

# FINAL BILL REPORT

## E2SHB 2793

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### PARTIAL VETO C 90 L 16 Synopsis as Enacted

**Brief Description:** Providing for suicide awareness and prevention education for safer homes.

**Sponsors:** House Committee on Finance (originally sponsored by Representatives Orwall, Blake, Kretz, Sullivan, Cody, Jinkins, Kagi, Goodman, Ormsby, Tharinger, Rossetti and Reykdal).

**House Committee on Judiciary**

**House Committee on Appropriations**

**House Committee on Finance**

**Senate Committee on Human Services, Mental Health & Housing**

**Senate Committee on Ways & Means**

#### **Background:**

The Department of Health (DOH) has developed a statewide suicide prevention plan (Plan) containing goals and recommendations on policies, system change, and community action to reduce suicides. The Plan includes among its core principles that suicide is a preventable public health problem and that everyone has a role in suicide prevention. The Plan contains numerous recommendations, including: engaging communities in suicide prevention through awareness programs; improving and expanding suicide assessment, treatment, and management for health professionals; and supporting legislation, technology, and public education to reduce access by people in crisis to lethal means, including firearms and medications.

#### Suicide Assessment, Treatment, and Management Training.

Certain licensed health professionals are required to complete training in suicide assessment, treatment, and management. Some of these professionals, like licensed social workers and psychologists, must complete the training every six years. Other professionals, like physicians, nurses, and physician assistants, only need to complete the training once. The training must be at least six hours in length, unless only screening and referral elements are appropriate for the professional's scope of practice, in which case the training only needs to be at least three hours in length.

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*This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not a part of the legislation nor does it constitute a statement of legislative intent.*

Beginning January 1, 2017, the training must meet minimum standards adopted by the DOH in rule. The standards for six-hour trainings must require content specific to veterans and the assessment of issues related to imminent harm via lethal means or self-injurious behaviors.

#### Firearms Safety and Hunter Education.

The Washington Department of Fish and Wildlife (WDFW) is responsible for producing a firearms pamphlet that covers issues of firearms safety, the legal limits of firearms use, and information on firearms laws and regulations. This pamphlet is provided to the Department of Licensing for distribution to firearms dealers and persons authorized to issue concealed pistol licenses. Firearms dealers are required to give a copy of the pamphlet to firearms purchasers.

The WDFW is responsible for the operation of a statewide hunter education program that must be completed by applicants for a state hunting license who are age 41 or younger. Hunter education courses are taught by volunteers that are trained and certified by the WDFW. The hunter education program consists of at least 10 hours of instruction in safety, conservation, sportsmanship, and firearm handling. The firearms pamphlet may be used in the hunter education program.

#### **Summary:**

#### Safe Homes Task Force.

Subject to amounts appropriated for this purpose, a Safe Homes Task Force (Task Force) is created to raise public awareness and increase suicide prevention education among partners in key positions to prevent suicides. The Task Force consists of a variety of stakeholders, including the DOH, representatives of suicide prevention organizations, the firearms industry and firearms rights organizations, individuals who have experienced suicide loss or survived suicide attempts, pharmacists and pharmacy organizations, the Department of Veterans Affairs, law enforcement, and others. Task Force membership is divided into a Suicide Prevention and Firearms Subcommittee and a Suicide Prevention and Pharmacy Subcommittee.

The Task Force is administered and staffed by the University of Washington (UW) School of Social Work, and its tasks include:

- developing suicide awareness and prevention messages for posters and brochures to be used by firearms dealers, firearms ranges, and pharmacies, and in hunter safety classes;
- developing online trainings on suicide awareness and prevention for firearms dealers, firearms ranges, and their employees;
- reviewing and recommending changes to incorporate suicide awareness and prevention into the firearms safety pamphlet developed by the WDFW;
- developing strategies for disseminating suicide awareness and prevention information for hunting safety classes, including messages to parents of children in the courses;
- developing suicide awareness and prevention messages for training for the schools of pharmacy and providing input on training being developed for community pharmacists;
- creating a website that will be a clearinghouse for the newly created suicide awareness and prevention materials;

- surveying firearms dealers and firearms ranges to determine the types and amounts of incentives that would be effective in encouraging those entities to participate in the Safe Homes Project (Project); and
- creating, implementing, and evaluating a pilot in two counties that have high suicide rates to provide advocacy efforts and training to firearms dealers, pharmacies, health care providers, and law enforcement on pairing suicide awareness and prevention education with the provision of devices for safe storage of firearms and prescription medications.

The Task Force must annually report on its progress to the Legislature beginning December 1, 2016. The final report of the Task Force must include the findings of the suicide awareness and prevention pilot program and recommendations on possible continuation of the program.

By July 1, 2017, the WDFW must update the firearms pamphlet with suicide prevention messages developed by the Task Force.

#### Safe Homes Project.

Subject to amounts appropriated for this purpose, the DOH is required to develop and administer a Project for firearms dealers and firearms ranges to encourage voluntary participation in a program to implement suicide prevention strategies. The DOH must consult with the Task Force in developing Project requirements. The Project will provide a Safe Homes Partner certification to firearms dealers and firearms ranges that meet the following requirements:

- provide online trainings on suicide awareness and prevention to employees;
- display suicide awareness and prevention posters and hand out suicide awareness and prevention brochures to firearms purchasers and customers; and
- offer safe storage devices, in the form of a lock box or life jacket, for sale at cost to firearms purchasers and customers.

The DOH must provide technical assistance to firearms dealers and firearms ranges that want to participate in the program, and conduct or contract for random audits of businesses that participate in order to ensure compliance with Project requirements. The DOH must implement the Project beginning January 1, 2018. The Project terminates January 1, 2024.

#### Suicide Assessment, Treatment, and Management Training for Pharmacists.

A licensed pharmacist must complete a one-time training on suicide assessment, treatment, and management. The training must be completed by the end of the pharmacist's first full continuing education reporting period after January 1, 2017, or during his or her first full continuing education reporting period after initial licensure, whichever is later. Three-hour trainings for pharmacists must include content related to the assessment of issues related to imminent harm via lethal means.

The Schools of Pharmacy at the UW and Washington State University must convene a work group to develop curriculum for pharmacy students on suicide assessment, treatment, and management that includes identifying at-risk patients and limiting access to lethal means. The Schools of Pharmacy must consult with the Task Force on appropriate messages for the curriculum and submit a progress report to the Governor and Legislature by December 1,

2016. By January 1, 2017, the DOH and the Pharmacy Quality Assurance Commission, in consultation with the Task Force and experts on suicide assessment, treatment and management, must develop written materials on suicide awareness and prevention for pharmacies to post or distribute to customers.

**Votes on Final Passage:**

House	93	4	
Senate	47	0	(Senate amended)
House	94	2	(House concurred)

**Effective:** June 9, 2016  
January 1, 2017 (Section 5)

**Partial Veto Summary:** The Governor vetoed provisions of the bill that create a Safe Homes Project to certify firearms dealers and firearms ranges that meet specified requirements as Safe Homes Partners.