



**COUNCILWOMAN  
JEANNINE PEARCE**

**Date:** December 11, 2018  
**To:** Honorable Mayor and Members of the City Council  
**From:** Councilwoman Jeannine Pearce, District 2 JP  
**Subject: Delivering Progress: Suicide Prevention Plan**

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**RECOMMENDATION:**

- Receive and file the Department of Health and Human Services report on Suicide Prevention provided in a memo on October 16th, 2018.
- Direct staff to participate consistently in the LACDMH Suicide Prevention Network and its response to existing suicide prevention plans.
- Increase the number of trainings available for Long Beach residents, businesses, and city staff.
- Report back annually on the progress and effectiveness of staff recommendations.

**DISCUSSION**

On June 19, 2018 meeting, City Council requested the City Manager to work with the Department of Health and Human Services and Long Beach Police Department (LBPD) to report back on current suicide prevention efforts in Long Beach, including the establishment of a suicide prevention plan, the creation of a suicide prevention community task force, and training for community members on intervention, procedures, and knowledge of existing resources. It was also requested that staff identify implementation options and associated costs.

On October 16, 2018, the City Manager brought back the report which identified the current methods Long Beach is participating in. It also identified the number of suicide rates per zip code and percentages of injury type. In 2010, the death rate due to suicide in Long Beach was 11.1 for every 100,000 people, and suicide was the 10th leading cause of death according to a 2010 Health Department report. From 2012 to 2016, City's suicide rates had a 17.4 percent increase. It is critical to ensure swift action is taken to create protective factors for prevention and recovery.

Staff recommends partnering closely with Los Angeles County Department of Mental Health (LACDMH) to ensure planning and services are accessible to the City of Long Beach. Additionally, the report states that there is an "opportunity to request additional training". The goal is to follow through with staff recommendations and include a report back annually on the progress of our suicide prevention methods.

**FISCAL IMPACT**

It is anticipated that this request may have a fiscal impact of \$100,000 or more if additional staffing is required. This action should include staff reviewing implementation options and additional associated costs per Council's direction.





