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[Introduced February 2, 2015; referred to the Committee on Health and Human Resources; and then to the Committee on Education.]

A BILL to amend the Code of West Virginia, 1931, as amended, by adding thereto a new section, designated §18-2-40; to amend said code by adding thereto a new section, designated §18B-1B-7; to amend said code by adding thereto a new article, designated §27-6-1 and §27-6-2; and to amend and reenact §30-1-7a of said code, all relating generally to suicide prevention training; requiring middle and high schools to provide information and opportunities for discussion of suicide prevention to students; authorizing the State Board of Education to consult with the Bureau for Behavioral Health to assure the quality and accuracy of the information provided; providing that institutions of higher education will develop and implement a policy to advise students and staff on available depression and suicide prevention resources; requiring suicide prevention information to be provided to all incoming students; requiring suicide prevention information to be posted on the websites of institutions of higher education; requiring free prevention materials and programs to be posted on the websites of all institutions of higher education, the higher education policy commission and the Bureau for Behavioral Health and Health Facilities; requiring the Bureau for Behavioral Health and Health Facilities to review such posted materials annually; providing legislative findings; requiring the Bureau for Behavioral Health and Health Facilities to post certain suicide prevention and awareness information on its website; providing for the Bureau for Behavioral Health and Health Facilities to assist middle and high schools in providing suicide prevention information to students; requiring certain health care professionals to obtain continuing education courses on suicide prevention and related topics as part of their license renewal; providing that certain health care professionals may only be required to complete two hours of suicide prevention training; requiring certain health care licensing boards to establish continuing education requirements and criteria and approve continuing education courses on suicide prevention and related topics.

Be it enacted by the Legislature of West Virginia:

That the Code of West Virginia, 1931, as amended, be amended by adding thereto a new section, designated §18-2-40; that said code be amended by adding thereto a new section, designated §18B-1B-7; that said code be amended by adding thereto a new article, designated §27-6-1 and §27-6-2; and that §30-1-7a of said code be amended and reenacted, all to read as follows:

CHAPTER 18. EDUCATION.

ARTICLE 2. STATE BOARD OF EDUCATION.

<u>§18-2-40. Suicide prevention awareness training; dissemination of</u> <u>information.</u>

- 1 On or before September 1, 2015, and September 1, of each
- 2 year thereafter, every public middle and high school administra-
- 3 tor shall disseminate and provide opportunities to discuss suicide
- 4 prevention awareness information to all middle and high school

5 students. The information may be obtained from the Department

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- 6 of Health and Human Resources, Bureau for Behavioral Health
- 7 and Health Facilities or from a commercially developed suicide
- 8 prevention training program approved by the State Board of
- 9 Education in consultation with the bureau to assure the accuracy
- 10 and appropriateness of the information.

CHAPTER 18B. HIGHER EDUCATION.

ARTICLE 1B. HIGHER EDUCATION POLICY COMMISSION.

§18B-1B-7. Student mental health policies; suicide prevention.

- 1 (a) Each public and private institution of higher education in
- 2 this state shall develop and implement a policy to advise students
- 3 and staff on suicide prevention programs available on and off
- 4 <u>campus that includes, but is not limited to:</u>
- 5 (1) Crisis intervention access, which includes information
- 6 for national, state and local suicide prevention hotlines;
- 7 (2) Mental health program access, which provides informa-
- 8 tion on the availability of local mental health clinics, student
- 9 <u>health services and counseling services;</u>
- 10 (3) Multimedia application access, which includes crisis
- 11 hotline contact information, suicide warning signs, resources
- 12 offered and free-of-cost applications;

13	(4) Student communication plans, which consist of creating
14	outreach plans regarding educational and outreach activities on
15	suicide prevention; and
16	(5) Post intervention plans which include creating a strategic
17	plan to communicate effectively with students, staff and parents
18	after the loss of a student to suicide.
19	(b) Each public and private institution of higher education in
20	this state shall provide all incoming students with information
21	about depression and suicide prevention resources available to
22	students. The information provided to students shall include
23	available mental health services and other support services,
24	including student-run organizations for individuals at risk of or
25	affected by suicide.
26	(c) The information prescribed by subsection (a), subdivi-
27	sions (1) through (4) of this section shall be posted on the
28	website of each institution of higher education in this state.
29	(d) Any applicable free-of-cost prevention materials or
30	programs shall be posted on the websites of the public and
31	private institutions of higher education, the Higher Education
32	Policy Commission, the West Virginia Council for Community

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 - 33 and Technical College Education and the Bureau for Behavioral

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- 34 Health and Health Facilities. The posted materials or programs
- 35 shall be reviewed on an annual basis for adequacy and complete-
- 36 <u>ness by the Bureau for Behavioral Health and Health Facilities.</u>

CHAPTER 27. MENTALLY ILL PERSONS.

ARTICLE 6. SUICIDE PREVENTION AND AWARENESS.

§27-6-1. Legislative findings.

