

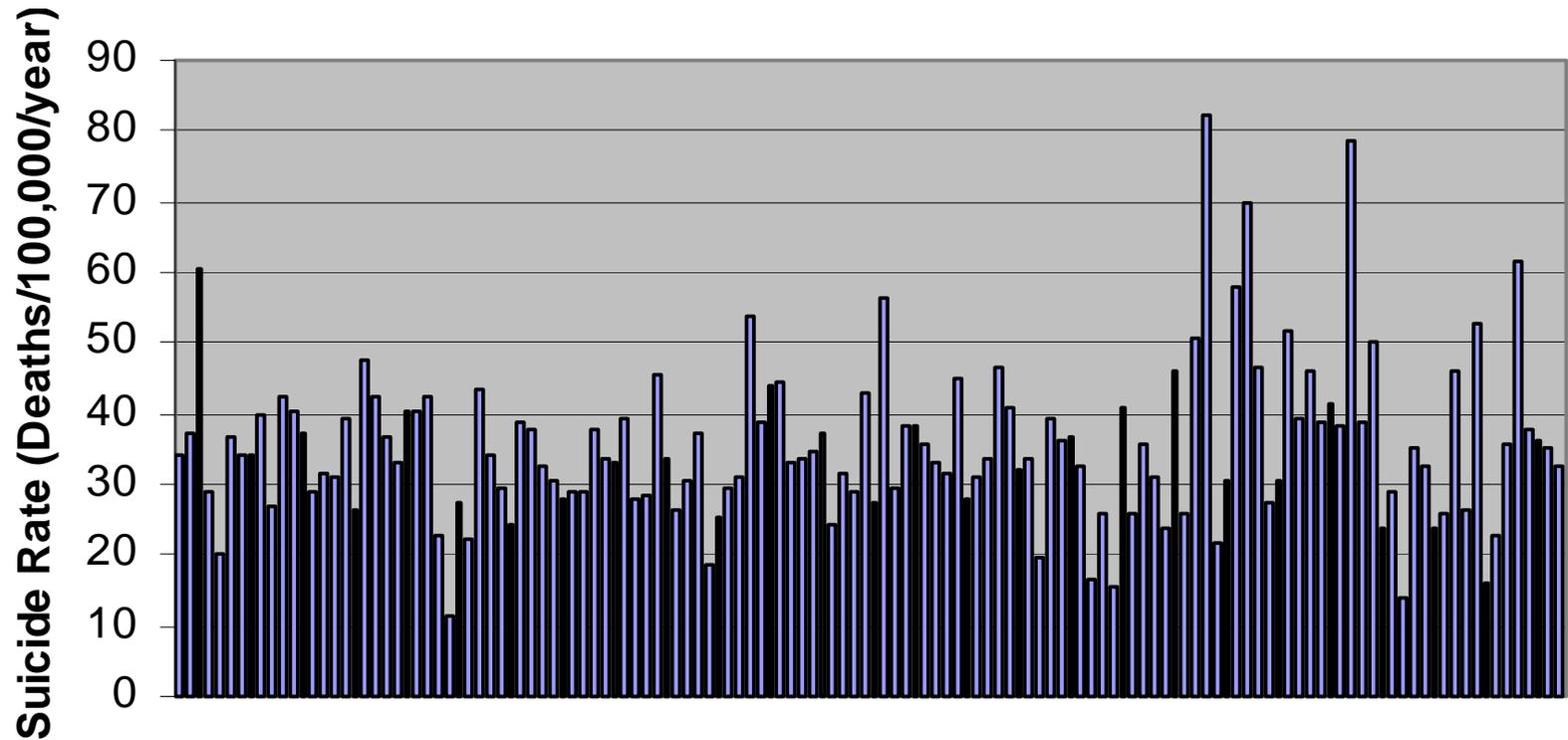
# Facts about Veteran Suicide

- ~30,000-32,000 US deaths from suicide/ year.
  - Centers for Disease Control and Prevention
- ~20% are Veterans.
  - National Violent Death Reporting System
- ~18 deaths from suicide/day are Veterans.
  - National Violent Death Reporting System
- ~ 5 deaths from suicide/day among Veterans receiving care in VHA.
  - VA Serious Mental Illness Treatment, Research and Evaluation Center
- More than 60% of suicides among utilizers of VHA services are among patients with a known diagnosis of a mental health condition
  - Serious Mental Illness Treatment Research and Education Center
- Before enhancements, rates in facilities depended upon the quality of mental health services
  - Office of Mental Health Services
- Veterans are more likely to use firearms as a means.
  - National Violent Death Reporting System
- ~1000 attempts/month among Veterans receiving care in VHA as reported by suicide prevention coordinators.
  - ~8 % repeat attempts with an average of 3 months follow-up
  - ~0.45% deaths from suicide in attempters with an average of 3 months follow-up
  - ~30% of recent suicides have a history of previous attempts
  - VA National Suicide Prevention Coordinator

# Suicide Prevention: Basic Strategy

- Basic Strategy
  - Suicide prevention requires ready access to high quality mental health (and other health care) services
    - Supplemented by
      - Programs designed
        - To help individuals & families engage in care
        - To address suicide prevention in high risk patients.
- Resources
  - National Suicide Prevention Coordinator
  - Local Suicide Prevention Coordinators or Teams
  - Hotline Call Center
  - Public Information Campaign
  - Centers of Excellence
    - Canandaigua Center of Excellence
    - VISN 19 MIRECC
    - Serious Mental Illness Treatment Research and Evaluation Center
  - ORD Research

## Variation in Suicide Rates across Facilities



Mean=35.4 ± 11.2

# National Suicide Prevention Coordinator

- Works with Deputy Chief Mental Health to implement the Suicide Prevention Strategic Plan
- Operates the Hotline Call Center
- Leads local Suicide Prevention Coordinators or Teams
- Subject matter expert for public information campaign
- Coordinates inpatient Environment of Care process
- Maintains and evaluates data on attempts and current deaths from suicide
- Links Office of Mental Health Services with the Canandaigua COE and VISN 19 MIRECC
- Liaison with other Federal agencies and programs
- Develops and implements new strategies for outreach and intervention with high risk Veterans

# Local Suicide Prevention Coordinators

- Staffing
  - Coordinator at each medical center & largest CBOCs
  - 0.5 FTE support staff at medical centers
  - 1.0 care manager for each 20,000 uniques beyond the first 20,000
  - Overall staffing is 385.5 and funding is \$33,687,722
- Responsibilities
  - Receive referrals from Hotline and facility staff
  - Coordinates enhancement of care for high risk patients
  - Care management for those at highest risk
  - Maintaining category II flagging system
  - Reporting of attempts and deaths from suicide
  - Education and training for facility staff
  - Outreach and education to the community
  - Participation in inpatient Environment of Care evaluations
  - Facilitating development of means restriction programs
  - Other programs responsive to local needs and opportunities

# Hotline and Chat Access

Hotline partnership with SAMHSA (Lifeline Crisis Centers) since July 2007

Veterans Chat – July 2009

Other access mechanisms:

warm transfers

e-mails

3<sup>rd</sup> party referrals