



The Power in Empowerment

The story of mental health care without barriers to those with housing insecurities.

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Learning Objectives

- Learn how access to mental health services can support the lives of those living with housing insecurities and how the use of evidence-based interventions and measurement-based care supports positive outcomes.
- Learn about a suicide prevention model that quickly identifies those at risk and offers a pathway to care for those clients who need suicide management treatment.
- You will learn about how a Wellness Model with six principles of wellness creates a powerful footprint for empowerment, change and support.
- The unique needs of Veterans and their families will be explored and participants will learn how cultural competency and mental health interventions together supports successful outcomes.



A Life Empowered

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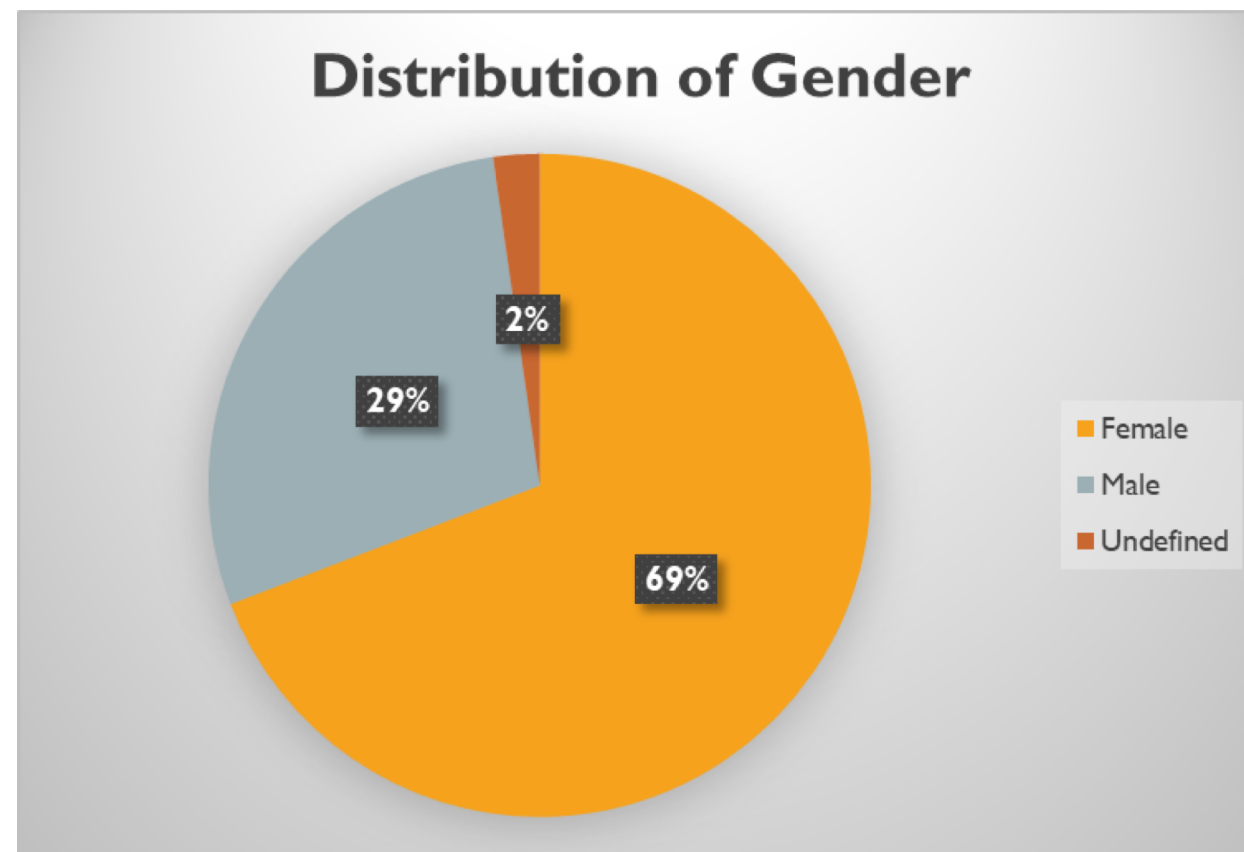
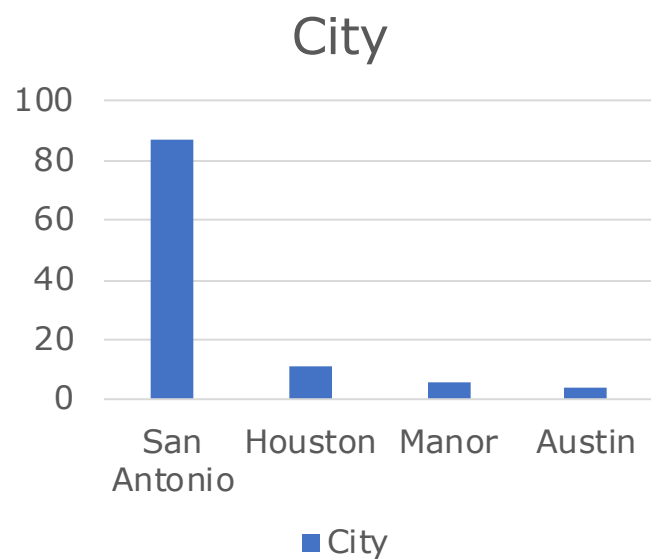
Meeting Clients Needs

