

EVERYONE deserves  
to be seen.



WELLSPACE  
HEALTH



# Behavioral Health Services

Suicide Crisis Line  
Emergency Department Follow-Up Services

MHSA Steering Committee  
March 18, 2021

This program is by the Division of Behavioral Health Services through the voter funded approved Proposition 63, Mental Health Services Act (MHSA).



# Suicide Crisis Line Emergency Department Follow-Up Services

- Prevention and Early Intervention (PEI)
- Suicide Prevention Project
  - Suicide Crisis Line
  - Emergency Department (ED) Follow-Up Services
- May/June 2019 - MHSA Steering Committee recommended expanding PEI component
  - Suicide Crisis Line expanded chat and text services; now 24/7
  - ED Follow-up Services provided to individuals seen at Sutter Medical Center; services expanded to individuals seen at Dignity San Juan and UC Davis Medical Center

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# Suicide Prevention & Crisis Line Services

Liseanne Wick, MS, D.  
Director



# Mission

*Achieving regional health through high quality  
comprehensive care.*





Everybody deserves to be seen, no matter who you are, where you come from, where you work or what place you call home.



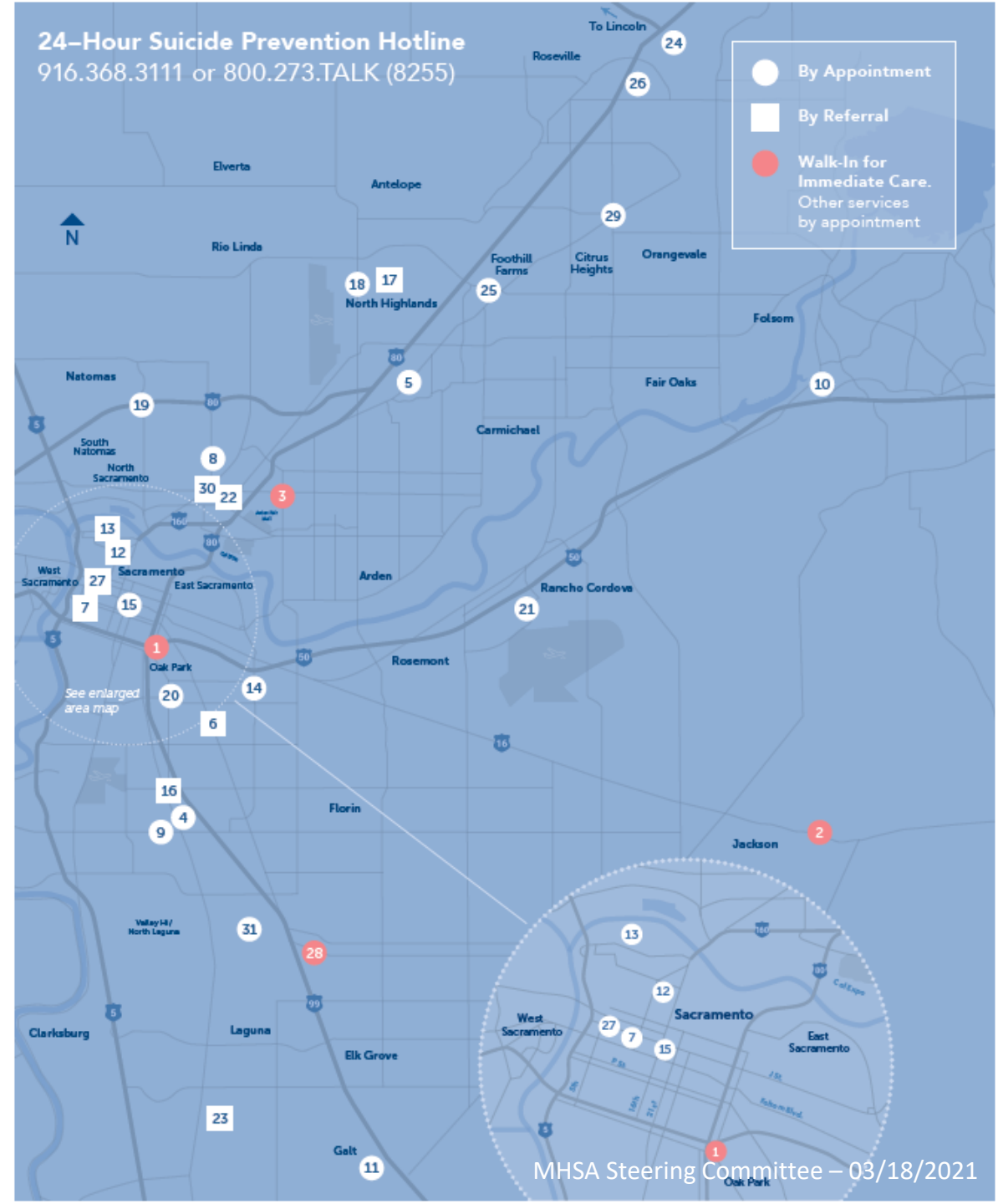
**WELLSPACE HEALTH**  
*We see YOU.*



# 30+ Locations

Sacramento, Placer, & Amador counties

- Community Health Centers
- Immediate Care Centers
- Dental Centers
- Behavioral Health Centers
- Supportive Service Centers
- Partnership Sites
- Suicide Prevention Hotline



