On June 5-6, 2018, SAMHSA’s Service Members, Veterans, and their Families (SMVF) Technical Assistance (TA) Center convened a meeting as follow up to the Mayor’s Challenge to Prevent Suicide Among SMVF Policy Academy. The purpose of the meeting was to review progress and further develop the strategic plan.

Twenty participants took part in the meeting over the course of the two days. The group included representatives from a diverse group of agencies such as the City of Albuquerque, New Mexico Department of Veteran’s Services, Albuquerque Mayor’s Office, Bernalillo County, New Mexico Crisis and Access Line (NMCAL) and the New Mexico Army National Guard.

Day 1: Setting the Stage

Team Update:
Ellen Braden, team lead, welcomed everyone and shared that the larger group has been meeting twice a month and smaller workgroups are meeting regularly, too. Since the Policy Academy, the team’s focus has included:

- Employment
- Approaching gun shops (New Hampshire training)
- Identifying and learning more about programs and in the community that add to what they are currently doing (i.e., county behavioral health initiative)
- Incorporating best practices into media, media plan and messaging.
Additionally, the team has identified a major concern to be the connection from discharge into actual treatment, though no particular initiative has yet been taken.

The team would like to engage the mayor in the planning process and noted that Suicide Prevention Month (September) will provide some opportunities.

Mitchell Lawrence, New Mexico state team lead, added that a legislative bill passed that establishes a veteran suicide task force. Members of the task force will be crossing the state to hold listening sessions with community members who have experienced veteran suicide. Some money has been secured and, because of Albuquerque’s work on the Policy Academy, Mr. Lawrence has allocated the majority of the funding to start the task force in Albuquerque.

Activities since the Policy Academy:
- As of May 30, 2018, Metropolitan Detention Center, detox facility, community engagement, youth transitional living services, and community connections (housing) added the question, “Have you or a family member ever served in the military?” to intake screening.
- Generated a list of employment services with contacts including, more recently, Goodwill Industries and Vet Center and assembled a list of employment providers throughout New Mexico.
- Community engagement teams are operational and receiving references for follow-up care from University of New Mexico (UNM) Hospital (after inpatient discharge with suicidal ideation)
- Motorcycle groups/clubs helped with gun shop initiative last year; they will start to attend small group meetings. The Legion Riders are trained to provide mental health and suicide prevention support and Patriot Riders can help identify where veterans are.
- Active Crisis Intervention Team program established four mobile crisis teams (only been rolled out about a month)

Team Discussion:
Moving forward the team agreed that they will continue to meet twice per month. One meeting will be dedicated to enhancing partnerships. The second meeting will be to update the action plan.

Starting in July, every second Wednesday meeting will be open to existing and potential community partners to build the team’s network and share information. Every forth Wednesday, the team will meet for group work and review tasks and action items.

As team members discussed the strategies in the CDC model, they noted that their community has an opportunity to promote connectedness by working to get active duty members engaged in community activities. Team members felt that this could help to build relationships with people who are currently serving, which would then help with connections to networks and resources when service members transition out of the military. The team identified ways to work with the Adjutant General, as a starting point, to explore opportunities to connect people currently serving in the military to community events.
Subject Matter Expert Consultations:
*Terresa Humphries-Wadsworth, Ph.D. (SME)*

The team discussed engagement and lack of connection. Dr. Humphries-Wadsworth encouraged the team to start by planning for the audiences that you want to reach first, identify what their needs and resources are, and then plan next steps for the next broader audience. The team asked for clarification as to whether they were compiling resources for providers or end users. Dr. Humphries-Wadsworth confirmed that it is for both. The team was also briefed on the value of language and consistent messaging in training, like Ask, Care, Escort (ACE) and Applied Suicide Intervention Skills Training (ASIST).

Team members also discussed outreach to engage veterans who are not involved with veteran affiliated organizations and families that are no longer connected to the military. Employment worksites, such as the Albuquerque Police Department comprising 10% veterans, and faith communities were identified. Dr. Humphries-Wadsworth suggested tailoring to the intended audience by considering where they work, where they play (recreational facilities), where they pray, and where they attend cultural events.

The team also looked at resources for supporting family members at risk, including children. The team is considering mental health first aid (which many county staff have received) and resiliency training for citizens. One idea is to offer the trainings through school parent nights or community centers. Another idea is to integrate resiliency training into high school curricula, engaging parents in student homework via an assignment where, perhaps, the child interviews the parent.

Dr. Humphries-Wadsworth also suggested that the group consider universal screening, what happens after screening, and how people will get referred and connected to quality care.

Following the subject matter consultation, the team began updating their action plan.

**Day 2: Moving the Plan Forward**

Day 2 opened with a recap and follow-up of discussions from Day 1. The team continued reviewing and updating the action plan.

