

## Standards, Training and Practices Committee Meeting Minutes

December 9, 2020/2:00pm - 5:00pm (ET)

Attendees: Co-chairs: D. Jobes, L. Langford, SAMHSA: R. McKeon, M. Cornette, Members: A. Martinez, B. Andrews, B. Patterson, B. Mishara, J. Rozel, J. Walsh, K. Hallstrom, L. Jones-Chandler, L. Turbeville, M. Gould, M. Cassidy, R. Fitzgerald, R. Ramchand, R. White, T. Dole, T. Pisani, S. Heath, Lifeline: J. Draper, S. Sinwelski, G. Murphy, S. Louis, H. Kam, M. Stone, E. Piette, R. Filler, A. Goldstein, J. Smith, L. Zapata, F. Kauffman

#### **SAMHSA Update**

Reports for the Hotline Designation Act in progress

Forthcoming 988 Behavioral Health Crisis Care Continuum workgroup meetings mentioned.

#### Lifeline Imminent Risk Policy Revision Update

- Review Process for the Imminent Risk Policy changes was presented which included discussion at the STPC meeting August 2020, LEC meeting October 2020, and a summary document distributed to committee members for comment through December 2020.
- Focus of review included the need to:
  - Enhance the use of active engagement and less invasive approaches to reducing risk in callers assessed to be at imminent risk of suicide.
  - Reduce unnecessary use of law enforcement interventions via improved trainings, supervisory reviews of involuntary incidences, technical assistance to centers with higher rates of involuntary dispatches, etc.
  - Address terms such as "active rescue."
- Feedback indicated that policy changes should be as follows:
  - 1. The Lifeline must provide training/education to crisis center staff on the impact of dispatching emergency services
    - a. The potential physical dangers associated with law enforcement and differential impacts on persons from historically victimized/oppressed communities
    - b. The emotional impact of an involuntary intervention, ranging from stigmatization to victimization, to traumatization to criminalization
    - c. The financial impact that hospitalization can have
    - d. Inclusion of individuals from impacted communities with lived experience in developing training activities
  - 2. The Lifeline must change the term "active rescue" to reflect the true nature of the intervention to be considered
    - a. Non-consensual intervention
    - b. Non-collaborative emergency intervention
    - c. Involuntary emergency intervention
    - d. Other suggestions
  - 3. The Lifeline must require that crisis centers
    - Maintain data on interventions used (active engagement and involuntary interventions) and provide data to Lifeline, to support network technical assistance efforts to enhance active engagement practices

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- b. Implement supervisory reviews of all "active rescues" to determine if active engagement approaches were practiced, and if involuntary activation of emergency services was the most appropriate response
- c. Collect information on local crisis response resources that are alternatives to 911 response and make referrals, where appropriate
- d. Engage first responders (e.g. law enforcement) in trainings and use of less invasive interventions for persons in mental health/suicidal crisis
- 4. The Lifeline must undertake quality monitoring
  - a. Collection of imminent risk intervention data
  - b. Support and guidance for centers
  - c. Annual (at a minimum) reports to SAMHSA
- 5. The Lifeline must provide public education and transparency
  - a. Clear imminent risk policy and procedures
- Areas to be further developed include:
  - Formal policy
  - o Training modules
  - o Data collection procedures
  - Supporting documentation/paper
  - o Network wide dissemination
  - o Follow-Up and Support

#### IR Discussion:

- Group discussion focused on the deep need for alternatives to police involvement. Obtaining information
  from centers on local crisis resource response alternatives will be essential if we are to move away from a
  reliance on 911 and Lifeline should consider this as a requirement in the policy update. Discussion on the
  real need for training counselors on unintended harms of involuntary interventions/police response on
  LGBTQ/BIPOC communities, with inputs from persons with lived experience from these communities to aid
  in training content development.
- How involuntary interventions for youth at imminent risk impacts them (minors and consent issues) was raised, and the need to delve further into this topic was stressed.
- The need for Lifeline to also clarify how the Policy reflects existing values related to both the safety and well-being of individuals at imminent risk of suicide and assuring equity was raised all members agreed that this needs to be reviewed and included in a policy update.
- Some committee members emphasized the importance of recognizing that while the criminal justice
  system is inherently biased (and discrimination is systemic), that calling first responders can be a lifesaving
  tool for both persons at imminent risk of suicide—including those in the act of attempting suicide—and this
  cannot be ignored.

#### Lifeline Core Clinical Training Plan

- A brief overview of Lifeline training plan was presented this included:
  - Goals of developing a core training that covers essential skills in suicide assessment and intervention
    for crisis counselors who answer calls/chats within the Lifeline network in order to enhance skill and
    facilitate consistency in response across the network
  - Review of plan phases
  - Possible Lifeline Center Requirements
  - Network Dissemination Process

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#### **Training Discussion**

- Group discussion focused on ways in which Lifeline could require standardized training and assure adherence to the model. The need for centers to understand the benefits of the training and for it to be accessible were emphasized. Increased funding needs for centers to have all staff trained was also raised.
- Issue of whether Lifeline could mandate training or just recommend was raised possibility of funding this may allow it to be required.
- Need for trainings to be inclusive of the needs of a range of groups was also raised.
- A new Coordinator for Best Practices in Access and Inclusion has been hired to start in the new year. Lifeline values need to be underpinning all trainings.

#### **Evaluation Updates**

Evaluation updates were provided on the current assessment of Frequent Callers to the Lifeline and the longer-term Lifeline Effectiveness Evaluation.

#### **Next Steps:**

- The Imminent Risk policy will be formalized as indicated in presentation today and comments collected
- Poll needs to be taken on specific term to be used instead of "Active Rescue"
- Lifeline to review and update Values Statement