



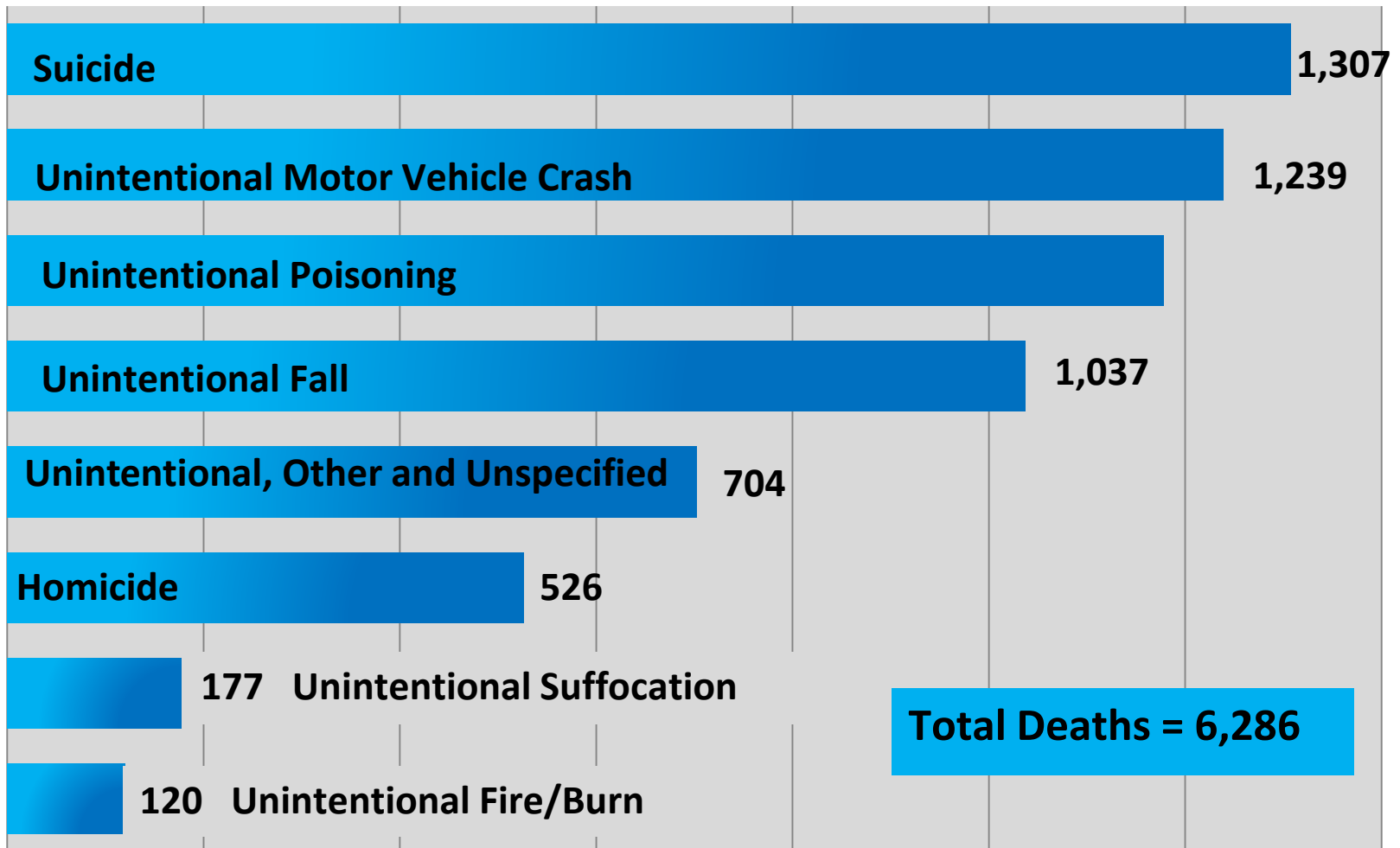
**Joint Legislative Oversight Committee
on Health and Human Services
April 12, 2016**