**Missing at the Table:**
Throughout the course of the two days, the team identified individuals and entities missing at the table. Those included:

- University of New Mexico (especially Vet Center)
- Faith-based communities
- Economic Development – City
- Joseph Dorn
- Lisa Graham – post hospital discharge planning
- Jaclyn Daugherty (Department of Health, Santa Fe, new suicide prevention coordinator (Ellen is keeping her in the loop, soon to attend meetings)
- Theresa Rhinehart (active duty component, integration into community)
Team Infrastructure:
The team also spent time identifying team structure. The team established workgroups, workgroup leads, and workgroup participants. The following workgroups were established:
- Education, Training, and CEUs
- Post Hospital Discharge
- Media
- Supporting Active Duty Members

TA REQUESTED/RECOMMENDED
- SMVF TA to send North Dakota Cares (ND Cares) information to Mandy regarding veteran owned businesses (“served and still serving”)
- SMVF TA to send lessons learned on partnering with colleges and universities, CEUs, military culture, and suicide prevention training
- SMVF TA to share SAMHSA GAINS crisis training information with Ellen and team
- SMVF TA to share information regarding Phoenix housing initiatives, landlord/tenant
- Team requested Lisa Salazar’s (Los Angeles Team) slides regarding LA’s employment initiative “10,000 Strong”

ACTION ITEMS AND NEXT STEPS

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<th>State Team</th>
<th>Comments</th>
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<td>2. Provide feedback on Suicide Prevention Resource Center (SPRC) talking points and elevator pitch</td>
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<td>3. Invite members of faith-based community to July meeting; explore possible partnerships to promote connectedness</td>
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<td>4. Compile and update service and resource list</td>
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<td>Make sure info gets to Wendy - New Mexico Crisis and Access Line (NMCAL)</td>
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<td>5. Add team representative from the Albuquerque and Bernalillo County Fire Departments</td>
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<td>6. Forward ND Cares information</td>
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<td>7. Forward GAINS information on SMVF CIT training</td>
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<td>8. Share Phoenix information on landlord/tenant resources</td>
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<td>9. Forward Lisa Salazar’s Workplace Conference slides</td>
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**APPENDICES**

Appendix I. Participants List/Sign-in Sheet  
Appendix II. Site Visit Meeting Notes  
Appendix III. Evaluation Report  
Appendix IV. Action Plan
APPENDIX I: PARTICIPANT LIST
Day One June 5, 2018

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## APPENDIX I: PARTICIPANT LIST
### Day Two June 6, 2018

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Day 1

Announcements and Updates:

House Bill 47 - Emergency Financial Assistance Fund for National Guard members starts July 2018

Fermin: Reached out to motorcycle groups/clubs that helped with gun shop initiative last year; they will start to attend small group meetings. Legion Riders are trained to provide mental health and suicide prevention support; and Patriot Riders can help identify where veterans are. They could be pulled in for other action items

Ellen: Holding bi-monthly meetings, everyone attends. Smaller workgroups are meeting regularly too. Topics they are addressing include:

- Employment
- Approaching gun shops (New Hampshire training)
- Identifying and learning more about programs and in the community that add to what they are currently doing (i.e., county behavioral health initiative)
- Incorporating best practices into media, media plan and messaging (Mindy + Bobby)
- Added an additional action item: understanding what supports and service are available from time of discharge into actual treatment; identified as a significant area of concern and interest

Discussion:

1. Challenge Getting University of New Mexico to the Table
   - They have the county data
   - Is there an entity at the state level who has connection with University of New Mexico?
   - Would hope/expect the Veteran Resource Centers (VRCs) are in good standing with university deans and presidents
   - They are a major medical trauma center for the state; there’s lots of training between VA and university system
   - Military trauma team doing 3-4 day training
   - Psych emergency center working with community engagement teams
   - Huge system with different requirements even federally – hard thing: knowing who to talk to
   - Dr. Toma and Dr. MacGyver have been helpful in the past; have to foster relationships and utilize who you know
   - What is our ask? That may determine who we go to
   - A good starting place is to see what’s available through the VRC
     - There is a new list of who is overseeing VRCs coming out – Mitch will get updated list out to team

2. Messaging:
• Mind and Bobby met last week to discuss how to roll out the mayor’s message; already came up with mission statement for the group
• Bobby handles marketing for the city as an ancillary task – he’ll be point of contact for messaging in the city (e.g., posters in buses and other outreach message points)
• First draft of elevator pitch is being reviewed; needs to go to SAMHSA team
• Mindy will work on first draft of letter for mayor to send out (a broader message that ties into campaign initiatives)

3. Other Discussion Points:

• Discussion of New York City Department of Veterans Services’s approach to behavioral health and other services for veterans
• Major issue in New Mexico is funding; need to tie into existing programs and services, etc. versus establishing new initiatives
• “Working to make no door a wrong door”
• Fermin: Proposal for training for mental health, pitched that $5000 gets used for the marketing of this group
• Evidence based best practice training – Mindy and Fermin to discuss this more
• Group is also working to find ways to include the mayor in what’s happening, bring the mayor’s office into meetings; suicide prevention month may provide opportunities

4. Other Updates:

• Mitch: Legislative bill passed establishing veteran suicide task force; will across the state conducting listening sessions with communities that have experienced veteran suicides; some funding has been secured; Mitch is use the bulk of the funding to start the task force in Albuquerque
• Brenda: Possible location for 16 community-based outreach centers (CBOCs) and 4 vet centers
• Deb: Military One Source piece; outreach to two colleges
  o Free non-medical counseling is available over the phone, online chat, video – the access is great; pushing for lower levels of care before something rises to level of medical concern
  o Support during transitions from the military, currently 6 full months of full eligibility; soon to be extended to a year
  o Yellow ribbon: process for service members, and a during deployment, pre-reunion process for service member families (resources and connections)
• Ellen: Training around coping skills and problem solving as preventative – on a large scale, what would that look like?
  o Shannon: University, life skills training; Army, resiliency skills training?

