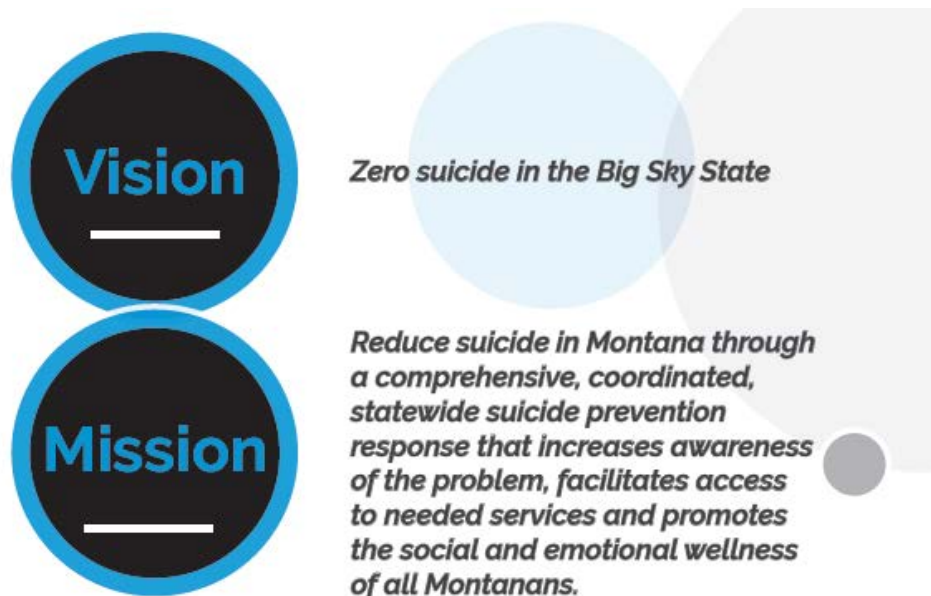


**Suicide
Prevention
Strategic
Plan**



Overview

The following goals, objectives, and strategies are designed to support a coordinated approach to reducing suicide in our state. A 2020-2021 action plan created with the input of key DPHHS stakeholders will track progress on the strategic activities of each of the five goals. DPHHS seeks to continue to build a strong suicide prevention infrastructure with key stakeholders and partners across the state and looks forward to sharing annual updates.

Alignment to DPHHS Strategic Goals

The following plan outlines key strategies to reduce the suicide rate in Montana and aligns with DPHHS's 2019-2024 strategic plan in improving and protecting the health, well-being and self-reliance of all Montanans. The Suicide Prevention Strategic Plan correlates directly to DPHHS's goals to promote health equity and improve population health; strengthen the economic and social well-being of Montanans across the lifespan; ensure all children and youth achieve their highest potential; effectively engage stakeholders; and ensure core business services are efficient, innovative and transparent. The following Plan aligns with agency plans addressing behavioral health, such as the 2019-2023 State Health Improvement Plan, 2017-2019 Substance Use: Addressing Substance Use Disorder in Montana Strategic Plan, and the 2017-2019 Native American Youth Suicide Reduction Plan, to ensure agency-wide coordination, resource alignment, and increased crosswalk impact.

Goals, Objectives, and Strategies

Goal 1

Implement a suicide prevention program at the department based upon the best available evidence

Objective 1.1

Dedicate core staff positions to carry out essential functions of DPHHS's suicide prevention efforts

Strategies

- 1.1.1 Establish an office of suicide prevention located within the Addictive and Mental Disorders Division (AMDD)
- 1.1.2 Continue support for the Native American Adult Zero Suicide Grant Manager¹
- 1.1.3 Sustain statutory suicide prevention coordinator for the DPHHS Suicide Prevention Program

Objective 1.2

Implement one-year suicide prevention action plan

Strategies

- 1.2.1 The DPHHS suicide prevention program will initiate suicide prevention action plan
- 1.2.2 Report on action plan progress and update the Montana Suicide Prevention Strategic Plan

Objective 1.3

Coordinate and integrate DPHHS's suicide prevention activities through the Suicide Prevention Program, encouraging cross-department collaboration and integration of programs across funding sources

