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Updates from the State Suicide Prevention Office

**Office of Mental Health Coordination
Health and Human Services
Commission**



Learning Objectives

- List three current suicide prevention initiatives in Texas;
- Describe populations that experienced changes in suicide mortality and attempts in 2020; and
- Describe how Texas has incorporated the Zero Suicide framework in the public mental health system.

Suicide Care Toolkit Update

- The original Texas version of the Zero Suicide toolkit was distributed in 2015.
- State office has worked to update and improve the toolkit with more practical implementation tips and more examples from the field.
- Expected toolkit release Summer 2022.



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Suicide Prevention Flyers

- A variety of suicide prevention flyers have been developed over the last year.
- These flyers are meant to be “quick reference guides” on various suicide prevention topics and may be used by people in the mental health field or the general population.
- Current topics include:
 - Language Matters;
 - Postvention;
 - Parent and Youth; and
 - Compassion Fatigue.



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Training

- Provide training in suicide prevention, intervention, and postvention.
 - ASK about Suicide to Save a Life;
 - Counseling on Access to Lethal Means;
 - Applied Suicide Intervention Skills Training; and
 - Specialized presentations to meet the need of requesting audiences.
- To request a training or presentation, email suicide.prevention@hhsc.state.tx.us.



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The Most Recent Suicide Data

- State mortality data released by National Center for Health Statistics via CDC WONDER.
- State Texas Poison Control Network (TCPN) rates of suspected suicide calls provided by the Texas Department of State Health Services (DSHS).

