

THE RIVERSIDE TRAUMA CENTER NEWSLETTER

Trauma Center Expands Statewide

After its official launch in 2006; the next big step for Riverside's Trauma Center came just a year later. In November 2007, the Department of Public Health awarded funds for the Trauma Center to expand trauma response and suicide response programs statewide (with the exception of Boston and Cambridge).

To establish the concept of "centralized coordination, localized response," the Riverside Trauma Center has already teamed up with three agencies: Behavioral Health Network (Springfield), South Shore Mental Health (southeastern Mass.) and The Bridge of Central Massachusetts (Worcester) to develop a statewide trauma response network.

Riverside is training staff from these partner agencies and helping them develop their locally-based response teams. The Trauma Center is working on developing partnerships with additional providers in the future.

Physician Outreach Effort for Suicide Prevention

Studies have shown that 80% of individuals who die by suicide have visited their Primary Care Physician (PCP) within 30 days of their death. As Primary Care Physicians are critical gatekeepers for the demographic groups in Massachusetts at highest risk for suicide – elders and middle-age white males – this information indicated a need for further study. The statistics prompted Riverside's Dorothea Iannuzzi, LICSW, and Larry Berkowitz, Ed.D., to conduct an outreach project through the Department of Public Health funded suicide prevention program at the Riverside Trauma Center.

Riverside program directors and coordinators provided a list of PCPs who would be responsive to a suicide prevention education effort. In total, 100 primary care practitioners were contacted across the state, representing three broad-based geographical areas served by Riverside: Northeast Massachusetts, the Metro Suburban area (Newton-Norwood), and the Blackstone Valley.

Each practitioner was sent a letter describing the project, along with a packet of general information about suicide assessment for Primary Care Physicians. Included in the packet was a "prescription pad," specific to each geographical area, listing all available mental

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International Expert on Trauma and Suicide Prevention Joins Trauma Center

Robert D. Macy, Ph.D. has long been a partner with Riverside's Trauma Center, leading trainings as well as assisting on responses. Starting on July 1, 2008, he will officially join the Trauma Center part-time as the Director of Training.

Dr. Macy developed the trauma response model known as PTSM: Post-Traumatic Stress Management. He was instrumental in assisting the South Boston community following a cluster of suicides in the 90's, and since then has responded to numerous natural disasters and war zones including those in Turkey, Bosnia, and Israel.

Robert Macy is also the founder and Executive Director of both the Children's Trauma Recovery Foundation and the Boston-based Center for Trauma Psychology.



Riverside Trauma Center: Suicide Prevention Services

Massachusetts spends more money, per capita, on suicide prevention than any other state in the U.S. As part of the Commonwealth's efforts, Riverside provides several suicide prevention and postvention programs.

Using a public health approach to decreasing suicide, Riverside Suicide Prevention Specialist Dorothea Iannuzzi provides training for people who work with elders - the age group with the highest rate of suicides. The training helps case managers, home health aides, visiting nurses, nursing home staff and other "gatekeepers" identify warning signs of depression and suicide, and make referrals for further evaluation, medical consultation and counseling.

In addition to gatekeeper trainings, Riverside's Trauma Center provides "postvention" services - responding to the needs of schools and other youth-serving organizations following the suicide death of an adolescent or young adult. In this case, the Center works both to assist youth as they mourn the loss of a peer, and also to prevent further suicides that may result from a contagion effect. Approximately 2-5% of suicides by young people are thought to be attributable to contagion.

In our postvention service model, the Trauma Center's Post Traumatic Stress Management model is combined with education of students, faculty and parents on the signs and symptoms of depression and brief depression screenings for students. Our unique postvention has been presented at several conferences and is gaining wide recognition as an innovative approach to responding to the tragedy of youth suicide.

The Trauma Center also trains mental health clinicians to better assess and manage suicide risk. Jim McCauley, LICSW, Associate Director and Larry Berkowitz, Ed.D., Director of the Trauma Center, have been approved to teach a full day "best practices" curriculum developed by the American Association of Suicidology.

Riverside is taking an active role in expanding suicide prevention efforts in Massachusetts. Through consultation with schools, municipal agencies, and communities, and active involvement in the Massachusetts Coalition for Suicide Prevention, the Needham Coalition and Northeast Massachusetts Coalition for Suicide Prevention, Riverside is partnering with communities throughout the state in this essential, life-saving effort.

Update on Trauma Center Activities

During the Fall and Winter 2007, Trauma Center clinicians responded to a number of critical incidents, including:

- Suicides of high school students: providing postvention services to one community, and consultation to another
- Accidental and medical deaths of students in three communities: providing psychoeducation and support
- Murder of social worker in North Andover: supporting colleagues and co-workers in multiple agencies
- Accidental death of an athlete during a competition in Worcester: providing support to peers and coaches

Presentations recently given by the Trauma Center:

"Assessing and Managing Suicide Risk: Core Competencies for Mental Health Clinicians"

Presented to 30 school counselors and nurses at the Newton Public Schools by **Larry Berkowitz**, Ed.D

"Psychological First Aid: Helping Communities Respond to Disaster"

Presented at Regis College and the Wellesley Public Library by **Robert D. Macy**, Ph.D. & **Larry Berkowitz**, Ed.D to over 120 clinicians, case managers, community representatives and school counselors.

