Together With Veterans Toolkit Amendment Summer, 2020

VA Suicide Prevention 2.0 and Together With Veterans (TWV)

The <u>National Strategy for Preventing Veteran Suicide 2018-2028</u> provides a framework for guiding the national focus on Veteran suicide prevention. The goals and objectives in the National Strategy promote wellness, increase protection, reduce risk, and promote effective treatment and recovery.

To expand the VA's approach to prevent Veteran suicide nationwide, the Veterans Health Administration (VHA) has approved the implementation of **Suicide Prevention (SP) 2.0** by the Office of Mental Health and Suicide Prevention (OMHSP). **SP 2.0** expands OMHSP's current efforts by taking a comprehensive public health approach that gives equal weight and emphasis to community- based prevention and clinically based interventions.

SP 2.0 aligns community-based suicide prevention efforts across state and local levels. This includes the **Together With Veterans** program.

SP 2.0 includes three focused Priority Areas to be used in all community-based suicide prevention efforts. Together With Veterans has adapted the original five TWV strategies to be consistent with these Priority Areas. TWV now uses <u>six</u> strategies to guide our program implementation. **All TWV tools and resources will reflect these changes.**



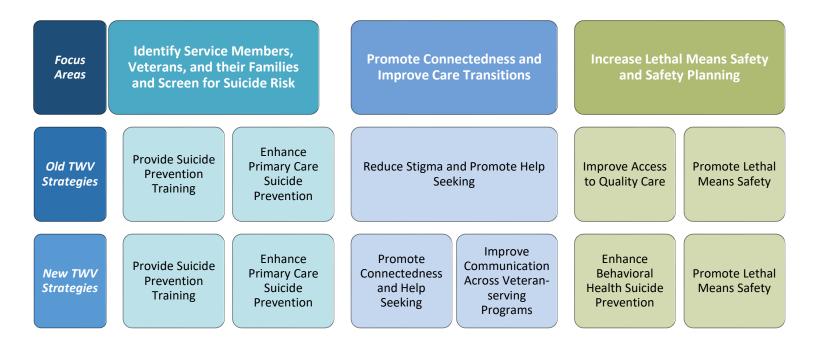


Funding is provided by the Office of Rural Health. Visit www.ruralhealth.va.gov to learn more.

General Overview of New TWV Strategies and Suicide Prevention 2.0 Focus Areas

There is some crossover between the original five TWV strategies and the updated **SP 2.0** strategies. The **Table 1** below illustrates the **SP 2.0** Focus Areas, previous TWV Strategies and the new TWV Strategies.

Table 1



Updates to Together With Veterans Toolkit and other Resources to Align with Suicide Prevention 2.0

Together With Veterans has incorporated the new Focus Areas and strategies into all program materials and tools, including the web portal https://togetherwithveterans.org/.

This document serves as an amendment to the printed toolkit. Specific changes for the TWV Toolkit are noted in *Table 2*. Please ensure you are using updated materials that refer to the new Focus Areas and strategies.

Table 2

| Page | Section | Change |
|----------------|---|---|
| Entire Toolkit | All references to TWV Strategies | Replace with New TWV Strategies as described in Table 1 above. |
| 0-4 to 0-7 | Overview | Replace descriptions of TWV strategies with updated SP 2.0 Focus Areas and Strategies as described in <i>Table 3</i> below. |
| Entire Toolkit | All References to Meeting and Activity Preparation Timeline | Replace Timeline with TWV Roadmap on <i>Table 4</i> . |
| 3-4 to 3-5 | Phase Three: Teach Your Team | Replace TWV Strategies with updated SP 2.0 Focus Areas and Strategies in <i>Table 5</i> below. |
| 4-2 to 4-11 | Phase Four: Plan For Action | Replace planning questions per <i>Table 6</i> below. |
| T-4 | Glossary | Replace TWV Process description with updated Focus Areas and Strategies described in <i>Table 1</i> above. |
| T-54 to T-58 | Tools | Action Plan Templates reflecting new strategies are available via TWV Web Portal. |
| T-59 | Tools | Replace TWV Community-Based Suicide Prevention Strategies with <i>Table 6</i> . |
| T-61 to T-76 | Resources | Resources can be used as needed for any or all six TWV strategies. |

Focused Priority Areas and TWV Strategies



Identify Service Members, Veterans, and their Families and Screen for Suicide Risk

- <u>Provide Suicide Prevention Training</u> allows community members, families, and service providers to identify at-risk Veterans and connect them to care.
- <u>Enhance Primary Care Suicide Prevention</u> informs medical providers about why and how to screen for suicide risk, identify Veterans they serve and provide culturally competent care.



Promote Connectedness and Improve Care Transitions

- <u>Promote Connectedness and Help Seeking</u> encourages social support and community engagement among Veterans, and promotes positive and supportive attitudes about Veterans seeking care when they need it.
- <u>Improve Communication Across Veteran-serving Programs</u> fosters working relationships and coordination of care across Veteran-serving agencies.



Increase Lethal Means Safety and Safety Planning

- <u>Promote Lethal Means Safety</u> encourages limiting access to lethal means during periods of crisis, which can make it more likely that the Veteran will delay or survive a suicide attempt.
- <u>Enhance Behavioral Health Suicide Prevention</u> informs community providers about training and consultation resources, such as safety planning, that help manage suicide risk and keep Veterans in treatment safe during a crisis.