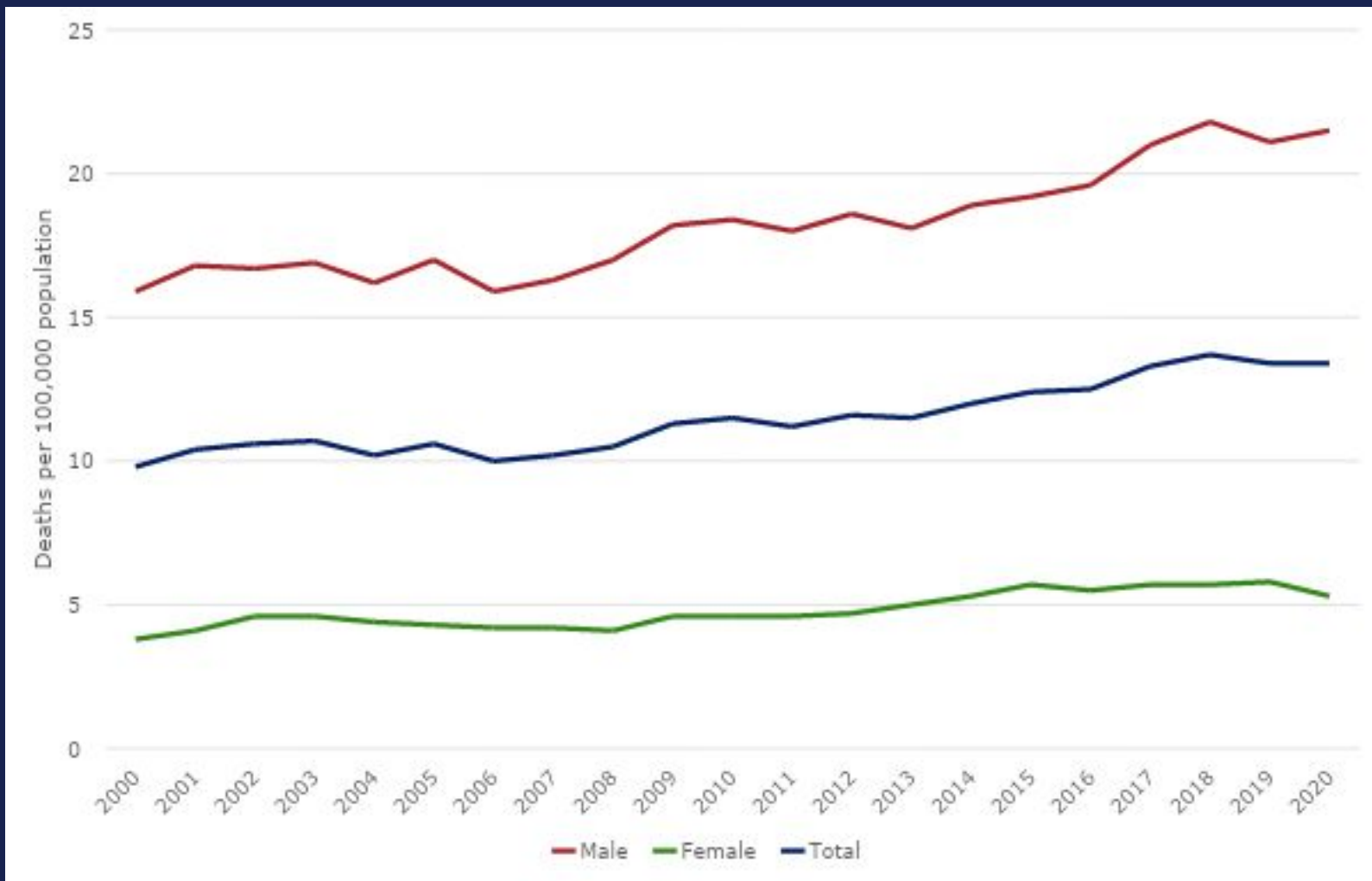


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Texas Suicide Mortality by Sex, 2000-2020*



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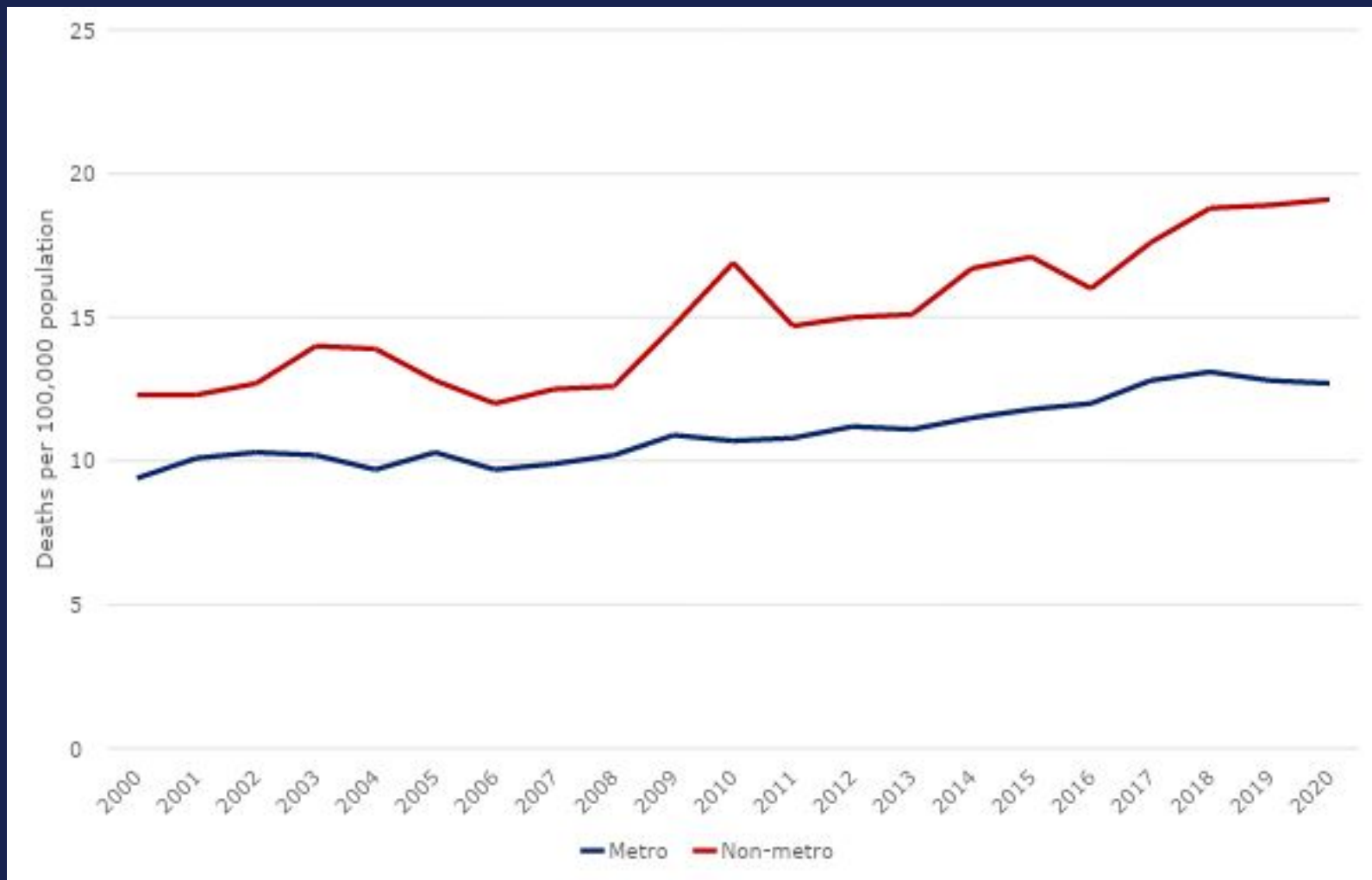


