Northern Virginia Suicide Prevention Plan Final Version, October 2014

Strategic Direction 1: Healthy and Empowered Individuals, Families, and Communities				
Goal	Strategy			
Goal 1. Integrate and coordinate suicide prevention activities across multiple sectors and settings.	1.1. Create an ongoing team or organization to coordinate suicide prevention efforts and manage and support implementation of the plan.			
Goal 2. Implement research- informed communication efforts designed to prevent suicide by changing knowledge, attitudes, and behaviors.	 2.1. Implement public education campaigns as a part of a coordinated and multi-faceted strategy designed to achieve one or more of the following outcomes: improve suicide risk recognition; increase awareness of resources available for individuals who need help; increase help-seeking behavior; and reduce stigma of mental illness. Include social media and a web presence in the communications plan. 2.2. Implement messaging that focuses on ways to enhance protective factors and assets that increase resilience. 2.3. Promote the messages of suicide attempt survivors and individuals living with and recovered from mental illness. 			
Goal 3. Increase knowledge of the factors that offer protection from suicidal behaviors and that promote wellness and recovery.	 3.1. Educate providers on strategies grounded in evidence and sound theory, as well as on strategies that have been proven ineffective and/or harmful. 3.2. Incorporate elements of resilience development and mental health into school curricula. 3.3. Promote speakers bureaus of individuals and organizations competent to speak on resilience and suicide prevention. 			
Goal 4. Promote responsible media reporting of suicide, accurate portrayals of suicide and mental illnesses in the entertainment industry, and the safety of online content related to suicide.	 4.1. Promote responsible media coverage of suicides. 4.2. Promote responsible entertainment industry portrayals of mental illness and suicide. 			

Strategic Direction 2: Clinical and Community Preventive Services				
Goal	Strategy			
Goal 5. Develop, implement, and monitor effective programs that promote wellness and prevent suicide and related behaviors.	 5.1. Incorporate strategies for building resilience into existing programming. 5.2. Implement teen gatekeeper training and other peer help/support programs (for any age). 5.3. Implement programs, policies, and systems – in multiple sectors – that focus on the following outcomes and issues: Increased resilience and coping skills Increased stress reduction and management Improved physical health and wellness Reduced bullying Improved classroom management and provider response Decreased alcohol and other drug use 			
Goal 6. Promote efforts to reduce access to lethal means of suicide among individuals with identified suicide risk.	 Increased individual and community connections (decreased isolation) Train providers in assessing and addressing access to lethal means for at-risk individuals. Work with firearms sellers and safety training providers to address safety issues and suicide prevention. Reduce access to suicide "hotspots" (locations that provide a direct means for suicide or seclusion that prevents intervention). 			
Goal 7. Provide training to community and clinical service providers on the prevention of suicide and related behaviors.	 7.1. Train gatekeepers to recognize when others may be at risk of suicide and to assist them in seeking help. 7.2. Train clinical and non-clinical providers on the impacts of trauma and how to support individuals in recovery from trauma. 7.3. Implement strategies to prevent and mitigate problems due to concussion and other brain injury. 			

Strategic Direction 3: Treatment and Support Services					
Goal	Strategy				
Goal 8. Promote suicide	8.1.	Train general practitioners to screen for depression and risk of suicide.			
prevention as a core component					
of health care services.					
Goal 9. Promote and implement	9.1.	Implement the use of evidence-based therapies and other treatments for people at risk of suicide.			
effective clinical and professional	9.2.	Use evidence-based and best practices when implementing screenings in community settings (e.g.,			
practices for assessing and		schools, workplaces).			
treating those identified as being	9.3.	Implement best practices for interventions with people who have survived suicide attempts.			
at risk for suicidal behaviors.					
Goal 10. Improve access to	10.1.	Develop and promote common screening and referral methods for use in primary care, entry and			
behavioral health care.		referral, and social services settings.			
	10.2.	Promote public awareness of access points for obtaining help.			
	10.3.	Implement effective use of and access to crisis intervention and connecting individuals to help.			
	10.4.	Improve linkages from inpatient psychiatric to outpatient care and community services.			
	10.5.	Increase access to behavioral health care services through increasing the number of providers, reducing financial barriers to access, and other methods.			
	10.6.	Implement services that help individuals and families navigate the behavioral health system.			
	10.7.	Implement supportive services in non-clinical settings to complement treatment goals for individuals			
	10.7.	at risk of suicide.			
Goal 11. Provide care and support	11.1.	Provide outreach at the scene of a suicide to encourage self-help for familial survivors.			
to individuals affected by suicide	11.2.	Implement standardized postvention in schools and best practices for postvention in workplaces			
deaths and attempts to promote		and communities.			
healing and implement	11.3.	Provide support groups and other ongoing forms of support for survivors of suicide attempts and for			
community strategies to help		familial survivors of suicide.			
prevent further suicides.					

Strategic Direction 4: Data, Research, and Evaluation					
Goal	Strategy				
Goal 12. Increase the timeliness and usefulness of relevant surveys		egularly collect and analyze local data to identify risk and protective factors most associated with sicidal ideation.			
and other data sources relevant	12.2. Ind	corporate items related to key risk and protective factors for suicide into local survey tools.			
to suicide prevention and improve the ability to collect, analyze and		evelop and implement a Youth Suicide Review Team to identify systemic improvements for suicide revention.			
use information for action.		nalyze public safety and other data to identify suicide "hot spots" and recommend strategies to mit access to those locations.			
Goal 13. Evaluate the impact and effectiveness of suicide prevention interventions and systems and synthesize and disseminate findings.		evelop standard process and outcome measures by which to evaluate suicide prevention rograms, activities, and initiatives.			