**Department of Health and Human Services
State Suicide Prevention Plan**



Leading Causes of Injury Death: N.C. Residents

all ages 2014



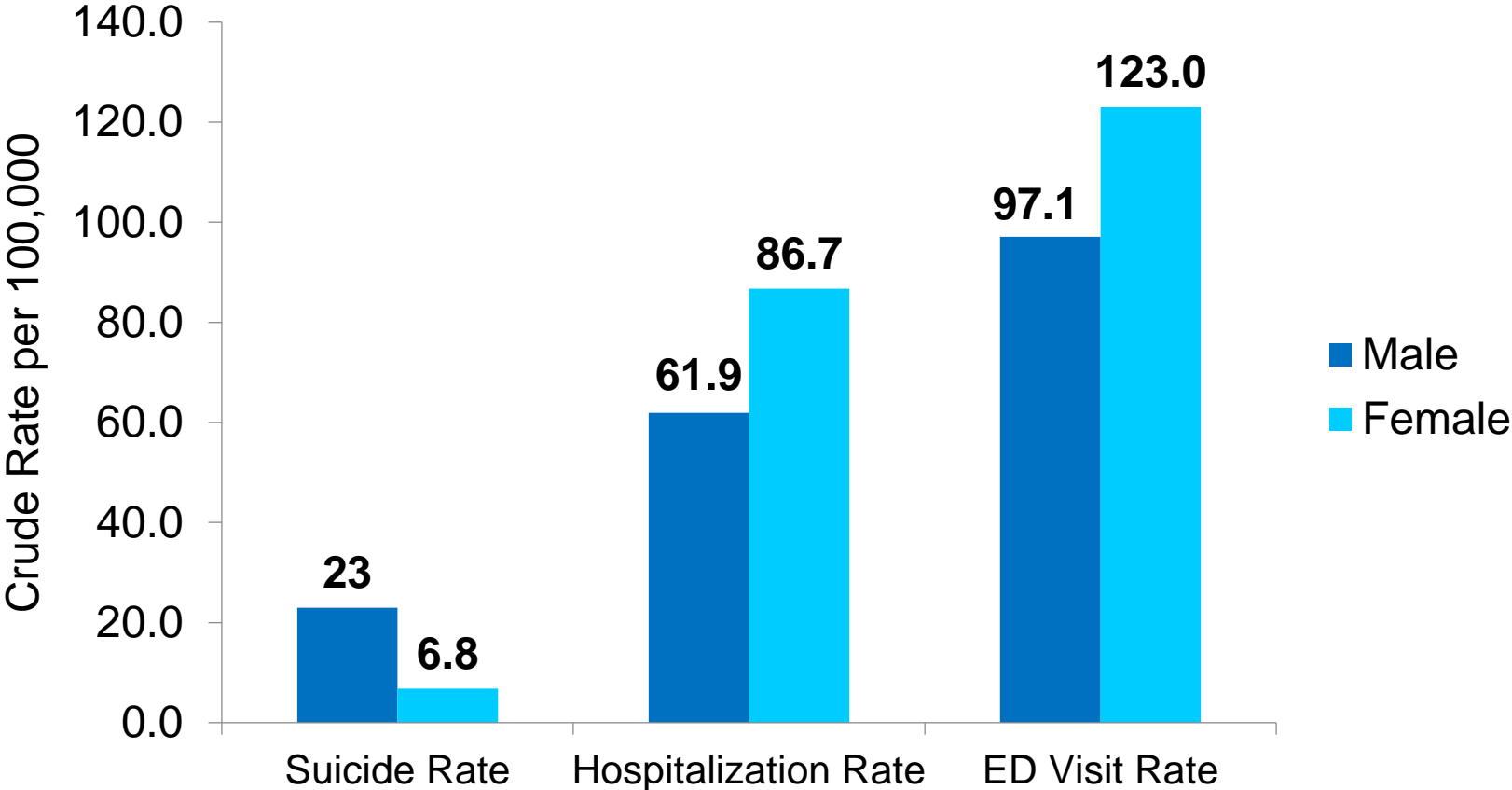
Data Sources: Suicide and Self-Inflicted Injury

- North Carolina Violent Death Reporting System (NC-VDRS)
 - Death Certificate
 - Law Enforcement Incident Reports
 - Medical Examiner Reports
- Hospital Discharge
- Emergency Department Admissions (NC-DETECT)
- N.C. Youth Risk Behavior Survey (YRBS)