* CDC WONDER

Texas Suicide Mortality by Simple Urbanization, 2000-2020*



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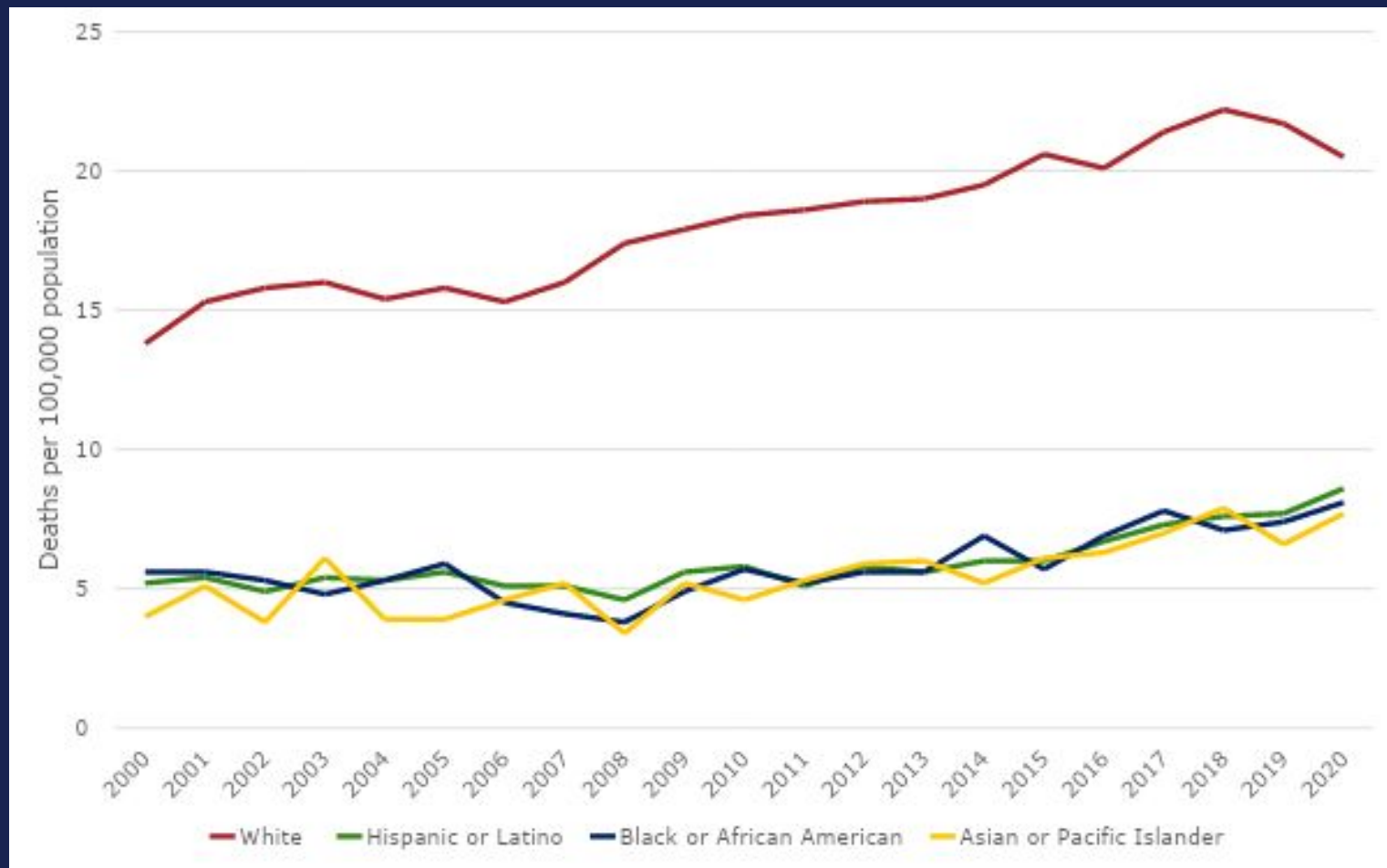