"Postvention: Responding to Schools and Communities following Adolescent Suicide"

Presented by **Jim McCauley**, LICSW & **Larry Berkowitz**, Ed.D at the State of Massachusetts 7th Annual Suicide Prevention Conference to a state-wide audience of clinicians and school counselors, and the American Association of Suicidology Annual Conference to a national audience of clinicians, school counselors and prevention specialists.

"How a Community Survives: Needham Coalition for Suicide Prevention's Experience in the Community"

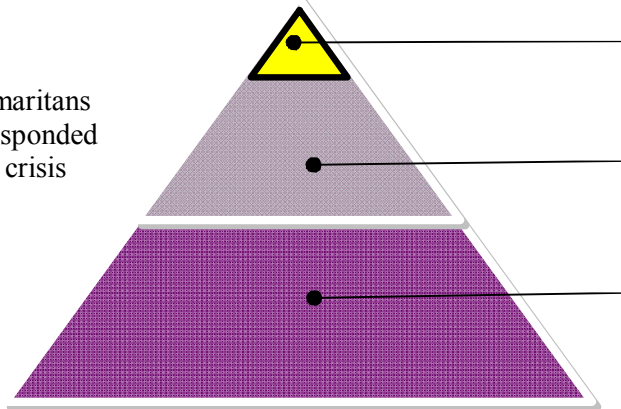
Presented at the State of Massachusetts 7th Annual Suicide Prevention Conference to a state-wide audience of community representatives and prevention advocates by **Jim McCauley**, LICSW (co-presenter)

FACTS & FIGURES

In Massachusetts, the rate of suicides was 2.6 times higher than homicides (N=469 and N=177 respectively) in 2005 (the most current year for which data is available); making suicide a leading public health issue for the state.

118,000

In 2005, the Samaritans organizations responded to over 118,000 crisis calls.



(Chart and data from Mass. Dept. of Public Health)

469

Completed Suicides (2005)

4,356

Hospital Stays for Self-Inflicted Injuries (FY2005)

6,956

Emergency Department Visits for Self-Inflicted Injuries (FY2005)

Nationally...

- 32,439 individuals completed suicide in 2004...that's 88.6 people each day...one person approximately every 16.2 minutes.
- Suicide is the 11th leading cause of death in the United States; however, it is the 8th leading cause of death for males and the 3rd leading cause of death for youth (ages 15-24), exceeded only by accidents and homicides. Homicide is the 15th leading cause of death. More Americans kill themselves than are killed by others.
- The elderly (ages 65+) have the highest rate of completed suicides. They are at a 50% higher rate than any other age group. Approximately 5,198 elders completed suicide in 2004. *Depression is not a normal part of ageing!*
- Women are three times more likely to attempt suicide than men, but men are four times more likely to die of suicide than women.

Physician Outreach, continued from Page 1

health resources, as well as support lines, for people feeling at risk for harming themselves. One component of this strategy was the assumption that medical patients are accustomed to being handed a prescription by their doctor. Therefore, using these pads as a referral mechanism for mental health treatment might help destigmatize the referral process, and underscore the importance of mental health as an important component of overall wellness.

Participating PCPs asked two questions of all patients. These particular questions can be used with patients of any age, and have been shown to be valuable suicide prevention screening tools. The questions are:

1. "Over the past two weeks, have you felt down, depressed, and hopeless?"
2. "Over the past two weeks, have you felt little interest or pleasure in doing things?"

A follow up survey was sent to all 100 practitioners regarding the usefulness of the material made available to the physicians. To date, medical providers who reported back to us noted that the information was useful and improved the quality of care for their patients.

SUICIDE PREVENTION RESOURCES

Here are a few websites with information on understanding and preventing suicide:

Massachusetts Coalition for Suicide Prevention

www.masspreventssuicide.org

Suicide Prevention Resource Center: SPRC

www.sprc.org

American Association for Suicidology

www.suicidology.org

SUICIDE PREVENTION TRAININGS OFFERED

Trainings offered through Riverside Trauma Center include:

Assessing and Managing Suicide Risk

Full day curriculum for mental health clinicians created by the American Association of Suicidology

Gatekeeper Trainings on Recognizing Warning Signs of Depression and Suicide in Elders

For agencies working with elder populations

Trainings on Warning Signs of Depression and Suicide in Youths and/or Adults

For schools, workplaces and community organizations

For more information or to set up a training for your organization, contact Larry Berkowitz at 781-433-0672, ext. 321, or lberkowitz@riversidecc.org

Add Your Name to our Email List

To receive this newsletter by email, announcements of upcoming trainings and events, and other pertinent information, send an email with "Trauma Center Email List" in the subject line to:

bsuttle@riversidecc.org

How Can The Trauma Center Help You?

Trauma Center Staff are available 24-hours a day, 7-days a week to assist in the event of a "critical incident." These incidents may include a homicide, suicide, or other sudden, unexpected death or disturbing event that affects a school, community or organization; a large scale accident or fire; or a natural disaster.

When calling, ask to speak with a Trauma Center manager—we will provide immediate assessment, consultation or support, as needed. Specialized training and consultation are also available to meet your organization's specific needs.

The Trauma Center currently serves all of Massachusetts, with the exception of the cities of Boston and Cambridge.

**Contact us by calling our 24-hour response line at:
1-888-851-2451**

Riverside Community Care

THE HELP YOU NEED CLOSE TO HOME

1-888-851-2451

www.riversidecc.org