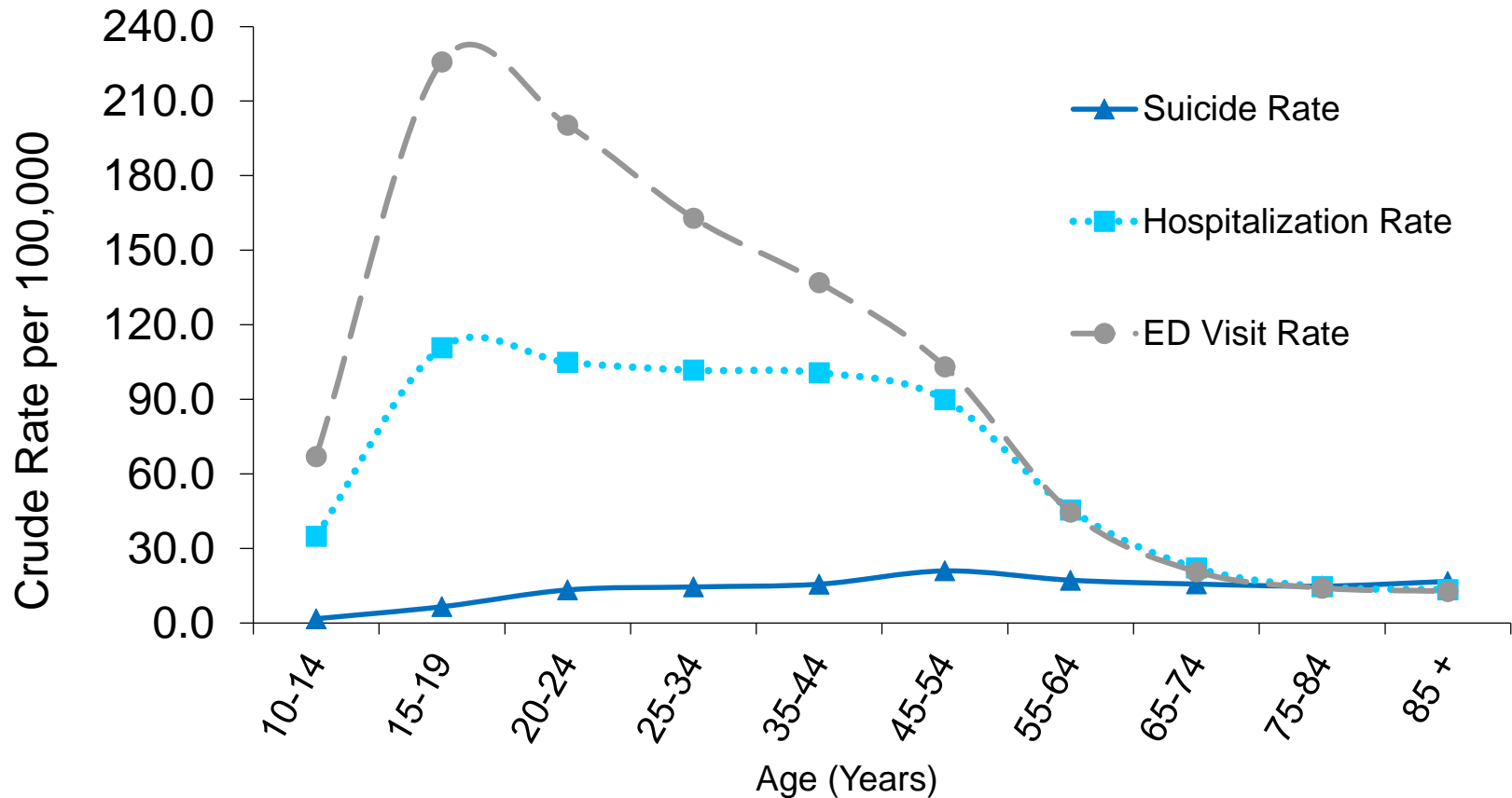
Suicide and Self-Inflicted Injury: N.C. Residents

