care Preventing Youth Suicide

You can make a difference.

Training Agreements





Focus of Training

- Scope of the issue
- Risk factors
- Warning signs
- Directly asking about suicide
- Action steps
- Resources





National Statistics

- In 2020 we lost 45,979 people to suicide
- Men die by suicide more often than women
- There is 1 death by suicide every 11 minutes
- There is 1 suicide for every estimated 25 attempts
- In 2020 firearms accounted for 52.83% of all suicide deaths

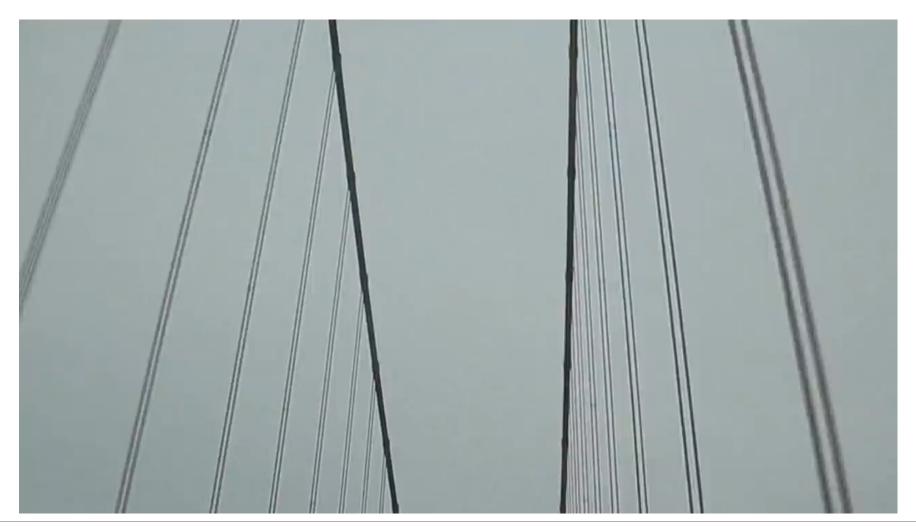


Washington Statistics

- Washington has a higher suicide death rate than the national average
 In 2020, 1,212 residents died by suicide
- Washington <u>Healthy Youth Survey</u>:
 - In 2021, 20% of 10th graders seriously thought about attempting suicide during the 12 months prior to the survey
 - $\circ~$ In 2021 15% of 10th graders reported they had no adult to turn to when sad or hopeless
- Suicide is the second leading cause of death between 10-24
- On average, each week:
 - o 2 youth kill themselves
 - o 17 youth are hospitalized because of suicide attempts



Video Clip - Kevin Himes





You can't always see pain.



You can help save a life by recognizing the signs and starting the conversation. Suicide is preventable.



Why would someone consider suicide?

• Most people who attempt suicide do not want to die

 \circ they want the pain to go away

• The impulse to end their life does not last forever







What can you do?



Learn to recognize signs



Respond to signs



Don't be afraid to talk about it

Think about it like CPR- helping in an immediate crisis



Language matters

Why does language matter?

- "Died by suicide" vs. "Committed suicide"
- You are not responsible for someone taking their own life





Self Harm

- Self-harm (also called Non-Suicidal Self-Injury) is the act of harming ones' own body. Examples:
 - o Cutting
 - o Burning
 - o Picking
 - o Pulling hair
 - o Carving
- Engaging in self-harm does not necessarily mean an individual is experiencing suicidal ideation
- Self-harm behaviors are often coping behaviors and have been thought to release similar endorphins that are released with other addictions



Self Harm

Key Facts

- 14-24% of adolescents engage in self-harm
- 13 is the average age of onset
- Female and LGBTQ+ youth are at higher risk
- Self harm often cooccurs with other behavioral health challenges

Warning Signs

- Unexplainable cuts, wounds, or scars
- Collecting or frequently carrying lighters or sharp tools
- Isolating from friends and family
- Hiding arms, legs, or other parts of the body

What To Do

- Listen
- Teach replacement coping strategies
- Encourage talking with a trusted adult
- Get professional help



Risk Factors and Warning Signs

BIOLOGICAL Family history Puberty Sexual Orientation Cognitive Impairment Behavioral health	SOCIOLOGICAL Peer pressure Family conflict Drug/Alcohol Use Academic Pressure Abuse Bullying	Psychological Negative self-talk Poor distress tolerance or problem-solving skills Humiliation Black and white thinking	EXISTENTIAL Failure to see good in the world Hopelessness Lack of attachment of Identity "What's the point?"	