* CDC WONDER

Texas Suicide Mortality by Race/Ethnicity, 2000-2020*



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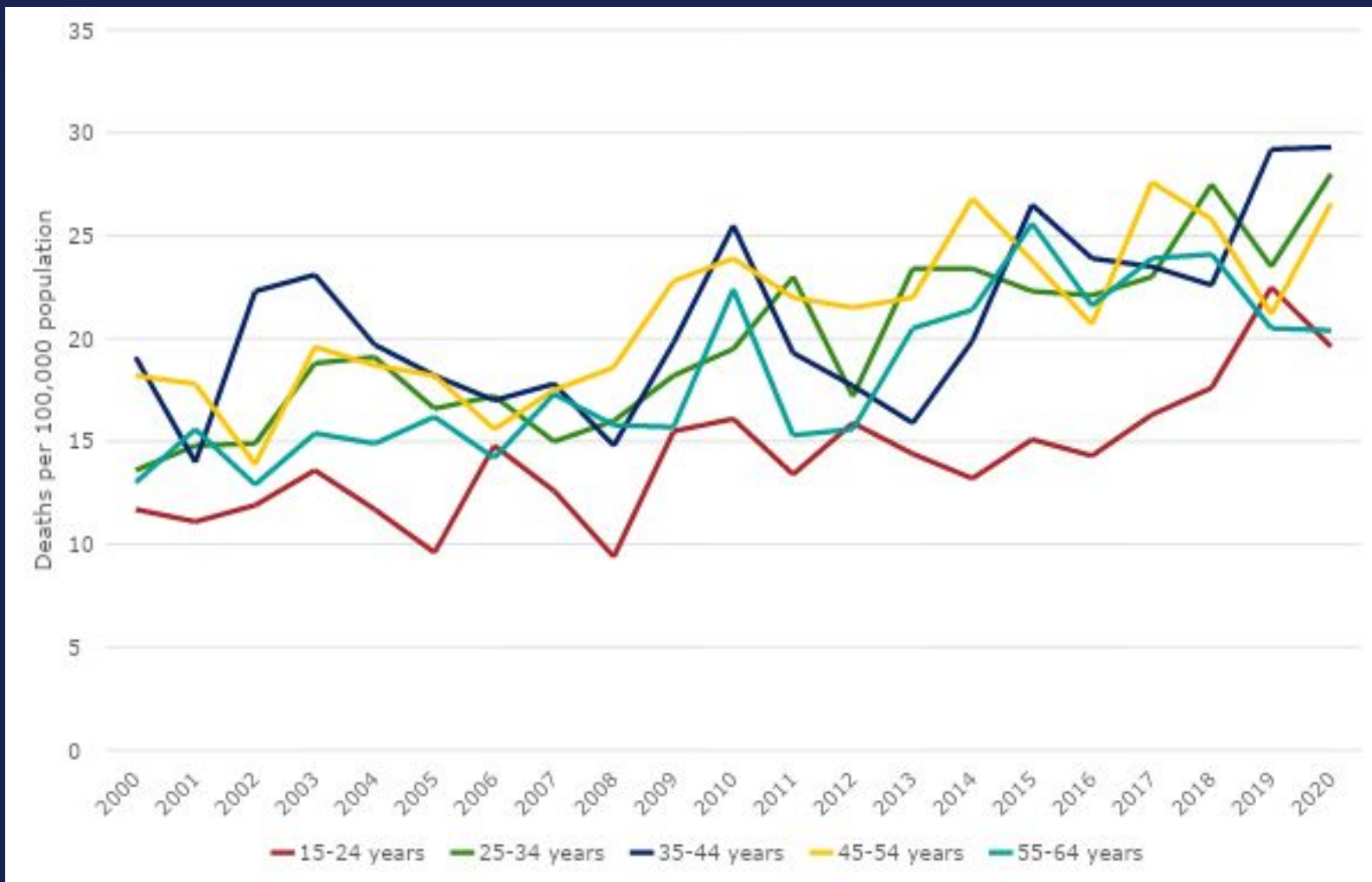


