



**CROOK COUNTY HEALTH DEPARTMENT
POLICIES AND PROCEDURES**

SUBJECT: Administrative Policy	NUMBER: ADM195.01	Page 1 of 23
<u>TITLE: Suicide Prevention, Intervention, and Postvention Policy</u> Katie Plumb, MS <i>Katie Plumb</i>	EFFECTIVE DATE: 3/21	
INITIAL APPROVAL BY: Director	DATE: 3/21	
PERIODIC REVIEW BY: Leadership Team	DATE: 4/21	
APPLIES TO: All Staff Members	REVISED: 12/2023	

PURPOSE

This policy provides a procedure for identifying community partners and local communication pathways for information sharing inclusive of mobilization of postvention responses. According to Oregon Health Authority, Suicide is the second leading cause of death among Oregonians aged 15-24 years, and the 10th leading cause of death among all Oregonians in 2021.

POLICY

Crook County Health Department (CCHD) is committed to working collaboratively with partners, stakeholders, and the community to establish and implement suicide prevention activities along with postvention and cluster/contagion-reduction protocols. CCHD will provide oversight of the process for coordination of the community response for suicides that meet ORS 418.735, Oregon Senate Bill 561(SB561) criteria (including amending Oregon Senate Bill 918 and 485) and postvention best practice for persons of any age.

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- Postvention Response Process Flow Chart
- Communication Protocol
- Response Protocol
 - Decedents 18 and younger
 - Decedents 18 to 24
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DEFINITIONS

Postvention:

A planned evidence-based response after a suicide to facilitate healing and reduce risk of additional suicide incidents (i.e., contagion, clusters).

Cluster:

A group of suicides, suicide attempts, or self-harm events that occur closer together in time and space that would normally be expected in each community. The cluster can be one type of event or any combination of the three listed (e.g., suicide, suicide attempt, self-harm).

Contagion:

A phenomenon by which the suicide, or suicidal behavior, of one or more persons influences others to attempt suicide.

ORS 418.735:

Local Mental Health Authorities (LMHA's) must share information with the Oregon Health Authority within 7 days of a suspected suicide involving individuals 24 years of age or younger and; LMHA's must create and act upon postvention plan that includes immediate, mid, and long-term interventions/activities.

Senate Bill 918:

Local Mental Health Authorities (LMHAs) must provide notification of a suicide death or suspected suicide death of an individual 24 years of age or younger to systems that had contact with the deceased individual, (i.e., current and/or former school(s), juvenile department, employer, child welfare, etc.).

Senate Bill 485:

Public school districts, public universities, and private education institutions must inform their LMHA of a suicide death or suspected suicide death of an individual 24 years of age or younger and any implemented activities to support local entities and individuals affected by the death.

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Communication Protocol

1. Crook County Health Department's (CCHD) Suicide Prevention Coordinator (SPC) will assume the lead communication role when an individual dies by suicide in Crook County.
2. Lead Communications Person backup – Prevention and Health Promotion Supervisor.
3. Medical Examiner via Suicide Consolidated Risk Assessment Profile (SCRAP) report (Appendix A), Law Enforcement entities, and/or the School Districts will notify CCHD within 72 hours and provide the following information, as available, from the Suicide Postvention Response Form (Refer to Appendix B):
4. CCHD's SPC will notify the Local Mental Health Authority (LMHA) (BestCare) of suicide death.
5. CCHD's SPC will collect information and submit the required Oregon Health Authority (OHA) [Youth Suicide Reporting Form](#) (Appendix D) to the OHA Suicide Intervention Coordinator via secure email within 7 days of the death.
6. As appropriate, CCHD's SPC will communicate the death to the applicable community partners to activate a Postvention Response Team.
7. Upon request, institutions of higher education, school districts, private schools and other Crook County-based education entities will provide contact information, per policy and Family Education Rights and Privacy Act (FERPA), to CCHD's SPC.
8. Medical Examiner, or other identified agency/individuals, will notify CCHD's SPC of final disposition of the fatality review if not ultimately determined to be a suicide.