- 1 (a) The Legislature finds that West Virginia ranks fifteenth
- 2 in the United States for deaths by suicide according to the
- 3 <u>Centers for Disease Control.</u>
- 4 (b) The Legislature further finds that suicide is the second
- 5 leading cause of death in youths ten to twenty-four years old,
- 6 with more than one in six high school students nationally having
- 7 reported seriously considering attempting suicide.
- 8 (c) The Legislature finds that losing our young people to
- 9 suicide is largely preventable through education and mental
- 10 <u>health services. However, more educators, administrators, other</u>
- 11 school personnel and health care providers need to be educated
- 12 to the prevalent dangers of suicide and how to prevent and treat
- 13 suicide.

14 (d) The Legislature further finds that although we require 15 some suicide prevention training for educators, administrators, 16 other school personnel and, to a limited extent, health care providers, we do not provide direct access to suicide prevention 17 18 materials to persons who are at risk. The Legislature further 19 finds that education and health care personnel generally do not 20 facilitate open discussion of suicide between trained personnel 21 and persons who are at risk.

§27-6-2. Dissemination of information.

1 (a) The Department of Health and Human Resources, Bureau 2 for Behavioral Health and Health Facilities shall, on or before 3 August 1, 2015, post on its website suicide prevention awareness information, to include recognizing the warning signs of a 4 5 suicide crisis. The website shall include information related to suicide prevention training opportunities offered by the Bureau 6 7 or an agency recognized by the Bureau as a training provider. 8 (b) The Bureau may assist the public middle and high school 9 administrators in providing suicide prevention information to 10 students in the public middle and high schools.

- 11 (c) The Bureau shall annually review, for adequacy and
- 12 completeness, the materials or programs posted on the websites
- 13 of the institutions of higher education as required by section
- 14 seven, article one-b, chapter eighteen-b of this code.

CHAPTER 30. PROFESSIONS AND OCCUPATIONS.

ARTICLE 1. GENERAL PROVISIONS APPLICABLE TO ALL STATE BOARDS OF EXAMINATION OR REGISTRATION REFERRED TO IN CHAPTER.

§30-1-7a. Continuing education.

(a) Each board referred to in this chapter shall establish
 continuing education requirements as a prerequisite to license
 renewal. Each board shall develop continuing education criteria
 appropriate to its discipline, which shall include, but not be
 limited to, course content, course approval, hours required and
 reporting periods.

7 (b) Notwithstanding any other provision of this code or the 8 provision of any rule to the contrary, each person issued a 9 license to practice medicine and surgery or a license to practice 10 podiatry or licensed as a physician assistant by the West Virginia 11 Board of Medicine, each person issued a license to practice 12 dentistry by the West Virginia Board of Dental Examiners, each

13 person issued a license to practice optometry by the West 14 Virginia Board of Optometry, each person licensed as a pharma-15 cist by the West Virginia Board of Pharmacy, each person 16 licensed to practice registered professional nursing or licensed 17 as an advanced nurse practitioner by the West Virginia Board of 18 Examiners for Registered Professional Nurses, each person 19 licensed as a licensed practical nurse by the West Virginia State 20 Board of Examiners for Licensed Practical Nurses and each 21 person licensed to practice medicine and surgery as an osteo-22 pathic physician and surgeon or licensed or certified as an osteopathic physician assistant by the West Virginia Board of 23 24 Osteopathy shall complete drug diversion training and best 25 practice prescribing of controlled substances training, as the 26 trainings are established by his or her respective licensing board, if that person prescribes, administers, or dispenses a controlled 27 28 substance, as that term is defined in section one hundred one. 29 article one, chapter sixty-a of this code.

30 (1) Notwithstanding any other provision of this code or the
31 provision of any rule to the contrary, the West Virginia Board of
32 Medicine, the West Virginia Board of Dental Examiners, the

33 West Virginia Board of Optometry, the West Virginia Board of 34 Pharmacy, the West Virginia Board of Examiners for Registered 35 Professional Nurses, the West Virginia State Board of Examiners 36 for Licensed Practical Nurses and the West Virginia Board of 37 Osteopathy shall establish continuing education requirements 38 and criteria appropriate to their respective discipline on the 39 subject of drug diversion training and best practice prescribing 40 of controlled substances training for each person issued a license 41 or certificate by their respective board who prescribes, adminis-42 ters or dispenses a controlled substance, as that term is defined 43 in section one hundred one, article one, chapter sixty-a of this 44 code, and shall develop a certification form pursuant to subdivi-45 sion (b)(2) of this section.

46 (2) Each person who receives his or her initial license or
47 certificate from any of the boards set forth in subsection (b) shall
48 complete the continuing education requirements set forth in
49 subsection (b) within one year of receiving his or her initial
50 license from that board and each person licensed or certified by
51 any of the boards set forth in subsection (b) who has held his or
52 her license or certificate for longer than one year shall complete

53 the continuing education requirements set forth in subsection (b) 54 as a prerequisite to each license renewal: Provided, That a 55 person subject to subsection (b) may waive the continuing 56 education requirements for license renewal set forth in subsec-57 tion (b) if he or she completes and submits to his or her licensing 58 board a certification form developed by his or her licensing 59 board attesting that he or she has not prescribed, administered, 60 or dispensed a controlled substance, as that term is defined in 61 section one hundred one, article one, chapter sixty-a of this code, 62 during the entire applicable reporting period.

