Boards, Commissions and Community Representatives/Volunteers

Behavioral Health Board Commission on Aging **SLO Health Counts**

Elected Officials

CA Senator John Laird, 17th District U.S. Congressman Salud Carbajal, 24th District **County Board of Supervisors**

Non-Profit Agencies

Alzheimer's Association Area Agency on Aging Atascadero Senior Center Health Projects Center Adventist Health

IICI A Health CenCal Health

Coast Caregiver Resource Center (CCRC) Community Action Partnership of SLO (CAPSLO) Community Health Centers (CHC)

Dignity Health

Gala Pride and Diversity Center Senior Advocacy

Hospice of SLO County **Access Central Coast**

Los Osos Cares Senior Program

LTC Ombudsman Services of SLO County

PathPoint

People's Self Help Housing

Ride-On Transportation

San Luis Obispo Legal Assistance Foundation

Senior Nutrition Program / Meals that Connect

Senior Volunteer Services (RSVP/3CV/PLS)

SLO Village Movement

Transitions-Mental Health Association / Central Coast

Tri-Counties Regional Center

United Cerebral Palsy

Veterans Affairs Supportive Housing (VASH)

Private Organizations

Home Instead

Senior Living Consultants

SLG Senior Care

SeaCoast Seniors

Care Connection Transport & Home Services

Geriatric Care & Dementia Consulting

Wisdom Center

Public Agencies

San Luis Obispo Council of Governments

San Luis Obispo County Departments of:

Public Health

Social Services/Adult Services

Libraries

ADULT SERVICES POLICY COUNCIL

Working together to meet the health and human service needs of adults and seniors. Our vision is safe and supported adults & seniors with access to a full continuum of resources & independence wherever they reside.

Chair: Kim Chartrand

Immediate Past Chair: Paulina Flores Jimenez

First Vice Chair: Clint Weirick Second Vice Chair: John Bellutz kimchartrand@hospiceslo.org pfloresjimenez@co.slo.ca.us clint.weirick@sen.ca.gov

AGENDA

October 3rd, 2025 9:00 a.m. - 11:00 a.m.

INTRODUCTIONS (15 Minutes or less)

Name and position within respective organization.

ANNOUNCEMENTS: (15 Minutes or less)

GUEST SPEAKERS: (30 Minutes)

Suicide Prevention – Roxanne Archer & Brita Connelly

CORRECTIONS / ADDITIONS TO THE SYNOPSIS

ACTION ITEMS: (50 Mins)

COMMITTEE UPDATES AS NEEDED (10 minutes or less)

- SLO MPA
- Commission on Aging Report

MEETING LOCATION:

DSS Conference Room #101 3433 S. Higuera St, San Luis Obispo

NEXT MEETING:

November 7th, 2025

MEETING MINUTES

DULT SERVICES POLICY COUNCIL
meet the health and human service needs of
supported adults and seniors with
d independence wherever they reside.
Meeting Called By: Kim Chartrand
Time: From: 9:00 AM To: 11:00 AM
Date: Friday October 3 rd , 2025
93401 Conference Room #101
Tembers Present:
Karen Jones – LTCO
Alexandra Morris – GCM
Jerry Mihaic – ACC
Sarah Reinhart – Public Health
Betty Purify – PSHH
Samuel Griffith – HPC
Roxanne Archer – Public Health
Sally Kruger – SLO Village Movement
Judy Hemenway – Atascadero Senior Center
Isabel Alfaro – Wisdom Center
Sue Gibson – SLG Senior Care
Matt Silva Walker – Home Instead