* CDC WONDER

Texas Suicide Mortality by Age Group Among Working-Age Adults, 2000-2020



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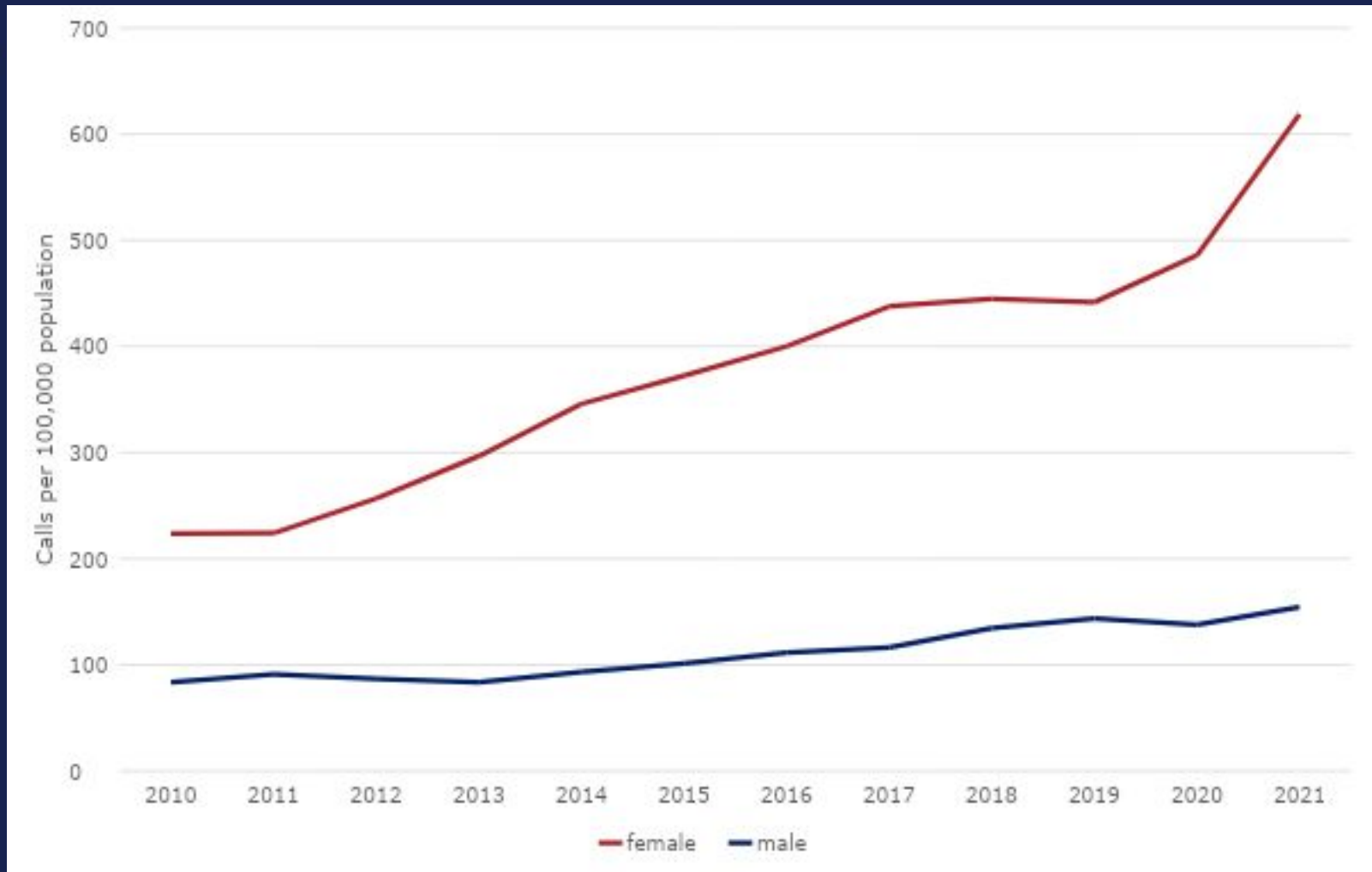


