

ALASKA STATE LEGISLATURE

LEGISLATIVE BUDGET AND AUDIT COMMITTEE

Division of Legislative Audit



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SUMMARY OF: A Sunset Review on the Department of Health and Social Services, Statewide Suicide Prevention Council (council), June 4, 2012

PURPOSE OF THE REPORT

In accordance with Title 24 and Title 44 of the Alaska Statutes (sunset legislation), we have reviewed the activities of the council. The purpose of this audit was to determine if there is a demonstrated public need for the council's continued existence and if the council has been operating in an effective and efficient manner. As required by AS 44.66.050(a), this report shall be considered by the committee of reference during the legislative oversight process in determining whether the council should be reestablished. Currently, under AS 44.66.010(a)(7), the council will terminate on June 30, 2013, and have one year from that date to conclude its administrative operations.

REPORT CONCLUSIONS

Overall, the council is operating in the public's interest. The council actively seeks to broaden the public's awareness of suicide as well as coordinates the efforts of other suicide prevention entities throughout the state. We recommend the council's termination date be extended to June 30, 2019.

The council has experienced notable improvements since its organizational alignment with the Alaska Mental Health Board (AMHB), and the Advisory Board on Alcoholism and Drug Abuse (ABADA). The AMHB and ABADA executive director's leadership as well as staff support under the new structure are significant factors in the council's improvements.

While the council's current organizational structure has proven beneficial, there is no formal agreement in place to ensure the executive director's time and abilities will continue to be shared effectively between AMHB, ABADA, and the council.

FINDINGS AND RECOMMENDATIONS

1. The council should, in accordance with statute, appoint its own coordinator and conduct annual performance reviews.
2. The council should monitor meeting attendance and inform the Office of the Governor of poor member attendance.

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3. The council should develop and monitor performance measures that support statutory duties and annually report progress.

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June 26, 2012

Members of the Legislative Budget
and Audit Committee:

In accordance with the provisions of Title 24 and Title 44 of the Alaska Statutes (sunset legislation), we have reviewed the activities of the Statewide Suicide Prevention Council, and the attached report is submitted for your review.

DEPARTMENT OF HEALTH AND SOCIAL SERVICES STATEWIDE SUICIDE PREVENTION COUNCIL SUNSET REVIEW

June 4, 2012

Audit Control Number
06-20074-12

This review was conducted as required by AS 44.66.050 and under the authority of AS 24.20.271(1). Currently, under AS 44.66.010(a)(7), the Statewide Suicide Prevention Council is scheduled to terminate on June 30, 2013. We recommend the legislature extend the termination date of the council until June 30, 2019.

The audit was conducted in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objectives. Fieldwork procedures utilized in the course of developing the findings and recommendations presented in this report are discussed in the Objectives, Scope, and Methodology.

A handwritten signature in black ink, appearing to read "Kris Curtis".

Kris Curtis, CPA, CISA
Legislative Auditor

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OBJECTIVES, SCOPE, AND METHODOLOGY

In accordance with Title 24 and 44 of the Alaska Statutes, we have reviewed the activities of the Statewide Suicide Prevention Council (council) to determine if there is a demonstrated public need for its continued existence and if it has been operating in an efficient and effective manner.

As required by AS 44.66.050(a), during the legislative oversight process, the committee of reference shall consider this report in determining whether the termination date of the council should be extended. Currently, state law specifies the council will terminate on June 30, 2013. If no action is taken by the legislature, the council will have one year from that date to conclude its administrative operations.

Objectives

The three central interrelated objectives of our audit were to:

1. Determine if the termination date of the council should be extended.
2. Determine if the council is operating in the public's interest.
3. Provide a current status of the recommendations made in the prior sunset audit report.

Our assessment of the council's operations and performance is based on criteria set out in AS 44.66.050(c). These criteria relate to the determination of a demonstrated public need for the council.

Scope and Methodology

The audit evaluated the operations and activities of the council for the period July 1, 2008, through March 31, 2012.

During the course of the audit, we examined:

- Applicable statutes and regulations to identify council functions and responsibilities including council member composition and qualifications. We also identified additions, deletions, and changes to council statutes to evaluate council actions during the audit period and the effect on council operations.
- Council by-laws to identify and evaluate compliance with council rules.
- Member applications and resumes filed with the Office of the Governor to verify council membership met statutory requirements.

- Council meeting minutes, budget documents, and annual reports to gain an understanding of council proceedings and activities as well as the nature and extent of public input. Additionally, we evaluated whether the reported information was compliant with statute.
- Public notice documentation to ascertain whether notice of council meetings was published as required by statute.
- The initial Statewide Suicide Prevention Plan (2004-2011) as well as the revised plan (2012-2017) to identify and evaluate council policies used as a framework for statewide suicide prevention efforts.
- The prior sunset audit of the council, *Department of Health and Social Services, Statewide Suicide Prevention Council Sunset Review, November 4, 2008* (Audit Control No. 06-20055-08), to identify and follow-up on previous and existing issues affecting the council.

We also assessed the internal control procedures related to various objectives of the audit, including membership, composition, and proceedings.

We inquired if any complaints regarding the council were filed with the following organizations:

- Department of Health and Social Services' Commissioner's Office;
- Alaska State Commission for Human Rights;
- Office of the Ombudsman;
- Office of Victims' Rights;
- Office of the Governor;
- Department of Administration's Division of Personnel and Labor Relations; and
- United States Equal Employment Opportunity Commission.

To identify and evaluate the various issues relating to council activities, we conducted interviews with state agency staff, council members and staff, and other stakeholders. Issues of inquiry included council operations and duplication of efforts. We specifically contacted:

- Council members also serving on the Alaska Mental Health Board (AMHB) and the Advisory Board on Alcoholism and Drug Abuse (ABADA).
- Select Division of Behavioral Health, AMHB, and ABADA staff.

ORGANIZATION AND FUNCTION

Under AS 44.29.350, the Statewide Suicide Prevention Council (council) is charged with advising the legislature and the governor on:

Actions that can and should be taken to improve health and wellness throughout the state by reducing suicide and its effect on individuals, families, and communities.

In addition to this advisory role, the council's activities include planning, coordinating, educating, and furthering outreach in the area of suicide prevention awareness.

The council consists of 16 members that serve staggered terms of four years. There are: two senators, two representatives, two executive branch employees, and ten public members. Of the two executive branch members, one must represent the Department of Health and Social Services (DHSS), and the other must represent the Department of Education and Early Development (DEED). The two senate and the two representative seats are appointed by the senate president and the house speaker, respectively. The senate and representative seats are non-voting. The executive branch and public seats are appointed by the governor.