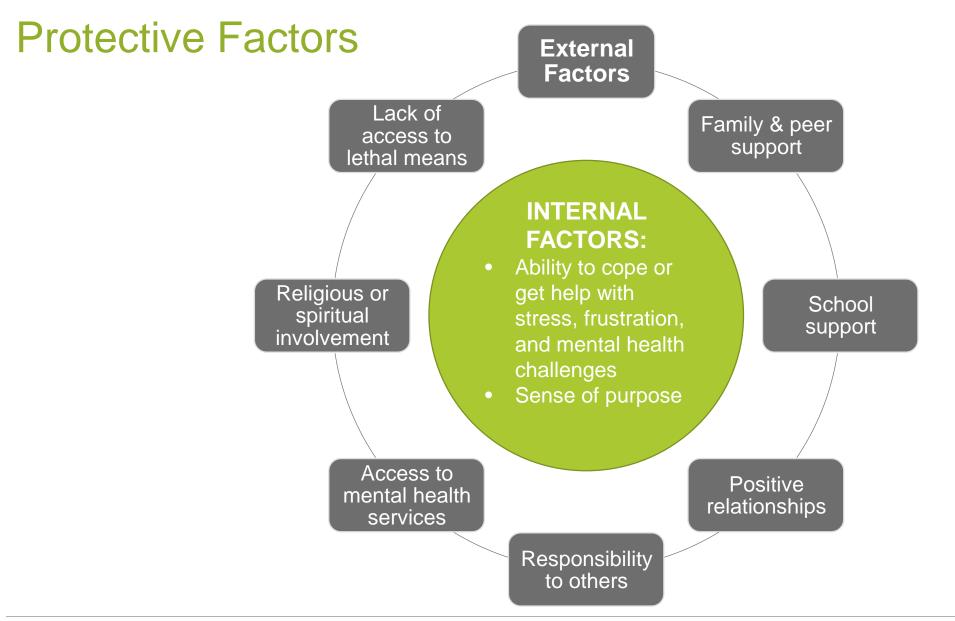


Warning Posts

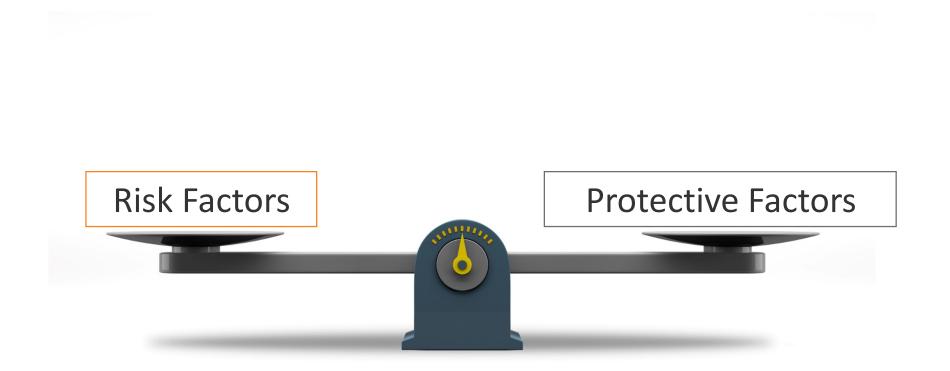
- In 2022, 95% of U.S. teens report they have access to a smartphone.
- Many social media platforms have reporting features if you see a concerning post. Teach youth about these safety features.
- Warning signs to look for on social media:
 - Post about changes to eating, sleeping, and daily habits
 - Post images or words expressing isolation, hopelessness, or emotional difficulties





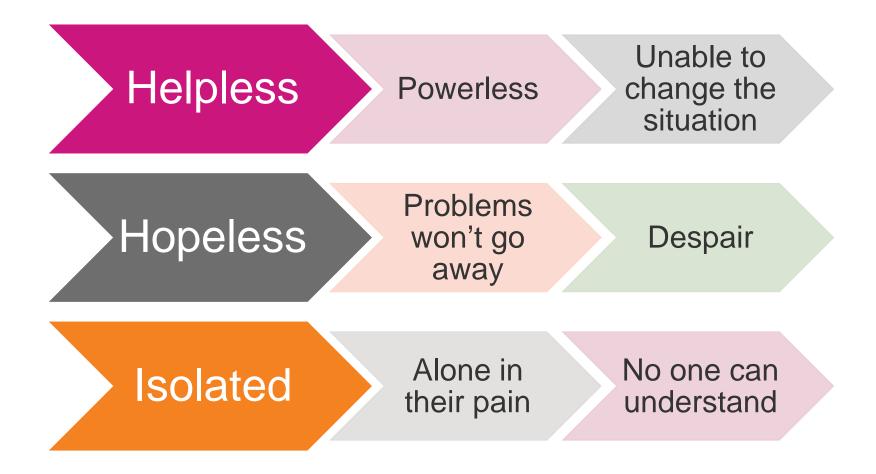


Balancing





Children and youth who are suicidal often feel:





Video - Under the Surface





They need you!

