
SUBSTITUTE HOUSE BILL 2793

State of Washington

64th Legislature

2016 Regular Session

By House Judiciary (originally sponsored by Representatives Orwall, Blake, Kretz, Sullivan, Cody, Jenkins, Kagi, Goodman, Ormsby, Tharinger, Rossetti, and Reykdal)

READ FIRST TIME 02/02/16.

1 AN ACT Relating to providing for suicide awareness and prevention
2 education for safer homes; amending RCW 9.41.310 and 43.70.442;
3 adding a new section to chapter 43.70 RCW; adding a new section to
4 chapter 82.04 RCW; creating new sections; providing an effective
5 date; and providing expiration dates.

6 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

7 NEW SECTION. **Sec. 1.** The legislature finds that: Washington's
8 suicide rate is fourteen percent higher than the national average; on
9 average, two young people between the ages of ten and twenty-four die
10 by suicide each week; almost a quarter of those who die by suicide
11 are veterans; and many of the state's rural and tribal communities
12 have the highest suicide rates. The legislature further finds that
13 when suicide occurs, it has devastating consequences for communities
14 and schools, yet, according to the United States surgeon general,
15 suicide is the nation's most preventable form of death. The
16 legislature further finds that one of the most immediate ways to
17 reduce the tragedy of suicide is through suicide awareness and
18 prevention education coupled with safe storage of lethal means
19 commonly used in suicides, such as firearms and prescription
20 medications. The legislature further finds that incentivizing
21 firearms dealers to participate in suicide awareness and prevention

1 education programs and provide certain safe storage devices at cost
2 is an important step in creating safer homes and reducing suicide
3 deaths in the state.

4 NEW SECTION. **Sec. 2.** (1)(a) A safe homes task force is
5 established to raise public awareness and increase suicide prevention
6 education among new partners who are in key positions to help reduce
7 suicide. The task force shall be administered and staffed by the
8 University of Washington school of social work.

9 (b) The safe homes task force shall consist of the members
10 comprised of a suicide prevention and firearms subcommittee and a
11 suicide prevention and pharmacy subcommittee, as follows:

12 (i) The suicide prevention and firearms subcommittee shall
13 consist of the following members and be cochaired by the University
14 of Washington school of social work and a member identified in
15 (b)(i)(A) of this subsection (1):

16 (A) A representative of the national rifle association and a
17 representative of the second amendment foundation;

18 (B) Two representatives of suicide prevention organizations,
19 selected by the cochairs of the subcommittee;

20 (C) Two representatives of the firearms industry, selected by the
21 cochairs of the subcommittee;

22 (D) Two individuals who are suicide attempt survivors or who have
23 experienced suicide loss, selected by the cochairs of the
24 subcommittee;

25 (E) Two representatives of law enforcement agencies, selected by
26 the cochairs of the subcommittee;

27 (F) One representative from the department of health;

28 (G) One representative from the department of veterans affairs,
29 and one other individual representing veterans to be selected by the
30 cochairs of the subcommittee; and

31 (H) No more than two other interested parties, selected by the
32 cochairs of the subcommittee.

33 (ii) The suicide prevention and pharmacy subcommittee shall
34 consist of the following members and be cochaired by the University
35 of Washington school of social work and a member identified in
36 (b)(ii)(A) of this subsection (1):

37 (A) Two representatives of the Washington state pharmacy
38 association;

1 (B) Two representatives of retailers who operate pharmacies,
2 selected by the cochairs of the subcommittee;

3 (C) One faculty member from the University of Washington school
4 of pharmacy and one faculty member from the Washington State
5 University school of pharmacy;

6 (D) One representative of the department of health;

7 (E) One representative of the pharmacy quality assurance
8 commission;

9 (F) Two representatives of the Washington state poison control
10 center;

11 (G) One representative of the department of veterans affairs, and
12 one other individual representing veterans to be selected by the
13 cochairs of the subcommittee; and

14 (H) No more than two other interested parties, selected by the
15 cochairs of the subcommittee.