Response Protocol

CCHD's SPC will assume the Lead Response role for overall County and OHA communication and response processes when a person of any age dies by suicide in Crook County. The SPC will serve as the Postvention Response Coordination Lead; backup is the Prevention and Health Promotion Team Supervisor (or designee). In the event an individual's residence is in a county other than Crook, the CCHD's SPC will contact the LMHA in the county of residence for notification of the individual's death.

Capacity of Response

The capacity of response is dependent upon the age of the decedent. The following outlines the response protocol for decedents 18 years of age or younger, decedents between the ages of 18 to 24, and decedents 25 years of age or older.

Decedents 18 Years of Age & Younger

Immediate Response

1. Medical Examiner or Medical Examiner Deputy will submit the Suicide Consolidated Risk Assessment Profile (SCRAP) form (Appendix A) within 72 hours after completed death investigation. SCRAP form is securely submitted to the Postvention Response Lead & Postvention Response Lead Supervisor.
2. Law enforcement notifies CCHD's SPC and School District within 72 hours of the death.
3. CCHD's SPC asks law enforcement for information to complete the Suicide Postvention Response Form (Appendix B).
4. CCHD's SPC notifies BestCare of suicide death.
5. CCHD's SPC and School Agency confirm facts of the death and discuss individuals to be assigned roles for the Postvention Response Team, which include the following

roles that are assigned for every suicide death of an individual 18 years of age and younger. Roles described in more detail in Appendix C.

- a. Postvention Response Coordination Lead (if not CCHD's SPC)
 - b. Therapeutic Support Mobilization Lead
 - c. Data Monitor
 - d. Survivor Support Liaison
 - e. Communication Lead
 - f. Social Media Monitor
6. School Agency makes an outreach call to the decedent's parent(s)/guardian(s) within 24 hours to:
 - a. express condolences
 - b. obtain permission to use the decedents name and whether the agency may disclose the death was a suicide;
 - i. If the decedent's parent(s)/guardian(s) express a desire to not disclose manner of death, agree upon what messaging can be released following [safe messaging guidelines](#) (hyperlink)
 - c. determine an appropriate Survivor Support Liaison for the family; and
 - d. notify the family that CCHD's SPC will be calling to describe resources available.
 7. Postvention Response Team meets within 36 hours to address items on the Immediate Postvention Response Checklist (Appendix H).
 8. CCHD's SPC submits the Youth Suicide Reporting Form (Appendix D) via secure email to OHA Association of Oregon Community Mental Health Programs (561Report.OHA@dhsosha.state.or.us) within 7 days of the death.
 9. CCHD's SPC makes an outreach call to survivor(s) using the Postvention Outreach Call Script (Appendix E) within 7 days of the death.
 10. Impacted organizations will monitor for the risk of contagion and clustering.
 11. Postvention Response Coordination Lead/SPC guides the Postvention Response Team throughout the Postvention Quality Improvement Form (Appendix L).
 12. Postvention Response Team determines applicable debriefing needs.

Mid-Term Response

1. Approximately 2-3 months following the death, the Postvention Response Team meets to determine Mid-Term Postvention Response plans and activities.
2. Postvention Response Coordination Lead/ SPC guides the Postvention Response Team through the Mid-Term Postvention Response Checklist (Appendix I).
3. Postvention Response Team meets and communicates as necessary.
4. Postvention Response Coordination Lead/SPC guides the Postvention Response Team through the Postvention Response Quality Improvement Form (Appendix L).
5. Postvention Response Coordination Lead/SPC provides the following information for the purpose of the Child Fatality Review:
 - a. An assessment of the effectiveness of meeting the needs of grieving families and families of choice;
 - b. friends or others with relationships with the deceased;
 - c. and the wider network of community members impacted by the suspected youth suicide.
6. Impacted organizations will continue to monitor for the risk of contagion.

