

# HOUSE BILL REPORT

## HB 2513

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### 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, with enhanced services to student veterans.

**Brief Description:** Concerning suicide prevention and behavioral health in higher education, with enhanced services to student veterans.

**Sponsors:** Representatives Orwall, Holy, Kilduff, Pellicciotti, Ortiz-Self, Senn, Stambaugh, Gregerson, Reeves, Muri, McBride, Wylie, Peterson, Stanford, Pollet, Doglio and Johnson.

#### **Brief History:**

##### **Committee Activity:**

Higher Education: 1/16/18, 1/17/18 [DP].

#### **Brief Summary of Bill**

- Requires the Department of Health to contract with a third party entity to create a statewide resource for behavioral health and suicide prevention in post secondary institutions that includes such things as training curriculum and model protocols.
- Creates a grant program to fund post secondary institutions' behavioral health and suicide prevention efforts and requires that the first six grants be awarded to community and technical colleges.
- Requires post secondary institutions to submit annual reports to the Department of Health regarding information related to behavioral health and suicide on their campuses.

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#### **HOUSE COMMITTEE ON HIGHER EDUCATION**

**Majority Report:** Do pass. Signed by 8 members: Representatives Hansen, Chair; Pollet, Vice Chair; Holy, Ranking Minority Member; Van Werven, Assistant Ranking Minority Member; Haler, Orwall, Sells and Tarleton.

**Staff:** Trudes Tango (786-7384).

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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.*

## **Background:**

Public secondary schools are required to have crisis plans that include suicide prevention. Post secondary 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 providing resources and technical assistance to post secondary institutions. The Task Force expired July 1, 2017.

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## **Summary of 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 post secondary 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 and in the specific needs of student veterans;
- provide a resource to build capacity within the institutions to train others who can conduct 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 convene and consult with a work group consisting of representatives from stakeholder groups the DOH deems

appropriate. The DOH must consider representatives from the entities listed in the 2015 Task Force, and at a minimum the work group must include:

- 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 post secondary institutions by June 30, 2020.

#### Grant Program.

Subject to funds appropriated, the Suicide Prevention in Higher Education grant program (grant program) is created to provide funding for post secondary institutions to create partnerships with health care entities providing mental health, behavioral health, and suicide prevention to students.

The WSAC must administer the grant program, in collaboration with the work group convened by the DOH. The grant program must be implemented by November 1, 2019.

The WSAC must award the first six grants to public community and technical colleges (CTC). When selecting the CTC recipients, the WSAC must consult with the State Board for Community and Technical Colleges. The WSAC must identify which CTCs have the greatest need along with a clear and strong demonstration of leadership willingness to utilize the statewide resources created under the act and develop partnerships to enhance capacity. From those identified CTCs, the WSAC must give priority to proposals that enhance treatment services to student veterans. Once the first six grants are awarded to CTCs, the WSAC may award grants to other post secondary institutions.

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

#### Data Collection.

For the purposes of establishing a baseline for behavioral health concerns and responses, post secondary institutions must submit annual reports to the DOH beginning June 1, 2019, and ending in 2022. 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;
- information about behavioral health services and supports available to veterans on campus; 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, serve as the depository for the annual reports, and by December 1 of each year, submit an aggregated summary report to the relevant committees of the Legislature. The DOH must collaborate with post secondary institutions in establishing data collection requirements and criteria.

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**Appropriation:** None.

**Fiscal Note:** Requested on January 9, 2018.

**Effective Date:** The bill takes effect 90 days after adjournment of the session in which the bill is passed.

**Staff Summary of Public Testimony:**

(In support) The bill goes a long way to implement the recommendations of the 2015 Task Force. It ensures that higher education institutions have crisis plans and training materials for staff, students, and faculty. Intervention and protocols are critical. Reports show that about half of military veterans have contemplated suicide. There are about 2,400 veterans on Washington's campuses. There are at least six community and technical colleges that do not have any mental health counselors on staff. Local community resources are helpful but they are not the same as having support on campus to intervene when a student is in crisis. Washington has been a leader in suicide prevention in the health care arena, and this bill brings that leadership to higher education.

(Opposed) None.

(Other) Suicide prevention efforts are critical for veterans. Training will help faculty understand the warning signs exhibited by veterans.

**Persons Testifying:** (In support) Representative Orwall, prime sponsor; Edward Esparza, State Board of Community and Technical College; Scott Latiolais, Clover Park Technical College Student Affairs; Esther Sexton, Lower Columbia College Counseling Department;

Katie Viola, Lake Washington Institute of Technology Student Development; Robert Munoz, The Evergreen State College; Marny Lombard; Jennifer Stuber, Forefront Suicide Prevention at the University of Washington; Donn Marshall, University of Puget Sound Counseling Services; Christian Crowell; Ted Wicorick, Veterans Legislative Coalition; and Lee Monic.

(Other) Alfie Alvarado, Washington State Department of Veteran Affairs.

**Persons Signed In To Testify But Not Testifying:** Cody Eccles, Council of Presidents.