# Suicide Prevention & Crisis Services

- 53 years of experience providing suicide prevention services
- Talk – Text – Chat 24/7/365
- Serving 50 of 58 California counties.
- Nationally Accredited by the American Association of Suicidology and The Joint Commission





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# SUICIDE PREVENTION CRISIS LINE

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24 HOURS A DAY, 7 DAYS A WEEK

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WELLSPACE  
HEALTH

*We see YOU.*

SACRAMENTO  
COUNTY

**Call: 800-273-8255**

**Text: 916-668-4226**

**Chat: [SuicidePreventionLifeline.org/chat](https://SuicidePreventionLifeline.org/chat)**

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# Suicide Prevention & Crisis Services

ANNUAL VOLUME BY MONTH



# Suicide Prevention

## Emergency Department Follow-Up



# The Need

Individuals who presented to California ED's with *suicide attempts* had a suicide rate in the year after their visit **56.8 times higher** than those of demographically similar Californians. (NIMH)

People who presented with *suicidal ideation* had suicide rates **31.4 times higher** than those of demographically similar Californians in the year post- discharge. (NIMH)

76% of ED Directors report a lack of community mental health resources to refer their patients.  
(Baragg, Janowicz, and Asarnow, 2006)

Half of all the costs of suicide attempt patient admissions were accounted for by re-admissions.  
(Beautrais, 2005)