Long-Term Response

1. Approximately 9-10 months following the death, the Postvention Response Team meets to determine the Long-Term Postvention Response plans, activities, and interventions.
2. Postvention Response Coordination Lead/SPC guides the Postvention Response Team through the Long-Term Postvention Response Checklist (Appendix J).
3. Postvention Response Coordination Lead/SPC guides the Postvention Response Team through the Postvention Response Quality Improvement Form (Appendix L).
4. CCHD's SPC will coordinate with community partners for provision of Question, Persuade, Refer (QPR), Mental Health First Aid (MHFA), and/or Applied Suicide Intervention Skills Training (ASIST) to community at-large and community partners.
5. Impacted organizations will continue to monitor for the risk of contagion and clustering.
6. Postvention Response Coordination Lead provides the following information to CCHD's SPC if not involved in the postvention response, for the purpose of the Child Fatality Review:
 - a. An assessment of the effectiveness of meeting the needs of grieving families and families of choice;
 - b. and friends or others with relationships with the deceased; and
 - c. the wider network of community members impacted by the suspected youth suicide.
7. Impacted organizations will continue to monitor the risk of contagion.

Decedents 18 to 24 Years of Age

Immediate Response

1. Medical Examiner or Medical Examiner Deputy will submit the Suicide Consolidated Risk Assessment Profile (SCRAP) form (Appendix A) within 72 hours after completed death investigation. SCRAP form is securely submitted to the Postvention Response Lead & Postvention Response Lead Supervisor.
2. Law enforcement notifies CCHD's SPC and School District/local higher education institution within 72 hours of the death.
3. CCHD's SPC asks law enforcement for information on the Suicide Postvention Response Form (Appendix B).
4. CCHD's SPC notifies BestCare of death within 24 hours of Law Enforcement notification.
5. CCHD's SPC and BestCare discuss appropriate levels of response. Considerations in determining the appropriate level of response include:
 - a. If the decedent is an alumnus of a Crook County schools
 - b. If the decedent is a current student of a local higher education institution, including Central Oregon Community College (COCC), or Oregon State University-Cascades (OSU-C)
 - c. If the decedent was employed
 - d. If the decedent was in custody of a government agency
 - e. The decedent's living situation
 - f. Decedent's connection to community at large or sub-communities
 - g. Volume of survivors
6. IF decedent was **not** an alumnus of a Crook County school **nor** a student of a local higher education institution, follow response protocol outlined for decedents 25 Years of Age & Older.

7. IF the decedent was **a current** student of a local higher education institution, follow response protocol outlined for decedents 17 Years of Age & Younger.
8. IF the decedent was an **alumnus** of a Crook County school, relevant agenc(ies) assign the following roles as appropriate for the determined level of response. Roles described in Appendix B.
 - a. Postvention Response Coordination Lead (if not CCHD's SPC)
 - b. Therapeutic Support Mobilization Lead
 - c. Data Monitor
 - d. Survivor Support Liaison
 - e. Communication Lead
 - f. Social Media Monitor
9. The most relevant agency makes an outreach call to the decedent's parent(s)/guardian(s) within 48 hours to:
 - a. express condolences;
 - b. obtain permission to use the decedents name and whether the agency may disclose the death was a suicide;
 - c. determine an appropriate Survivor Support Liaison for the family; and
 - d. notify the family that CCHD's SPC will be calling to describe resources available.
10. Postvention Response Team meets within 36 hours to address items on the Immediate Postvention Response Checklist.
11. CCHD's SPC submits Youth Suicide Reporting Form (Appendix D) via secure email to OHA Association of Oregon Community Mental Health Programs (561Report.OHA@dhsosha.state.or.us) within 7 days of the death.
12. CCHD's SPC makes an outreach call to survivor(s) using the Postvention Outreach Call Script (Appendix E) within 7 days of the death.
13. Postvention Response Coordination Lead guides the Postvention Response Team throughout the Postvention Quality Improvement Form.
14. Postvention Response Team determines applicable debriefing needs.
15. Impacted organizations will monitor for the risk of contagion.