Strategies

- 1.3.1 Improve communication and coordination across branches, divisions, and programs to better collaborate on suicide prevention efforts

Objective 1.4

Provide policy recommendations based on published data, best practices, and state-specific data analysis to DPHHS (as the lead agency) with an eye towards state law and/or policies where relevant

Strategies

- 1.4.1 Establish a link between AMDD Division leadership and DPHHS data experts to ensure a comprehensive approach to evidence-based practices and metrics

Goal 2

Develop a comprehensive communication plan

Objective 2.1

Research effective suicide prevention messaging and explore resources to create and disseminate public awareness messaging

Strategies

¹ Montana Native Youth Suicide Reduction Strategic Plan (2017-2019)

- 2.1.1 Develop a communication plan regarding suicide prevention efforts²
- 2.1.2 Identify key stakeholder groups and a plan for outreach with targeted messaging strategies³
- 2.1.3 Explore use of existing public facing platforms to disseminate suicide prevention messaging and resources⁴

Objective 2.2

Direct resources towards identifying and implementing evidence-based strategies to prevent lethal means through messaging for target groups

Strategies

- 2.2.1 Work with substance abuse prevention experts to continue to promote safe storage and disposal of prescription medications⁵⁶
- 2.2.2 Partner with subject matter experts to hold focus groups and study how to message best practice strategies, including lethal means restriction when necessary for high risk individuals experiencing acute suicidality

Goal 3

Identify and use available resources needed to guide state, tribal, county, and local efforts, including crisis response efforts⁷

Objective 3.1

Oversee an overall suicide prevention training plan for prevention and intervention trainings within communities

Strategies

- 3.1.1 Create, disseminate, and monitor an updated online toolkit resource with self-guided online educational resources for providers and residents
- 3.1.2 Deliver a coordinated state-provided train the trainer system to include: QPR, ASSIST, suicide safer care, CSSRS, and Safety Planning trainings to healthcare and behavioral health programs in Montana’s university system⁸

Objective 3.2

Strengthen the crisis response system infrastructure in Montana

Strategies

- 3.2.1 Maintain and strengthen the suicide crisis response infrastructure in Montana through support of the two regional State Suicide Prevention Lifelines and statewide crisis texting services through the National Crisis Text Line.
- 3.2.2 Support the development of an effective and comprehensive crisis response infrastructure in local communities that diverts individuals experiencing behavioral health crises to appropriate level of care⁹
- 3.2.3 Expand use of and coverage for peer support services in mental health, substance

² Native American Youth Suicide Reduction Strategic Plan (2017-2019), Priority Action Step 1.3

³ Native American Youth Suicide Reduction Strategic Plan (2017-2019), Priority Action Step 1.2

⁴ Native American Youth Suicide Reduction Strategic Plan (2017-2019), Priority Action Step 2.4 and 2.5

⁵ Montana State Health Improvement Plan (SHIP) (2020) Priority Area 1: Behavioral Health, Prevention and Health Promotion Strategies

⁶ Addressing Substance Use Disorder in Montana Strategic Plan (SUD) (2019), Focus Area 2: Prevention and Education, Action #2

⁷ SHIP (2020), Priority Area 1: Behavioral Health, Prevention and Health Promotion Strategies

⁸ SHIP (2020), Priority Area 1: Behavioral Health, Clinical Strategies

⁹ SUD (2019) Focus Area 3: Enforcement

- use, and crisis response systems¹⁰¹¹
- 3.2.4 Support the use of Mental Health First Aid, Crisis Intervention Training, and other evidence-based Crisis interventions for additional law enforcement officials, first responders, and hospital ER staff¹²
- 3.2.5 Support and promote the utilization of the resource and referral system as a tool for referrals from crisis services to other state, county, and local services

Objective 3.3

Embed expectations for suicide prevention within relevant state-funded contracts

Strategies

- 3.3.1 Support health systems in incorporating a systematic approach to provide suicide safer care

