

From: Bailey, Melissa <Melissa.Bailey@vermont.gov>

Sent: Thursday, March 2, 2017 1:33 PM

To: Anne Donahue; billlippert@gmavt.net

Cc: Fox, Mourning; Reed, Frank; Hentcy, Kathleen; Harrigan, Emma; Gobeille, Al; Dragon, Paul; Thompson, Shannon; Biss, Charlie

Subject: Follow up for tomorrow

Good Afternoon,

We met with Secretary Gobeille and Fox and Shannon will be testifying tomorrow on the "Budget Proposals of the House Health Care Committee's Mental Health Subcommittee". As for section A we feel that the DAs are more appropriate to provide the information related to this proposed appropriation. Since this is the work they do they will be able to provide the details needed.

As for H.184. DMH fully supports the concept of a suicide fatality review board but remains concerned that the only information we will have access to are the death certificates which provides – *Name, Address, DOB, DOD, Gender, diagnosis related to cause of death and a narrative description*. This information:

- *Would* provide some high level trends and patterns;
- *Would not* provide information pertaining to prevalence or risk factors for preventable deaths
- *Would not* provide information pertaining to evaluating high-risk factors, current practices, gaps in systematic responses, and barriers to safety and well-being for individuals at risk for suicide;
- *Would not* give us information to appropriately inform the implementation of suicide prevention activities and supporting the prioritization of suicide prevention resources and activities;
- *Would* give us information on recommending improvement to the sources of data relative to investigating reported suicide deaths and preventing suicide.

Providing a summary of data that comes from the death certificate is possible but drawing conclusions or making in depth recommendations to improvements to suicide prevention from this information is not recommended. Lastly, other states that review cases in more detail are not able to do more than a handful of cases a year due to the amount and intensity of the cases. In H. 184 asks for "*each death by suicide occurring in the State*" which is over 100 cases a year. Again we support the concept but to do this well it requires people resources to really extract the information. Fox will discuss in more detail with you tomorrow and if possible we would both like to sit and discuss after Town Meeting Week.

Thank you, I will be checking emails and will try to respond to additional requests and again Fox and Shannon will be there tomorrow for DMH

Melissa Bailey, LCMHC
Commissioner
Department of Mental Health
Agency of Human Services
802-241-0122
280 State Drive, NOB 2 North
Waterbury, VT 05671-2010
Melissa.bailey@vermont.gov