Alaska Statute 44.29.300(a)(3) specifies that the public seats must be filled by:

- (B) *One member of the Advisory Board on Alcoholism and Drug Abuse[ABADA];*
- (C) *One member of the Alaska Mental Health Board [AMHB];*
- (D) *One person recommended by the Alaska Federation of Natives, Inc.;*
- (E) *One person who is an employee of a secondary school;*
- (F) *One person who is active in a youth organization;*
- (G) *One person who has experienced the death by suicide of a member of the person's family;*
- (H) *One person who resides in a rural community in the state that is not connected by road or the Alaska marine highway to the main road system of the state;*

Exhibit 1

Council Members as of March 31, 2012

1. William Martin, Chair,
2. Meghan Crow, Vice-Chair
3. Melissa Stone, DHSS
4. Phyllis Carlson, DEED
5. Brenda Moore, AMHB
6. Anna Sappah, ABADA
7. Christine Moses, Public
8. Barbara Jean Franks, Public
9. Teressa Baldwin, Public
10. Alana Humphrey, Public
11. Sharon Norton, Public
12. Pastor Lowell W. Sage, Jr., Public
13. Senator Johnny Ellis
14. Senator Fred Dyson
15. Representative Anna Fairclough
16. Representative Berta Gardner

- (I) *One person who is a member of the clergy;*
- (J) *One person who is enrolled in grade nine, 10, 11, or 12 of a secondary school in the state; and*
- (K) *One public member.*

The council is staffed by a coordinator and a program assistant. By statute, the coordinator may be employed by the council. As of June 1, 2012, the coordinator is the AMHB and ABADA executive director and is employed by and directly responsible to the boards. The program assistant position is funded by, and is directly responsible to, the council. The council also receives administrative assistance from DHSS.

BACKGROUND INFORMATION

In FY 09, the Statewide Suicide Prevention Council (council) was organizationally aligned with the Prevention and Early Intervention section of the Department of Health and Social Services' (DHSS) Division of Behavioral Health. The council identified this alignment in the FY 09 annual report to the governor and legislature as a key challenge to performing its duties. The report states, "*The Council has not had a dedicated staff person to help assist and manage the business responsibilities of the Council for several years.*"

In November 2009, the council voted to request that its staff and budget be coordinated by the Alaska Mental Health Board and the Advisory Board on Alcoholism and Drug Abuse's executive director. In February 2010, a letter outlining the request was sent to DHSS' commissioner. The council believed this move would facilitate collaboration and leverage funding to better accomplish its mission. The commissioner requested that the council draft a transition plan.

In accordance with the transition plan, dated May 2010, the council was placed under the leadership of the executive director that serves both the Alaska Mental Health Board and the Advisory Board on Alcoholism and Drug Abuse. The executive director and council members refer to this organization as a *co-location*. The goal of the co-location is to better share resources as the activities of the two boards enhance the council's suicide prevention efforts. The executive director acts as the council coordinator. The council coordinator position is defined by AS 44.29.330 as well as council by-laws.

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REPORT CONCLUSIONS

Overall, the Statewide Suicide Prevention Council (council) is operating in the public's interest. The council seeks to broaden the public's awareness of suicide. Furthermore, the council coordinates the efforts of other suicide prevention entities throughout the state and provides a comprehensive statewide suicide prevention plan in which communities can participate. We recommend the council's termination date be extended to June 30, 2019.

Beginning in FY 10, the council made notable improvements. The improvements include greater meeting attendance and participation by members, and completion of a new Statewide Suicide Prevention Plan. Additionally, the council played an integral part in assembling the 2010 and 2012 Statewide Suicide Prevention Summits. The improvements are attributed to an organizational alignment with the Alaska Mental Health Board and the Advisory Board on Alcoholism and Drug Abuse as well as the shared services of the boards' executive director.

While improvements are noteworthy, the organizational structure may not continue to be effective long term. There is no agreement in place to ensure the executive director's time and abilities will continue to be shared effectively between the Alaska Mental Health Board, the Advisory Board on Alcoholism and Drug Abuse, and the council. With no agreement in place, turnover in the executive director's position or a change in the focus and direction of either board could lessen the effectiveness of the council. This finding is discussed further in Recommendation No. 1.

This report also includes two additional recommendations to improve the council's effectiveness. We recommend the council report poor meeting attendance to the Office of the Governor (discussed in Recommendation No. 2). Furthermore, we recommend the council develop performance measures to evaluate progress in achieving statutory objectives (discussed in Recommendation No. 3).

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FINDINGS AND RECOMMENDATIONS

Two recommendations were made in the prior sunset audit of the Statewide Suicide Prevention Council (council) dated November 4, 2008.¹ The prior recommendation that the legislature consider modifying the composition of council membership has been resolved. During the period covered by this audit, the council supported statutory changes that broadened the applicant pool for council seats. Statutory changes also redefined legislative members as non-voting, thereby allowing the council to more easily achieve a quorum. A quorum has been met for every meeting since August 2010. As of March 31, 2012, all council seats were filled.

The prior recommendation that the council formally appoint its own coordinator and perform annual performance reviews has not been resolved and is reiterated as Recommendation No. 1.

Recommendation No. 1

The council should, in accordance with statute, appoint its own coordinator and conduct annual performance reviews.

Prior Finding

Effective July 1, 2008, the Department of Health and Social Services (DHSS) assigned the council coordinator's responsibilities to the Prevention and Early Intervention section manager in Division of Behavioral Health. This appointment was not made in accordance with statute and appeared to diminish the council's autonomy and independent voice with the governor and legislature. Also, the council had not annually evaluated the coordinator's performance for the past four years.

Legislative Audit's Current Position

As a result of the council's co-location with the Alaska Mental Health Board (AMHB) and the Advisory Board on Alcoholism and Drug Abuse (ABADA) in 2010, the AMHB and ABADA executive director also performs the duties of the council coordinator. The coordinated leadership has been successful; however, there is no agreement among the three entities outlining responsibilities, budgeting, and lines of authority. Furthermore, due to a lack of awareness of statutory requirements, the council has not evaluated the executive director's performance as council coordinator.

¹*Department of Health and Social Services, Statewide Suicide Prevention Council Sunset Review, November 4, 2008 (Audit Control No. 06-20055-08).*

The hiring, supervision, and evaluation of the council coordinator are part of the council's rights and responsibilities per statute. Alaska Statute 44.29.330(b) states:

The council may employ a coordinator to assist the council. The coordinator is in the partially exempt service. The coordinator shall be directly responsible to the council in the performance of the coordinator's duties. The council shall annually review the performance of the coordinator.

The council's performance has improved under the leadership of the AMHB and ABADA executive director. The current leadership structure is based on a transition plan approved by DHSS' commissioner in FY 10. While the plan outlines the general structure of the coordinated leadership, it does not provide for long-term continuity because neither board has formally agreed to the arrangement. Furthermore, the degree to which the executive director's time should be dedicated to council activities has not been formally agreed to by the boards. Due to the success of the current arrangement, it has not been considered necessary to update, enhance, or formalize the original transition document.

Currently, the executive director contributes approximately 20 percent of her time to council coordinator duties. Services are not funded by the council nor does the council evaluate her performance. Evaluating the coordinator's performance is important for ensuring the council maintains an independent voice.

We recommend the council formalize the current leadership structure through a written agreement. We also recommend the council annually evaluate the coordinator as required by statute.

Recommendation No. 2

The council should monitor meeting attendance and inform the Office of the Governor of poor member attendance.

From FY 09 through March 2012, eight council members demonstrated poor meeting attendance.

Alaska Statute 44.29.310(c) states:

Members of the council serve at the pleasure of the governor. The governor shall replace a member who, by poor attendance or lack of contribution to the council's work, demonstrates ineffectiveness as a member. In this subsection, "poor attendance" means the failure to attend three or more consecutive meetings.

The council does not enforce statute with regard to member attendance and does not track absences. Consequently, the Office of the Governor does not have the information necessary to follow the statutory requirement of replacing members with poor attendance.

When a member does not attend a council meeting, the council is unable to benefit from that member's input. The council meets three to four times a year. A member not attending three consecutive meetings potentially deprives the council of that member's input for an entire year.

We recommend that the council track member attendance and report instances of poor attendance to the Office of the Governor.