Table 4

TOGETHER WITH VETERANS

TWV Roadmap

Phase 2 Phase 1 Phase 3 Phase 4 Phase 5 **Build Your Team Learn About Your Teach Your Team** Follow Your Plan & **Plan for Action Measure Results** Address Strategies for Each Schedule SP Training Implement plan Prepare your organization **Conduct 3 Assessments** Track and report progress **Teach SP Focus Areas** SP Focus Area Provide Suicide Prevention Individual Suicide Veteran-driven **Readiness Assessment Monthly Reports Prevention Training** Training Teach Suicide Prevention **Enhance Primary Care Suicide Community Partners SWOT Analysis Quarterly Reports** Focus Areas & Strategies Prevention Promote Connectedness and **Steering Committee PARTNER Tool Survey** Reflections Help Seeking Improve Communication Organizational Across Veteran-serving Preparedness **Programs** Promote Lethal Means Safety Enhance Behavioral Health Suicide Prevention

Table 5

Planning Questions for Each Strategy

Promote Connectedness and Help Seeking

- 1. What services, activities and events are available for Veterans and their families? How do we find out?
- 2. How can we identify those who are interested in supporting Veterans in our community?
- 3. How can we help Veterans know about local resources and opportunities?
- 4. How can we encourage Veterans to seek support and help when needed?
- 5. What do we need to know before we begin raising public awareness?

Improve Communication Across Veteran-serving Programs

- 1. How could increasing communication and coordination of Veteran services address some of our prioritized needs?
- 2. Where are the biggest gaps in coordination?
 - a. What services are missing or need improvement?
 - b. What are the most important connections that need to be made?
 - c. What is the best approach for building those connections?

Provide Suicide Prevention Training

- 1. What suicide prevention training(s) should we use? What's available in our community?
- 2. Who should be trained? How will we prioritize which groups to train?
- 3. How many should be trained? By when? (How will we notify them?)
- 4. How does advertising upcoming SP trainings link to the strategy: Promote Connectedness and Help Seeking?

Promote Lethal Means Safety

- 1. What are the most common lethal means used by Veterans for self-harm in our state?
- 2. Who should we involve (i.e. pharmacists, gun shops, firing ranges, medication takeback programs, etc.)? How will we involve them?
- 3. How do we educate the community that lethal means safety involves expanding time and space between a suicidal thought and the opportunity to act on it, and that this saves lives?
- 4. How will we get the message out using what distribution and public awareness tactics?
- 5. How can we link this distribution to the Promote Connectedness and Help Seeking public awareness campaign?

Enhance Primary Care Suicide Prevention

- 1. Who are the primary care providers in our community?
- 2. Are primary care providers in our community knowledgeable about Veteran/military culture?
- 3. What do primary care providers need to know about Veterans in our community?
 - a. How many Veterans, Active Service members and families are in our community?
 - b. What is the data for Veteran suicide in our state?
 - c. What is the data for rural Veteran suicide?
- 4. How do we reach out to primary care providers in our community?

Enhance Behavioral Health Suicide Prevention

- 1. Who are the behavioral health providers in our community?
- 2. Have behavioral health providers in our community received training on suicide risk assessment and safety planning?
- 3. Are behavioral health providers in our community knowledgeable about Veteran/military culture?
- 4. How do we reach out to behavioral health providers in our community?

Table 6

| TWV Strategy | Strategy Rationale | |
|---|---|--|
| Promote Connectedness and Help Seeking | Interventions to increase connectedness can help to prevent suicide Lack of trust in mental health care, a culture of taking care of oneself, and stigma about mental health issues create barriers to seeking care, especially in rural areas Increases community capacity to identify and provide help for Veterans at-risk | |
| Improve communication Across Veteran- serving Programs | Lack of timely access to care, coordination of care, and provider communication were identified as common root causes of suicide among post-9/11 Veterans Suicide is related to mental health, substance abuse, trauma, violence, injury, and many other issues Services for Veterans are often spread across multiple agencies While some organizations specifically serve Veterans, other programs could offer services to Veterans and their families Communication between Veteran-serving organizations can lead to: Increased collaboration between organizations Community providers' knowledge of military culture and protocols for caring for Veterans at risk for suicide Organizations better understand available resources (e.g., local, national) for Veterans and how to access them Increased reach of suicide prevention activities | |
| Provide Suicide Prevention Training | Suicide prevention training helps community members regarding suicide risk leads to people not seeing warning signs Lack of confidence and knowledge of what to do if you recognize someone at risk may lead to not asking someone if they need help, and therefore, not helping people in need. People who are trained in suicide prevention have more awareness and sensitivity to the needs of individuals who are at risk for suicide | |
| Promote Lethal Means Safety | The time between deciding to attempt suicide and the attempt is usually brief TWV promotes strategies that increase the space and time between thinking about suicide and accessing the lethal means to act on those thoughts Firearm storage, medication packaging, bridge and building barriers, and poison control policies have all been shown to save lives | |
| Enhance Primary Care Suicide Prevention | 80% of people who die by suicide have seen a primary care provider in the last year. Approximately 45% have in the last month. Rural primary care providers often cover a broader range of services including mental health due to fewer specialists in rural areas and stigma related to using mental health care | |
| Enhance Behavioral Health Suicide Prevention | A significant portion of individuals who died by suicide received mental health services prior to their deaths Many behavioral health providers have not received training in suicide risk assessment Safety plans help Veterans cope with suicidal crises and are likely to reduce suicide attempts among Veterans Personalized and high-quality safety plans result in fewer psychiatric hospitalizations and subsequent suicidal behaviors | |