Mid-Term Response

1. Approximately 1 month following the death, the Postvention Response Coordinator contacts School Agency to determine any necessary Mid-Term Response activities.
2. Postvention Response Coordination Lead provides the following information to the CCHD's SPC if not involved in the postvention response, for the purpose of the Child Fatality Review:
 - a. An assessment of the effectiveness of meeting the needs of grieving families and families of choice;
 - b. friends or others with relationships with the deceased;
 - c. and the wider network of community members impacted by the suspected youth suicide.
3. Impacted organizations will continue to monitor for the risk of contagion and clustering.

Long-Term Response

1. Approximately 9-10 months following the death, the CCHD's SPC contacts School Agency and/or survivor(s) to determine any Long-Term Response activities.

2. School Agency, and any other relevant agencies, provide the following information to the CCHD's SPC if not involved in the postvention response, for the purpose of the Child Fatality Review:
 - a. An assessment of the effectiveness of meeting the needs of grieving families and families of choice;
 - b. friends or others with relationships with the deceased;
 - c. and the wider network of community members impacted by the suspected youth suicide.
3. CCHD's SPC will coordinate with community partners for provision of QPR, MHFA, and/or ASIST training to community at-large and community partners.
4. Impacted organizations will continue to monitor the risk of contagion.

Decedents 25 Years of Age & Older

Immediate Response

1. Medical Examiner or Medical Examiner Deputy will submit the Suicide Consolidated Risk Assessment Profile (SCRAP) form (Appendix A) within 72 hours after completed death investigation. SCRAP form is securely submitted to the Postvention Response Lead & Postvention Response Lead Supervisor.
2. Law enforcement notifies CCHD SPC within 72 hours of the death.
3. CCHD SPC asks law enforcement for information that will support in the postvention response.
4. CCHD SPC makes outreach calls using the Postvention Script within 7 days following the death.
5. CCHD SPC and other relevant agencies determine resource needs and level of support for survivor(s) and works to connect survivor(s) to supports.
6. Impacted organizations will monitor for the risk of contagion and clustering.

Mid-Term Response

1. Approximately 1 month following the death, the Postvention Response Coordination Lead/SPC determine any necessary Mid-Term Response activities.
2. Impacted organizations will continue to monitor the risk of contagion.

Long-Term Response

1. Approximately 9-10 months following the death, Postvention Response Coordination Lead/SPC contacts survivor(s) and determines any long-term response/resource needs.
2. Impacted organizations will continue to monitor the risk of contagion.
3. CCHD's SPC will coordinate with community partners for provision of Question, Persuade, Refer (QPR), Mental Health First Aid, and/or ASIST training to community at-large and community partners.


APPENDICES

Appendix A

Crook County
Suicide Consolidated Risk Assessment Profile (SCRAP) Form

NOTE:

Medical Examiner or Medical Examiner Deputies complete this [online](#) form within 72 hours of completing death investigations.



Deschutes County Suicide Risk Assessment Profile

Welcome	Decedent Demographics	At Time of Death	Last 14 Days	Last 30 Days
Months or Years Prior	Complete Lifespan			

**Welcome to the Deschutes County
Suicide Consolidated Risk Assessment Project (SCRAP)**

This form is suicide reporting only.
For drug overdose reporting (DOMS) [go here](#).

Medical Examiner Name*

Police Case Number

County Location of Death Deschutes Crook Jefferson Unknown Other

[Proceed to Assessment](#)



[Assessment Definitions Document](#)

Appendix B

Crook County Suicide Postvention Response Form

NOTE:

Suicide Prevention Coordinator/Postvention Response Lead will only ask officers for this information. Officers are not being asked to fill out this form.

1. Deceased Name: Click here to enter text.
2. DOB: Click here to enter text.
3. Date and Time of Death: Click here to enter a date.
4. Physical Location of Death: Click here to enter text.
5. Place of Death: Click here to enter text.
6. Means of Death: Click here to enter text.
7. Circumstances preceding the death (if known): Click here to enter text.
8. City and County of residence: Click here to enter text.
9. School attended or facility where person worked: Click here to enter text.
10. If the deceased is under the age of 24, was the youth in custody of a government agency (e.g. Department of Human Services (DHS), Oregon Youth Authority (OYA), etc.) Click here to enter text.
11. If yes, please list point of contact: Click here to enter text.
12. Ethnicity: Click here to enter text.
13. Race: Click here to enter text.
14. Gender: Click here to enter text.
15. Sexual Identity (if known): Click here to enter text.
16. Survivors & Contact Information Click here to enter text.
17. Please list who found the deceased individual and their contact information: Click here to enter text.
18. Any additional survivors or that should be contacted? Click here to enter text.
19. Additional Notes: Click here to enter text.