16 (c) The University of Washington school of social work shall
17 convene the initial meeting of the task force.

18 (2) The task force shall:

19 (a) Develop and prepare to disseminate online trainings on
20 suicide awareness and prevention for firearms dealers and their
21 employees and firearm range owners and their employees;

22 (b) In consultation with the department of fish and wildlife,
23 review the firearm safety pamphlet produced by the department of fish
24 and wildlife under RCW 9.41.310 and, by January 1, 2017, recommend
25 changes to the pamphlet to incorporate information on suicide
26 awareness and prevention;

27 (c) Develop suicide awareness and prevention messages for posters
28 and brochures that are tailored to be effective for firearms owners
29 for distribution to firearms dealers and firearm ranges;

30 (d) Develop suicide awareness and prevention messages for posters
31 and brochures for distribution to pharmacies;

32 (e) In consultation with the department of fish and wildlife,
33 develop strategies for creating and disseminating suicide awareness
34 and prevention information for hunting safety classes, including
35 messages to parents that can be shared during online registration, in
36 either follow up electronic mail communications, or in writing, or
37 both;

38 (f) Develop suicide awareness and prevention messages for
39 training for the schools of pharmacy and provide input on trainings
40 being developed for community pharmacists;

1 (g) Provide input to the department of health on the
2 implementation of the safe homes project established in section 3 of
3 this act;

4 (h) Create a web site that will be a clearinghouse for the newly
5 created suicide awareness and prevention materials developed by the
6 task force; and

7 (i) Create, implement, and evaluate a suicide awareness and
8 prevention pilot program in two counties, one rural and one urban,
9 that have high suicide rates. The pilot program shall include:

10 (i) Developing and directing advocacy efforts with firearms
11 dealers to pair suicide awareness and prevention training with
12 distribution of safe storage devices;

13 (ii) Developing and directing advocacy efforts with pharmacies to
14 pair suicide awareness and prevention training with distribution of
15 medication disposal kits and safe storage devices;

16 (iii) Training health care providers on suicide awareness and
17 prevention, paired with distribution of medication disposal kits and
18 safe storage devices; and

19 (iv) Training local law enforcement officers on suicide awareness
20 and prevention, paired with distribution of medication disposal kits
21 and safe storage devices.

22 (3) The task force shall consult with the department of health to
23 develop timelines for the completion of the necessary tasks
24 identified in subsection (2) of this section so that the department
25 of health is able to implement the safe homes project under section 3
26 of this act by January 1, 2018.

27 (4) Beginning December 1, 2016, the task force shall annually
28 report to the legislature on the status of its work. The task force
29 shall submit a final report by December 1, 2019, that includes the
30 findings of the suicide awareness and prevention pilot program
31 evaluation under subsection (2) of this section and recommendations
32 on possible continuation of the program. The task force shall submit
33 its reports in accordance with RCW 43.01.036.

34 (5) This section expires July 1, 2020.

35 NEW SECTION. **Sec. 3.** A new section is added to chapter 43.70
36 RCW to read as follows:

37 (1) The department shall develop and administer a safe homes
38 project to provide financial incentives to firearms dealers and

1 firearms ranges to encourage voluntary participation in a program to
2 implement suicide awareness and prevention strategies.

3 (2) As part of the safe homes project, the department shall
4 certify a firearms dealer or firearms range that meets the
5 requirements of subsection (3) of this section as a safe homes
6 partner. A firearms dealer or firearms range that has been certified
7 by the department as a safe homes partner is entitled to the tax
8 incentives provided in section 5 of this act.