• Mitch: What are the best practice for families with regard to suicide prevention – both preventing suicide among family members or role family may play in prevention of suicide for service members and veterans; guidance for families; safety plans

• Brenda: New Mexico VA has given away over 75,000 gunlocks; rolled out as child safety, not suicide prevention
  o Shannon passes out gunlocks at events
  o Chris: Community policing council – engages with community (e.g., coffee with a cop, the fast and the fuzz) – there may be ways for the team to work with CPC and already existing events
  o Domestic Violence Resource Centers (DVRCs)
  o Mitch: Veterans see their guns as tools not so much as lethal means – so they may not see the connection with guns and suicide like someone who isn’t as experienced with guns

5. Subject-Matter Expert Technical Presentation: Teressa Wadsworth-Humphreys

• Ellen: Engagement, lack of connection – how do we identify who needs to be connected and what do we connect them to? Who is the target audience for our contact list? Who are we targeting for information and outreach? Who should we be connecting with? Are we compiling resources for providers or end users?
  o Teressa: “Yes, it’s both” – homelessness, education, etc. a navigator could support both; to start, plan for the audiences you want to reach first and what are their needs and resources, then what’s the next step for the next broader audience

• Regarding working with families of a service member at risk: How do you identify families? How do you provide authentic and genuine connection with them? Who has access to service member families?
  o Mindy: Airforce, Army National Guard
  o Green Dot training—volunteer base program for male and female spouses of service members

• What is being used to train leadership and active duty locally?

• Language is important across trainings; it makes it easier for families and members at risk
  o Mindy: Training uses language of ACE (Ask, Care, Escort) - common suicide prevention language, entry level suicide prevention training, and goes up to ASIST (advanced intervention)
  o Shannon: Family Readiness Group (FRGs) are struggling, trying to include them in ACE training with a more solid base of family involvement
  o How to connect with families that are no longer military connected? Goes back to how will we find them.
Outreach is often when we get to engage veterans and families

What about veterans that don’t want to engage with a veteran affiliated organization? Where else do they show up?

Faith community involvement – that’s been a barrier for us

Worksites – major employers, where are veterans getting employed after service?

Tailor to the audience: where do they work, where do they play (recreational facilities), where do they pray, where do they attend cultural events

Supermarkets

It’s not uncommon for grandparent to be raising children of veterans; public schools

About 10% of the Albuquerque Police Department is made up of veterans… DOE (Couriers), New Mexico is our economy; we don’t have jobs here

- Active CIT program; four mobile crisis teams (only been rolled out about a month)

- Resources for supporting family members at risk: Do they understand warning signs and what to do if warning signs are present? Crisis line call? Who has had suicide intervention and military culture training? Who of the primary care, behavioral health, substance use, mental health providers have had training in suicide intervention and military cultural competency training? VA has free online training.

- Vetting component can be challenging; liability concerns as well

- You can offer training you would like clinicians to go through and then say these people have completed this training instead of a referral list

- Training for veteran-owned businesses and gun shop owners to be able to provide safe zones and connect veterans and their families to resources

- We’re considering mental health first aid (the county has trained many staff) and resiliency training for our citizens – how would we best offer that?
  - We could offer training through schools, which have parent nights, or community centers
  - John Garvel – Mindy will check name and send contact info
  - Schools, resiliency training for high school students—may be able to pull parents into that via a homework assignment, where child interview parent or something like that (integrate into curriculum)
  - Shannon: Teachers are interested in suicide prevention training; they actually requested ASIST training
  - It is a chapter in the state health class, so it depends on how long a teacher wants to spend on it
  - Team up with Red Cross for First Aid training
  - Athletic groups, coaches
  - Air Force physical fitness and resiliency training – perhaps that could be offered in high schools
- Youth and family programs host a camp, held annually – might be worth looking at their training, activities, what they do
- OBGYN, mental health
- Primary care may not come through physician, may come through the nurse
- Training has been offered to primary care providers in the past - challenging

- How to measure if training/initiatives are effective?
  - All high schools, or identify one or two with focused intervention where teachers are getting trained, resiliency officer is training teachers and coaches; some schools do it and some don’t, then you can compare (year or semester)

- Teressa - Consider: Universal Screening – what happens after the screening, how do they get referred and connected to quality care? Think through that whole process
  - Mindy - We were talking about screening like “Ask the Question,” not screening for suicide risk
  - OBGYN, mental health
  - Primary care may not come through physician, may come through the nurse
  - Training has been offered to primary care providers in the past - challenging