all ages 2010-2013



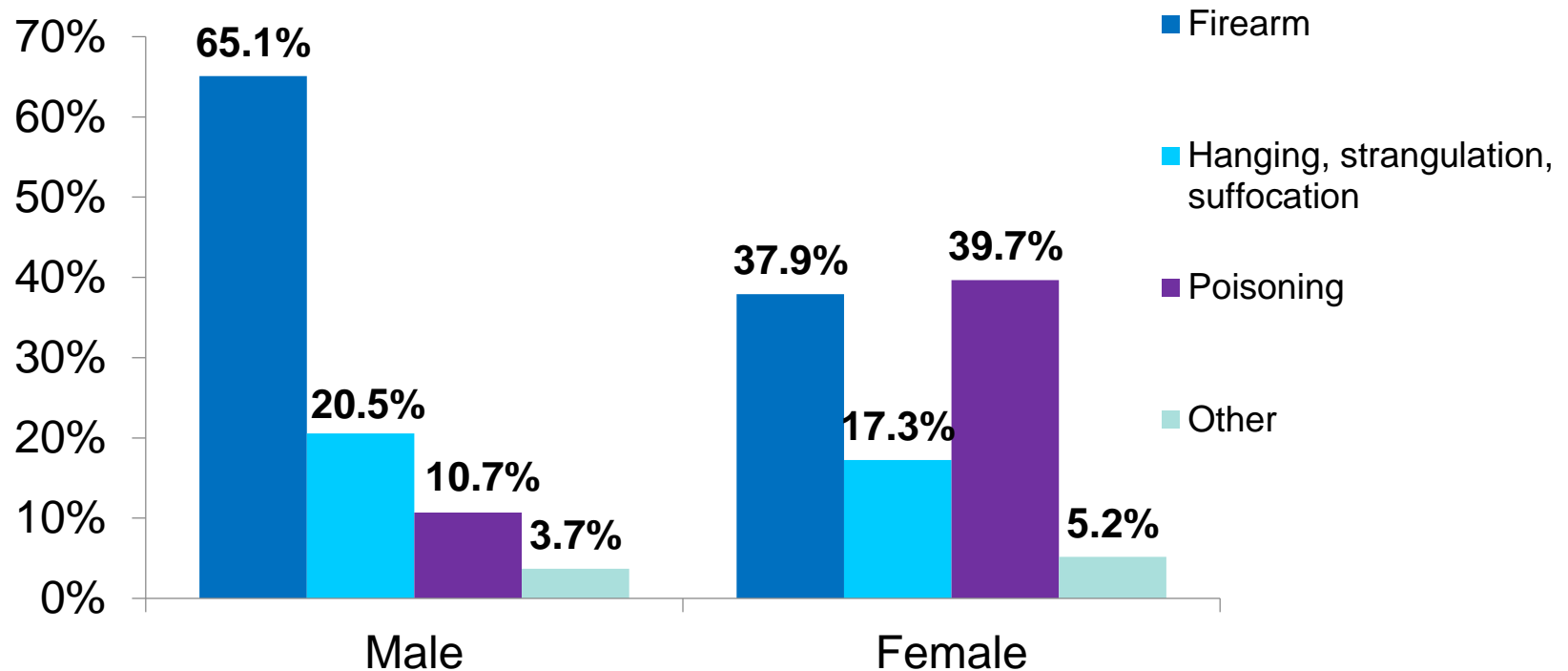
Suicide and Self-Inflicted Injury: N.C. Residents