9 (3) The department, in consultation with the safe homes task
10 force created in section 2 of this act, shall develop criteria for
11 certification of a firearms dealer or firearms range as a safe homes
12 partner that include, at a minimum, the following requirements:

13 (a) Posting of suicide awareness and prevention posters,
14 developed by the safe homes task force, at the firearms dealer's or
15 firearms range's premises;

16 (b) Distribution of suicide awareness and prevention brochures,
17 developed by the safe homes task force, to firearms purchasers and
18 customers;

19 (c) Completion by the firearms dealer and employees, or firearms
20 range and employees, of an online suicide awareness and prevention
21 training developed by the safe homes task force; and

22 (d) Offering safe storage devices, in the form of a lock box or
23 life jacket, for sale at cost to firearms purchasers, or customers.

24 (4) The department shall:

25 (a) Provide technical assistance to firearms dealers and firearms
26 ranges that want to participate in the safe homes project;

27 (b) Track and report status updates of the program to the
28 legislature in accordance with RCW 43.01.036; and

29 (c) Conduct, or contract with local health departments to
30 conduct, random audits of businesses who participate in the safe
31 homes project to ensure compliance with the requirements of this
32 section.

33 (5) The department shall implement the safe homes project
34 beginning January 1, 2018. Beginning December 1, 2017, and annually
35 thereafter, the department shall provide to the department of revenue
36 the name, address, and unified business identification number of each
37 business that is certified as a safe homes partner under this
38 section.

39 (6) For the purposes of this section:

1 (a) "Firearms dealer" means a firearms dealer licensed under RCW
2 9.41.110; and

3 (b) "Firearms range" means an entity that operates an area or
4 facility designed for the safe discharge or other use of firearms for
5 sport, recreational, or competitive shooting or training purposes.

6 NEW SECTION. **Sec. 4.** (1) This section is the tax preference
7 performance statement for the tax preference contained in section 5
8 of this act. This performance statement is only intended to be used
9 for subsequent evaluation of the tax preference. It is not intended
10 to create a private right of action by any party or be used to
11 determine eligibility for preferential tax treatment.

12 (2) The legislature categorizes this tax preference as one
13 intended to induce certain designated behavior by taxpayers, as
14 indicated in RCW 82.32.808(2)(a).

15 (3) It is the legislature's specific public policy objective to
16 incentivize firearms dealers and firearms ranges to participate in
17 the safe homes project by providing a tax credit for firearms dealers
18 and firearms ranges who become certified safe home partners under
19 section 3 of this act.

20 (4) To measure the effectiveness of the tax preference in section
21 5 of this act, in achieving the specific public policy objective
22 described in subsection (2) of this section, the joint legislative
23 audit and review committee must, at minimum, evaluate the following:

24 (a) The number of businesses that are claiming the credit
25 authorized in section 5 of this act;

26 (b) The total amount of credit claimed by fiscal year, with an
27 average credit amount estimated based on the number of businesses
28 claiming the credit;

29 (c) Any additional data related to the utilization and outcomes
30 of the safe homes project administered by the department of health
31 under section 3 of this act, including data related to the number of
32 suicide deaths in the state prior to the authorization of the credit
33 and after.

34 (5) The joint legislative audit and review committee may request
35 the necessary data from the department of health needed to complete
36 the evaluation under subsection (4) of this section.

37 NEW SECTION. **Sec. 5.** A new section is added to chapter 82.04
38 RCW to read as follows:

1 (1) Subject to the limits and provisions of this section, a
2 credit is authorized against the tax otherwise due under this chapter
3 for a firearms dealer licensed under RCW 9.41.110 or a firearms range
4 that is certified as a safe homes partner under section 3 of this
5 act.

6 (2) The maximum amount of credit that can be claimed under this
7 section is two thousand five hundred dollars per calendar year. The
8 amount of credit claimed for a reporting period may not exceed the
9 tax otherwise due under this chapter for that reporting period.

10 (3) Persons claiming a credit under this section must file
11 electronically with the department. No application is required to
12 claim the credit, but a taxpayer claiming a credit under this section
13 must keep records necessary for the department to determine
14 eligibility under this section, including records from the department
15 of health that identifies the taxpayer as a certified safe home
16 partner.