AGENDA ITEMS	COMMENTS/CONCLUSIONS/ACTIONS (IF ANY)
Introductions	
Public Comment	JERRY MIHAIC • DIOS DE LOS MUERTOS EVENT ON NOVEMBER 1 ST IN SLO JULIANE MCADAM • MEALS THAT CONNECT PICKLE FESTIVAL WILL BE HELD AT LAGUNA LAKE PARK ON OCTOBER 4 NELL BENNETT • PEARLS IS A FREE DEPRESSION COACHING RESILIENCY ONE-ON-ONE AVAILABLE FOR SENIORS OVER 60 SUE GIBSON • UPCOMING SENIOR FAIRS IN ARROYO GRANDE AND TEMPLETON • ALZHEIMER'S WALK ON NOVEMBER 8 TH
Member Spotlight	N/A
Guest Speakers	BRITA CONNELL & ROXANNE ARCHER - SENIOR & OLDER ADULT SUICIDE PREVENTION LANGUAGE AND CONCEPTS SURROUNDING SUICIDE: DIED OF/BY SUICIDE -THE TERM COMMITTED SUICIDE DOES NOT ACCURATELY DESCRIBE THAT AN INDIVIDUAL DIED AS THE RESULT OF A MENTAL HEALTH CONDITION WITH A MEDICALLY TREATABLE CAUSE, OR BY SEVERE PSYCHOLOGICAL DISTRESS WITH NO APPARENT WAY OUT. FATAL OR NON-FATAL ATTEMPT - LANGUAGE ABOUT SUICIDE THAT USES ILLNESS-BASED LANGUAGE. SIMILAR TO FATAL OR NON-FATAL HEART ATTACK PERSON WITH LIVED EXPERIENCE - A PERSON WITH LIVED EXPERIENCE OF SUICIDE WHO HAS EITHER STRUGGLED WITH SUICIDAL THOUGHTS AND/OR BEHAVIORS OR AN ATTEMPT SURVIVOR. LOSS SURVIVOR - AN INDIVIDUAL WHO HAS LOST SOMEONE THEY CARE ABOUT TO SUICIDE. CAN BE FURTHER BEREAVED BY SUICIDE, EXPERIENCING A HIGH LEVEL OF PSYCHOLOGICAL, PHYSICAL, AND/OR SOCIAL DISTRESS FOR A LONG PERIOD OF TIME SUICIDAL IDEATION - THINKING ABOUT, CONSIDERING, OR MAKING A PLAN TO DIE BY
	SUICIDE. CAN BE PASSIVE OR ACTIVE. AMONG ADULTS AGED 18 OR OLDER IN 2023, 5.0% (OR 12.8 MILLION PEOPLE) HAD SERIOUS THOUGHTS OF SUICIDE, 1.4% (OR 3.7 MILLION PEOPLE) MADE A SUICIDE PLAN, AND 0.6% (OR 1.5 MILLION PEOPLE) ATTEMPTED SUICIDE IN THE PAST YEAR. THERE IS NO SINGLE CAUSE OF SUICIDE. SUICIDE ATTEMPTS TEND TO BE MORE LETHAL IN OLDER ADULTS AS OF 2023 SUICIDE IS ONE OF THE TOP LEADING CAUSES OF DEATH IN THE UNITED STATES FOR THOSE AGED BETWEEN 10 AND 64 YEARS OLD THE SUICIDE RATE IN SLO COUNTY IS HIGHER THAN THE OVERALL RATE IN CALIFORNIA OLDER ADULTS HAVE THE HIGHEST RATE OF DEATHS BY SUICIDE IN SLO COUNTY MALES HAVE A HIGHER RATE THAN FEMALES THE RATE IS SIMILAR ACROSS THE REGIONS WITHIN SLO COUNTY IN 2021, 31 OF 58 COUNTIES PARTICIPATED IN CALVDRS. SUPPLEMENTAL MULTI-SOURCE

AGENDA ITEMS	COMMENTS/CONCLUSIONS/ACTIONS (IF ANY)
	California in 2021. 37% had a known history of suicidal thoughts and/or plans; 8% had a family member or friend die recently; 4% had a financial problem that appeared to contribute to their death; More than 20% disclosed their suicide thoughts and/or plans to someone in their personal or professional circle prior to their death.
	SUICIDE DEATH IS STIGMATIZED ACROSS ALL AGE GROUPS
	OFTEN SEEN AS BEING 'WEAK'
	 SOMETIMES SEEN AS THE PERSON WAS 'SELFISH'
	OLDER ADULTS WERE RAISED IN A TIME WHERE IT WAS STILL CONSIDERED A 'SIN' AND WAS OFTEN CONSIDERED 'ILLEGAL'
	O WE SEE HIGHER RATES IN MEN THAN WOMEN, WHY?
	• RISK FACTORS:
	 DEPRESSION & OTHER MENTAL HEALTH PROBLEMS
	O SUBSTANCE USE DISORDER (ALCOHOL & PRESCRIPTION MEDICATION)
	O PHYSICAL ILLNESS, DISABILITY, AND PAIN (ESPECIALLY IF ANY OF THESE ARE CHRONIC)
	 SOCIAL ISOLATION & LONELINESS
	 Loss of a loved one, especially to suicide
	o Financial & food insecurity
	O EXPOSURE TO A TRAUMATIC EVENT
	• PROTECTIVE FACTORS:
	O STRENGTHEN ECONOMIC SUPPORTS
	 STRENGTHEN HOUSEHOLD FINANCIAL SECURITY
	 HOUSING STABILIZATION POLICIES
	O STRENGTHEN ACCESS AND DELIVERY OF SUICIDE CARE
	O COVERAGE OF MENTAL HEALTH CONDITIONS IN HEALTH INSURANCE POLICIES
	 REDUCE PROVIDER SHORTAGES IN UNDERSERVED AREAS
	O SAFER SUICIDE CARE THROUGH SYSTEMS CHANGE
	 CREATE PROTECTIVE ENVIRONMENTS
	O REDUCE ACCESS TO LETHAL MEANS AMONG PERSONS AT RISK OF SUICIDE
	O COMMUNITY-BASED POLICIES TO REDUCE EXCESSIVE ALCOHOL USE
	 PROMOTE CONNECTEDNESS
	o Peer programs
	 COMMUNITY ENGAGEMENT ACTIVITIES
	 TEACH COPING AND PROBLEM-SOLVING SKILLS
	O SOCIAL-EMOTIONAL LEARNING PROGRAMS
	 FAMILY RELATIONSHIP PROGRAMS
	 IDENTIFY AND SUPPORT PEOPLE AT RISK
	o Gatekeeper training
	o Crisis intervention