Appendix C

Crook County Suicide Postvention Response Team Roles

Crook County Health Department Suicide Prevention Coordinator (or Postvention Response Coordination Lead)

- Responsible for leading the overall postvention response
- Assigns community partners to Postvention Team roles
- Facilitates Postvention Team meetings, utilizing the Postvention Response Checklists
- Coordinates and facilitates mid-term and long-term postvention team meetings
- Gathers information and needs from affected agency, including internal policies and protocols

Therapeutic Support Mobilization Lead

- Assembles a team of behavioral health providers to provide evidence-based therapeutic support. This could include:
 - BestCare Crisis Team
 - Activating other community Critical Incident Stress Management (CISM) trained clinicians. Such clinicians will operate under the direction of the Therapeutic Support Mobilization Lead.
- Provide psychoeducation resources on grieving, depression, PTSD, and suicide to those at risk and to others in the community
- Work with team of behavioral health providers to screen the impacted population for depression, anxiety, and if appropriate provide referrals or link to services

Data Monitor

- Conducts rapid data surveillance, which includes:
 - Calls to 911 or 24-hour Crisis Line related to suicide
 - Contacts to the Central Oregon YouthLine related to suicide
 - Number of visits to the Emergency Room or other care facilities
 - Visits to school-based health centers
 - Additional data sources identified by the Postvention Response Team

Survivor Support Liaison

- Serve as the main point of contact for family/survivor(s)
- Work with family/survivor(s) to commemorate the deceased appropriately and safely
- Gather information on any others at risk
- Provide referrals/link to services

Communications Lead

- Serve as the main point of contact for media on behalf of Postvention Response Team

- Disseminate information and safe reporting guidelines
- Monitor media outlets' communications to ensure safe messaging
- Work with affected agency on best practices for disseminating information
 - i.e., letters for staff to read to students, talking points for public information officers, etc.

Social Media Monitor Lead

- Assemble a team and coordinate with Law Enforcement for monitoring social media to ensure a healthy response to the suicide
- Ensure that Social Media Monitoring Team:
 - Provides accurate, appropriate information
 - Flags any risky posts or comments
- The Social Media Monitoring Team notifies CCHD's SPC to address any potential risks or comments

Appendix D

Crook County Youth Suicide Death Reporting Form

NOTE:

Suicide Prevention Coordinator/Postvention Response Lead will use the [Youth Suicide Death Reporting Form](#) for all youth suicides 24 and younger to the Oregon Health Authorities



Youth Suicide Death Reporting Form (age 24 and younger)

Please provide the most information possible in compliance with applicable confidentiality and privacy laws within 7 days of notification of a youth suicide death to: 561Report.OHA@dhsosha.state.or.us

Today's date: Click or tap to enter a date.

Date you were notified of the death: Click or tap to enter a date.

Date of death (if known): Click or tap to enter a date.

Appendix E

Crook County

Postvention Outreach Call Script

Outreach calls are to be performed by *Crook County Health Department Suicide Prevention Coordinator* unless otherwise specified.

When Caller gets Voicemail:

Hello, my name is [name] and I'm a prevention specialist with Crook County Health Department. I'm calling because it is standard protocol that police notify me when there is a loss like the one you have experienced recently. I'm very sorry about your loss of [name of deceased]. We wanted to take time and make sure you have information on resources available to you and others who may be affected by [deceased's name]'s sudden death. If you'd like to talk about the resources available to you, please feel free to contact me at 541-447-3260. Otherwise, please know that you or your loved ones can call the Crook County Crises Line 24/7 at 541-323-5330 (then press 2 for afterhours support) or visit BestCare which is located at 1059 NW Madras Hwy in Prineville.