Recommendation No. 3

The council should develop and monitor performance measures that support statutory duties and annually report progress.

The council does not have established performance measures for quantifying the results of its activities. Furthermore, the council lacks a method for evaluating progress in achieving statutory duties.

State departments annually submit performance measures to the Office of Management and Budget. As part of their analyses, departments identify goals or end results, outline strategies to achieve those results, and provide status updates on progress. This data contributes to increased efficiency and effectiveness of department operations.

Since 2009, the council has omitted performance measures from its annual reports. Council members were not involved in developing the measures and believed some were not appropriate indicators of council performance. While the council has established short term goals, it has not developed quantifiable performance measures. Performance measures are necessary to evaluate progress in meeting statutory duties and to communicate results to policy makers. Without quantifiable measures, policy makers lack the necessary information to evaluate the council.

We recommend the council work with DHSS management to develop and track performance measures that support statutory duties and report annually on the effectiveness of its activities.

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ANALYSIS OF PUBLIC NEEDD

The following analyses of board activities relate to the public need factors defined in AS 44.66.050(c). These analyses are not intended to be comprehensive, but address those areas we were able to cover within the scope of our review.

Determine the extent to which the board, commission, or program has operated in the public interest.

Alaska Statute 44.29.350 directs the Statewide Suicide Prevention Council (council) to serve in an advisory capacity to the legislature and the governor regarding what actions should be taken to meet six prevention objectives. We evaluated council activities against the six objectives and conclude the council has operated in the public's interest.

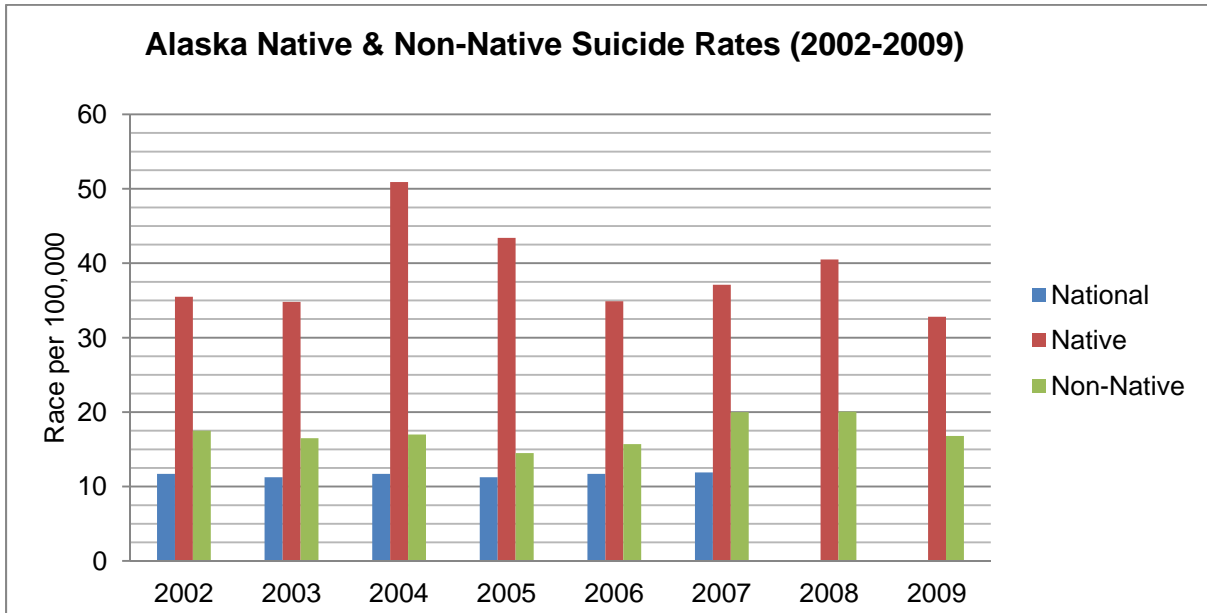
The following is a description of the council's activities for each of the six prevention objectives defined in Alaska Statute:

1. *Improve health and wellness throughout the state by reducing suicide and its effect on individuals, families, and communities.*

As shown in Exhibit 2 (following page), suicide rates in Alaska have remained at nearly twice the national average with no significant decline for the years 2002 through 2009.² While a direct correlation between the council's activities and the suicide rate in Alaska cannot be determined, the council has been actively working towards reducing rates. The council's state plan provides direction and strategies for communities in preventing suicide. Additionally, the council contributed to the creation of the www.stopsuicidalaska.org portal, an interactive forum for individuals and communities to share information and support. Council members also participated in compiling "*Helping Our Communities Heal, a Postvention Resource Guide.*" This resource provides guidelines for communities dealing with the after effects of suicide. In June 2011, Division of Behavioral Health (DBH) hosted a training on the resource guide which was attended by more than 70 people from regions throughout Alaska. The resource guide is also posted on the council's website.

²Confirmed data for 2010 and 2011 is unavailable.

Exhibit 2



Source: www.stopsuicidealaska.org³

2. *Broaden the public's awareness of suicide and the risk factors related to suicide.*

The council has taken an active part in broadening the public's awareness of suicide. Of particular significance is the council's outreach to Alaska Native communities and tribal leaders. The council has focused on opening the lines of communication among tribal leaders through initiatives such as the Southeast Regional Suicide Symposium and the 2010 and 2012 Mending the Net suicide prevention summits. Additionally, presentations given at the Alaska Federation of Natives (AFN) Convention, and the AFN Elders and Youth Conference demonstrate the council's efforts to broaden the public's awareness of suicide and suicide risk factors.

3. *Enhance suicide prevention services and programs throughout the state.*

The council has teamed with the Alaska Mental Health Board (AMHB), the Advisory Board on Alcoholism and Drug Abuse (ABADA), and DBH to create the www.stopsuicidealaska.org web portal. The council has also partnered with the Alaska Native Tribal Health Consortium, the Alaska Mental Health Trust Authority, and the Alaska Brain Injury Network in order to develop an education and awareness campaign featuring the 2010 and 2011 winners of the Iron Dog snowmobile race. Campaign materials actively promote Careline, Alaska's toll-free statewide suicide prevention hotline.

³National data for the years 2008 and 2009 was not yet available.

The council also works to coordinate in-state suicide prevention and awareness efforts among organizations such as the Southeast Alaska Regional Health Consortium and the Juneau Suicide Prevention Coalition.

4. *Develop healthy communities through comprehensive, collaborative, community-based and faith-based approaches.*

The council is taking steps to help communities work toward the goals set out in the 2012 through 2017 state plan. The second Suicide Prevention Summit, held in January 2012, invited teams from each of Alaska's six regions.⁴ Teams were tasked with choosing a goal from the new state plan and developing a plan to accomplish that goal in their respective communities.

The council has incorporated faith-based approaches to healthy communities by giving an educational awareness presentation to the Southeast Alaska Episcopal Deanery in May 2011. Additionally, attendees of the two Statewide Suicide Prevention Summits included clergy members.

5. *Develop and implement a statewide suicide prevention plan.*

The council issued the first Statewide Suicide Prevention Plan in 2004. Over time, the council concluded that the plan was too general and not directive. A new state plan was developed that focused on directives, strategies, and re-engaging the community. The new five-year State Suicide Prevention Plan (2012 through 2017) was issued in January 2012.