# City of Long Beach

Working Together to Serve

## Memorandum

Date: October 16, 2018

To: Patrick H. West, City Manager *T.M.W.*

From: Kelly Colopy, Director of Health and Human Services *KC*

For: Mayor and Members of the City Council

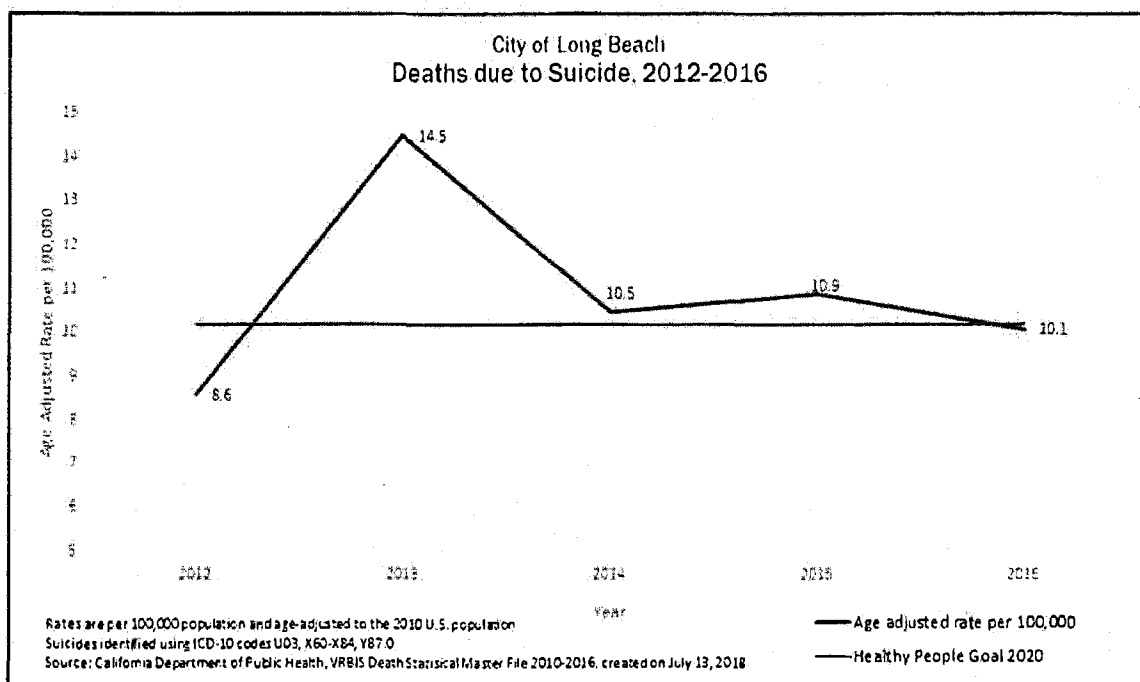
**Subject: Suicide Prevention**

At its June 19, 2018 meeting, the City Council requested the City Manager to work with the Department of Health and Human Services (Health Department) and Long Beach Police Department (LBPD) to report back on current suicide prevention efforts in Long Beach, including the establishment of a suicide prevention plan, the creation of a suicide prevention community task force, and training for community members on intervention, procedures, and knowledge of existing resources. It was also requested that staff identify implementation options and associated costs.

### OVERVIEW

In 2010, the death rate due to suicide in Long Beach was 11.1 for every 100,000 people, and suicide was the 10<sup>th</sup> leading cause of death according to a 2010 Health Department report.

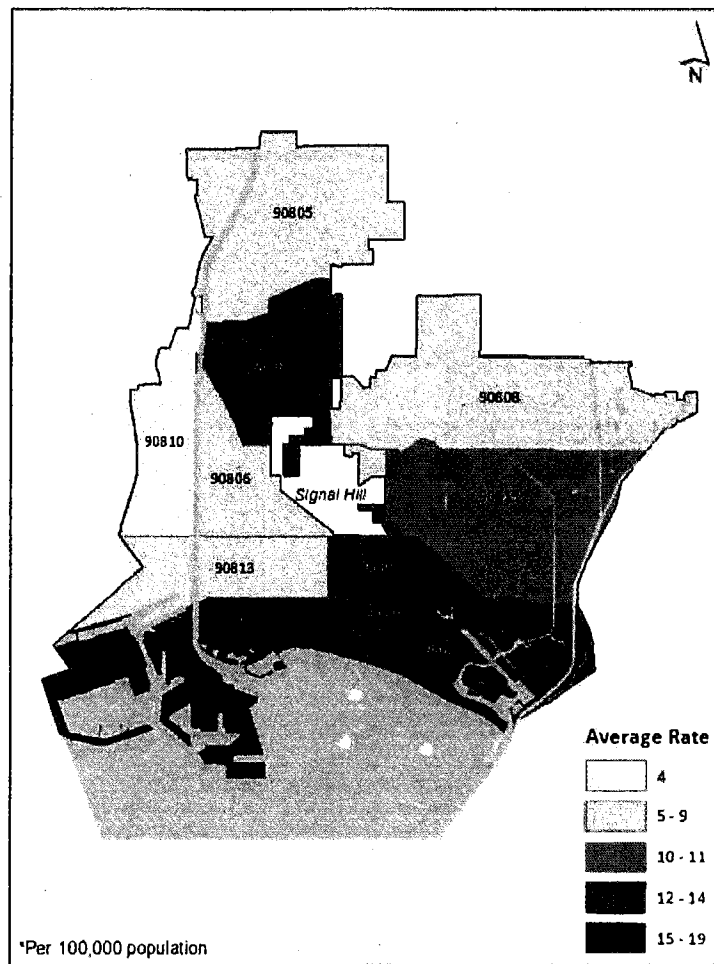
The chart below illustrates the City's suicide rates from 2012 to 2016. During this period, there was a 17.4 percent increase in the death rate due to suicide. Of note, in 2013 there was a spike in the suicide rate in Long Beach, which cannot be easily attributed to any specific cause/factor.