Validate what they are going through is really hard.

- Every suicide threat, comment or action is serious
- Listen
- You do not have to solve the problem or advise
- Encourage the expression of feelings





Ask the Question



Are you thinking about suicide?

Are you thinking about taking your life?

- Saying the word will not put it in someone's head.
- o Ask clearly



How to ask the question

Sometimes when someone is feeling...

Insert what you know

Anxious, Hopeless and Tired

they can be thinking about suicide.

"Are you thinking about suicide?"



Reactions

If they reply "No"

- Keep showing you care
- Keep a neutral reaction
- Ask them to identify someone to turn to if they do have suicidal thoughts.
- Still give them the number for the crisis line: **988**





Talk About Behavioral Health

- Talk frequently, not once
- Talking about suicide helps prevent suicide
- Honest conversations are the basis for prevention efforts
- Keep the door open for more conversations
- Validate and acknowledge emotions
- Stay supportive and neutral
- Help them identify their own feelings- don't ask leading questions
- It's okay to tell them what you're noticing, do so without judgement

• Give Hope



https://www.youtube.com/watch?v=w 9pD2Sr 0w



https://findyourwords.org/kids-mental-health/talk-often/

Reactions

If they say "Yes"

- Talking about it can make a difference
- Respond:

 I'm listening or
 please tell me more
- Acknowledge their pain

- Contact crisis line: 988
- Access on-going mental health support
- Identify additional friends, family and services



Additional questions

Ask additional questions to help gather important information and understand the level of risk.



Have you thought about how you would take your life?



Have you thought about when you plan on doing this?



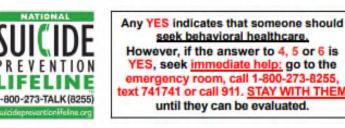
The Columbia Protocol: C-SSRS

• Visit the Columbia Protocol website (https://cssrs.columbia.edu/) for:

o Training

- Risk assessment tools to be utilized by schools, law enforcement, healthcare, family/friends/neighbors, first responders, corrections
- Download the Columbia Protocol app for <u>iPhone</u> or <u>Android</u>

Past 1	Month
ut High Risk High Risk	
	High Risk
	H R Life-









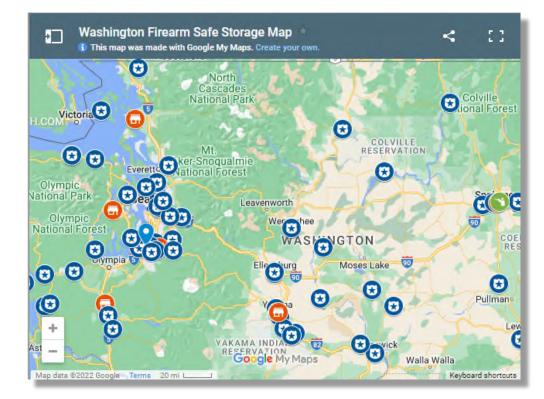




Make Your Home Safer

Over 50% of all suicides involve firearms.

- Firearms should be safely secured
- Safer Homes Campaign
 <u>https://saferhomescoalition.org/</u>
- WA Firearm Safe Storage Map <u>https://hiprc.org/firearm/firearm-</u> <u>storage-wa/</u>

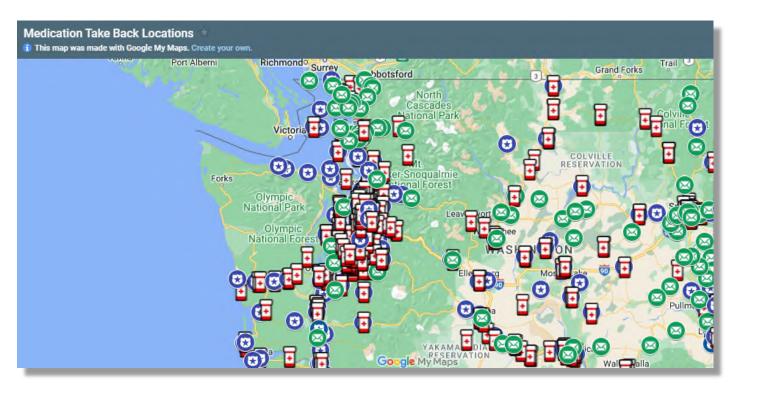




Make Your Home Safer

Lock it up:

- Over-the-counter medicines and prescriptions
- 1-day dose of medication for mental health crisis
- Take back unneeded medications: <u>www.takebackyourmeds.org</u>











Let's Practice

Your foster child has been in your care for 6 months.