Note: Michelle Cleary sent SAVE Psych Armor/VA video to Mitch
To do
Send review notes to Margie/Maryanne FW
Team: By 1/25 send list of contacts/interests FW to Summar
- specific strategies
- plan drafts 1st to invite new participants

Get UNM to table
- Mandi
- Red Cross
- Coaching/Polling
- Army's Youth & Family
- David Plaza - Goodwill re Reserve Component

Missing at Table
- UNM (equally Vet Center)
- Economic Dev City
- Joseph Dom
- Lee Graham

Supporting Active Duty Members
- Subgroup
- Daniel
- Mitch
- Chris
- Mindy
- Shannon
- Deb
- Theresa

Media Subgroup
- Mindy
- Bobby

Educational Training/SCAs
- Subgroup
- Brenda
- Allen
- Elmore
- Tami
- Mindy
- Melissa

Post Hospital Discharge
- Transition Planning
- Subgroup
- Allen/Margaret
- Jon Kehoe?
- Gilbert
- Misty Pilgrim?
1. How would you rate the onsite TA session overall?

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2. Please rate the usefulness of the following strategic planning session activities:

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3. What was most helpful about the onsite TA session?
   - It gave us an opportunity to clarify next steps regarding our particular task.
   - The in-depth discussion.
   - The facilitation-making sure details were captured accurately-ensuring plan. SO HELPFUL!! Thank you!
   - Collaboration, strategizing, and network contacts.
   - The group contact interactions for brainstorming.
   - Next steps and specificity in deadlines.
   - Organization of processes and tasks. Overview of successes.

4. How would you improve the onsite TA session?
   - N/A
   - N/A
- If more of the team were able to attend.
- Hands-on and/or various learning styles considered in the presentation.
- That all players were present for necessary steps.
- Not possible! Both facilitators were excellent-kept us on track and engaged in the process.
- Full participation from all stakeholders.

5. **How would you rate the facilitator’s/subject matter expert’s knowledge of the subject?**

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6. **How would you rate the facilitator’s skills on presenting?**

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7. **How would you rate the onsite support of the Technical Assistance Center’s staff?**

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<td>0.00% (0)</td>
<td>0.00% (0)</td>
<td>0.00% (0)</td>
<td>16.7% (1)</td>
<td>83.3% (5)</td>
<td>4.83</td>
</tr>
</tbody>
</table>

8. **What three objectives would you like to accomplish in your work as a result of this technical assistance?**
- Contact other states/or best practices, create training program/toolkit for businesses, and have to communicate message to businesses.
• Engage larger team for buy-in of revised plan, have the Mayor roll out messaging, more involvement of Veterans in larger group, and actual completion of tasks.
• Action plan, individualized goals and objectives, continued follow-up, and increased communication with contacts.
• More experience with other community entities.
• Establish contacts with existing resources, define and refine my main task, and coordinate more efficiently with fellow stakeholders.

9. What is the biggest challenge you face with respect to accomplishing these objectives?

• Time is my biggest challenge. Only person in my department for entire state. Creating a new program from scratch. Funding.
• Time- workload allowing for all the work that is necessary. Thank you Michelle and Jasmine! You both are amazing!
• More involvement with Policy Academy and/or establish annual conference.
• Having other community partners be able to devote time for required tasks.
• Follow-up by fellow stakeholders.
APPENDIX IV: ACTION PLAN

Mayor’s Challenge to Prevent Suicide Among Service Members, Veterans and their Families

MISSION STATEMENT: End suicide among Service Members, Veteran's and their families by building safer, stronger, and engaged communities.

<table>
<thead>
<tr>
<th>STRATEGY: PROMOTING CONNECTEDNESS (PRIORITY 1)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Action Items:</strong></td>
</tr>
<tr>
<td>Identify Veterans accessing care from existing partnerships who are not in VA services</td>
</tr>
<tr>
<td>1. Identify number of Partners for Mayor’s Initiative Today</td>
</tr>
<tr>
<td>3. Increase number of Veterans identified through new partners</td>
</tr>
<tr>
<td>• SSVF</td>
</tr>
</tbody>
</table>
- Vocational Rehab and Employment - Kathy Nelson
- Veteran Service Officers (VSOs)
- NAMI – ask about peer-based initiatives (Margarita will reach out to Betty)
- Faith-based community:
  - Albuquerque Interfaith (Ellen)
  - Sage Brush (Wendy)
  - United Methodist (Shannon)
  - Archdiocese (Mindy)
  - LDS (Mindy)
  - Catholic Charities
  - Center for Spiritual Living (Wendy)
  - Baptist Church, Commander Hale (Mitch)
  - Explore setting up faith-based subcommittee
- Native American and First Nations Groups
  - Coalition to Stop Violence Against Native Women
  - Indian Health Services
- New Mexico Coalition Against Domestic Violence
  - The Network (Wendy)
- CYFD-Child, Youth, Family Department (Behavioral Health Services, Margarita)
- FAC (Chris)
- Adult Protective Services (Shannon)
- All Faiths (foster care, forensic interviewing) (Margarita)
- Center for Developmental Disabilities
- Parents Reaching Out – peer support
- Pegasus

| Reoccurring meetings with these partners | Ellen Braden | 1. Host recurring monthly meetings (the large group monthly meetings)  
2. Recurring quarterly meeting (perhaps beginning in September) | 1st meeting scheduled in May |
<table>
<thead>
<tr>
<th></th>
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</thead>
<tbody>
<tr>
<td>Explore opportunities to partner with faith-based communities on events and community outreach</td>
<td>Ellen and Mitch</td>
<td>Following July meeting</td>
</tr>
</tbody>
</table>
Connecting to peer supports -
- VA Certified Peer: Salis
- Support Our Troops: Bryan
- Veterans Integration Center (VIC)
- CET – peer focused
- Peers for caregivers