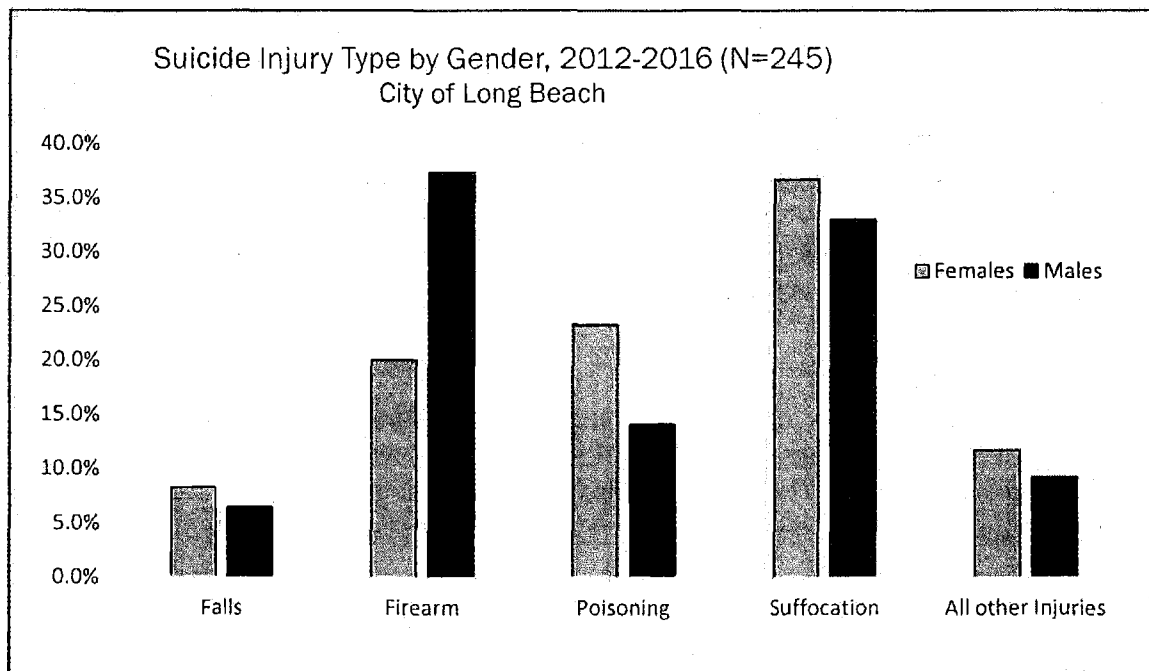
The age-adjusted death rate due to suicide for Long Beach over a three-year period from 2014 to 2016 was 10.5 for every 100,000 people. This rate was higher than both Los Angeles County (7.8 deaths per 100,000) and California (10.4 deaths per 100,000) for the same period.

Suicide rates also varied by zip code. The 90802 zip code had the highest five-year (2012-2016) average suicide rate (18.5 per 100,000), and 90810 had the lowest rate (3.8 per 100,000).

**Average Rate\* of Death by Suicide in Long Beach  
2012-2016**



The highest rate of suicide was among those 55 years and older, despite the average age of the Long Beach population, from 2012-2016, being 48 years. In 2016 alone, males were 3.2 times more likely to die from suicide compared to females. Among race and ethnicity groups, the highest rates of death due to suicide were for whites and blacks, according to a California Department of Public Health report.



The Center for Disease Control reports that some populations are at a higher risk of suicide compared to the general population. LGBTQ youth are almost five times as likely to have attempted suicide compared to heterosexual youth. Moreover, the U.S. averaged a total of 20.6 military-related suicides per day in 2015, 68 percent of which involved firearms, according to a Department of Veterans' Affairs report. Of those, 16.8 were veterans and 3.8 were active-duty service members, guardsmen, and reservists. Veterans accounted for 8.3 percent of the adult population (ages 18 and up), but 16.5 percent of all deaths by suicide. The rate of suicide in 2015 was 2.1 times higher among veterans compared with non-veteran adults.

#### **CURRENT SUICIDE PREVENTION METHODS IN LONG BEACH**

The Los Angeles County Department of Mental Health (LACDMH) is the agency responsible for providing mental health services in Long Beach and administers state and federal funds for mental health services. These funds do not come to Long Beach.

#### Mental Evaluation Teams

The LBPD operates six Mental Evaluation Teams (MET). Each MET unit consists of one LACDMH co-located mental health clinician and one LBPD sworn officer, working together in the same car. The six police officers assigned to the MET units are consistently assigned to those teams, allowing them to develop a high level of expertise in mental illness. The MET units respond to calls for service when a mental health concern is involved. In addition, all LBPD recruits participate in general mental health and suicide prevention, intervention and response training.

