Good morning, Madam Chair and members of the Senate Human Services Committee. My name is Micki Savelkoul and I am the Suicide Prevention Program director for the North Dakota Department of Health. I am here today to provide information about services 2-1-1 provides for the Department of Health in relation to Senate Bill 2205.

In the 2011-2013 biennium, the Department of Health and FirstLink have worked on several projects together. In addition to operating 2-1-1, FirstLink is the organization that operates the National Suicide Prevention Lifeline (NSPL). The Department of Health provides funding to First Link for two additional projects: Applied Suicide Intervention Skills Training (ASIST) and the NSPL call back program.

FirstLink has two incoming phone lines designated specifically for the NSPL. Calls to these lines take priority over calls to 2-1-1. Calls to 2-1-1 are answered in the order that they come in or in a phone “queue,” which may result in a long wait time or an abandoned call. Because suicidal callers are potentially being placed in a queue or waiting on hold when calling 2-1-1, the Department of Health promotes the National Suicide Prevention Lifeline as a resource for suicidal callers rather than 2-1-1.

ASIST is an educational program designed to teach people about recognizing the warning signs of suicide, how to talk to someone about suicide and how to refer them for help. FirstLink has conducted ASIST in two locations in North Dakota. FirstLink has also worked with two of our new ASIST trainers who are American Indian, and offered ASIST on the tribal college campuses within North Dakota. Firstlink mentored the new trainers and provided guidance in conducting the ASIST classes. FirstLink also coordinated bringing the ASIST train-the-trainer model to North Dakota where 24 new ASIST trainers in North Dakota were trained on the model. FirstLink again mentored the new trainers and assisted in setting up trainings needed for them to become fully credentialed.
In 2012 FirstLink began offering a call back program. Through that program, people who called the NSPL were asked if they would like additional support over the next 6 to 8 weeks by receiving calls from a staff member at FirstLink. These calls provide listening and support, assistance with or referral to community resources, developing healthy coping skills and a healthy support system. The call back program has also been offered to a few hospitals and clinics within the state as a resource for patients who may be admitted with suicidal ideation, but not in imminent risk, that are agreeable to additional support once discharged from the hospital.

The 2-1-1 hotline may provide services to the Department of Health’s Suicide Prevention Program by providing referrals to community agencies. They may also provide suicide intervention when a suicidal caller calls 2-1-1 instead of the National Suicide Prevention Lifeline.

This completes my testimony. I would be happy to answer any questions you may have.