The plan is the result of a comprehensive effort that solicited input from over 100 stakeholders and interested individuals. Implementation of the plan began at the 2012 Statewide Suicide Summit. The summit brought together teams from the six different regions in Alaska and called upon each team to choose one of the six goals in the plan. (See Exhibit 3). Teams then developed a strategy to accomplish the goal in their community.

Exhibit 3

Prevention Goals Statewide Suicide Prevention Plan
1. Alaskans accept responsibility for preventing suicide.
2. Alaskans effectively and appropriately respond to people at risk of suicide.
3. Alaskans communicate, cooperate, and coordinate suicide prevention efforts.
4. Alaskans have immediate access to the prevention, treatment, and recovery services they need.
5. Alaskans support survivors in healing.
6. Quality data and research is available and used for planning, implementation, and evaluation of suicide prevention efforts.

⁴The six regions are: Northern, Interior, Southwest, Anchorage/Mat-su, Gulf Coast, and Southeast.

6. *Strengthen existing and build new partnerships between public and private entities that will advance suicide prevention efforts.*

The council has made strides in partnering with tribal leaders and organizations which is crucial given the high rate of suicide among the Alaska Native population. The council strengthened the existing partnerships mentioned under objective three (page 14). Additionally, the council built new partnerships with the Alaska Association of Student Governments for promoting awareness in schools, the Jason Foundation for promoting awareness and prevention of youth suicide, and with gay and lesbian organizations such as Identity.

Determine the extent to which the operation of the board, commission, or agency program has been impeded or enhanced by existing statutes, procedures, and practices that it has adopted, and any other matter, including budgetary, resource, and personnel matters.

Under AS 44.29.330, the council “*may employ a coordinator to assist the council. The coordinator shall be directly responsible to the council in the performance of the coordinator’s duties.*” The council currently utilizes the services of AMHB and ABADA’s executive director to perform the council coordinator duties. However, the council does not employ nor compensate this person. This arrangement is attributed to the fact that while statute allows for the employment of a coordinator, the council’s budget is not adequate to fund the position and fulfill other council activities.

The “*Personal Services*” expenditure line, shown in Exhibit 4 on the following page, represents the salary and benefits paid to staff hired by the council to perform routine administrative duties. The unspent funding in FY 09 and FY 10 is reflective of the council’s difficulty in filling a vacant position.

Since co-locating with AMHB and ABADA, the executive director has provided strong leadership and direction for the council. This is evidenced by the council’s achievements over the last two years. The council’s continued long-term success is uncertain due to the fact that the current leadership structure has not been formalized. This finding is further discussed in Recommendation No. 1.

Exhibit 4

Schedule of Expenditures and Funding Sources				
FY 09 through March 2012				
(Unaudited)				
	<u>FY 09</u>	<u>FY 10</u>	<u>FY 11</u>	<u>FY 12 (through March)</u>
Expenditures:				
Personal Services	\$ -	\$ -	\$ 65,295	\$ 50,272
Travel	23,281	29,094	43,992	22,399
Services	18,767	23,521	15,217	11,582
Commodities	9,222	5,530	5,912	11
Total Operating Expenditures	<u>\$ 51,270</u>	<u>\$ 58,145</u>	<u>\$ 130,416</u>	<u>\$ 84,264</u>
Funding Sources:				
General Fund Appropriations	<u>\$ 82,800</u>	<u>\$ 82,800</u>	<u>\$ 136,800</u>	<u>\$ 130,900</u>

Determine the extent to which the board, commission, or agency has recommended statutory changes that are generally of benefit to the public interest.

From FY 09 through March 2012, the council supported the following statutory changes that modified council membership.

- The requirement for two of the council’s members to be employed by the executive branch was changed to specify that one executive branch member represent the Department of Health and Social Services and one represent the Department of Education and Early Development.
- The requirement that a member be a secondary school counselor was changed to allow any employee of a secondary school.
- The requirement for one member under the age of 18 was updated to a student enrolled in grades nine through 12.
- One public member seat was added.
- The status of legislative members was modified from voting to non-voting.
- Clarifying language was added to specify that only voting members could elect officers.

- Quorum requirements were modified to include members attending via teleconference. Votes can also be cast via teleconference.
- Legislation that passed in FY 12 (Chapter 33, SLA 2012) requires a member of the military to sit on the council and extends the age limit of the youth representative to 24 years of age.⁵

Determine the extent to which the board, commission, or agency has encouraged interested persons to report to it concerning the effect of its regulations and decisions on the effectiveness of service, economy of service, and availability of service that it has provided.

The council held 15 meetings from FY 09 through March 2012. Two of these were executive sessions and not subject to public notice or participation. The remaining 13 were open to the public. Of the 13 meetings, four did not allow for adequate public notice, and two did not allow time for public comment.

Failure to allow for adequate public notice and/or public comment is significant. However, with the exception of one, these failings occurred prior to the council's co-location with AMHB and ABADA. After the co-location and subsequent new leadership, adherence to the requirements for public notice and participation improved.

Determine the extent to which the board, commission, or agency has encouraged public participation in the making of its regulations and decisions.

The council publishes its decisions and policies through its state plan. The new Statewide Suicide Prevention Plan (2012 through 2017) was issued in January 2012.

The new plan was drafted using the input of approximately 100 stakeholders and interested persons. The stakeholders and interested persons included: health professionals, Alaska Native representatives, suicide survivors, board members from other health related boards, Southcentral Foundation representatives, and members of the Association of Student Governments. Additional public input was solicited through the Alaska online public notice system.

Determine the efficiency with which public inquiries or complaints regarding the activities of the board, commission, or agency filed with it, with the department to which a board or commission is administratively assigned, or with the office of victims' rights or the office of the ombudsman have been processed and resolved.

There have been no complaints filed regarding the council based on inquiries made with the Office of the Ombudsman, Office of Victims' Rights, the DHSS Commissioner's Office, and the Alaska State Commission for Human Rights.

⁵House Bill 21 was signed into law May 23, 2012.

Determine the extent to which a board or commission that regulates entry into an occupation or profession has presented qualified applicants to serve the public.

This criterion is not applicable since the council does not regulate occupations or professions.

Determine the extent to which state personnel practices, including affirmative action requirements, have been complied with by the board, commission, or agency to its own activities and the area of activity or interest.

There have been no complaints filed regarding the council based on inquiries with the Department of Administration's Division of Personnel and Labor Relations and the United States Equal Employment Opportunity Commission.

Determine the extent to which statutory, regulatory, budgeting, or other changes are necessary to enable the agency, board, or commission to better serve the interests of the public and to comply with the factors enumerated in this subsection.

The council best serves the interests of the public when all council seats are filled, thereby allowing for the input of each member's experience and opinion. While the council has minimal control over the time it takes to find a suitable applicant, once a vacancy is known, the council is responsible for notifying the Office of the Governor of vacancies in a timely manner.

In May 2010, the council youth member graduated from high school and was no longer eligible to sit on the council. The seat was not filled until March 2011. The delay was partially attributable to the council not informing the Office of the Governor of the vacancy until November 2010. Council vacancies need to be communicated to the Office of the Governor in a timely manner to facilitate full council membership. Additionally, the council is responsible for informing the Office of the Governor regarding members with poor attendance. This finding is further discussed in Recommendation No. 2.

The council's progress over the past two years indicates that the transition from DBH to a collocation with AMHB and ABADA substantially benefits the council. Under the current organization, the council is utilizing the services of AMHB and ABADA's executive director. However, the executive director is not employed nor formally appointed by the council. In order to solidify the leadership structure, the council should formalize this agreement, including the approval of AMHB and ABADA. This finding is further discussed in Recommendation No. 1.