63 (c) Notwithstanding any other provision of this code or the 64 provision of any rule to the contrary, each person licensed to 65 practice registered professional nursing or licensed as an 66 advanced nurse practitioner by the West Virginia Board of 67 Examiners for Registered Professional Nurses, each person 68 licensed as a licensed practical nurse by the West Virginia State 69 Board of Examiners for Licensed Practical Nurses, each person 70 issued a license to practice midwifery as a nurse-midwife by the 71 West Virginia Board of Examiners for Registered Professional 72 Nurses, each person issued a license to practice chiropractic by

73 the West Virginia Board of Chiropractic, each person licensed to 74 practice psychology by the Board of Examiners of Psychologists, 75 each person licensed to practice social work by the West 76 Virginia Board of Social Work, and each person licensed to 77 practice professional counseling by the West Virginia Board of 78 Examiners in Counseling, shall complete two hours of continu-79 ing education for each reporting period on mental health 80 conditions common to veterans and family members of veterans, 81 as the continuing education is established or approved by his or her respective licensing board. The two hours shall be part of the 82 83 total hours of continuing education required by each board and 84 not two additional hours.

85 (1) Notwithstanding any other provision of this code or the 86 provision of any rule to the contrary, on or before July 1, 2015, 87 the boards referred to in this subsection shall establish continu-88 ing education requirements and criteria and approve continuing 89 education coursework appropriate to their respective discipline 90 on the subject of mental health conditions common to veterans 91 and family members of veterans, in cooperation with the 92 Secretary of the Department of Veterans Assistance. The 93 continuing education shall include training on inquiring about
94 whether the patients are veterans or family members of veterans,
95 and screening for conditions such as post-traumatic stress
96 disorder, risk of suicide, depression and grief, and prevention of
97 suicide.

98 (2) On or after July 1, 2017, each person licensed by any of
99 the boards set forth in this subsection shall complete the continu100 ing education described herein as a prerequisite to his or her next
101 license renewal.

102 (d) Notwithstanding any other provision of this code or the provision of any rule to the contrary, each person licensed to 103 104 practice medicine as a physician or surgeon, podiatrist or 105 physician assistant by the Board of Medicine; each person 106 licensed to practice medicine as an osteopathic physician, or 107 surgeon by the Board of Osteopathic Medicine; each person 108 licensed to practice registered professional nursing or licensed 109 as an advanced nurse practitioner by the West Virginia Board of 110 Examiners for Registered Professional Nurses, each person 111 licensed as a licensed practical nurse by the West Virginia State 112 Board of Examiners for Licensed Practical Nurses, each person

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113	issued a license to practice midwifery as a nurse-midwife by the
114	West Virginia Board of Examiners for Registered Professional
115	Nurses, each person issued a license to practice chiropractic by
116	the West Virginia Board of Chiropractic, each person licensed to
117	practice psychology by the Board of Examiners of Psychologists,
118	each person licensed to practice social work by the West
119	Virginia Board of Social Work, and each person licensed to
120	practice professional counseling by the West Virginia Board of
121	Examiners in Counseling, shall complete two hours of continu-
122	ing education on suicide awareness, prevention and intervention,
123	as the continuing education is established or approved by his or
124	her respective licensing board. The two hours shall be completed
125	as part of the total hours of continuing education required by
126	each board and not two additional hours during the licensing
127	period following the approval of suicide awareness, prevention
128	and intervention training.
129	(1) Persons licensed by the Board of Medicine, the Board of
130	Osteopathic Medicine and the Board of Chiropractic are required
131	to obtain the two hours suicide awareness, prevention and

132 intervention once, but may take additional hours. The Board of

133	Examiners for Registered Professional Nurses, the Board of
134	Examiners for Licensed Practical Nurses, the Board of Examin-
135	ers of Psychologist, the Board of Social Work, the Board of
136	Examiners in Counseling may each provide by rule for addi-
137	tional suicide prevention training.
138	(2) On or before July 1, 2016, each of the boards referred to
139	in subsection (d) above shall establish continuing education
140	requirements and criteria and approve continuing education
141	course work appropriate to their respective disciplines on the
142	subject of suicide prevention including risk factors, characteris-
143	tics of mental or emotional disorders, effective strategies for
144	intervention, de-escalation techniques, positive behavioral
145	interventions and supports and available resources for additional
146	mental health services.

NOTE: The purpose of this bill is to expand the number of people who are trained in suicide prevention in order to maximize the possibility that at risk children and adults can be saved. School personnel from middle school through college will not only be trained, they will provide children and young adults with suicide prevention information, facilitate discussion about preventing suicide and make mental health resources available. Licensed medical professionals will be required to obtain education in suicide prevention as part of their licensing process.

Strike-throughs indicate language that would be stricken from the present law, and underscoring indicates new language that would be added.

Sections §18-2-40, §18B-1B-7 and article §27-6-1 and §27-6-2 are new; therefore, they have been completely underscored.

This bill was recommended to introduction and passage by the Joint Committee on Children and Families.