

HOUSE BILL REPORT

ESHB 2411

As Passed Legislature

Title: An act relating to suicide prevention.

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).

Brief History:

Committee Activity:

Health Care & Wellness: 1/22/20, 1/31/20 [DPS].

Floor Activity:

Passed House: 2/12/20, 95-0.

Passed Senate: 3/3/20, 48-0.

Passed Legislature.

Brief Summary of Engrossed Substitute Bill

- Requires advanced suicide prevention training for certain mental health professionals.
- Requires optometrists and acupuncture and Eastern medicine practitioners to complete one-time training in suicide assessment, treatment, and management.
- Requires veterinarians and veterinary technicians to complete suicide prevention training.
- Requires the University of Washington to develop suicide prevention training for the construction industry.

HOUSE COMMITTEE ON HEALTH CARE & WELLNESS

Majority Report: The substitute bill be substituted therefor and the substitute bill do pass. Signed by 14 members: Representatives Cody, Chair; Macri, Vice Chair; Schmick, Ranking Minority Member; Chambers, Chopp, Davis, DeBolt, Harris, Maycumber, Riccelli, Robinson, Stonier, Thai and Tharinger.

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.

Staff: Jim Morishima (786-7191).

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.

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 of Engrossed Substitute Bill:

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 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 University of Washington's Forefront Suicide Prevention Center of Excellence (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.

Appropriation: None.

Fiscal Note: Available.

Effective Date: The bill takes effect 90 days after adjournment of the session in which the bill is passed, except for section 1, relating to training requirements for certain health professions, which takes effect August 1, 2020.

Staff Summary of Public Testimony:

(In support) The state should be proud of the work it has done on suicide prevention. Behavioral health professionals have to complete training every six years. Washington is the only state to require this training. We have learned a lot about the impact of this training. There is evidence that the training has led to health professionals who are more competent, willing, and knowledgeable to perform suicide interventions. There should be a continuum of care to get the right option to the right patient at the right time. Most suicide victims were not in contact with a mental health provider. Any incremental steps to increase training are important. Safety planning interventions can be helpful to different types of health professions. Longitudinal studies, limiting access to lethal means, and specific, measurable action steps are next.

It is not enough to do the same training over and over. Subsequent trainings need to be advanced and evidence-based. Instead of having the same training repeated, this bill would require that certain professionals complete advanced training, which will give them the skills to work with patients at risk for suicide. This bill will keep people out of the hospital and help address the high suicide rate faced by veterans. This bill will also include other professions who were inadvertently left out of the law.

Veterinarians are faced with unique challenges and have higher suicide rates. They are also an important resource to family members. The contact veterinarians have with people is different and the training should also be different. The focus should be on staff and colleagues.

(Opposed) None.

Persons Testifying: Representative Orwall, prime sponsor; Jerry Fugich, Veterans Legislative Coalition; Jennifer Stuber, Forefront Suicide Prevention at the University of Washington; Christopher DeCou, University of Washington Center for Suicide Prevention and Recovery; and Greg Hanon, Washington State Veterinary Medical Association.

Persons Signed In To Testify But Not Testifying: None.