

# **FINAL BILL REPORT**

## **ESHB 2366**

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### **C 181 L 12**

#### Synopsis as Enacted

**Brief Description:** Requiring certain health professionals to complete education in suicide assessment, treatment, and management.

**Sponsors:** House Committee on Health Care & Wellness (originally sponsored by Representatives Orwall, Bailey, McCune, Jinkins, Upthegrove, Maxwell, Ladenburg, Kenney, Van De Wege and Darneille).

**House Committee on Health Care & Wellness**  
**House Committee on Ways & Means**  
**Senate Committee on Health & Long-Term Care**

#### **Background:**

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

According to the United States Centers for Disease Control and Prevention, suicide is the tenth leading cause of death nationally. Suicide assessment, treatment, and management training programs help participants identify individuals at risk of suicide and perform prevention-related services. The American Foundation for Suicide Prevention (AFSP) and the Suicide Prevention Resource Center (SPRC) jointly created a best practices registry that contains programs rated on accuracy of content, likelihood of meeting objectives, programmatic guidelines, and messaging guidelines. Programs listed on the best practices registry are not necessarily endorsed or recommended by the AFSP or the SPRC, but are intended to be used as an information source as part of a prevention planning process.

##### Continuing Education Requirements for Certain Mental Health Professionals.

All health professions are subject to at least four hours of Acquired Immune Deficiency Syndrome (AIDS) education prior to licensure and have varying requirements for continuing education.

- Certified counselors and certified advisors must complete at least 36 hours of continuing education every two years.
- Certified chemical dependency professionals must complete at least 28 hours of continuing education every two years.
- Licensed marriage and family therapists, mental health counselors, and social workers must complete at least 36 hours of continuing education every two years.

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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.*

- Licensed occupational therapy practitioners (includes both occupational therapists and occupational therapist assistants) must complete at least 30 hours of continuing education every two years.
- Licensed psychologists must complete at least 60 hours of continuing education every three years.

**Summary:**

Beginning January 1, 2014, the following health professions must complete training in suicide assessment, treatment, and management every six years as part of their continuing education requirements:

- certified counselors and certified advisors;
- certified chemical dependency professionals;
- licensed marriage and family therapists, mental health counselors, and social workers;
- licensed occupational therapy practitioners;
- licensed psychologists; and
- persons holding a retired active license in any of the affected professions.

The first training must be completed during the first full renewal period after initial licensure or the effective date of the act, whichever is later. A person is exempt from the first training if he or she can demonstrate completion, no more than six years prior to initial licensure, of a six-hour training program in suicide assessment, treatment, and management on the best practices registry of the AFSP and the SPRC.

The training must be approved by the relevant disciplining authority and must include the following elements: suicide assessment, including screening and referral, suicide treatment, and suicide management. A disciplining authority may approve a training program that does not include all of the elements if the element is inappropriate for the profession in question based on the profession's scope of practice. A training program that includes only screening and referral must be at least three hours in length. All other training programs must be at least six hours in length.

A disciplining authority may specify minimum training and experience necessary to exempt a practitioner from the training requirement. The Board of Occupational Therapy may exempt its licensees from the requirements by specialty if the specialty in question does not practice primary care and has only brief or limited patient contact. A state or local government employee, or an employee of a community mental health agency or a chemical dependency program, is exempt from the training requirements if he or she has at least six hours of training in suicide assessment, treatment, and management from his or her employer; the training may be provided in one six-hour block or in shorter segments at the employer's discretion.

The relevant disciplining authorities must work collaboratively to develop a model list of training programs to be reported to the Legislature by December 15, 2013. When developing the list, the disciplining authorities must:

- consider suicide assessment, treatment, and management training programs on the best practices registry of the American Foundation for Suicide Prevention and the Suicide Prevention Resource Center; and

- consult with public and private institutions of higher education, experts on suicide assessment, treatment, and management, and affected professional associations.

The Secretary of Health must conduct a study evaluating the effect of evidence-based suicide assessment, treatment, and management training on the ability of a licensed health care professional to identify, refer, treat, and manage patients with suicidal ideation. The study must, at a minimum:

- review available research and literature regarding the relationship between completion of the training and patient suicide rates;
- assess which licensed health care professionals are best situated to positively influence the mental health behavior of individuals with suicidal ideation;
- evaluate the impact of suicide assessment, treatment, and management training on veterans with suicidal ideation; and
- review curricula of health profession programs offered at state educational institutions regarding suicide prevention.

In conducting the study, the Secretary of Health may collaborate with other health profession disciplinary boards and commissions, professional associations, and other interested parties. A summary of the findings of the study must be reported to the Legislature no later than December 15, 2013.

The act may be known and cited as the Matt Adler Suicide Assessment, Treatment, and Management Training Act of 2012.

**Votes on Final Passage:**

House	92	5
Senate	48	0
	(Senate amended)	
House	96	0
	(House concurred)	

**Effective:** June 7, 2012