The main intervention tool available to law enforcement is outreach to people with suicidal ideation. The focus of outreach is to link and refer people who voluntarily seek assistance with mental illness with organizations that can provide help. However, in certain cases, an involuntary 72-hour hold may be necessary. If a person meets the criteria for an involuntary hold, the person is transported to Harbor UCLA if they are uninsured or to a private/non-profit hospital if they are insured. For those with private insurance, the LACDMH mental health clinician serves as an ombudsman who will place the patient in hospitals located in Long Beach or surrounding cities. Access depends on capacity.

### Urgent Care Centers

Urgent Care Centers (UCC), operated by non-profit organizations, will accept uninsured, Medi-Cal and/or privately insured clients. A UCC can take involuntary patients but may only hold a person for less than 24 hours to assess and connect to additional services. Clinicians assess individuals to determine need and may send patients to a county or local hospital.

Star View Behavioral Health Urgent Care Center (BHUCC) is Long Beach's new UCC. It features 24-hour psychiatric urgent care for up to 12 adults and six adolescents. They provide 24-hour nursing staff and mental health therapists, as well as a Crisis Walk-In Center where clients can be evaluated and receive medications on a short-term basis until they are connected to on-going psychiatric care. Referrals are also made for housing and other services. The Star View BHUCC takes several forms of insurance.

### ACCESS Center Helpline

The LACDMH operates the ACCESS Center Helpline at (800) 854-7771, a 24-hour, 7 days a week service in response to mental health emergencies. LACDMH staff facilitate referrals to the City's Psychiatric Mobile Response Team, which is different than the City MET. For calls to the ACCESS line that originate from Long Beach, both the Psychiatric Mobile Response Team and the LACDMH coordinate a response to suicide calls for service.

### LACDMH Outpatient Services

Outpatient mental health services funded by the LACDMH are available at 22 locations in Long Beach. The ACCESS Center Helpline offers live assistance determining the most appropriate clinic based on the person's insurance status and geographic location. Navigators are also available to assist people in gaining access. Please see the Attachments 1 and 2 for lists of LACDMH services in Long Beach.

### Hospitals

Local hospitals provide a response to individuals who enter the hospital with suicidal ideation, a suicide attempt, or who are a danger to themselves or are gravely disabled.

St. Mary Medical Center screens patients who present a risk of suicide. At-risk patients are seen by a medical doctor who orders social work and psychiatric consultations. Long Beach Memorial Medical Center also administers a Suicide Risk Screen. In addition, a depression screening tool is used for certain diagnoses, including cancer, stroke, and adult cystic fibrosis.

### SUICIDE PREVENTION PLAN

Suicidal ideation is multi-faceted and can develop long before individuals attempt to harm themselves. The social determinants of health associated with suicide include social cohesion and community engagement, safe neighborhoods, quality education, economic stability, and access to health care. A public health focus on suicide prevention across the lifespan requires us to prioritize protective factors, build and enhance emotional well-being, reduce stigma and incorporate mental health into overall health and well-being.

Los Angeles County participates in the *California Strategic Plan on Suicide Prevention* produced by the State of California. This plan covers the City through the LACDMH.

### SUICIDE PREVENTION COMMUNITY TASK FORCE

The LACDMH coordinates the Los Angeles County Suicide Prevention Network (SPN) for the entire county. The Long Beach Health Department has joined this task force.

### TRAINING OPPORTUNITIES

The LACDMH's Partners in Suicide Prevention team trains staff and community members countywide. The following trainings have been provided by the LACDMH in Long Beach over the past two years. We have an opportunity to request additional trainings.

Date of Training	Content	Agency Trained
10/11/16	QPR-Question, Persuade, Refer	Concord Senior Housing
10/11/16	Mental Health First Aid	Concord Senior Housing
12/6/16	Promoting Emotional Wellbeing	Lomco
3/3/17	Outreach regarding suicide prevention programs/trainings	Long Beach LGBTQ Center
11/2 & 3/17	Mental Health First Aid	PATH Long Beach
3/20/18	QPR-Question, Persuade, Refer	The Children's Clinic

Los Angeles County also hosts an annual Suicide Prevention Summit that is in its eighth year.

The State of California offers on-line resources funded by the Mental Health Services Act.

Non-profits and national organizations also offer support and training. Some of these groups are:

- NAMI Long Beach, the National Alliance on Mental Illness, provides education, skills training, and support related to mental illness, including suicide.
- Trevor Project provides crisis intervention and suicide prevention training specific to LGTBQ youth.
- National Suicide Prevention Lifeline 800-273 TALK (8255).