* CDC WONDER

Suspected Suicide Calls to Texas Poison Control Network Concerning 13- to 19-year-olds, 2010-2021*



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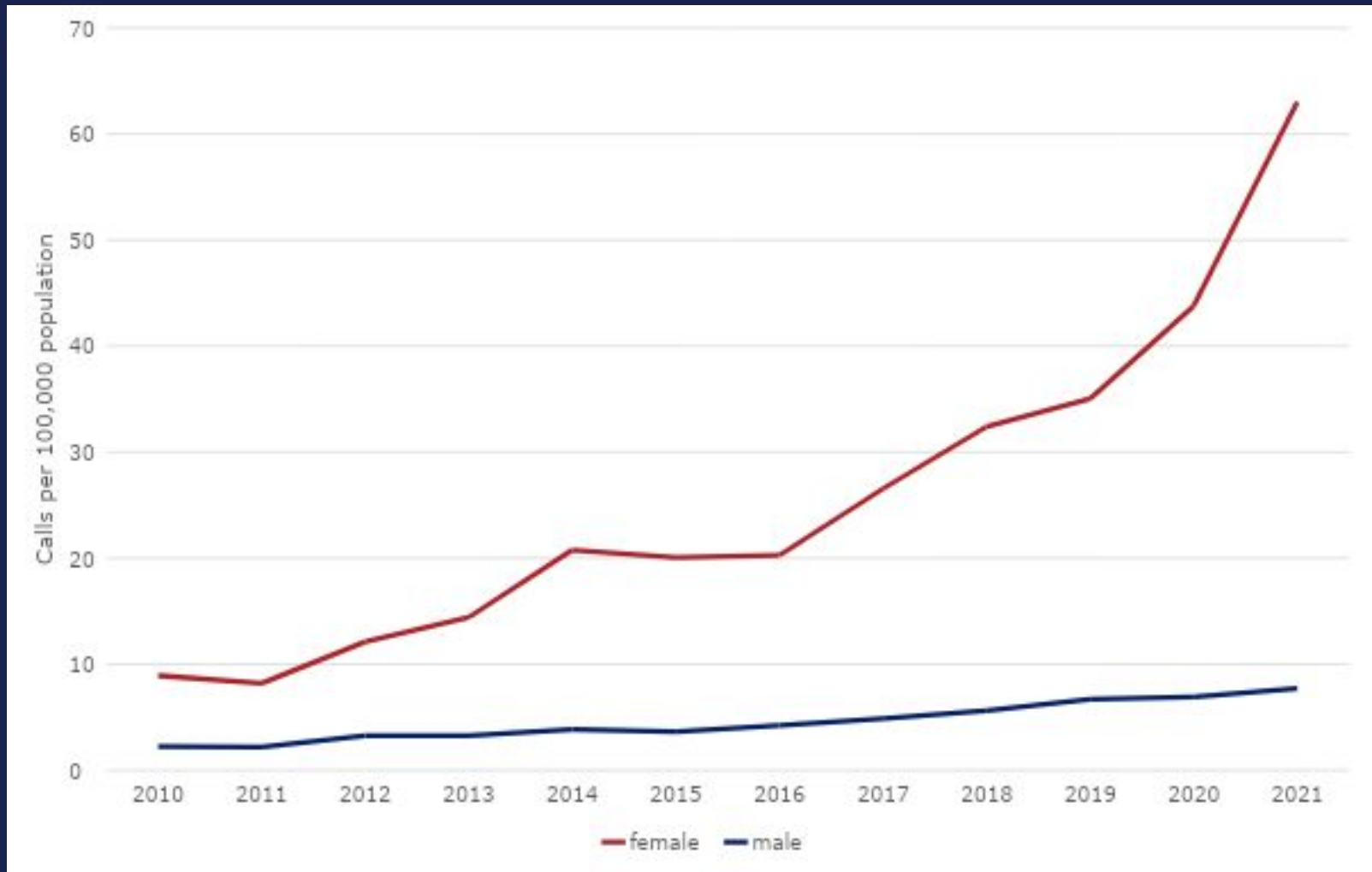