Determine the extent to which the board, commission, or agency has effectively attained its objectives and purposes and the efficiency with which the board, commission, or agency has operated.

The council's objectives and purposes are laid out in statute, the state plan, and in its annual reports. Council activities, in relation to its statutory objectives, are summarized on pages 13 through 16 of this report. Overall, the council is meeting its statutory objectives.

The council has not provided an FY 11 annual report to the legislature and the Office of the Governor as required by statute. Additionally, the council has not used performance measures since 2008. The council eliminated performance measures from annual reports beginning in 2009 because it had not been involved in the development of the performance measures and believed some of them to be inaccurate metrics of council performance. This finding is discussed in Recommendation No. 3.

Determine the extent to which the board, commission, or agency duplicates the activities of another governmental agency or the private sector.

On a statewide basis, the council coordinates suicide prevention efforts of other organizations. It also advises the legislature and the governor concerning suicide prevention policy and prepares the Statewide Suicide Prevention Plan. While there are other governmental and private sector agencies that have a common goal in the prevention of suicide, no other organization performs the statewide coordinator function.



THE STATE
of **ALASKA**
GOVERNOR SEAN PARNELL

Department of
Health and Social Services

OFFICE OF THE COMMISSIONER
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July 6, 2012

Kris Curtis, Legislative Auditor
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Juneau, Alaska 99811

RECEIVED

JUL 18 2012

LEGISLATIVE AUDIT

Re: Statewide Suicide Prevention Council Sunset Review
Audit Control No. 06-20074-12

Dear Ms. Curtis:

I appreciate the consideration the Division of Legislative Audit put into the audit of the Statewide Suicide Prevention Council (Council). The recommendations made are reasonable. The Department of Health and Social Services (DHSS) will support the Council in addressing the organizational areas identified for improvement.

In response to the Report Conclusion:

We appreciate the recommendation that the Council be extended to June 30, 2019. The Council has undertaken many strategic improvements to allow it to better fulfill its responsibilities, with marked success. Extending the Council to 2019 allows for complete implementation of the five-year state suicide prevention plan, as well as evaluation of the outcomes.

In response to Recommendation No. 1:

The recommendation that the Council formalize the coordination of effort and shared leadership with the Alaska Mental Health Board (AMHB) and Advisory Board on Alcoholism and Drug Abuse (ABADA) is reasonable, as is the expectation that the Council evaluate the performance of its coordinator annually.

The current leadership arrangement and co-location with AMHB and ABADA has resulted in significant improvements in the Council's work. The decision to co-locate the Council with these boards was a result of the last legislative audit, which identified significant organizational difficulties. Co-location has served as an effective solution, at least in the short-term. However, the department supports the Council in its organizational improvement efforts and will work with the Council to maintain its effectiveness and achieve independent sustainability.

Ms. Kris Curtis
July 6, 2012
Page 2

In response to Recommendation No. 2:

Council staff implemented an attendance log on July 1, 2013 pursuant to this recommendation. I expect such log to be shared with the Governor's Office and Legislature annually.

In response to Recommendation No. 3:

I am aware of the efforts that the Council has made to monitor and improve its performance. Council members have undertaken periodic performance reviews, and, in January 2011, held a formal strategic planning session. The result of this work was clarification of the roles, responsibilities, and actions of the Council in furtherance of its statutory responsibilities. Those efforts will, in future, be coordinated with department leadership to ensure that the Council provides performance measures to the Office of Management and Budget.

In response to the Analysis of Public Need:

I appreciate that the report includes an overview of the significant effort of Council members and staff since 2010, noting especially the investment in partnerships with Alaska's tribal organizations, community coalitions, health care organizations, and others. The Council plays an important role in achieving our mission to promote and protect the health and well-being of Alaskans, and the department is committed to supporting the Council in its continued efforts.

Sincerely,



William J. Streur
Commissioner

cc: William Martin, Chairman, Statewide Suicide Prevention Council



THE STATE
of **ALASKA**
GOVERNOR SEAN PARNELL

**Department of
Health and Social Services**

STATEWIDE SUICIDE PREVENTION COUNCIL

431 North Franklin Street, Suite 204

Juneau, Alaska 99801

Main: 907.465.6518

Fax: 907.465.4410

July 9, 2012

Kris Curtis, Legislative Auditor
Alaska Legislature, Division of Legislative Audit
P.O. Box 113300
Juneau, Alaska 99811

RECEIVED

JUL 09 2012

LEGISLATIVE AUDIT

Re: Statewide Suicide Prevention Council Sunset Review, Audit Control No. 06-20074-12

Ms. Curtis:

Please accept the following as the Statewide Suicide Prevention Council's response to the Preliminary Audit Report issued June 26, 2012.

In response to the Report Conclusions:

We appreciate the recommendation that the Statewide Suicide Prevention Council ("Council") be extended to June 30, 2019. Suicide has plagued Alaska since statehood, despite the efforts of many good people and good programs. The Council is hopeful that, with the new emphasis on action and community involvement, Alaska will begin to reduce the incidence of suicide over the next five years. The recommendation that the Council be extended to 2019 will allow us to coordinate and evaluate implementation of the five-year state suicide prevention plan, *Casting the Net Upstream: Promoting Wellness to Prevent Suicide*.

In response to Recommendation No. 1:

We appreciate the recognition of the positive changes and increased effectiveness since the Council was co-located with the Alaska Mental Health Board (AMHB) and Advisory Board on Alcoholism and Drug Abuse (ABADA). We believe that the leadership and closer coordination of efforts that have resulted from the co-location are integral to the Council's improved effectiveness. The recommendation that the coordination of effort and shared leadership be formalized by the three organizations is well-taken, as is the need for annual evaluation of the executive director. The Council is pursuing a joint meeting of the three executive committees to discuss how to implement this recommendation.

In response to Recommendation No. 2:

We emphasize that attendance and participation by council members has improved significantly since 2010. However, we find the recommendation to keep the Governor's Office better informed of council member attendance to be reasonable. Council staff has implemented an attendance roster in FY2013 (*see Attachment A*), and will provide attendance information to the

Governor's Office, the Speaker of the Alaska House of Representatives, and the President of the Alaska Senate at the end of each fiscal year.

In response to Recommendation No. 3:

While the Council has not provided performance measures to the Office of Management and Budget, the Council has considered how best to measure the effectiveness of its work. At its April 2009 meeting in Anchorage, the Council reviewed existing performance measures and worked with a paid facilitator from the Foraker Group to establish new strategic direction. This process resulted in short-term goals within the larger objective of becoming a "credible, leading force for suicide prevention." (See Attachment B at 5-6.)

In January 2011, the Council engaged in a formal strategic planning session. The result of this work was a guidance document identifying the roles, responsibilities, and actions of the Council in furtherance of its statutory obligations. (See Attachment C.) Also, *Casting the Net Upstream* includes specific performance measures related to efforts by the Council to implement the strategies included in the five-year state suicide prevention plan.¹

Thus, though they have not been included in the performance measures submitted to the Office of Management and Budget by the Department of Health and Social Services (DHSS), the Council has undertaken to evaluate its performance during the audit period. The Council will coordinate with the Commissioner's Office to have Council performance measures included in departmental information communicated to the Office of Management and Budget in FY2013 and thereafter.