Their therapist expressed concern about increasing hopelessness. Someone at the school heard them saying "meds aren't helping and have never helped."

How do you respond?

They appear tired all the time and are not involved in extra curricular activities.



Practice

Sometimes when people are....

Feeling really tired, confused and hopeless about their future,

They are thinking about suicide. Are you thinking about suicide?



Choose Tomorrow a Zero Suicide Program: We take your health seriously.

- Coordinated Care's health care coordination team responds to all indicators of suicide risk
- A Columbia-Suicide Severity Rating Scale (C-SSRS) is completed
 o any suicide risk indicated is addressed with
 - crisis response planning
 - comprehensive resources



Safety Plan Template

Step 1:	Warning signs (thoughts, images developing:	s, mood, situation, behavior) that a crisis may be
Step 2:	Internal coping strategies - Thin	gs I can do to take my mind off my problems on (relaxation technique, physical activity):
I		
2.		
3		
Step 3:	People and social settings that p	provide distraction:
		Phone
		Phone
		4. Place
Step 5:	Professionals or agencies I can co	ontact during a crisis:
1. Clinicia	an Name	Phone
	an Pager or Emergency Contact #	
2. Clinicia	an Name	Phone
Clinicia	an Pager or Emergency Contact #	
Urgen	t Care Services Address	
	t Care Services Phone	
	e Prevention Lifeline Phone: 1-800-273	-TALK (8255)
4. Suicide	Balling also and the sector	
	Making the environment safe:	
Step 6:		
Step 6:		





If Your Child has Access to a Phone...

Consider saving key crisis contacts.

O Crisis Connection: 1-866-427-4747
- 24-hour help line

 Trevor Project: 1-866-488-7386
 National 24-hour hotline for LGBTQ+ youth
 <u>https://www.thetrevorproject.org</u>

 The National Suicide Prevention Lifeline: 988

o A trusted friend/relative

National Suicide Prevention Lifeline

988

Reasons to call:

- Speak with someone who cares
- If you feel you might be in danger of killing yourself
- Referrals to mental health services in your area

- Speak to a crisis worker if you're concerned about someone
- If the person seems unwilling to accept treatment and is in crisis



Accessing Behavioral Health Services

Apple Health Core Connections Member Services 1-844-354-9876 (TDD/TTY: 711)

24/7 Nurse Advice Line

1-844-354-9876 (TDD/TTY: 711)



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Summary

- You can make a difference with a conversation and asking the question
- Call the crisis line 988 for
 - Questions about suicide or anyone who needs to talk to someone.
- 1-844-354-9876 (TYY: 711)

 $_{\odot}$ Health care coordination team





Additional Resources:

Native and Strong Lifeline: 988, Press 4

Calls are answered by Native crisis counselors who are tribal members and descendants closely tied to their communities. The Native and Strong Lifeline counselors are fully trained in crisis intervention and support, with special emphasis on cultural and traditional practices related to healing.

Crisis Connection: 1-866-427-4747 (24-hour help line)

1-866-833-6546 - Teen Link 6-10 pm Teen link website - 866TeenLink.org https://www.crisisconnections.org/

The Trevor Project: 1-866-488-7386 National 24 hour hotline for LGBTQ youth https://www.thetrevorproject.org

Trans lifeline: 1-877-565-8860

Peer support hotline run by and for trans people

Times: 7am-1am

https://www.translifeline.org



References

- American Foundation for Suicide Prevention
 - o https://afsp.org/suicide-statistics/
- Center for Disease Control
 - o https://www.cdc.gov/suicide/facts/index.html
- National Institutes of Health
 - o <u>https://www.ncbi.nlm.nih.gov/pmc/</u>
- Pew Research Center
 - <u>https://www.pewresearch.org/internet/2022/08/10/te</u> <u>ens-social-media-and-technology-2022/</u>
- Seattle Children's Hospital
 - <u>https://providernews.seattlechildrens.org/spotlight-on-cutting-to-cope-what-is-nonsuicidal-self-injury/</u>

- Washington Healthy Youth Survey
 - o https://www.askhys.net/
- Washington State Department of Health
 - Youth Suicide Prevention. Retrieved from <u>https://doh.wa.gov/you-and-your-family/injury-and-violence-prevention/suicide-prevention/youth-suicide-prevention</u>
 - (published in 2013; updated, 2017) The Health of Washington State chapter on Suicide. Retrieved from

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THANK YOU!