Reach out to Elinor to add contacts and resources to small working group
- Initiate brainstorming session

Talk to David Plaza (Goodwill) about Reserve Center on Base (Reserve Component)

<table>
<thead>
<tr>
<th>Connecting to peer supports -</th>
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</thead>
<tbody>
<tr>
<td>• VA Certified Peer: Salis</td>
</tr>
<tr>
<td>• Support Our Troops: Bryan</td>
</tr>
<tr>
<td>• Veterans Integration Center (VIC)</td>
</tr>
<tr>
<td>• CET – peer focused</td>
</tr>
<tr>
<td>• Peers for caregivers</td>
</tr>
<tr>
<td>Reach out to Elinor to add contacts and resources to small working group</td>
</tr>
<tr>
<td>• Initiate brainstorming session</td>
</tr>
<tr>
<td>Talk to David Plaza (Goodwill) about Reserve Center on Base (Reserve Component)</td>
</tr>
</tbody>
</table>

| Ellen |
| The team |
### Strategy:
**Teaching Coping and Problem-Solving Skills (Priority 2)**

<table>
<thead>
<tr>
<th>Action Items:</th>
<th>Responsible Person</th>
<th>Measurement/Outcome</th>
<th>Timeline Scheduled/Completed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Identify what services are already provided and see if we can leverage them to include service members, veterans and their families</td>
<td>Shannon Chapman</td>
<td>Establish a comprehensive list of Albuquerque resources</td>
<td>1. (Group deadline for initial submission from stakeholders: July 25) August 15, 2018; ongoing monthly maintenance</td>
</tr>
<tr>
<td>a. See about partnering with the Network of Care: contact portal gatekeepers: Joseph Dorn (veteran) + Mika Tari (behavioral health)</td>
<td>Working group: Ellen, Joseph Dorn, (perhaps work study?) (monthly maintenance)</td>
<td></td>
<td>2. October 30, 2018</td>
</tr>
<tr>
<td>b. Other already existing databases: Network of Care - What are they doing? Can we leverage it?</td>
<td></td>
<td></td>
<td>3. Ongoing (monthly updates)</td>
</tr>
<tr>
<td>1. <strong>Team adds to resource list</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. <strong>Increase provision, leverage funds</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Share information that is developed with Wendy</td>
<td>3. Shannon will ask what they’re called and what they’re doing</td>
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</tr>
<tr>
<td>4. Share information with providers</td>
<td>4. Margarita</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. La Familia merged with Hogarus (Open Skies?)</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>6. Bernalillo County has a youth mental health curriculum for teachers to teach students—Who is it? What are they doing? Can we leverage it?</td>
<td></td>
<td></td>
<td>By June 8, 2018</td>
</tr>
</tbody>
</table>

**Do research on best practices on problem solving and coping skills and suicide prevention**
- Schools
- ACCESS
- Air Force Base training
- Association of Suicide Prevention
- Red Cross
- Mental Health First Aid (county provides)
- Agora does ASIST 2x/year
- National Guard does ASIST, ACE, ACESI
- Yellow Ribbon (Ane Ramero, ASFP, school-based program)

**Ellen Braden**

| 1. Establish a list of best practices |   | 1. May 15, 2018 – emailed out several to group, hope to finalize by July 11, 2018 |   |

---

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- NMCAL (Crisis and Access Line), QPR, MH First Aid
- Presbyterian Health Care (youth and adult versions; free training)
- DOH new Suicide Prevention Coordinator: Jaclyn Daughtery

Consider offering training to:
- Faith-based community
- Homeless community
- Specialty courts
- Community centers
- Senior centers
- Substance use and recovery services
- Albuquerque Health Care for the Homeless (large veteran population) – staff gets training, clients do not

Online component of training PsychArmor and Center for Deployment Psychology

1b. Consider establishing measurement component to track trainings (survey monkey)

<table>
<thead>
<tr>
<th>Brenda</th>
<th>Link will be added to NMCAL site (Wendy)</th>
<th>Ongoing</th>
</tr>
</thead>
</table>