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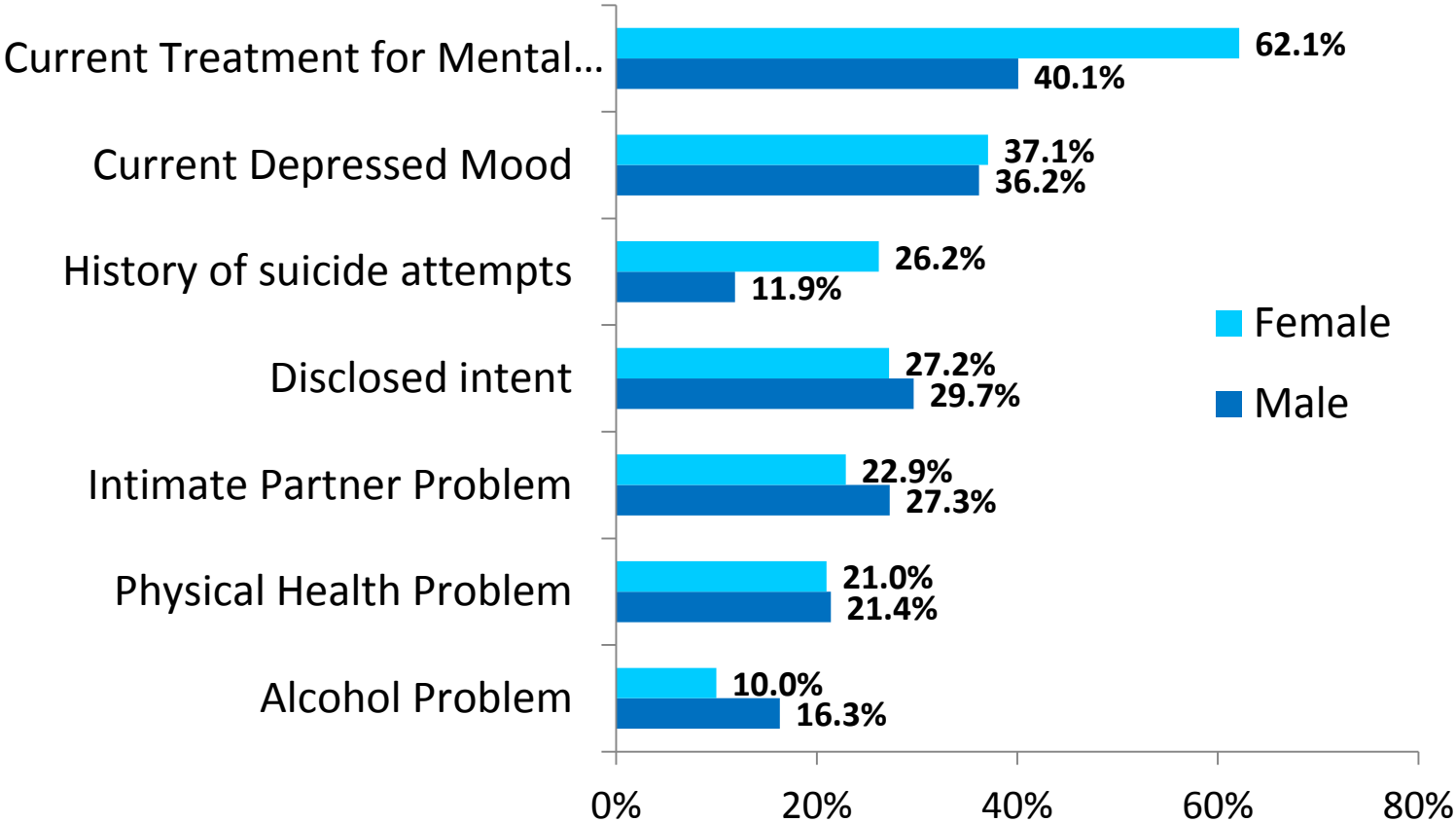
Suicide Method by Sex: N.C. Residents