17 (4) Credits under this section may not be claimed before January
18 1, 2018, or after December 31, 2023.

19 **Sec. 6.** RCW 9.41.310 and 1994 c 264 s 2 are each amended to read
20 as follows:

21 (1) After a public hearing, the department of fish and wildlife
22 shall publish a pamphlet on firearms safety and the legal limits of
23 the use of firearms. The pamphlet shall include current information
24 on firearms laws and regulations and state preemption of local
25 firearms laws. By July 1, 2017, the department of fish and wildlife
26 shall update the pamphlet to incorporate information on suicide
27 awareness and prevention as recommended by the safe homes task force
28 established in section 2 of this act.

29 (2) This pamphlet may be used in the department's hunter safety
30 education program and shall be provided to the department of
31 licensing for distribution to firearms dealers and persons authorized
32 to issue concealed pistol licenses. The department of fish and
33 wildlife shall reimburse the department of licensing for costs
34 associated with distribution of the pamphlet.

35 **Sec. 7.** RCW 43.70.442 and 2015 c 249 s 1 are each amended to
36 read as follows:

37 (1)(a) Each of the following professionals certified or licensed
38 under Title 18 RCW shall, at least once every six years, complete

1 training in suicide assessment, treatment, and management that is
2 approved, in rule, by the relevant disciplining authority:

3 (i) An adviser or counselor certified under chapter 18.19 RCW;

4 (ii) A chemical dependency professional licensed under chapter
5 18.205 RCW;

6 (iii) A marriage and family therapist licensed under chapter
7 18.225 RCW;

8 (iv) A mental health counselor licensed under chapter 18.225 RCW;

9 (v) An occupational therapy practitioner licensed under chapter
10 18.59 RCW;

11 (vi) A psychologist licensed under chapter 18.83 RCW;

12 (vii) An advanced social worker or independent clinical social
13 worker licensed under chapter 18.225 RCW; and

14 (viii) A social worker associate—advanced or social worker
15 associate—independent clinical licensed under chapter 18.225 RCW.

16 (b) The requirements in (a) of this subsection apply to a person
17 holding a retired active license for one of the professions in (a) of
18 this subsection.

19 (c) The training required by this subsection must be at least six
20 hours in length, unless a disciplining authority has determined,
21 under subsection ~~((+9))~~ (10)(b) of this section, that training that
22 includes only screening and referral elements is appropriate for the
23 profession in question, in which case the training must be at least
24 three hours in length.

25 (d) Beginning July 1, 2017, the training required by this
26 subsection must be on the model list developed under subsection (6)
27 of this section. Nothing in this subsection (1)(d) affects the
28 validity of training completed prior to July 1, 2017.

29 (2)(a) Except as provided in (b) of this subsection, a
30 professional listed in subsection (1)(a) of this section must
31 complete the first training required by this section by the end of
32 the first full continuing education reporting period after January 1,
33 2014, or during the first full continuing education reporting period
34 after initial licensure or certification, whichever occurs later.

35 (b) A professional listed in subsection (1)(a) of this section
36 applying for initial licensure may delay completion of the first
37 training required by this section for six years after initial
38 licensure if he or she can demonstrate successful completion of the
39 training required in subsection (1) of this section no more than six
40 years prior to the application for initial licensure.

1 (3) The hours spent completing training in suicide assessment,
2 treatment, and management under this section count toward meeting any
3 applicable continuing education or continuing competency requirements
4 for each profession.

5 (4)(a) A disciplining authority may, by rule, specify minimum
6 training and experience that is sufficient to exempt an individual
7 professional from the training requirements in subsections (1) and
8 (5) of this section. Nothing in this subsection (4)(a) allows a
9 disciplining authority to provide blanket exemptions to broad
10 categories or specialties within a profession.

11 (b) A disciplining authority may exempt a professional from the
12 training requirements of subsections (1) and (5) of this section if
13 the professional has only brief or limited patient contact.