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**ACTION PLAN**

**STRATEGY:**  
**IDENTIFYING AND SUPPORTING PEOPLE AT RISK (PRIORITY 3)**

<table>
<thead>
<tr>
<th>Action Items:</th>
<th>Responsible Person Primary/Secondary</th>
<th>Measurement/Outcome</th>
<th>Timeline Scheduled/Completed</th>
</tr>
</thead>
</table>
| Dive deeper into the screening process for different facilities that may filter our target population  
1. **Define Question:** Have you or a family member ever served in the military?  
2. Create list of agencies willing to add the question  
3. All added question to intake screening  
• What information is consistent? Advocate for consistency across the board  
• Asking the question: Have you or a family member ever served in the military?  
• Look into the feasibility of adding contract language to BC and City | Ellen Braden | Establish consistent screening process to identify SMVF accessing care | 1. April 30, 2018  
2. May 1, 2018  
3. August 1, 2018 |
| | | | Margarita - May 30, 2018  
Elinor – September 15, 2018 |

Margarita  
Elinor
<table>
<thead>
<tr>
<th>social service contracts that facilitate asking the question and reporting on it quarterly</th>
<th>Ellen</th>
<th>Ellen – September 15, 2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>MDC (jail), detox facility, community engagement, youth transitional living services, our community connections (housing) Work with New Mexico Coalition to End Homelessness City’s Substance Abuse Treatment Network • Add to intensive case management and community connections contract</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>1. Create list of entities – including AFD and Heading Home</td>
<td></td>
</tr>
<tr>
<td>2. Partnership) for people just getting out of jail—staffed 24:7; a place to offer info and receive peer support</td>
<td>2. Margarita</td>
<td>2. June 30, 2018</td>
</tr>
<tr>
<td>---</td>
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</tr>
<tr>
<td>Re: New Resource Reentry Center - Brief UNM, Discharge Planners, and head of Resource Reentry Center on resources, ask them to ask the question, give them a banner with resource phone numbers—</td>
<td>2b. Brenda will send cards to Margarita 2c. Ellen 2d. Brenda 2e. TBD 2f. Brenda and Margarita 2g. Margarita</td>
<td>2b. To be completed June 6, 2018 2c. June 30, 2019 2d. July 31, 2018 2e. TBD 2f. June 30, 2018 2g. April 1, 2018</td>
</tr>
<tr>
<td>2b. Give NMCAL and veteran resources cards 2c. Develop a single card and secure funding 2d. Draft high level veteran specific resource list 2e. Explore veteran peer opportunities 2f. VA or VJO can offer training to Resource Reentry Center Staff 2g. The question has been modified to “Have you served?” on intake screening for all inmates</td>
<td>Add team representative from the Albuquerque and Bernalillo County Fire Departments - have</td>
<td>Identify new funding July 1st for position</td>
</tr>
</tbody>
</table>
them ask the question about service

| Training for Pathway Navigators on resources available for veterans; ask the question on Pathway intake  
  • Ellen will contact Daryl | Ellen  
  Brenda (can send information) + Rebecca (can share resource guide) | Establish training for Pathway Navigators | June 15, 2018 |
# Mayor’s Challenge to Prevent Suicide Among Service Members, Veterans and their Families

## ACTION PLAN

### STRATEGY:

**CREATING PROTECTIVE ENVIRONMENTS (PRIORITY 4)**

<table>
<thead>
<tr>
<th>Action Items:</th>
<th>Responsible Person Primary/Secondary</th>
<th>Measurement/Outcome</th>
<th>Timeline Scheduled/Completed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provide optional mental health training to gun shop owners in identifying at-risk consumers</td>
<td>Brenda Mayne</td>
<td>Establish mental health training resources for gun shop owners</td>
<td>1. July 1, 2018</td>
</tr>
<tr>
<td>1. Create list of gun shop owners, including veteran owned</td>
<td></td>
<td></td>
<td>2. Ongoing</td>
</tr>
<tr>
<td>2. Identify training needed/wanted (individualized, voluntary training) and schedule</td>
<td></td>
<td></td>
<td>3. June 13, 2018</td>
</tr>
<tr>
<td>3. Identify trainers</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Specifically identify veteran-owned gun shops</td>
<td>Ellen + Bobby</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Add pawn shops (for the city/county)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Reach out to full team for other possible trainers</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>1a. Provide incentives</td>
<td></td>
<td></td>
<td>1a. December 30, 2018</td>
</tr>
<tr>
<td>• Consider how team can partner with mayor on priorities like public safety, gun safety</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Identify veteran welcoming businesses including veteran owned businesses: “profoundly served our country and now proudly serving our community” and identify a simplistic way of labeling

1. Create lists of current veteran welcoming businesses including veteran-owned businesses and partners willing (e.g., gun shops)
2. Incorporate learning from NDCares conversation
3. Develop a unified message (include mayor’s office) – including possibility of a flyer to have in business window
4. Establish capacity to offer training/resources as needed
5. Develop a cumulative list of veteran welcoming businesses that have been trained/resourced

<table>
<thead>
<tr>
<th>Mandy Dykman + Rebecca (training) + Ellen (messaging)</th>
<th>Feature veteran welcoming businesses in Albuquerque</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mandy + Bobby</td>
<td>1. May 1, 2018</td>
</tr>
<tr>
<td></td>
<td>2. June 30, 2018</td>
</tr>
<tr>
<td></td>
<td>3. October 15, 2018</td>
</tr>
<tr>
<td></td>
<td>4. Ongoing</td>
</tr>
<tr>
<td></td>
<td>5. TBD</td>
</tr>
<tr>
<td>Look into NDCAres approach</td>
<td></td>
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<tr>
<td>-----------------------------</td>
<td>-----------------</td>
</tr>
<tr>
<td>• Could become a part of the action plan to be presented to the Mayor as an initiative</td>
<td></td>
</tr>
</tbody>
</table>

1. Work with community centers and gyms, provide resources regarding veteran identity/culture and suicide prevention (limit substance abuse information)
2a. **Create a list of community centers, senior centers, police substations, malls and gyms (Joseph Dorn)**

2. Create banner/poster (visuals) to be displayed while Joseph is on the road (Have you or a family member served in the military?)

