

FINAL BILL REPORT

ESHB 2411

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Synopsis as Enacted

Brief Description: Preventing suicide.

Sponsors: House Committee on Health Care & Wellness (originally sponsored by Representatives Orwall, Kilduff, Gildon, Leavitt, Paul, Cody, Davis, Pollet, Goodman, Wylie, Doglio and Morgan).

House Committee on Health Care & Wellness
Senate Committee on Health & Long Term Care

Background:

The following health professions must complete training in suicide assessment, treatment, and management every six years as part of their continuing education requirements:

- counselors and certified advisors;
- substance use disorder professionals;
- marriage and family therapists, mental health counselors, and social workers;
- occupational therapy practitioners; and
- psychologists.

The following health professions must complete one-time training in suicide assessment, treatment, and management as part of their continuing education requirements:

- chiropractors;
- naturopaths;
- licensed practical nurses, registered nurses, and advanced registered nurse practitioners;
- physicians;
- osteopathic physicians;
- physician assistants;
- osteopathic physician assistants;
- physical therapists;
- physical therapist assistants;
- pharmacists;
- dentists;
- dental hygienists; and
- athletic trainers.

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.

To satisfy the training requirement, a member of one of the health professions subject to the requirement must complete a training from a model list maintained by the Department of Health (DOH). All trainings on the model list must meet minimum standards developed by the DOH.

Summary:

I. Advanced Training.

The second training for a psychologist, marriage and family therapist, mental health counselor, advanced social worker, independent clinical social worker, or an associate advanced or independent clinical social worker must either be:

- an advanced training focused on suicide management, suicide care protocols, or effective treatments; or
- a training in a treatment modality shown to be effective in working with people who are suicidal, including dialectical behavior therapy, collaborative assessment and management of suicide risk, or cognitive behavior therapy—suicide management.

The Department of Health (DOH) must develop minimum standards for this training and include training that meets the minimum standards on the model list. A person is exempt from the training if he or she can demonstrate that the training is not reasonably available.

II. One-Time Training.

Optometrists and acupuncture and Eastern medicine practitioners are added to the one-time training requirement for suicide assessment, treatment, and management.

III. Veterinarians.

Beginning July 1, 2022, all veterinarians and veterinary technicians must complete one-time suicide prevention training developed by the Veterinary Board of Governors (VBG). When developing the training, the VBG must consult with the University of Washington's Forefront Suicide Prevention Center of Excellence (FSPCE) and affected professional associations.

The training must:

- recognize that veterinarians treat animal patients and have limited interaction with animal patient owners;
- focus on mental health and well-being;
- include general content on suicide risk, prevention, and resources;
- include specific content on imminent harm by lethal means; and
- be three hours in length.

The hours spent completing the training must count toward meeting applicable continuing education requirements. The VBG may exempt a veterinarian or a veterinary technician from the requirement if he or she completed substantially equivalent training between July 1, 2019, and July 1, 2022.

IV. The Construction Industry.

Subject to appropriated funds, the FSPCE must develop:

- an online, interactive training module in suicide prevention; and
- a series of complementary modules to be delivered by the construction industry, which must include training on available resources, lethal means safety, screening tools, men's mental health, and a refresher on the online training.

When developing the training, the FSPCE must coordinate with associations representing the construction industry. The training must be developed by July 1, 2021.

Votes on Final Passage:

House	95	0
Senate	48	0

Effective: June 11, 2020
August 1, 2020 (Section 1)