- **Housing insecurities/Homeless and prevalence of mental health support needs.**
 - **Untreated mental health illnesses**
 - **Barriers to care**
 - **Substance Use Disorder Recovery**
 - **Case Management**
 - **Collaboration**



By the numbers

- **Clients served**
 - **133**
 - **Mean age: 37.25 years**



October 2021 to August 30, 2022

By the numbers

- **Most Common Diagnosis**

 - Post-Traumatic Stress Disorder**

 - Generalized Anxiety**

 - Major Depression Disorder**

- **Outcome Data**

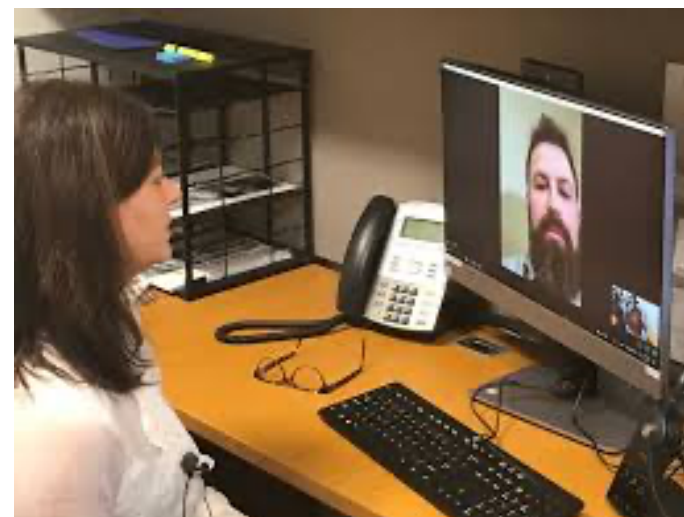
- **Access to care**

 - **Devices—200 Tablets**
 - **Training to use systems**
 - **Virtual sessions**



Care Model

- **Standardization**
- **Data Driven Decisions**
 - **Evidence-Based Care**
 - **SUD Treatment**
- **Common Language**
- **TeleMental Health Care**
 - **Access**
 - **Secure text video link**





Multi-Disciplinary Team Approach





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Social Determinants of Health (SDOH) and Suicide

- **Rate of death higher than those who are housed.**
- **Die 20 years before their housed peers.**
- **Access to care**
- **Food Insecurities**
- **Zip codes impact longevity**

Endeavors Zero Suicide Initiative



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Substance and Mental Health Services (SAMHSA)

- 5 year grant to implement the Zero Suicide Model.

