
Measuring the Collective Impact of a Regional Suicide Prevention Alliance

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- Regional Organization created through collaborative partnership among public and private organizations Crook, Deschutes, and Jefferson Counties
- Develops, implements, and monitors effective programs that promote wellness and prevention of suicide death, attempts, and related behaviors
- Leadership Group & Project Work Groups
- Collective Impact Model





The 5 Pillars of Collective Impact





COSPA Goal 1:
Promote suicide prevention as a core component of health care organization procedures by providing training to implement effective clinical and professional practices to clinical service providers and staff on the prevention, assessment and treatment of suicide and related behaviors

Objective 1: Engage one behavioral health and one health care organization to adopt the Zero Suicide initiative by June 2018.

Activity	Who is responsible?	By when?	Comments
Approach St. Charles, Deschutes County and Youth Villages to secure an interest in developing a Zero Suicide Team.	Laura Pennavaria Whitney Schumacher Rebecca Bowman	January 2019	Rebecca Bowman – Clinical Supervisor 541-539-0888 (Youth Villages)
Convene Zero Suicide teams within each organization for the Zero Suicide Academy.	Laura Pennavaria Whitney Schumacher Rebecca Bowman	January 2019	Rebecca Bowman – Clinical Supervisor 541-539-0888 (Youth Villages)

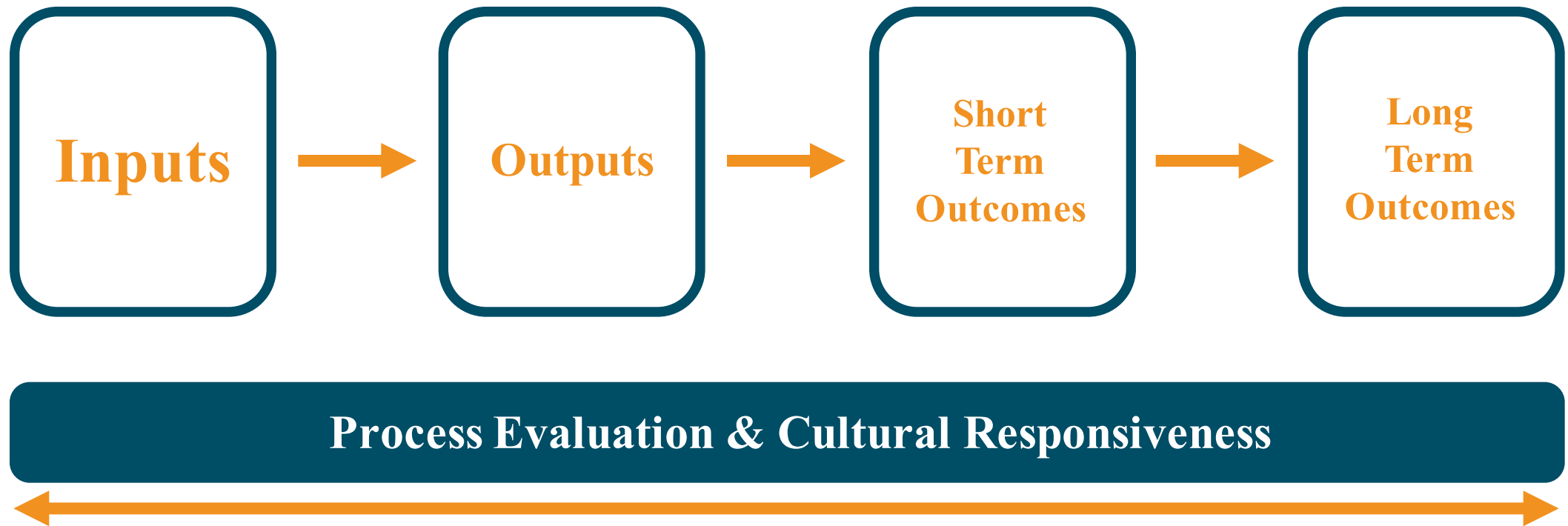
Progress Made:
6/26/18: Mosaic Medical, St. Charles, & Deschutes County Health Services have submitted applications Zero Suicide Academy
7/23/18: Mosaic Medical, St. Charles, & Deschutes County Health Services all accepted into Zero Suicide Academy
9/19/18: Mosaic Medical, St. Charles, & Deschutes County Health Services all attended ZS Academy and created 90 plans
10/22/18: All three teams and the Youth Village team met to discuss collaboration and next steps

Objective 2: Increase confidence in primary care providers in addressing positive depression and suicide screening tools

Activity	Who is responsible?	By when?	Comments
Establish a baseline of the number of providers with policies and procedures regarding screening for access to lethal means in patients at risk for suicide	Identification & Awareness (COHC); PacificSource		Could consultant start collecting this data?
Provide training regarding lethal means awareness and screening for providers	Primary Care Workgroup		Suggested that trainers use retrospective scale to capture confidence data - Jessica Jacks, Whitney Schumacher, & Paige Farris develop survey to give a draft to Primary Care Workgroup

Progress Made:
7/23/18: Consultant has been hired to train providers in Central Oregon, scope of her role will be clarified
7/23/18: Training videos for primary care providers have been developed and will be imbedded into website when videos are complete. Videos are specific to firearms
7/27/18: Dr. Pennavaria provided presentation at Grand Rounds on screening for firearms in patients at risk for suicide
9/23/18: Dawn Creach, Consultant for BH Integration project underway and currently conducting key informant interviews, learning about SZ to ensure integration

1. Implement effective, comprehensive suicide prevention practices in health care settings
2. Provide support & promote healing to individuals affected by suicide deaths and implement community strategies to prevent further suicides
3. Reduce mental health stigma and promote wellness in our communities
4. Foster help-seeking behavior among youth in Central Oregon schools





Our Guiding Principles for Developing an Evaluation Framework

- Instruments that are already in place or new ones to help us meet the action plan's goals/objectives
- Protocol or plan to follow
- Formalized agreements between involved agencies (because leadership wanted a backbone org to lead the eval and action plan)



Phase One



- Cull through Action Plan details
- Categorize Indicators
- Define outputs & outcomes



Phase Two



- o Data Inventory
- o Identify Gaps
- o Determine current work loads



Phase Three



- Synthesize Results
- Actions identified
- Gaps identified
- Re-group & refine approach



Phase Four



- Evaluation Instruments
- Institutional Agreements
- Accountability Mechanism
- Communicating Agreed upon Expectations



Phase Five



- Pilot Proposed Approach
- Assess for:
 - Adherence
 - Applicability of data
 - Feasibility



Phase Six



- o Fine Tune
- o Communicate Changes
- o Implement
- o Evaluate the Process



Sage Advice



- Be realistic
- Avoid over-surveying
- What are you going to do with your information?
- Do not recreate the wheel



Key to Success