* Texas Poison Control Network, DSHS

Suspected Suicide Calls to Texas Poison Control Network Concerning 6- to 12-year-olds, 2010-2021*



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* Texas Poison Control Network, DSHS

Suicide Care Initiative

- A SAMHSA-funded project implemented by HHSC's Office of Mental Health Coordination.
- The focus is to enhance suicide care in the public mental health system through the Local Mental Health/Behavioral Health Authorities (LMHAs/LBHAs) using the Zero Suicide framework.
- Zero Suicide is a practical framework of evidence-based best practices for system-wide transformation toward safer suicide care.



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Suicide Care Initiative

Two Goals

- Goal 1: Establish Regional Suicide Care Support Centers (RSCSCs).
- Goal 2: The RSCSCs will fully implement the Zero Suicide framework into each of their own centers.



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SCI Goal One: RSCSCs

- RSCSCs include:
 - Region One: The Harris Center for MH and IDD
 - Region Two: Integral Care;
 - Region Three: My Health My Resources (MHMR) of Tarrant County; and
 - Region Four: Tropical Texas Behavioral Health.
- Each RSCSC serves eight or nine LMHAs/ LBHAs, offering suicide care best practice training and technical assistance.



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SCI Goal One: RSCSCs

- RSCSCs were established to:
 - Support the LMHAs/LBHAs more closely with Zero Suicide implementation;
 - Decentralize resources and trainings beyond HHSC; and
 - Move toward sustainability of regional and local suicide prevention systems and leadership.
- The training and technical assistance provided by each RSCSC is based on regional need.



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SCI Goal Two: Implement the Zero Suicide Framework

- Each tenet of the framework must be implemented to fidelity for the agency to be considered a suicide safe care agency. The tenets are:
 - Lead
 - Workforce development
 - Identify
 - Engage
 - Treat
 - Transition
 - Improve



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Elements of Zero Suicide

- **Lead:** Focuses on establishing the infrastructure needed to implement a successful system. Examples include:
 - Policies and procedures around ZS; and
 - An implementation team.
- **Workforce Development:** Focuses on building the capacity of the behavioral health workforce to identify and intervene with individuals at risk for suicide.
 - Provide evidence-based training for staff based on their roles.