<https://zerosuicide.edc.org/>



Endeavors Zero Suicide Initiative

- **Goals:**
 - **Implementing the 7 elements of the model:**
 - Across all services at Endeavors (4 lines of service & 2,000+ employees)
 - Train our collaborative network
 - Build a suicide safer community.
 - **Work collaboratively with each program to develop a *Pathway to Care*.**
 - **Train clinical and non-clinical staff in suicide prevention best practices to be able to identify, ask, intervene and refer.**

Zero Suicide Supported by Research

The Relationship Between Suicidal Behaviors and Zero Suicide Organizational Best Practices in Outpatient Mental Health Clinics

Deborah M. Layman, M.A., Jamie Kammer, Ph.D., Emily Leckman-Westin, Ph.D., Mike Hogan, Ph.D., Julie Goldstein Grumet, Ph.D., Christa D. Labouliere, Ph.D., Barbara Stanley, Ph.D., Jay Carruthers, M.D., Molly Finnerty, M.D.

Published Online: 18 Mar 2021 | <https://doi.org/10.1176/appi.ps.202000525>



Conclusions:

These findings support an association between clinics' use of ZS organizational best practices and lower suicidal behaviors of patients under their care. Findings also support the validity of the ZS Organizational Self-Study instrument.

Current Issue



Friday, March 19, 2021

'Zero Suicide' Practices at Mental Health Clinics Reduce Suicide Among Patients, Study Finds



published Thursday in a [report](#) in *Psychiatric Services in Advance*.

Patients who were seen at outpatient mental health clinics were significantly less likely to attempt suicide when clinics practiced "Zero Suicide" principles, including suicide screening, safety planning, and support during care transitions with follow-up after discharge from acute care settings. These findings were

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Preparation - Pathway to Care

- **Training Plan**
 - **Pre-Implementation training needs identified (Pre-Workforce Survey)**
 - **Senior Leadership Meeting**
 - **Framework Training**
 - **3 Gatekeeper Trainings**
 - **Columbia Suicide Severity Rating Scale (CSSRS) & Crisis Response Plan(CRP) Trainings**
 - **1 Intervention Skills Training**
 - **On-going process groups**



Ask Frist Approach

- **Organization wide moving away from client led behavior**
 - Focused on prevention - Proactive vs. reactive
 - Utilizing best practices (screening tools, interventions)
- **Scope of practice and ability**
- **When risk is identified - engage in the Pathway to Care**
 - What you do when the risk is identified
 - Screening at every visit
 - Engaged in clinical services