AGENDA İTEMS	COMMENTS/CONCLUSIONS/ACTIONS (IF ANY)
	TREATMENT FOR PEOPLE AT RISK OF SUICIDE
	• TREATMENT TO PREVENT RE-ATTEMPTS
	 FIVE FACTORS OF LATE LIFE SUICIDE: DISEASE, DISCONNECTEDNESS, DISABILITY, DEADLY MEANS, DEPRESSION
	WARNING SIGNS OF SUICIDE INCLUDE:
	 TALKING ABOUT WANTING TO DIE OR ABOUT SUICIDE
	 TALKING ABOUT FEELING HOPELESS OR HAVING NO REASON TO LIVE
	 LOOKING FOR WAYS TO KILL ONESELF
	 Loss of interest in activities that used to be enjoyable
	O CUTTING BACK ON SELF-CARE AND GROOMING
	 BEING ALONE FOR LONG PERIODS OF TIME, BECOMING ISOLATED
	O Breaking medical regimens or skipping appointments
	o Feeling hopeless or worthless
	 WHEN COMBINED WITH OTHER WARNING SIGNS, GIVING THINGS AWAY, OR MAKING CHANGES IN WILL
	OBTAINING LETHAL MEANS SUCH AS FIREARMS OR STOCK-PILING MEDICATION
	 PREOCCUPATION WITH DEATH OR LACK OF CONCERN ABOUT PERSONAL SAFETY
	 INCREASED USE OF ALCOHOL OR OTHER SUBSTANCES
	O CHANGES IN SLEEP (EITHER "TOO MUCH" OR "TOO LITTLE")
	• IF YOU SEE ONE OR MORE OF THESE WARNING SIGNS, IT'S TIME TO REACH OUT
	O START THE CONVERSATION
	O ASK ABOUT SUICIDE, BE DIRECT
	o Listen
	• Crisis Resources:
	• CENTRAL COAST HOTLINE (CALL OR TEXT) 800-783-0607
	 NATIONAL SUICIDE PREVENTION LIFELINE (CALL OR TEXT) 988
	• NATIONAL FRIENDSHIP LINE (PEOPLE AGED 60+)
	o Call 1-888-670-1360
	• MOBILE CRISIS TEAM (MCT)
	 AVAILABLE 24 HOURS A DAY, 7 DAYS A WEEK, 365 DAYS A YEAR. TO REQUEST AN MCT RESPONSE, CALL THE CENTRAL COAST HOTLINE AT 1-800-783-0607.
	• LOCAL SUPPORT:
	o County Behavioral Health Call (805) 781-4768
	• HABITAT FOR HUMANITY
	 Home Preservation Program
	 Low-income senior homeowner repairs
	• Transitions-Mental Health Association

AGENDA ITEMS	COMMENTS/CONCLUSIONS/ACTIONS (IF ANY)
	 FAMILY SUPPORT, WORK PROGRAMS, CENTRAL COAST HOTLINE, COMMUNITY PROGRAMS, MENTAL HEALTH SERVICES, AND ADULT FULL SERVICE PARTNERSHIP PROGRAMS
1	○ HOSPICE OF SLO COUNTY
	O CARE MANAGEMENT SERVICES, IN-HOME SUPPORT, GRIEF COUNSELING, PET PEACE OF MIND, & MORE!
Corrections/Additions to the Synopsis	SYNOPSIS ACCEPTED WITH NOTED CORRECTIONS.
Action Items	• N/A
Committee Updates as Needed	SLOMPA • Survey developed to identify gaps in providers throughout the county.
	COMMISSION ON AGING
	Presentation on suicide prevention on September 24 th .

The next meeting is: November 7th, 2025 Time: 9:00 AM

Location: 3433 South Higuera St, San Luis Obispo, CA 93401 Conference Room #101