3. Disseminate national suicide prevention hotline or NMCAL contact number

<table>
<thead>
<tr>
<th></th>
<th>Mitch Lawrence</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Give resource card(s) to Joseph Dorn to share with others)</td>
<td></td>
</tr>
<tr>
<td>Work with communications committee for messaging</td>
<td></td>
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</tbody>
</table>

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<thead>
<tr>
<th></th>
<th><strong>(Tied to Strategy #7)</strong></th>
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</thead>
</table>

1. **April 15, 2018**

2. **December 31, 2018**
Service Members, Active Duty – spouse groups, children, social services network, transition to civilian life (potential preventive approach)
– Ask: What does the base already do? What resources are service members made aware of? What resources/services are being utilized? What are they doing to foster transition/community (re)integration and grow life skills in the community (off the base)?

Mindy will connect Thomas and Shannon and Theresa Rhinehart and Airman of Family Readiness Flight Chief, Mr. Burton via email

Connect with Transition Assistance Program (Mr. Ray Burton oversees staff)

Explore partnering with the base in on-base and community activities (ex. KAFB Summer Bash; health fair on base – a means for connecting with

<table>
<thead>
<tr>
<th>Thomas</th>
<th>Thomas + Chris work with Shannon on possible message on need for community connection for active service members and their families (Mindy to add support, as needed)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hold subgroup meeting</td>
<td>Report back initial findings: July 25, 2018</td>
</tr>
<tr>
<td>June 6, 2018</td>
<td>June 30, 2018</td>
</tr>
</tbody>
</table>

Supporting active duty members subgroup: Chris, Mindy, Shannon, Mitch?, Deb?, Theresa?

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| service members, Chris Neubeck |  |  |  |
**Mayor’s Challenge to Prevent Suicide Among Service Members, Veterans and their Families**

**ACTION PLAN**

## STRATEGY:
**STRENGTHENING ACCESS AND DELIVERY OF SUICIDE CARE (PRIORITY 5)**

<table>
<thead>
<tr>
<th>Action Items:</th>
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<th>Timeline Scheduled/Completed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Collaborate with the professional training groups to use evidence-based practices – military culture and suicide prevention training</td>
<td>Brenda Mayne</td>
<td>Establish evidence-based military culture and suicide prevention training resources</td>
<td>1. October 15, 2018</td>
</tr>
<tr>
<td><strong>1. Identify what we are requesting and offering</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>2. Establish a list of Qualified Training Groups (re: CEUs) – ask Brenda if list already exists</strong></td>
<td></td>
<td></td>
<td>2. TBD, 2018</td>
</tr>
<tr>
<td><strong>3. Make CEU resources available to larger community</strong></td>
<td>Ellen will contact Dr. Mauricio Towen</td>
<td></td>
<td>3. TBD</td>
</tr>
<tr>
<td><strong>4. Provide a link to evidence-based trainings</strong></td>
<td>NM State - Shannon</td>
<td></td>
<td>4. TBD</td>
</tr>
<tr>
<td><strong>5. Obtain agreement with colleges/universities</strong></td>
<td>Highlands – Mindy</td>
<td></td>
<td>5. June 2019</td>
</tr>
<tr>
<td>• Center for Deployment Psychology and PsychArmor</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• UNM – a way to tie in with UNM: grand rounds through the psychiatry department (CEUs)</td>
<td></td>
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</tbody>
</table>
- New Mexico State – Maj. Pilgrim has contact we can reach out to
- Highlands
- Psychological First Aid - online, free

<table>
<thead>
<tr>
<th>Determine what connections are available to support the access and delivery of suicide care</th>
</tr>
</thead>
<tbody>
<tr>
<td>- 242-COPS (wellness check number for families; “I need a mobile crisis team”)</td>
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<table>
<thead>
<tr>
<th>Ellen Braden</th>
</tr>
</thead>
<tbody>
<tr>
<td>Margarita + Ellen</td>
</tr>
<tr>
<td>Margarita + Ellen</td>
</tr>
<tr>
<td>Ellen</td>
</tr>
<tr>
<td>Margarita + Ellen</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>a. Publicize crisis numbers (Call NMCAL: #855.NMC.RISIS)</th>
</tr>
</thead>
<tbody>
<tr>
<td>b. Call National Suicide Prevention: #800.273.TALK (press 1)</td>
</tr>
<tr>
<td>c. NMCAL peer to peer text line: #741741</td>
</tr>
<tr>
<td>d. National Suicide Prevention text line: #838255</td>
</tr>
</tbody>
</table>