When Caller gets Survivor on the Line:

Hello, my name is [name] and I'm a prevention specialist with Crook County Health Department. Do you have a moment to talk? I'm calling because it is standard protocol that police notify me when there is a loss like the one you have experienced. I'm very sorry about your loss of [name of deceased]. I wanted to let you know that I am not a licensed mental health professional, however, I'm calling to provide you with information on resources available to you and others who may be affected by [deceased's name]'s sudden death. Would you be open to hearing about some resources that can help you through this difficult time?

- Crook County/BestCare Crisis Line 541-323-5330 (then press 2 for after-hours crisis support)
- 988, the National Suicide and Crisis Lifeline, is a resource for someone who is needing emotional and/or crisis support. The person can call or text 988, 25/7 and it is free and confidential.
- Grief Share Groups, are offered at a number of different locations, dates, and times in Prineville. You can register and learn more at [GriefShare.org](https://www.griefshare.org).

I'm happy to email all this information to you [Email Address]. Thank you for taking the time to talk with me and take care.

If Survivor is really upset/struggling:

I am not a licensed mental health professional, however when we hang up would you be comfortable if I had a mental health professional call you today?

If yes - explain that you are going to call a mental health professional from BestCare Treatment Services. Expect a phone call today.

If no - explain that it is completely fine and if they decide they do want to talk with a mental health professional to call the Crook County BestCare Crisis Line: Crook County Crises Line: 1-541-323-5330 (then press 2 for afterhours crisis support)

Appendix F

Crook County Survivor Resource Email Template

SUBJECT LINE: Resources

TEMPLATE:

Hi [name],

Here are the resources we spoke about on the phone. See below and attached.

Take good care,
[name]

Resources:

- Crook County/BestCare Crisis Line 541-323-5330 (then press 2 for after-hours crisis support)
- 988, the National Suicide and Crisis Lifeline, is a resource for someone who is needing emotional and/or crisis support. The person can call or text 988, 25/7 and it is free and confidential.
- Grief Share Groups, are offered at several different locations, dates, and times in Prineville. You can register and learn more at [GriefShare.org](https://www.griefshare.org).
- American Foundation for Suicide Prevention: This national suicide prevention organization provides an opportunity for survivors of suicide loss the opportunity to speak with volunteers who are themselves loss survivors through their Healing Conversations Program. Learn more here: [Healing Conversations: Personal Support for Survivors of Suicide Loss \(afsp.org\)](https://www.afsp.org)

Appendix G

Crook County Postvention Notification Email Template

SUBJECT LINE: Youth Postvention Notification

TEMPLATE:

Hi,

There has been a sudden death of an individual 24 years of age or younger. This death is affecting the communities of [city name(s)]. A postvention response is currently underway and [name] is the Postvention Response Coordination Lead for this incident. If you suspect this death is affecting your organization, please contact the Crook County Postvention Response Coordination Lead as soon as possible by email at [email] or phone at [phone number]. Please only share this information with others who can assess how the death is impacting their organization.

Please remember to use [safe messaging](#) when communicating about suicide.

Please note, this notification serves two purposes:

1. To alert you and your organization to meet the needs of the population(s) you serve, and
2. To request that you communicate with the lead identified of any noticeable change in the population that you serve (e.g., increase in service volume, heightened mental health distress or any other information). This information assists the Deschutes County Prevention Program to monitor and address the situation appropriately.