14 (5)(a) (~~Beginning January 1, 2016,~~) Each of the following
15 professionals credentialed under Title 18 RCW shall complete a one-
16 time training in suicide assessment, treatment, and management that
17 is approved by the relevant disciplining authority:

18 (i) A chiropractor licensed under chapter 18.25 RCW;

19 (ii) A naturopath licensed under chapter 18.36A RCW;

20 (iii) A licensed practical nurse, registered nurse, or advanced
21 registered nurse practitioner, other than a certified registered
22 nurse anesthetist, licensed under chapter 18.79 RCW;

23 (iv) An osteopathic physician and surgeon licensed under chapter
24 18.57 RCW, other than a holder of a postgraduate osteopathic medicine
25 and surgery license issued under RCW 18.57.035;

26 (v) An osteopathic physician assistant licensed under chapter
27 18.57A RCW;

28 (vi) A physical therapist or physical therapist assistant
29 licensed under chapter 18.74 RCW;

30 (vii) A physician licensed under chapter 18.71 RCW, other than a
31 resident holding a limited license issued under RCW 18.71.095(3);

32 (viii) A physician assistant licensed under chapter 18.71A RCW;
33 (~~and~~)

34 (ix) A pharmacist licensed under chapter 18.64 RCW; and

35 (x) A person holding a retired active license for one of the
36 professions listed in (a)(i) through (~~(viii)~~) (ix) of this
37 subsection.

38 (b)(i) A professional listed in (a)(i) through (viii) of this
39 subsection or a person holding a retired active license for one of
40 the professions listed in (a)(i) through (viii) of this subsection

1 must complete the one-time training by the end of the first full
2 continuing education reporting period after January 1, 2016, or
3 during the first full continuing education reporting period after
4 initial licensure, whichever is later. Training completed between
5 June 12, 2014, and January 1, 2016, that meets the requirements of
6 this section, other than the timing requirements of this subsection
7 (5)(b), must be accepted by the disciplining authority as meeting the
8 one-time training requirement of this subsection (5).

9 (ii) A licensed pharmacist or a person holding a retired active
10 pharmacist license must complete the one-time training by the end of
11 the first full continuing education reporting period after January 1,
12 2017, or during the first full continuing education reporting period
13 after initial licensure, whichever is later.

14 (c) The training required by this subsection must be at least six
15 hours in length, unless a disciplining authority has determined,
16 under subsection ~~((+9))~~ (10)(b) of this section, that training that
17 includes only screening and referral elements is appropriate for the
18 profession in question, in which case the training must be at least
19 three hours in length.

20 (d) Beginning July 1, 2017, the training required by this
21 subsection must be on the model list developed under subsection (6)
22 of this section. Nothing in this subsection (5)(d) affects the
23 validity of training completed prior to July 1, 2017.

24 (6)(a) The secretary and the disciplining authorities shall work
25 collaboratively to develop a model list of training programs in
26 suicide assessment, treatment, and management.

27 (b) The secretary and the disciplining authorities shall update
28 the list at least once every two years.

29 (c) By June 30, 2016, the department shall adopt rules
30 establishing minimum standards for the training programs included on
31 the model list. The minimum standards must require that six-hour
32 trainings include content specific to veterans and the assessment of
33 issues related to imminent harm via lethal means or self-injurious
34 behaviors and that three-hour trainings for pharmacists include
35 content related to the assessment of issues related to imminent harm
36 via lethal means. When adopting the rules required under this
37 subsection (6)(c), the department shall:

38 (i) Consult with the affected disciplining authorities, public
39 and private institutions of higher education, educators, experts in
40 suicide assessment, treatment, and management, the Washington

1 department of veterans affairs, and affected professional
2 associations; and

3 (ii) Consider standards related to the best practices registry of
4 the American foundation for suicide prevention and the suicide
5 prevention resource center.