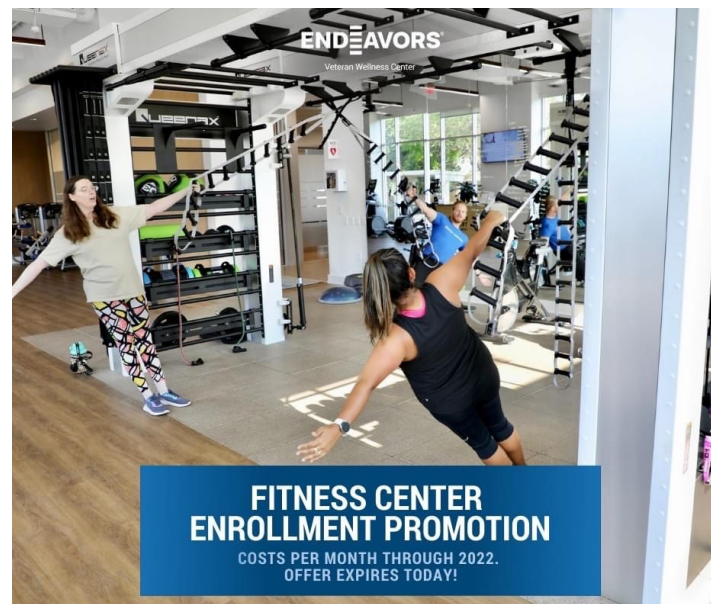
Endeavors Wellness Model



Wellness Model



- **Virtual Services**
 - **Fitness App**
 - **Wellness Group**



- **Foundational**
 - **Overall Health**
 - **Mindfulness**
 - **Removes Shame**



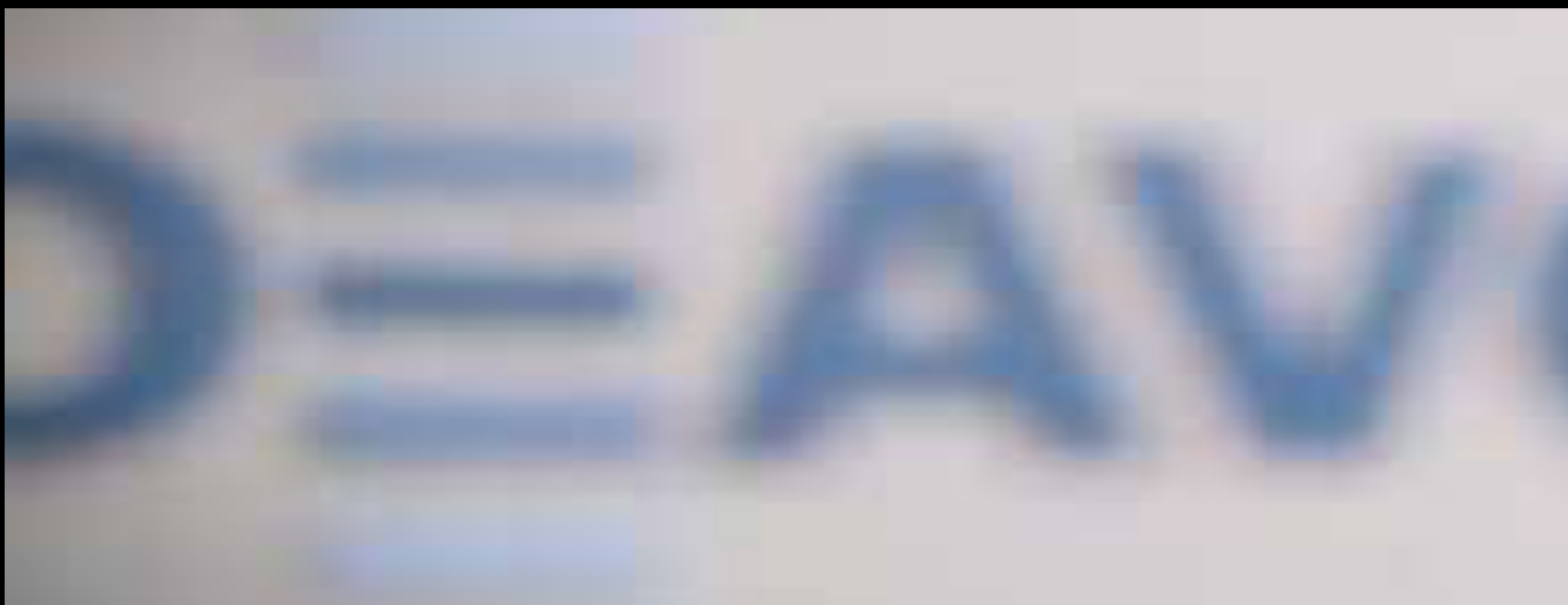
Caring for our
Nations Heroes



Suicide and Veterans experiencing homelessness

- Rates of death by suicide among Veterans remain high – 1.5 times higher for Veterans than non-Veteran adults.
- Risk is pronounced among Veterans experiencing homelessness, whom have particularly high rates of suicidal ideation.
 - *Associated with multiple risk factors: extreme poverty, loneliness, limited social support, comorbidities, psychosocial stressors (eg, unemployment); and high rates of trauma exposure and interpersonal violence.*
- Housing instability is also associated with suicide – 6 times more likely to report suicidal ideation.
- Rural Veterans are at a 20-22% greater risk of dying by suicide than urban Veterans.

TO CARE FOR HIM WHO SHALL
HAVE BORNE THE BATTLE AND
FOR HIS WIDOW, AND HIS ORPHAN
A. LINCOLN



THANK YOU

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