Goal 4

Build a multi-faceted, lifespan approach to suicide prevention

Objective 4.1

Support efforts to ensure a systematic approach to provide suicide safer care by partnering with healthcare and behavioral health programs in Montana's university settings

Strategies

- 4.1.1 Support initiatives that encourage the development of integrated behavioral healthcare models across Montana, creating "no wrong door" access to individuals with behavioral health concerns¹³
- 4.1.2 Encourage medical community to use universal depression and anxiety screening, SUD screening, risk assessment, safety planning, lethal means counseling, and follow up¹⁴¹⁵

Objective 4.2

Build capacity within the public health system to prevent suicide in Montana

Strategies

- 4.2.1 Provide suicide safer care training to health professionals
- 4.2.2 Support and promote the resource and referral system as a tool to provide linkage to behavioral health services as it is integrated into public health, community-based organizations, and coalitions across the state¹⁶

Objective 4.3

Develop and support suicide prevention programs to address suicide prevention with at-risk groups in Montana¹⁷

Strategies

- 4.3.1 Develop and support suicide prevention programs for Service Members, Veterans, and Military Families (SMVF)

¹⁰ SHIP (2020) Priority Area 1: Behavioral Health, Clinical Strategies

¹¹ SUD (2019), Focus Area 4: Family and Community Resources

¹² SUD (2019), Focus Area 4: Family and Community Resources

¹³ SHIP (2020), Priority Area 1: Behavioral Health, Clinical Strategies

¹⁴ SHIP (2020), Priority Area 1: Behavioral Health, Clinical Strategies

¹⁵ SUD (2019), Focus Area 5: Treatment

¹⁶ SHIP (2020), Priority Area 1: Behavioral Health, Clinical Strategies

¹⁷ SHIP (2020), Priority Area 1: Behavioral Health, Health Equity Strategies

- 4.3.2 Develop and support suicide prevention programs for Native Americans¹⁸
- 4.3.3 Develop and support suicide prevention programs for youth¹⁹
- 4.3.4 Develop and support suicide prevention programs for middle-aged white males
- 4.3.5 Develop and support suicide prevention programs for older adults
- 4.3.6 Develop and support suicide prevention programs for LGBTQ+

Objective 4.4

Establish policies, model practices, and develop resources in preparation for post-suicide response (postvention), including in the event of a suicide cluster

Strategies

- 4.4.1 Conduct gap analysis and build out postvention services and resources
- 4.4.2 Review existing crisis response infrastructure and models in communities to leverage and develop response teams for postvention (e.g., school crisis response model, FICMR teams, and regional emergency preparedness programs)

Objective 4.5

Establish a Suicide Prevention Task Force at the state level and receive feedback on actions taken to-date and the Suicide Prevention Strategic Plan

Strategies

- 4.5.1 Establish a Suicide Prevention Task Force with representation from a diverse group of suicide prevention experts
- 4.5.2 Convene Task Force at the end of 2020 to review progress and receive feedback on action plan and assess strategic plan

Goal 5

Support high quality, privacy-protected suicide morbidity and mortality data collection and analysis

Objective 5.1

Increase the use of data to understand the problem of suicide and effectively target interventions²⁰

Strategies

- 5.1.1 Improve surveillance for suicide and suicide risk factors through the new federal National Violent Death Reporting System (MT-VDRS) with funding from the Centers for Disease Control and Prevention²¹
- 5.1.2 Analyze existing population-level data to ascertain specific risk factors for suicide in order to better target evidence-based practices for suicide prevention

Objective 5.2

Establish a system for using and communicating data

Strategies

- 5.2.1 DPHHS Office of Epidemiology and Scientific Support (OESS) to compile an annual data report (available 8/31/2021) on suicide morbidity and mortality in Montana based on data sets available from MT-VDRS and identify recommendations

¹⁸ Native American Youth Suicide Reduction Strategic Plan (2017-2019)

¹⁹ Native American Youth Suicide Reduction Strategic Plan (2017-2019), Priority Action Step 1.4

²⁰ SUD (2019), Focus Area 1: Partnerships

²¹ SHIP (2020), Priority Area 1: Behavioral Health, Policy Strategies