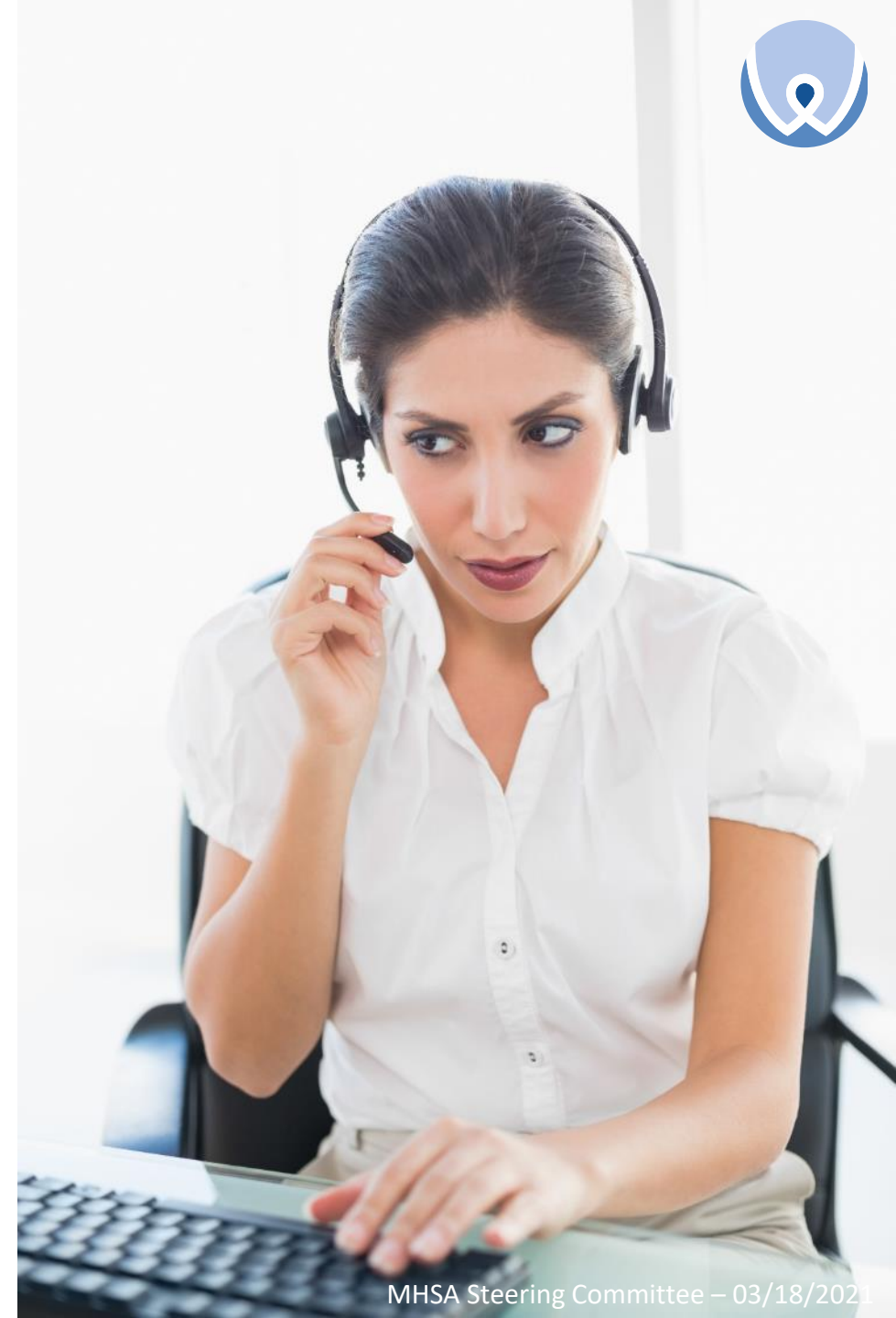
*Patients can easily fall through the cracks after discharge even if they were referred to mental health services in their discharge plan.*





# Emergency Department Follow-Up

- Referral from in Emergency Department
- First follow-up contact and engagement within 24-48 hours.
- No cost to the patient.
- Improved continuity of care.





# ED Follow-Up Engagement

- Ongoing risk assessment & monitoring;
- Empathetic emotional support;
- Collaborative safe planning;
- Debriefing crisis and hospitalization;
- Linkage to treatment services and supports;
- Self care plan explored;
- 24hr access to hotline, chat, text.



# California Post Discharge Outcomes



# WellSpace Health Post Discharge Outcomes



# ED Follow-Up Benefits

- Lives are saved and risk of re-attempt is reduced post discharge from ED;
- Expert follow up care post-discharge at no cost to the patient using best practices and evidence-based interventions;
- Improved continuity of care for persons at high risk of suicide;
- Individuals feel supported and learn about services that can help;
- Ongoing risk assessment and monitoring.

# Questions?

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*We see YOU.*