all ages 2011-2013



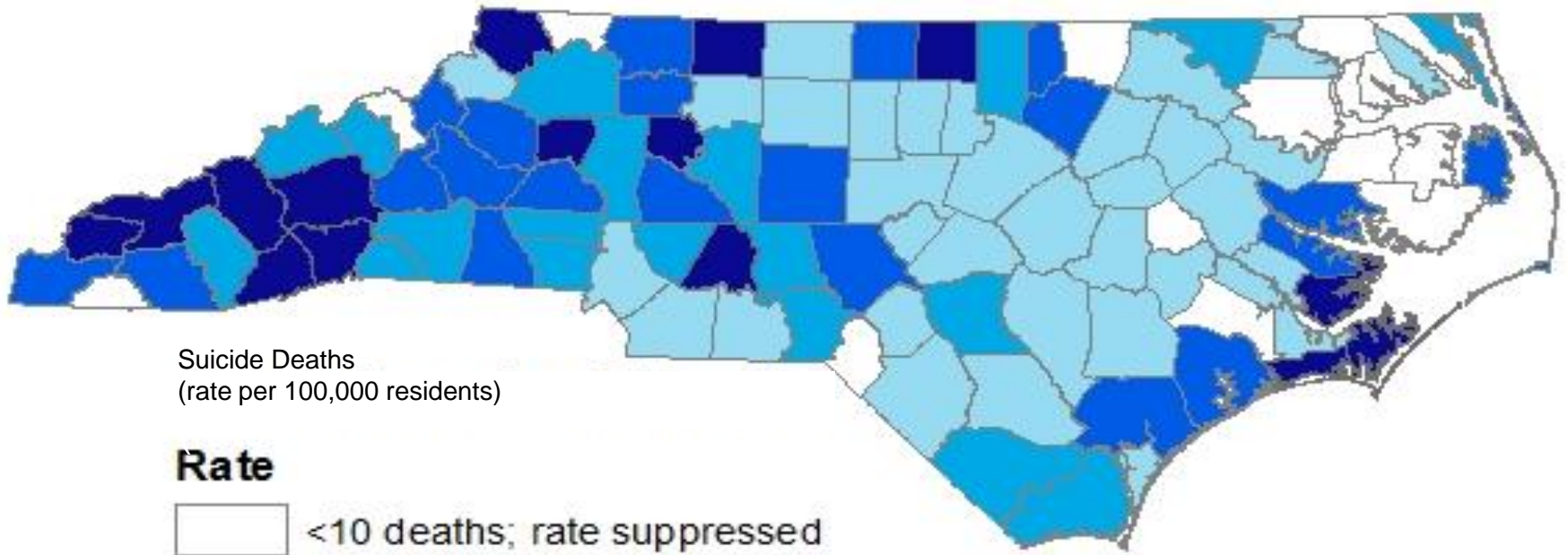
Suicide Circumstances: N.C. Residents

all ages 2011-2013

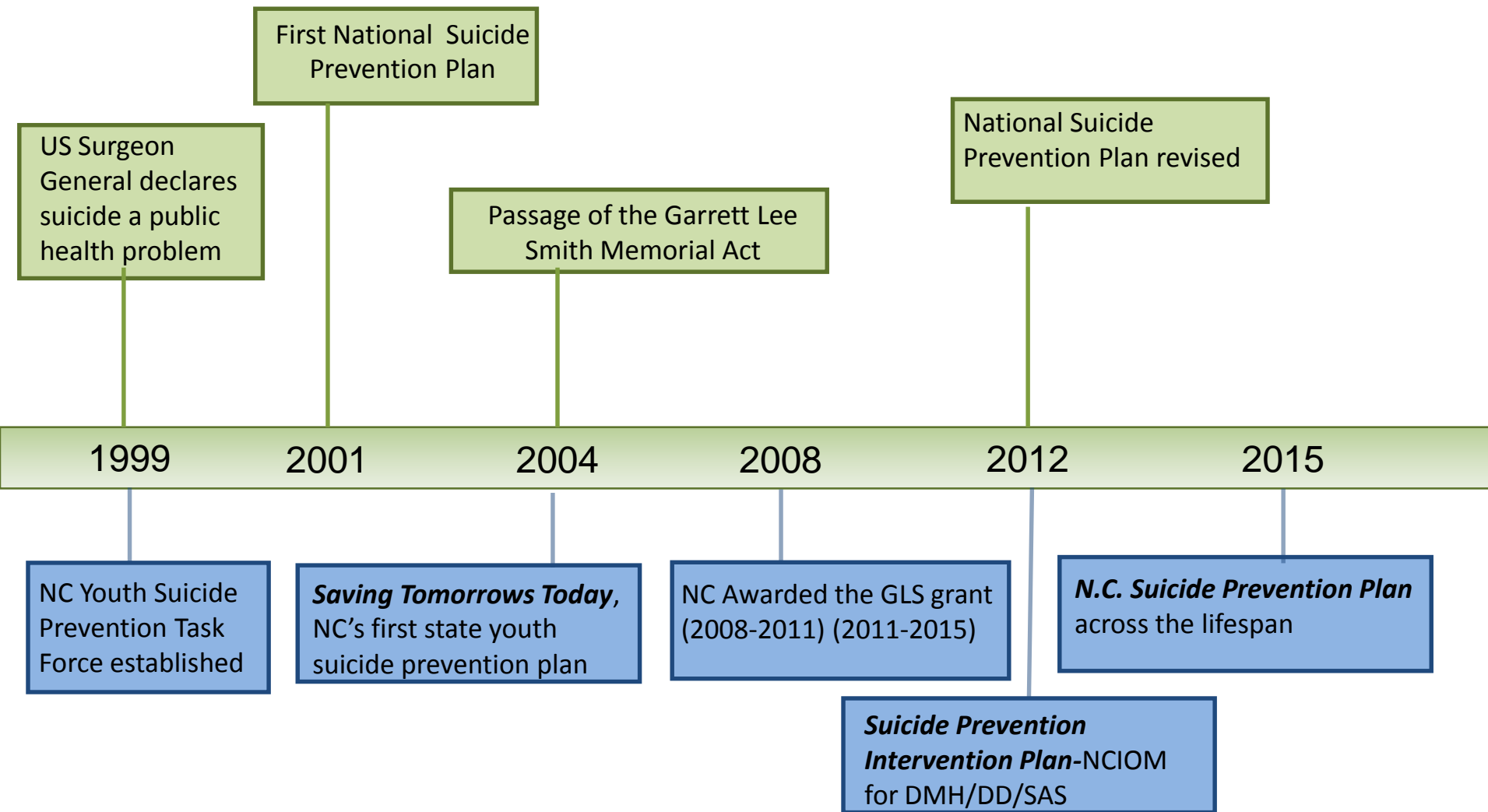


Suicide Rates by County: N.C. Residents

all ages 2010-2013



Suicide Prevention Milestones



2015 State Suicide Prevention Plan

Core Planning Team



2015 N.C. Suicide Prevention Plan Contents

- **184 Acknowledgements**
- **Section 1: Introduction**
- **Section 2: How was the 2015 N.C. Suicide Prevention Plan developed?**
- **Section 3: How can you use the 2015 N.C. Suicide Prevention Plan?**
- **Section 4: What Does the Problem of Suicide Look Like in NC?**
- **Section 5: In What Direction Should NC Move?**
- **Section 6: What Can Stakeholders Do to Address Suicide in NC?**
- **Section 7: Where can I go to learn more about suicide prevention?**
- **Section 8: Plan Endorsements**



