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**SUBSTITUTE SENATE BILL 6570**

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**State of Washington**

**66th Legislature**

**2020 Regular Session**

**By** Senate Behavioral Health Subcommittee to Health & Long Term Care (originally sponsored by Senators King, Saldaña, Wagoner, Lovelett, and Wilson, C.)

READ FIRST TIME 02/07/20.

1 AN ACT Relating to law enforcement officer mental health and  
2 wellness; creating new sections; and providing an expiration date.

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

4 NEW SECTION. **Sec. 1.** (1) The legislature finds that law  
5 enforcement officers respond to and witness some of the most tragic  
6 events that happen in our communities. On-the-job stress can have a  
7 significant impact on their physical and mental well-being and can  
8 accumulate over the course of a career.

9 (2) Research indicates that law enforcement officers experience  
10 key risk factors for suicides, including exposure to trauma, alcohol  
11 use, availability of firearms, and the strains of shift work.  
12 Compared to the general population, law enforcement officers report  
13 much higher rates of depression, posttraumatic stress disorder, and  
14 other anxiety-related mental health conditions. These health  
15 conditions have a significant impact on the officers and their  
16 families.

17 (3) A 2019 report from the United States department of justice  
18 found that, nationally, law enforcement suicides are 28.2 per one  
19 hundred thousand for men and 12.2 per one hundred thousand for women.  
20 A 2018 report by the Ruderman family foundation found that law

1 enforcement officers are one and one-half times more likely to die by  
2 suicide than the general population.

3 (4) Despite these significant risk factors, there is no central  
4 repository of comprehensive data regarding law enforcement officer  
5 suicides. As a result, there are no comprehensive tools available to  
6 law enforcement agencies to develop effective suicide prevention  
7 strategies, or to know whether those strategies are making a  
8 difference.

9 (5) Although Washington state has conducted significant work  
10 towards suicide prevention more broadly, there is not a current  
11 statewide program that provides comprehensive, evidence-based mental  
12 health and suicide prevention resources for law enforcement and their  
13 families.

14 (6) The legislature finds that there is an urgent need to develop  
15 resources and interventions specifically targeted at helping law  
16 enforcement and their family members manage their behavioral health  
17 needs.

18 NEW SECTION. **Sec. 2.** (1)(a) The department of health shall  
19 convene a task force on law enforcement officer mental health and  
20 wellness in Washington state with members as provided in this  
21 subsection:

- 22 (i) The secretary of health, or the secretary's designee;
- 23 (ii) The chief of the Washington state patrol, or the chief's  
24 designee;
- 25 (iii) The secretary of the department of corrections, or the  
26 secretary's designee;
- 27 (iv) A representative from the University of Washington's  
28 forefront suicide prevention program;
- 29 (v) The executive director of the criminal justice training  
30 commission, or the director's designee;
- 31 (vi) A psychiatrist;
- 32 (vii) A representative of local public health;
- 33 (viii) One representative each from:
  - 34 (A) The Washington council of police and sheriffs;
  - 35 (B) The Washington state fraternal order of police;
  - 36 (C) The council of metropolitan police and sheriffs;
  - 37 (D) The Washington state patrol troopers association;
  - 38 (E) The Washington state patrol lieutenants and captains  
39 association;

1 (F) Tribal law enforcement;

2 (G) The Washington association of sheriffs and police chiefs;

3 (H) An association representing community behavioral health  
4 agencies;

5 (I) An association representing mental health providers; and

6 (J) An association representing substance use disorder treatment  
7 providers.

8 (b) The representative from the department of health shall serve  
9 as the chair of the task force.

10 (c) At a minimum, the task force shall meet quarterly.

11 (2) The task force shall review the following issues and  
12 information:

13 (a) Data related to the behavioral health status of law  
14 enforcement officers, including suicide rates, substance abuse rates,  
15 posttraumatic stress disorder, depression, availability of behavioral  
16 health services, and utilization of behavioral health services;

17 (b) Factors unique to the law enforcement community that affect  
18 the behavioral health of persons working in law enforcement,  
19 including factors affecting suicide rates;

20 (c) Components that should be addressed in the behavioral health  
21 and suicide prevention pilot program established in section 3 of this  
22 act, including consideration of components that relate to similar  
23 programs funded or partially funded by the bureau of justice  
24 assistance and the national institute of justice;

25 (d) The recommendations of the Washington state department of  
26 health's suicide prevention plan and the applicability of the plan's  
27 recommendations to law enforcement mental health issues;

28 (e) The recommendations of the United States department of  
29 justice 2019 report to congress on law enforcement mental health and  
30 wellness; and

31 (f) Options to improve the behavioral health status of and reduce  
32 prevalent mental health issues and the suicide risk among law  
33 enforcement officers and their families.

34 (3) Staff support for the task force shall be provided by the  
35 department of health.

36 (4) The task force shall report its findings and recommendations  
37 to the governor and relevant committees of the legislature by  
38 December 1, 2021, including a summary of:

39 (a) The data to be reviewed described in subsection (2) of this  
40 section;

1 (b) The results of the pilot projects funded by this act and  
2 recommendations regarding the continuation of those programs;

3 (c) The best practices and policies for providing mental health  
4 services and preventing law enforcement suicides; and

5 (d) Recommendations on resources and technical assistance to  
6 support law enforcement agencies in preventing law enforcement  
7 suicides.

8 (5) This section expires July 1, 2022.

9 NEW SECTION. **Sec. 3.** (1) Subject to the availability of amounts  
10 appropriated for this specific purpose not to exceed three hundred  
11 thousand dollars per fiscal year, the Washington association of  
12 sheriffs and police chiefs shall establish three pilot projects to  
13 support behavioral health improvement and suicide prevention efforts  
14 for law enforcement officers.

15 (2) The Washington association of sheriffs and police chiefs  
16 shall establish a competitive grant program to award funding for the  
17 three pilot projects by September 1, 2020.

18 (3) Law enforcement associations and agencies are eligible to  
19 compete for grant funding.

20 (4) The following programs and activities are eligible for grant  
21 funding:

22 (a) Public information and wellness promotion campaigns;

23 (b) Embedded mental health professionals;

24 (c) Peer support programs;

25 (d) Resiliency training programs; and

26 (e) Critical incident stress management programs.

27 (5) Grantees must provide a report to the association on the  
28 results of their program by October 1, 2021. The association must  
29 provide the information to the officer mental health and wellness  
30 task force established in section 2 of this act, for incorporation in  
31 the December 1, 2021, report to the governor and relevant committees  
32 of the legislature.

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