

HOUSE BILL REPORT

HB 1379

As Reported by House Committee On:
Higher Education

Title: An act relating to implementing a comprehensive approach to suicide prevention and behavioral health in higher education.

Brief Description: Implementing a comprehensive approach to suicide prevention and behavioral health in higher education.

Sponsors: Representatives Orwall, Stambaugh, Blake, Holy, Pollet, Tarleton, Haler, Sells, Goodman, Lovick, Frame, Kilduff, Doglio and Stanford.

Brief History:

Committee Activity:

Higher Education: 2/7/17, 2/10/17 [DPS].

Brief Summary of Substitute Bill

- Requires the Department of Health to contract with a third party entity to create a statewide resource for postsecondary institutions that includes such things as training curriculum and model protocols.
- Creates a grant program to fund postsecondary institutions' behavioral health and suicide prevention efforts.
- Requires postsecondary institutions to submit annual reports to the Department of Health on information related to behavioral health and suicide on their campuses.

HOUSE COMMITTEE ON HIGHER EDUCATION

Majority Report: The substitute bill be substituted therefor and the substitute bill do pass. Signed by 9 members: Representatives Hansen, Chair; Pollet, Vice Chair; Holy, Ranking Minority Member; Van Werven, Assistant Ranking Minority Member; Haler, Orwall, Sells, Stambaugh and Tarleton.

Staff: Trudes Tango (786-7384).

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.

Background:

Public secondary schools are required to have crisis plans that include suicide prevention. Postsecondary institutions are not statutorily required to have suicide prevention plans, but many institutions have initiatives focused on addressing behavioral health and suicide prevention on their campuses.

In 2015 the Legislature created the Task Force on Mental Health and Suicide Prevention at the Higher Education Institutions (Task Force) to determine what policies, resources, and technical assistance are needed to support the institutions in improving access to mental health services and improving suicide prevention responses. Members of the Task Force included, among others, the Washington Student Achievement Council (WSAC), the Council of Presidents, the institutions of higher education, the Independent Colleges of Washington, the Department of Veteran Affairs, and the Department of Health (DOH). Forefront, an organization based at the University of Washington School of Social Work, staffed the Task Force.

At the end of 2016, the Task Force reported its findings and provided recommendations to the Legislature regarding resources and technical assistance needed at the institutions. The Task Force is set to expire July 1, 2017.

Summary of Substitute Bill:

Statewide Resource.

Subject to funds appropriated, the DOH must collaborate with the WSAC to develop a statewide resource for behavioral health and suicide prevention for the state's postsecondary institutions. The DOH must contract with an entity that has suicide prevention expertise, which will be responsible for constructing and hosting the statewide resource and linking the resource to the WSAC and the DOH websites.

At a minimum, the statewide resource must:

- be made publicly available through a web-based portal or a support line;
- provide a free curriculum to train faculty, staff, and students in suicide recognition and referral skills;
- provide a free curriculum for institutions to train others to deliver trainings in person;
- contain model crisis protocols, per sector, that include behavioral health and suicide identification, intervention, reentry, and postvention;
- contain model marketing materials and messages that promote student behavioral health;
- develop capacity for an annual conference for institutions (the contracting entity is responsible for hosting the first conference); and
- include resources that serve diverse communities and underrepresented populations.

To establish the components of the statewide resource, the DOH must work with the Task Force and entities or persons that include the following:

- representation from a tribal college;

- representation from a veterans training support center;
- representation from students and families;
- representatives selected by the Educational Opportunity Gap Oversight and Accountability Committee;
- representation from a community behavioral health provider;
- a suicide prevention expert; and
- three institutional counseling center directors or executive directors, one from a public four-year institution, one from a private nonprofit institution, and one from a community and technical college.

The statewide resource must be available to postsecondary institutions by June 30, 2019.

Grant Program.

Subject to funds appropriated, the Suicide Prevention in Higher Education grant program is created to provide funding for postsecondary institutions to develop basic infrastructure and strategic plans supporting behavioral health and suicide prevention. Development of basic infrastructure and strategic plans include creating partnerships with state agencies and community organizations such as community crisis clinics.

"Postsecondary institutions" includes the public two-year and four-year institutions of higher education, degree-granting institutions, private vocational schools, and cosmetology and barber schools.

The WSAC must administer the grant program, in collaboration with the Task Force. The grant program must be implemented by August 1, 2018.

Data Collection.

For the purposes of establishing a baseline for behavioral health concerns and responses, postsecondary institutions must submit annual reports to the DOH beginning June 1, 2018 and ending in 2021. The report must include certain information in compliance with the DOH's data collection requirements, and must indicate whether the institution does not collect or have access to the specified information.

The reports must include the following information:

- the awareness of students, faculty, and staff about behavioral health and suicide prevention resources;
- the institution's counselor-to-student ratio;
- the number of students referred to off-campus behavioral health providers;
- the number of students identifying emotional distress as reasons for withdrawal;
- the number of student suicide deaths;
- the number of student suicide attempts resulting in hospitalization;
- information about dissemination of material to students about on and off campus resources;
- confirmation of campus plans identifying the groups already receiving training and groups who will receive training in the future;
- the entity on campus that develops and maintains the campus crisis plan; and
- the point person responsible for the crisis plan.

The reporting requirement applies to the same institutions eligible for the grant program.

The DOH must aggregate the information received by sector and serve as the depository for the annual reports. The DOH must collaborate with postsecondary institutions in establishing data collection requirements and criteria.

The expiration date of the Task Force is repealed.

Substitute Bill Compared to Original Bill:

The substitute bill corrects a codification error.

Appropriation: None.

Fiscal Note: Available.

Effective Date of Substitute Bill: The bill contains an emergency clause and takes effect immediately.

Staff Summary of Public Testimony:

(In support) Washington has a higher rate of suicide than the national average. In the higher education settings, the two high-risk groups are veterans and youth. There needs to be more data to find out how to better direct state resources. Students in the two-year school systems don't have many resources. Many of the community colleges do not have a dedicated mental health counselor on campus. Students can't succeed if they have emotional health issues. About 10 percent of students think about suicide, but it is really unknown how many students are at risk because there is no statewide data collection. There needs to be a shift in priority towards early intervention and prevention rather than treating people with mental health issues after harm is already done. College is a place where many mental health issues begin to emerge, especially because it's many students' first time away from home. There is a serious lack of funds for behavioral health, especially in the rural areas. This bill can begin to establish a statewide resource for all campuses across the state.

(Opposed) None.

Persons Testifying: Representative Orwall, prime sponsor; Jennifer Stuber and Marny Lombard, Forefront; Ted Wicorek, Veterans Legislative Coalition; Edward Esparza, State Board for Community and Technical Colleges; Scott Latiolais, Renton Technical College; Seth Dawson, National Alliance on Mental Illness; Jerry Fugich, Veterans of Foreign Wars; and Donn Marshall, University of Puget Sound.

Persons Signed In To Testify But Not Testifying: None.