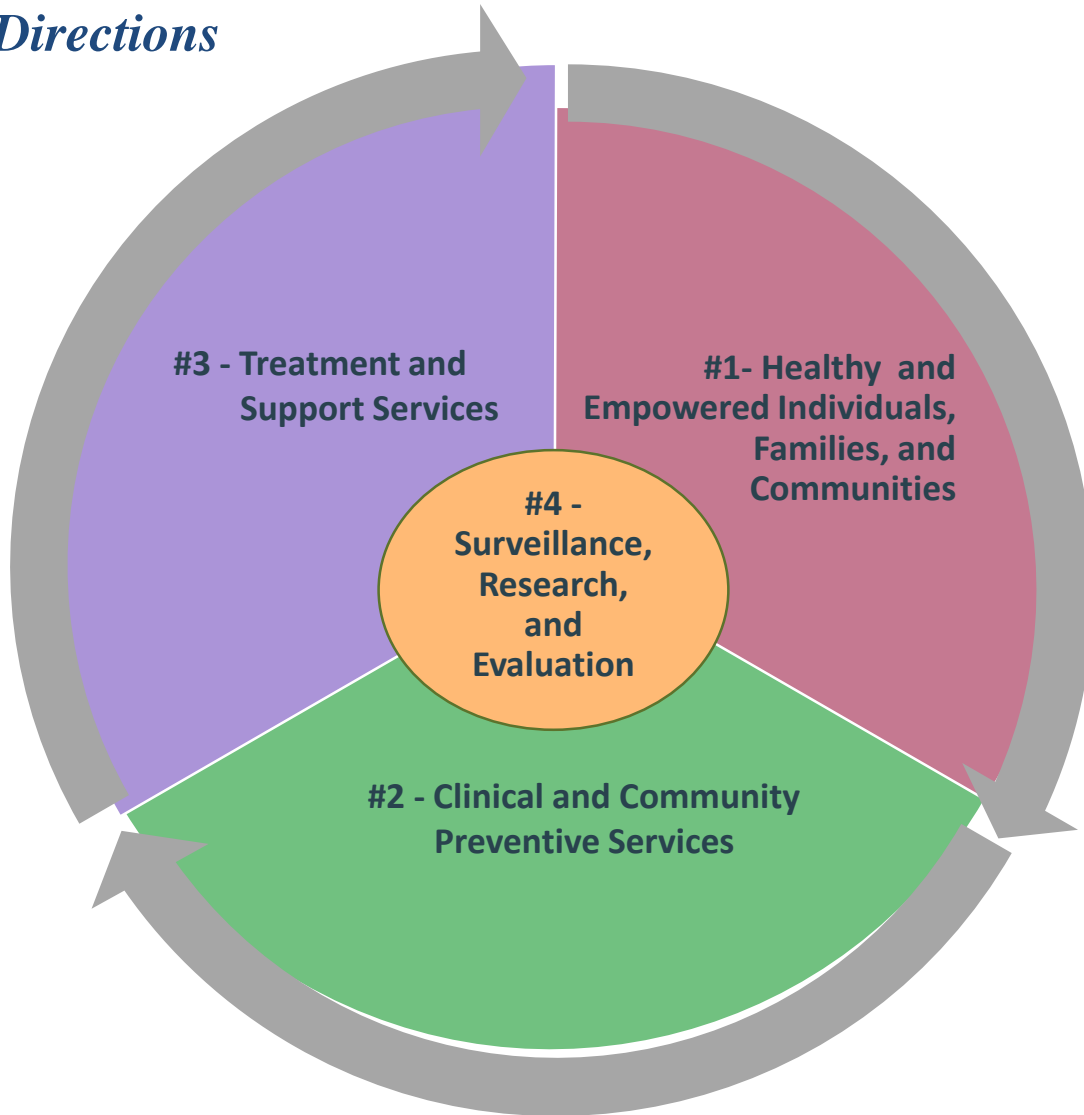
Plan Development Process

- Identified stakeholder groups to recruit for involvement
- Sent invitations to Join Working or Consulting Groups- 184 participated
Respondents self-selected into two groups:
 - Working Group
 - Consulting Group
 - Conducted survey to assess N.C. alignment with *2012 National Strategy for Suicide Prevention*
 - First Working Group meeting
 - Provided an online opportunity for Working and Consulting Group Members to identify NC suicide prevention examples
 - Second Working Group meeting
 - Rated objectives in each strategic direction by importance
 - Consensus process used to finalize list of prioritized objectives
 - Verified high or medium feasibility
- 46 agency and organization endorsements



Prioritized Objectives (N=32)

by Strategic Directions



Prioritized Objectives

SD1	9
SD2	8
SD3	11
SD4	4



Impact of the State Suicide Prevention Plan

Released at the State Health Directors Conference: January 2015

- **First State Suicide Prevention Summit (May 12, 2015)**
- **Entities interested in implementing goals**
 - Injury Free NC Academy: **10** teams (October 2015- April 2016)
 - Local Health Departments placing suicide prevention in their 16-17 plans: **21** counties
 - Department of Public Safety – inform agency goals
 - Department of Public Instruction – online training modules



Impact of the State Suicide Prevention Plan

Continued

- **Disseminated widely through the DHHS/DMHDDSAS LME/MCOs and provider networks, the North Carolina Practice Improvement Collaborative and Crisis Solutions Initiative (January, 2015)**

- **Examples of Entities interested in implementing plan goals:**
 - **Mental Health First Aid Instructors: 257 instructors (May 20, 2015)**
 - **LME/MCO Child MH System of Care Coordinators: 27 (Nov. 2015)**
 - **SA Prevention Coordinators: 30 provider agencies (February 2016)**
 - **Child Fatality Task Force – inform recommendations (March 2016)**



The Plan Informs Communities

Common Understanding of Suicide Prevention Approaches

Prevention is possible ~ is population based

Everyone has a role in suicide prevention.

Intervention requires many strategies

- *MUST be tailored to community conditions through service delivery providers*
- Strengthen protective factors & reduce risks

Treatment

- Informed by what works (evidence)
- Reduces risk factors
- Sees risk factors as “alerts” (attempt)

Postvention

- How we treat survivors and suicide attempt survivors= Prevention
- Postvention = Prevention