In response to the Analysis of Public Need:

We appreciate the effort taken by Legislative Audit staff to fully explore and understand the work of the Council – and our intensive efforts since 2010 to improve our ability to fulfill our responsibilities. We have prioritized our role as the coordinator of statewide suicide prevention efforts, emphasizing the Council's ability to promote and coordinate communication and collaboration among the many projects and programs addressing suicide. We believe that the investments we have made to improve our transparency and inclusiveness, as well as our professionalism, will result in a greater return on our efforts to reduce the incidence of suicide in Alaska.

The Council has practiced many economies, required by our limited budget (noted on page 17 of the report), to permit the Council to have a full-time assistant. We believe that having a dedicated staff member to focus on the work of the Council is essential to our effectiveness. We are grateful for the support and leadership provided by AMHB and ABADA through the co-location and the sharing of their executive director's time and expertise. The Council has taken steps to promote its self-sufficiency and sustainability, though we recognize that we will continue to need

¹ Strategies 1.1, 2.1, 2.4, 2.5, 3.3, 3.6, 4.4, 5.2, 6.1, 6.2, and 6.3 of *Casting the Net Upstream* all reflect performance measures related to the Council's efforts under the plan.

the support and resources of our partners and the Department of Health and Social Services in order to maintain – and improve – our efforts to fulfill our statutory mandates.

To the discussion of how the Council has “recommended statutory changes that are generally of benefit to the public interest” (at page 17), we would add that the Council supported – and coordinated grassroots support for – legislation to mandate suicide awareness and prevention training for Alaska’s teachers in grades 7-12.² This legislation is aligned with Strategy 3.3 (“The State of Alaska will mandate evidence-based suicide prevention and intervention training for all school district personnel”) of *Casting the Net Upstream*, the state suicide prevention plan.

The Report noted that the Council “has not provided an FY11 annual report . . . as required by statute” (at page 20). The Council published its FY2011-2012 Annual Report on June 22, 2012, which was admittedly late for FY2011. The Annual Report is web-published exclusively, to save printing costs (which could not be reasonably borne by the Council). It can be accessed on the Council’s website.³ A printed copy has been provided to the Office of the Governor. Notice of the Annual Report, and how to access it, will be provided by mail to legislators and partners in July, 2012.

We appreciate the time, effort, and careful consideration Stacey McDowell and her colleagues put into the audit of our organization and work. This process has been of benefit to Council members and staff, and will help inform legislators and the public about our efforts to reduce the incidence of suicide in Alaska.

Sincerely,



William Martin, Chairman

cc: Commissioner Bill Streur, DHSS

² SB 137 was signed into law May 23, 2012 (Chapter 34 SLA 12).

³ The FY2011-2012 Annual Report is available at http://www.hss.state.ak.us/suicideprevention/pdfs_sspc/2011-12SSPCAnnualReport.pdf.

ATTACHMENT A

**Statewide Suicide Prevention Council
FY2013 Attendance Roster**

Council Member

Meeting Date

Teressa Baldwin
Phyllis Carlson
Megan Crow
Fred Dyson
Johnny Ellis
Anna Fairclough
Barbara Jean Franks
Berta Gardner
Alana Humphrey
William Martin
Brenda Moore
Christine Moses
Lowell Sage
Anna Sappah
Melissa Stone
Sharon Strutz-Norton

Staff Member

Eric Morrison
Kate Burkhart



ATTACHMENT B

Statewide Suicide Prevention Council
Meeting Minutes
April 8-9, 2009

Wednesday, April 8th

In attendance:

Brenda Moore, Pat Donelson, Renee Gayhart, Bill Martin, Barbara Franks, Marc Wheeler, Melissa Stone, Les Hamley

Staff: James Gallanos, Diane Casto, DHSS, Prevention and Early Intervention Services

Guests: Kate Burkhart, AMHB/ABADA

Ethics disclosures:

Bill Martin...CCTHITA tribe applies for state grants. Barbara works for ANTHC and applies for state grants. Renee Gayhart state employee. Marc Wheeler is also a recipient of a DBH prevention grant for the BBBS.

Approval of Agenda: Update on legislation. James recommended to make a change to meet at the LIO office at 1:30 for the committee hearing and move the public comment portion to 2:30 and post change in the lobby. Pat motioned and Barbara seconded. Approved.

FY09 annual report review:

James G. reviewed the FY09 annual report draft that is due in April. This is the first draft so several revisions are needed to complete the report including report back from members on individual performance measures.

Discussion: Renee had suggested to remove or revise the follow back study recommendations to include only the direct activities that relate to the recommendations. Also James had asked council members to report back to him on those activities so he could include them in the draft outline. Les had shared recent SOS efforts at Juneau area high schools and the alternative school and supported recommendation to the DEED commissioner, Larry Ladoux to support policies that screen all students to the high numbers of those who required follow up for depression and suicidal ideation.

AMHT report: Jeff Jesse and Katie Johnson

Jeff gave overview of the Trust and relationship and early development with the council. Also explained the Trust role in supporting beneficiaries and advocacy efforts with the legislature including issues such as housing and funding.

Discussion: Brenda asked about performance measures that the Trust establishes. Jeff shared that it is easier to help develop other's performance measures as opposed to developing their own because they do not control those variables. So why hold ourselves accountable for those outcomes. But does require a strategic plan that does try and impact beneficiaries. Example is success of the Bring the Kids Home efforts which have reduced out of state residential care and treatment for Alaska's children and youth. Several other

areas such as justice and housing has not seen these same results. So efforts to successfully implement a data driven strategy that drives down suicide is still needed. Marc asked about logic models or change models that the Trust uses. Jeff identified that all the committees and focus areas have these models but is tricky to develop good strategies that impact the changes you seek. Jeff had questioned the council work to be internal to the council or is it going to be working collaboratively with partners. Brenda said that yes, they will consider these efforts to work collaboratively and share similar goals. The legislature however have not invested in developing the infrastructure to support research and data that can drive the state's efforts. Jeff shared the "missions and measures" example as the legislatures attempt to understand the level of resources that are needed to support the states work. But will often cycle through these business models and as always, the bottom line is to whether they will fund these types of efforts.

Jeff questioned the issue of the council sitting outside of the boards if they are both addressing mental health, whether it should be separate or aligned should be part of the discussion as the council moves forward.

Bill commented on cluster suicides and used the example of screening youth and trying to find information about those youth who had talked to friend or potentially reduced suicide. Its worth a try to use funding to pursue this.

Jeff recommended to use a targeted or regional effort so we can build the resources as much as possible to show significant reduction in the suicides. Diane had interjected this is the direction the state is headed with many of their new grant programs.

AMHB/ABADA presentation on substance abuse and suicide: Kate Burkhart
Kate gave a presentation on the influence of substance abuse and suicide. She also shared some recommendations for future partnering with the boards that may be useful to council members as they are conducting their strategic planning.

Lunch

Public Comment: No public had attended the public comment period.

Planning session:

Open discussion among council members. Renee opened with the idea to share personal expectations of why or what they contribute or would like to see developed. Pat stated that he would like to know what the overall purpose of the council is and what part is promoting the council as opposed to reaching out and directly touching the lives of people. What will the council be doing on an ongoing basis? Systems as opposed to direct or hands on work and activities with people who we know are affected by suicide. Brenda opened up for members to share their personal interest and expectations to the council.

Pat shared his history of doing work hands on and wants to continue to be part of this retreat and develop a shared plan.

Marc has been involved in youth development work for past 8 years and is seeing “kids lost” and wants to try and help stop that. Was also interested in learning how boards work and be part of the council to make a difference. Wants to look at the “root” causes and underlying the problem of suicide as opposed to be reactive.