6 (d) Beginning January 1, 2017:

7 (i) The model list must include only trainings that meet the
8 minimum standards established in the rules adopted under (c) of this
9 subsection and any three-hour trainings that met the requirements of
10 this section on or before July 24, 2015;

11 (ii) The model list must include six-hour trainings in suicide
12 assessment, treatment, and management, and three-hour trainings that
13 include only screening and referral elements; and

14 (iii) A person or entity providing the training required in this
15 section may petition the department for inclusion on the model list.
16 The department shall add the training to the list only if the
17 department determines that the training meets the minimum standards
18 established in the rules adopted under (c) of this subsection.

19 (7) The department shall provide the health profession training
20 standards created in this section to the professional ((~~education~~
21 ~~educator~~)) educator standards board as a model in meeting the
22 requirements of RCW 28A.410.226 and provide technical assistance, as
23 requested, in the review and evaluation of educator training
24 programs. The educator training programs approved by the professional
25 educator standards board may be included in the department's model
26 list.

27 (8) Nothing in this section may be interpreted to expand or limit
28 the scope of practice of any profession regulated under chapter
29 18.130 RCW.

30 (9) The secretary and the disciplining authorities affected by
31 this section shall adopt any rules necessary to implement this
32 section.

33 (10) For purposes of this section:

34 (a) "Disciplining authority" has the same meaning as in RCW
35 18.130.020.

36 (b) "Training in suicide assessment, treatment, and management"
37 means empirically supported training approved by the appropriate
38 disciplining authority that contains the following elements: Suicide
39 assessment, including screening and referral, suicide treatment, and
40 suicide management. However, the disciplining authority may approve

1 training that includes only screening and referral elements if
2 appropriate for the profession in question based on the profession's
3 scope of practice. The board of occupational therapy may also approve
4 training that includes only screening and referral elements if
5 appropriate for occupational therapy practitioners based on practice
6 setting.

7 (11) A state or local government employee is exempt from the
8 requirements of this section if he or she receives a total of at
9 least six hours of training in suicide assessment, treatment, and
10 management from his or her employer every six years. For purposes of
11 this subsection, the training may be provided in one six-hour block
12 or may be spread among shorter training sessions at the employer's
13 discretion.

14 (12) An employee of a community mental health agency licensed
15 under chapter 71.24 RCW or a chemical dependency program certified
16 under chapter 70.96A RCW is exempt from the requirements of this
17 section if he or she receives a total of at least six hours of
18 training in suicide assessment, treatment, and management from his or
19 her employer every six years. For purposes of this subsection, the
20 training may be provided in one six-hour block or may be spread among
21 shorter training sessions at the employer's discretion.

22 NEW SECTION. **Sec. 8.** The schools of pharmacy at the University
23 of Washington and Washington State University shall convene a work
24 group to jointly develop a curriculum on suicide assessment,
25 treatment, and management for pharmacy students. The curriculum must
26 include material on identifying at-risk patients and limiting access
27 to lethal means. When developing the curriculum, the schools shall
28 consult with experts on suicide assessment, treatment, and
29 management, and with the safe homes task force created in section 2
30 of this act on appropriate suicide awareness and prevention
31 messaging. The schools of pharmacy shall submit a progress report to
32 the governor and the relevant committees of the legislature by
33 December 1, 2016.

34 NEW SECTION. **Sec. 9.** By January 1, 2017, the department of
35 health and the pharmacy quality assurance commission shall jointly
36 develop written materials on suicide awareness and prevention that
37 pharmacies may post or distribute to customers. When developing the
38 written materials, the department and the commission shall consult

1 with experts on suicide assessment, treatment, and management, and
2 with the safe homes task force created in section 2 of this act on
3 appropriate suicide awareness and prevention messaging.

4 NEW SECTION. **Sec. 10.** Section 7 of this act takes effect
5 January 1, 2017.

6 NEW SECTION. **Sec. 11.** Sections 3 and 5 of this act expire
7 January 1, 2024.

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