Appendix H

Crook County

Immediate Suicide Postvention Response Checklist

Postvention Team Orienting:

- Suicide Prevention Coordinator/Postvention Response Coordination Lead to share Law Enforcement-verified facts about the suicide
- Discuss any possible risk factors and warning signs involved
- Identify survivors and vulnerable individuals
- Review affected organizations(s)' internal policies and procedures related to postvention activities

Therapeutic Support:

- If the deceased was a primary or secondary education student, determine need for Crisis Response Team
- Determine need for community Critical Incident Stress Management (CISM) trained clinicians
- Determine clinicians to be part of the Therapeutic response
- Identify organizations and individuals in need of therapeutic support

Survivor Support:

- Verify if survivor(s)/family have received an Outreach Call from CCHD Suicide Prevention Coordinator/Postvention Response Coordinator
- Determine outreach strategy

Social Media Monitor:

- Create a standard template as a response to social media posts and comments
- Determine individuals to be part of the Social Media Monitoring Team

Communications:

- Create agreed upon talking points that respect survivor(s)/family wishes
- Identify media outlets to disseminate Safe Reporting Guidelines
- Determine organization/agency contacts to provide information on postvention best practice procedures

Data Surveillance:

- Identify data sources to track i.e., crises phone line, Youthline contacts, ER visits, SBHC visits, 911 calls, etc.
- Identify frequency for surveillance updates provided to Postvention Response Team

Mid-Term Postvention Planning

- Schedule Mid-Term Postvention Team Meeting 2-3 months from the death

Long-Term Postvention Planning

- Schedule Long-Term Postvention Team Meeting 9-10 months from the death

Quality Improvement

- Complete the Postvention Response Quality Improvement Form as a Postvention Team

Debriefing

- Determine appropriate debriefing resources for Postvention Response Team

Appendix I

Crook County

Mid-Term Suicide Postvention Response Checklist

Risk Assessment:

- Identify how on-going risk assessment of impacted individuals is being provided through natural organizational contacts (i.e., higher education counseling, school counseling, workplace-provided counseling, etc.)

Survivor Support:

- Survivor Support Liaison provide update on survivor(s)/family
- Identify any additional supports or resources that need to be provided for survivor(s)/family

Data Surveillance

- Review surveillance data
- Determine need of additional postvention activities or interventions as necessary based on data

Long-Term Postvention Planning

- Confirm scheduled Long-Term Postvention Team Meeting 9-10 months from the death

Quality Improvement

- Review the Postvention Response Quality Improvement Form as a Postvention Team; add any additional information as necessary at this point in the response

Appendix J

Crook County

Long-Term Suicide Postvention Response Checklist

Risk Assessment:

- Identify how on-going risk assessment of impacted individuals is being provided through natural organizational contacts (i.e., higher education counseling, school counseling, workplace-provided counseling, etc.)

Anniversary of the Death

- Determine outreach to impacted organization(s) and survivor(s)/family regarding best practice for anniversaries

Quality Improvement

- Review the Postvention Response Quality Improvement Form as a Postvention Team; add any additional information as necessary at this point in the response

Appendix K

Crook County

Online Search Recommendations

Postvention Response Leads and/or Postvention Response Coordinators should consider the following recommendations when searching for decedent information online. The purpose of this process is to identify impacted populations who are grieving the death and/or evidence of contagion. Team members are encouraged to limit their search to the most relevant information and involve others when necessary.

- Online Search Methods
 - Use Google to search for general decedent information – add key words such as “death”, “obituary”, “suicide”, “GoFundMe”, decedent address and/or hometown to ensure accurate identification
 - Use social media platforms to identify decedent and learn further information. Always search all known social media platforms regardless of decedent age as they often are linked. Relevant platforms to search - Facebook, Instagram, Tik Tok, etc.
- Initial Decedent Identification
 - Confirm spelling of decedent name and/or nicknames and attempt searches with various alternative spellings if unsure of accuracy
 - Confirm unique identity of decedent among others with the same name by matching of known information – age, race/ethnicity, residence, family members etc.
- Identification of Affected Populations or Contagion
 - General Guidance – Review photos and comments to gather information and explore related profiles as friends and families often comment publicly on deaths. Parents and caregiver profiles are particularly useful sources of information.