Bill was first appointed at 2003 was interested at grass root level at first. Represents Alaska Natives and brings understanding the complexity of the race and trying to restore sense of balance, Historically is sensitive but also easy to please. Our children are everybody’s children. We are all parents. Personal experience of suicide in his family had taught him about the issue at an early age. Wish we could do more. Identified alcohol as a main risk factor to address. Alcohol expands the Alaska Native sensitivities and emotions.

Renee...two sides. Bureaucratic side....works as tribal affairs and Medicaid. Suicide has dollar value attached to it and from the states perspective acts as big insurance co. and part of role is to go back and talk to other divisions of how suicide impacts our work in the state. Improve public health registries and track dollars and line items to make sure monies are spent to address needs. Personal side.... came to office of public advocacy and had observed the system to provide public assistance and case management. While there, 4 people committed suicide. Had to arrange funerals and observed no-one showing up to funeral. Role was on the Alaska advisory council and held meeting to share information and heard from regions about their experiences of suicides and hear their stories. How do we connect to the bigger prevention groups or share each of our significant work or perspectives as a group and share these experiences to learn how to best impact the council’s work.

Barbara. Doing this work she realized that she was not alone and that there was other people out there. But was still really difficult and pursued her education and moved to Anchorage. Remember the Elders and Ancestors and have our families with us. We have as a society become impersonal. Message needs to be personal and promoting the message of making a choice that will allow us to reach out and “be free” and kids can “be free”. Son was made to feel wounded and affected him for rest of life. Lets teach kids to chisel down there problems and seek solutions. Providing more opportunities and gathering more resources such as the new Careline website and partnering and pulling together, share resources. Jobs and wages make it hard to support families.

Les...nobody talked about suicide growing up. Received suicide training in college. In ten years lost 8 kids at the alternative high school. Middle school not as much but still suicidal ideations. After retired and working at high school....but now working directly with kids and fell in love with it because had a chance to do grass roots work. Since has seen several Alaska Native and non-native teens have died by suicide. Took Gatekeeper instructor training. Since Juneau has created a task force. People are ready to talk about it. Biggest thing is to let em know you care.

Brenda...help found organization that provided peer counseling and observed those experiencing problems associated with suicide and mental health. Arctic Barnabus work had worked with ministry leaders and support church leaders who had experienced several suicides. Joined the council to connect resources. Ministry leaders want more training and resources in behavioral health. Tried in past to connect clergy with Gatekeeper and other training resources but has been unsuccessful. Coordination and sustainability has been difficult being on the council.

Break

Planning session continued:

Review of Alaska statute “goals and responsibilities” a review of performance measures and Alaska Suicide Prevention Plan. Brenda opened discussion about role of “advisory” versus activities and strategies that support the direct work of suicide prevention across the state. Pat asked the question of what work wouldn’t get done if a council did not exist...why or how should the council makes a difference? Members hoped to address the issue in the strategic planning meeting tomorrow.

Adjourn

Thursday, April 9th

In attendance:

Brenda Moore, Pat Donelson, Renee Gayhart, Bill Martin, Barbara Franks, Marc Wheeler, Les Hamley, Bernard Gatewood.

Staff: James Gallanos, Diane Casto, DHSS, Prevention and Early Intervention Services

Guest Strategic Planning Facilitator: Terry Horton, Foraker Group

Foraker Group Strategic Planning Session

Who is the council and what is its purpose?

Terry reviewed the statutes and reviewed the role of an “advisory” board versus an “advocacy or grass roots body”. Reviewed advisory role according to statute that serves two purposes, 1) to know what we are talking about and 2) to have the Governor and legislature “listen”. Reviewed sustainability model that include human capacity, unrestricted funding and a clear focus or direction in an environment of collaboration.

Break:

Core Purpose exercise:

Members reviewed and discussed “core purpose”:

1. A voice for reduction of suicide in Alaska

2. Inform, advise and advocate to prevent suicide

Core values exercise:

1. Life
2. Community
3. Culture

LUNCH

Big Hairy Audacious Goal BHAG:

SSPC will become as a credible, leading force for suicide prevention.

Short Term Strategic Direction:

Marc: Develop a white paper on causes of suicide in Alaska, hold a summit to disseminate information and develop a statewide campaign based on the research to implement specific strategies that address the underlying causes of suicide.

Brenda: Supports summit idea, regional plans with tech support and info to implement regional plans.

Melissa: Teach and inform others what to do, how to respond.

Pat: Get all Tribal leaders involved. Increase screening i.e. SOS in middle schools, and suicide prevention plan for not only state and region but also community.

Diane: Social marketing campaign, targeting vulnerable population and learning how to best reach youth and teen culture.

Renee: Supports summit idea. Garnering wide support.

Bill: Tribal assembly, summit idea and invite separate tribal leadership gathering and get survey implemented to help communities identify their needs, willingness and commitment to be involved. Resolutions developed that get tribes actively involved. Council can also write a bill that directs this activity.

Bernard: Increase partnerships with like minded organizations.

Short Term Strategic Directions

- Get Tribal Leaders to buy off on suicide prevention. (Bill and Renee)
 - Talk about suicide in our tribal communities
 - Get a statement on the platform at AFN – Albert Kookesh and Julie Kitka. (Les and Bill) (October 2009)

- Indian Health Service Providers Conference – December 2009 (Diane will check about getting on agenda.)
- Rural Providers?
- The Summit (Result would be regional plans, then technical support to implement regional plans.) (January 2010 – Brenda) (Barbara and ANTHC) (With a call to action.)
- Get everything in order as to what we want and write a bill and get it passed (2010 – Bill and Brenda takes the lead, plus legislative members of the Council.)
- Find a Legislative Hero (2009)(Bill, Marc, Melissa)
- Have every middle school and high school student do SOS Screening. (2012)
 - (MatSu, Juneau, and Lower Yukon School District are already doing this – data will be compelling.
 - (Les, Barbara)
- Increase partnerships with like-minded organizations. (Ongoing) (Bernard, Barbara)

Motion

Melissa motioned Bernard seconded and by unanimous consent the council agreed on the following action plan:

- to find out how much money is remaining to be encumbered or spent (James)
- to contract with Foraker Group to develop work plan to implement strategic plan (James)
- to identify event planner to begin statewide summit planning (Brenda)
- to begin planning process and identify budget for Southeast Tribal Leader Summit in partnership with Tlingit Haida (Teleconference)

ADJOURN

ATTACHMENT C

**Statewide Suicide Prevention Council
Member Roles & Responsibilities 2011**

Chair	William Martin	Alaska Federation of Natives	Juneau
Vice-Chair	Barbara Jean Franks	Suicide Loss Survivor	Anchorage
Officer at-large	Bernard Gatewood	Advisory Board on Alcoholism and Drug Abuse	Fairbanks
Recorder/Treasurer	Melissa Stone	DHSS	Anchorage

Members	Brenda Moore	Alaska Mental Health Board	Anchorage
	Christine Moses	Rural Member off the road system	Bethel
	Phyllis Carlson	Education and Early Development	Juneau
	<i>Vacant</i>	Youth Member	
	Meghan Crow, LCSW	Secondary schools	Bethel
	Alana Humphrey	Statewide youth organization	Anchorage
	Sharon Norton, MSN, RN	Public	Homer
	Pastor Lowell W. Sage Jr.	Clergy	Kivalina

Ex-Officio Members	Senator Johnny Ellis	Anchorage
	Senator Fred Dyson	Eagle River
	Representative Anna Fairclough	Eagle River
	Representative Berta Gardner	Anchorage

Staff: Kate Burkhart, Executive Director
Eric Morrison, Assistant to the Statewide Suicide Prevention Council

SSPC Principles:

- ❖ Local solutions work best.
- ❖ It is the role of the State to offer resources, training, and technical assistance to communities and regions.
- ❖ While the Statewide Suicide Prevention Council has few direct resources, it plays a key role in coordinating State and local efforts in suicide prevention.