- Bring resource updates to monthly meetings and share with Shannon
- Inventory educational opportunities

| 1. June 6, 2018 |
| 2. Ongoing |
| 3. October 15, 2018 |
| CIU and APD CIU and Coast  
<p>| Military culture training for Albuquerque Fire and Rescue (AFR) Care Teams (We’ll know more once we have an AFR representative) |
| Link to NMCAL and National Suicide Prevention Crisis (Veterans) Lines phone and text numbers |
| Link to websites: <a href="http://www.CABQ/help">www.CABQ/help</a> |
| Network of Care has the most comprehensive database; explore partnership |
| Establish training CEU subgroup |
| Mindy will work with Bobby on getting phone apps listed on CABQ/help |
| Shannon |
| June 30, 2018 |
| Connections for discharge from hospital into actual treatment – currently there are no providers (clinical not peer care). This will also include family members. Include Kaseman and Ellen + Margarita |
| Post hospital discharge planning subcommittee: Gilbert, John Kehoe?, Misty Pilgrim? |</p>
<table>
<thead>
<tr>
<th>UNM and Presbyterian – added 5/2/18</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Regular meeting - put together post hospital discharge treatment planning subcommittee</td>
</tr>
<tr>
<td>2. Develop connections and plan to improve post hospital discharge process</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>1. July 11, 2018</th>
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<tbody>
<tr>
<td>2. December 2019</td>
</tr>
</tbody>
</table>
### Mayor’s Challenge to Prevent Suicide Among Service Members, Veterans and their Families

#### ACTION PLAN

**STRATEGY:**
**STRENGTHENING ECONOMIC SUPPORTS (PRIORITY 6)**

<table>
<thead>
<tr>
<th>Action Items:</th>
<th>Responsible Person Primary/Secondary</th>
<th>Measurement/Outcome</th>
<th>Timeline Scheduled/Completed</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Ensure that we have the right entities at the table to promote job development, benefits counseling, and educational services</td>
<td>Rebecca Clark Subcommittee: staff</td>
<td>1. Create list of Employment Services w/contact 1a. Create list of employment providers throughout NM</td>
<td>1. April 15, 2018 1a. Complete</td>
</tr>
<tr>
<td>2. Staff to finalize message and talking points related to initiative; present potential script to larger group</td>
<td></td>
<td></td>
<td>2. First August Meeting, 2018</td>
</tr>
<tr>
<td>3. Staff to verify current information on veteran-owned business list</td>
<td></td>
<td></td>
<td>3. January 2019</td>
</tr>
<tr>
<td>4. Staff to meet with employers identified to be contacted in Bernalillo County</td>
<td></td>
<td></td>
<td>4. June 2019</td>
</tr>
<tr>
<td>5. Share the remainder of rural employer list with Shannon as well as DVR and Dept. of Workforce Connections</td>
<td></td>
<td></td>
<td>5. October 2019</td>
</tr>
<tr>
<td>Explore LA employment initiative (10,000 veterans employed)</td>
<td>Ellen</td>
<td></td>
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<td>---</td>
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<td></td>
</tr>
</tbody>
</table>
| Ensure that we have the right policies for housing  
1. **Copy of Housing Policy**  
2. **Review of Policy**  
3. **Recommend Changes**  
4. **Implement Recommendations**  
B. Look at housing for guardsmen and dishonorably discharged (Melissa) | Elinor Reiners  
Shannon + Mindy | Update Housing Policy  
1. April 15, 2018  
2. May 1, 2018  
3. July 30, 2018  
4. August 15, 2018  
B. November 30, 2018 |
| Housing – landlords and property owners – help them get information regarding mental health first aid, crisis intervention  
o Veteran landlords?  
NM Legal Aid might offer training on landlord and tenant rights | **Ask Fermin** | Ongoing |
# Mayor’s Challenge to Prevent Suicide Among Service Members, Veterans and their Families

## ACTION PLAN

### STRATEGY: LESSENING HARM AND PREVENTING FUTURE RISK (PRIORITY 7)

<table>
<thead>
<tr>
<th>Action Items:</th>
<th>Responsible Person Primary/Secondary</th>
<th>Measurement/Outcome</th>
<th>Timeline Scheduled/Completed</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Recruit</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>2. TA inputs</td>
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<td>3. Develop plan</td>
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<td>4. Implement campaign</td>
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<td>Develop a media plan (public service announcements throughout city, implementation on public buses and print options to be distributed in local resource areas - Goodwill, Rape Crisis Center, tattoo parlors, semi-colon movement, etc.)</td>
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<tr>
<td>Continue follow up on target individuals (after in-patient discharge from UNM with suicidal ideation they are referred to community engagement teams (CET) for follow up)</td>
<td>Margarita Chavez Subcommittee will identify next steps (see strategy #5)</td>
<td>Create SMVF/suicide prevention informed post-discharge process</td>
<td>1. April 15, 2018 2. June 30, 2018</td>
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<td>3. List of follow-up</td>
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<td>3. August 15, 2018</td>
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