Appendix L

Crook County

Postvention Response Quality Improvement Form

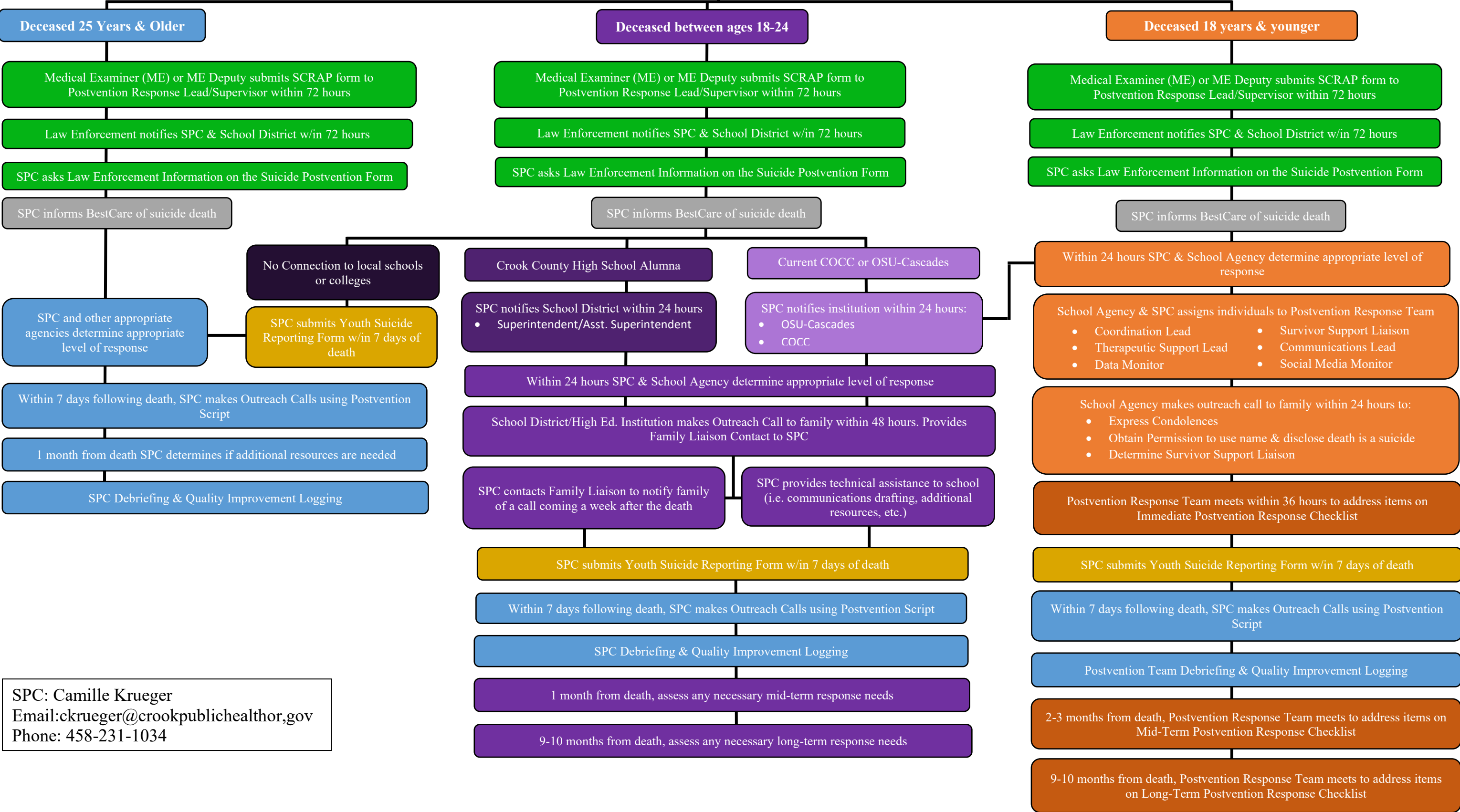
1. What worked well? [Click here to enter text.](#)
2. Identify areas that need improvement: [Click here to enter text.](#)
3. Identify who else should be involved in the future: [Click here to enter text.](#)
4. What would we do differently in the future? [Click here to enter text.](#)

Appendix M

Crook County

Suicide Communication Protocol Flowchart

Suicide Loss



SPC: Camille Krueger
 Email: ckrueger@crookpublichealthor.gov
 Phone: 458-231-1034