Alaska Statute 44.29.350 outlines duties of the Statewide Suicide Prevention Council:

The Council shall serve in an advisory capacity to the legislature and the governor with respect to what actions can and should be taken to:

- (1) improve health and wellness throughout the state by reducing suicide and its effect on individuals, families, and communities;
- (2) broaden the public's awareness of suicide and the risk factors related to suicide;
- (3) enhance suicide prevention services and programs throughout the state;
- (4) develop healthy communities through comprehensive, collaborative, community-based and faith-based approaches;
- (5) develop and implement a statewide suicide prevention plan;
- (6) strengthen existing and build new partnerships between public and private entities that will advance suicide prevention efforts in the state.

Major Roles of the Statewide Suicide Prevention Council to achieve the duties described in Alaska Statute 44.29.350:

- Clearinghouse - Build the statewide knowledge base for training resources, successful programs, and information on funding and other resources;
- Convener/Coordinator - Bring State agencies, community agencies, tribal and national resources together to better support regions and communities;
- Media/Public Education - Utilize the news media, social networks, and other forms of public information/advertising to focus attention on the issue of suicide prevention and promote strategies to reduce suicide;
- Planning and Public Engagement – Engage stakeholders to develop a Statewide Suicide Prevention Plan and report on progress;
- Policy and Budget - Recommend legislative actions to support suicide prevention;
- Statewide Suicide Prevention Council Effectiveness - Regularly examine how it meets, communicates, and works to determine if it can fulfill its statutory mission more effectively.

Planned SSPC Activities by Role:

Clearinghouse

Build the statewide knowledge base for training resources, successful programs, and information on funding and other resources.

1. Web Portal for Suicide Prevention:

- a. The Council will continue to develop the web portal as a key component of its clearinghouse function.

2. Postvention Kits:

- a. The Council will provide postvention training and resources for regions and communities throughout the State including developing, distributing, and updating "Postvention Kits."

3. Training:

- a. The Council will initiate and promote training opportunities including distance-delivered training.

4. Technical Assistance:

- a. The Council will continue to respond to requests for information, technical assistance, and support from regions, communities, groups, and individuals.
- b. All Council members will be trained in suicide intervention.

Convener/Coordinator

Bring State agencies, community agencies, tribal and national resources together to better support regions and communities.

1. Enhance Key Partnerships:

- a. The Council will convene meetings with key partners to identify overlapping interests, determine possible strategies to improve support to regions and communities, and coordinate planning and activities to promote suicide prevention.
 - The Council will explore the benefits of affiliating with national suicide prevention organizations to determine potential involvement
- b. The Council will actively seek out strategic opportunities to learn what other groups are doing to promote suicide prevention, provide education on Council activities, and participate in key partners' activities.
 - The Council will participate in the development of the State Comprehensive Integrated Mental Health Plan ("The Comp Plan").

- The Council will schedule periodic status updates from the Division of Behavioral Health about grant activity and other initiatives related to suicide prevention for each quarterly meeting.
 - The Council will request an invitation to address journalists at their statewide meeting, "J-Week," held in Anchorage in April each year.
- c. The Council has designated members from the Alaska Mental Health Board and the Advisory Board on Alcoholism and Drug Abuse; the Council will engage the Alaska Mental Health Trust Authority to participate in Council meetings and activities.

2. Suicide Prevention Summit:

- a. Every two years, the Council will coordinate a summit as a primary tool to expand the public discussion of suicide.

3. Partner with Schools:

- a. The Council will work with the Alaska Association of School Boards, The Alaska Association of Student Governments, schools, and other relevant stakeholders to:
- jointly develop strategies to engage students in preventing suicide
 - implement holistic programs to promote student wellness in and out of school aimed at building protective factors.
- b. The Council will encourage school districts to undertake suicide prevention education and screening, like the "Signs of Suicide (SOS)" training curriculum currently used in Juneau, Bethel, and other districts.
- a state budget increment will be offered to fund this activity in school districts.

Media/Public Education

Utilize the news media, social networks, and other forms of public information/advertising to focus attention on the issue of suicide prevention and promote strategies to reduce suicide.

1. Develop Media Campaigns:

- a. The Council will work with community leaders and other partners to develop media campaigns to promote suicide prevention and reduce stigma.
- The Council will continue to work with the Alaska Mental Health Trust's anti-stigma campaign.
 - The Council will develop different forms of media (articles, brochures, posters, videos, advertisements, public service announcements, etc.) and use a diversity of outlets, including using social media and the Council's web portal, to effectively reach intended audiences.

2. Public Education:

- a. The Council will continue to make, encourage, and support relevant and appropriate public presentations to reduce the stigma of discussing suicide and promote suicide prevention.

Planning and Public Engagement

Engage stakeholders to develop a Statewide Suicide Prevention Plan and report on progress

1. Statewide Suicide Prevention Plan:

- a. The Council will develop a Statewide Suicide Prevention Plan periodically as the Council deems necessary. In intervening periods, the Council will explore updates to the Plan that might make it more informative and useful to stakeholders.
 - The Council will develop the plan by actively soliciting and incorporating public input from a diversity of stakeholders from around the State.
 - The Council will continue to examine and incorporate promising and evidence-based practices that might help prevent suicide in Alaska.
 - The Council will consider developing companion plans that focus on particular high-risk groups as necessary.
- b. The Council will implement, monitor, and evaluate strategies included in the Statewide Suicide Prevention Plan by, among other actions:
 - developing a stakeholder engagement/involvement plan
 - developing appropriate budget/policy requests
- c. The Council will report progress on strategies included in the Statewide Suicide Prevention Plan to stakeholders.
 - Per A.S. 44.29.360, the Council will report findings and recommendations to the Governor, Speaker of the House, and President of the Senate annually by March 1st of each year.

Policy and Budget

Recommend legislative actions to support suicide prevention

1. Policy Recommendations:

- a. Guided by the Statewide Suicide Prevention Plan and ongoing public input, the Council will continue to provide recommendations to policy makers to help prevent suicide in the State.
- b. The Council will discuss and deliberate upon recommendations to the State Legislature for potential changes to state law

2. Budget Recommendation:

- a. The Council will evaluate the current prevention system and, guided by the Statewide Suicide Prevention Plan and ongoing public input, discuss, deliberate, and recommend to the State Legislature changes to the State's budget that will advance suicide prevention in the State.

Suicide Prevention Council Internal Effectiveness

Regularly examine how it meets, communicates, and works to determine if it can fulfill its statutory mission more effectively.

3. Meetings:

- a. While face to face meetings are generally preferred, due to funding limitations the Council recognizes meeting by teleconferencing, videoconferencing and regional meetings can augment quarterly meetings and allow the Council to become more effective. The Council will meet as required.
 - The Council will regularly evaluate whether its administrative budget provides adequate resources to accomplish their statutory charge and make recommendations for changes as required.