**OPTIONS**

***Suicide Task Force***

**A. Participate more fully in the LACDMH Suicide Prevention Network (includes Long Beach)**

The goal of the SPN is to promote public and professional awareness, education, training, and engagement regarding suicide and suicide prevention, intervention and post-treatment in Los Angeles County.

In collaboration with attempt survivors and survivors of suicide loss, the Los Angeles County SPN builds the capacity of providers, systems, and communities to implement effective, culturally and linguistically-appropriate suicide prevention, intervention, and post-treatment strategies for all age groups and high-risk populations. This includes supporting the California Office of Suicide Prevention in:

- Building a coordinated system of suicide prevention among state, regional, and local organizations.
- Developing and supporting suicide prevention training.
- Building a network of suicide prevention experts to address the needs of high-risk populations.
- Developing new knowledge and best practices for suicide prevention that are appropriate for diverse populations.

There is no fiscal impact associated with this option. Participation in the Network can be covered with existing staff.

**B. Implement a Long Beach Suicide Prevention Task Force**

To develop and staff a Long Beach task force would require a City staff position. This position would be responsible for developing relationships with all stakeholders, learning about existing resources, developing a coordinated response and coordinating and hosting the task force.

This option would require .5 FTE Community Program Specialist III with associated benefits, including indirect costs, supervision, and administrative support, at an estimated annual cost of \$68,000. An additional \$10,000 annually would be needed for materials and meeting costs.



### ***Suicide Prevention Plan***

A. Participate in the LACDMH Suicide Prevention Network response to the existing statewide and national plans.

The LACDMH SPN and the Partners in Suicide Prevention team are Los Angeles County's response to *California's Strategic Plan on Suicide Prevention*. These entities operate in support of three larger plans: *California Strategic Plan on Suicide Prevention*, *the National Strategy for Suicide Prevention*, and *Charting the Future of Suicide Prevention*. In addition, the SPN works to implement culturally-competent strategies and programs that reduce disparities, including:

- Eliminating barriers and increasing outreach and access to services.
- Developing and implementing strategies to reduce the stigma associated with seeking or being a consumer of mental health, substance use, or suicide prevention services.
- Developing mental health promotion strategies that offer education, foster resilience, and enhance protective factors (including a Strengthening Families framework).
- Meaningfully involving survivors of suicide attempts and the family members, friends, and caregivers of those who have died by, or attempted, suicide, and representatives of specific populations (including youth, adults in mid-life, older adults, military families and veterans, and selected ethnic communities).
- Using evidence-based models and promising practices to strengthen program effectiveness.
- Broadening the spectrum of partners involved in a comprehensive system of suicide prevention, intervention, and post-treatment.
- Employing a lifespan approach to suicide prevention.

Participating in the SPN has no fiscal impact and will likely result in benefits to Long Beach. However, implementing specific actions as outlined above would require a minimum of one FTE mental health professional with associated benefits, indirect costs, supervision and administrative support, at an estimated annual cost of \$130,000.

B. Develop a Long Beach Suicide Prevention Plan

Long Beach Health Department staff have reviewed three suicide prevention plans from Contra Costa, Tuolumne, Kings and Tulare Counties in California. In general, these plans were developed using a committee process spanning approximately two years each.

To develop such a plan would require approximately \$200,000 over two years in either consultant time or for City personnel, materials, data analysis, graphics, and printing.

**RECOMMENDATION**

The Health Department understands the importance of engaging in suicide prevention activities. We recommend that the City partner closely with LACDMH to ensure planning and services are adequately available within the City of Long Beach. This includes continued LBPD collaboration with the MET units and the Psychiatric Mobile Response Team; identifying LACDMH training, educational opportunities and services, and ensuring these are shared more broadly in the Long Beach community; and to participate more fully in the LACDMH Suicide Prevention Network and its response to existing suicide prevention plans. This can be accomplished with existing staff.

Please contact me at 562-570-4016, or by email at [Kelly.Colopy@longbeach.gov](mailto:Kelly.Colopy@longbeach.gov) with questions.

Attachments: Long Beach Mental Health Provider List  
Service Area 8 Contact Sheet (bilingual)

cc: CHARLES PARKIN, CITY ATTORNEY  
LAURA L. DOUD, CITY AUDITOR  
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MONIQUE DE LA GARZA, CITY CLERK (REF FILE #18-0542)