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Elements of Zero Suicide

- **Identify:** Focuses on the capacity to recognize individuals at increased risk of suicide and communicate the elevated risk status to all providers who interact with the individual. This element includes:
 - Universal screening every visit, every time; and
 - Full risk assessments for individuals who screen positive.
- **Engage:** Focuses on the use of a suicide care management pathway to standardize processes for engaging and maintaining safety for individuals identified with moderate to high levels of suicide risk. This element includes:
 - On-going risk assessment;
 - Frequency of contact; and
 - Safety planning.



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Elements of Zero Suicide

- **Treat:** Focuses on the use of evidence-based treatments specifically aimed at reducing an individual's risk of suicide. Examples include:
 - Cognitive Behavioral Therapy for Suicide Prevention (CBT-SP);
 - Dialectical Behavioral Therapy (DBT); and
 - Collaborative Assessment and Management of Suicidality (CAMS).
- **Transition:** Focuses on the organization's capacity to manage risk during periods of high-risk transition. Examples include:
 - Transition from emergency department to outpatient treatment; and
 - Transition from inpatient treatment to outpatient treatment.



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Elements of Zero Suicide

- **Improve:** Focuses on the agency's use of a continuous quality improvement process to foster better outcomes. Examples include:
 - Measures fidelity of specific policies and practices.
 - Relevant individual outcomes.
 - Number of suicide attempts and suicide deaths of individuals in care.



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Zero Suicide Site Visits

- As part of the Suicide Care Initiative, HHSC and the Texas Institute for Excellence in Mental Health (TIEMH) at UT Austin are offering LMHAs/LBHAs site visits to review progress on Zero Suicide implementation.
- When centers have reached fidelity on implementation, they will receive a Suicide Safe Care Center Certificate from HHSC.



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Zero Suicide Site Visits

- From fiscal year 2020 to fiscal year 2021, two separate agencies more than doubled their overall fidelity scores while implementing during a pandemic.
- Reach out to Bethaney Myers to learn more about how your agency may benefit from a site visit.



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Trainings Available through SCI

- Some of the free trainings available through the LMHA/LBHAs are:
 - AS+K T4T (Training for Trainers)
 - Counseling on Access to Lethal Means (CALM) T4T
 - Applied Suicide Intervention Skills Training (ASIST) T4T
 - Safety Planning Intervention T4T
 - SafeTALK T4T
 - CASE approach training
 - CAMS training
 - DBT skills training



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Trainings Provided Through SCI

- In fiscal years 2020 and 2021, the RSCSCs provided many suicide specific trainings.
- In two years:
 - 623 individuals trained as trainers in one or more suicide prevention best practice trainings (AS+K, ASIST, CALM).
 - 707 people trained in a suicide-focused treatment such as DBT or CAMS.
 - 127 people participated in other suicide-related trainings.



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SCI Success Stories

- From Tropical Texas Behavioral Health:
 - "A client was restarted on CAMS after being hospitalized. Upon successfully completing the second round of CAMS treatment and graduating, she has been able to experience reduced suicidality with no hospitalizations in the past seven months."
- From Integral Care:
 - A crisis team responded to an individual in their home following a first episode of psychosis, suicidal ideation, depression, anxiety, and agoraphobia. The team worked on stabilizing with intensive services and was able to transition the individual directly into ongoing services without having to leave their home. The individual will remain connected to community-based services.



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QUESTIONS?

Thank You



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Tammy Weppelman, M.S., LPC-S
State Suicide Prevention Coordinator
Tammy.Weppelman@hhs.texas.gov
512-944-8569

Jennifer Haussler Garing, M.S.
Suicide Policy & Outcomes Coordinator
Jennifer.HausslerGaring@hhs.texas.gov
(512) 657-5092

Bethaney Myers, MPH, MCHES
Suicide Care Coordinator
Bethaney.Myers@hhs.texas.gov
512-633-2118