

CALIFORNIA STATE BOARD OF BEHAVIORAL SCIENCES BILL ANALYSIS

BILL NUMBER: AB 2112

VERSION: AMENDED JULY 15, 2020

AUTHOR: RAMOS

SPONSOR: • CALIFORNIA ALLIANCE OF
CHILD AND FAMILY SERVICES

PREVIOUS POSITION: SUPPORT

SUBJECT: SUICIDE PREVENTION

Summary: This bill authorizes the establishment of the Office of Suicide Prevention within the State Department of Public Health.

Existing Law:

- 1) Beginning January 1, 2021, requires an applicant for licensure as a marriage and family therapist, educational psychologist, professional clinical counselor, or clinical social worker to show, as part of the application, completion of at least six hours of coursework or applied supervised experience in suicide risk assessment and intervention. The coursework or experience must be gained via one of the following methods (BPC §§4980.396(a), 4989.23(a), 4996.27(a), 4999.66(a)):
 - a) It was obtained as part of the qualifying degree. The applicant must provide the Board with a written certification from the registrar or training director of the educational institution or program stating the coursework was included; or
 - b) It was obtained as part of the applicant's applied experience via practicum, associateship, formal postdoctoral placement, or other qualifying supervised experience. The applicant must submit to the Board a written certification from the director of training for the program, or from the primary supervisor, stating the required training was included; or
 - c) It was obtained via a continuing education course from a provider designated as acceptable by the Board. The applicant must submit a certificate of course completion to the Board.
- 2) Beginning January 1, 2021, requires a licensee, upon his or her license renewal, reactivation, or reinstatement, to have completed at least six hours of coursework or applied supervised experience in suicide risk assessment and intervention, as a one-time requirement. Proof of compliance must be certified under penalty of perjury, and must be retained for submission to the Board upon request. (BPC §§4980.369(b) & (c), 4989.23(b) & (c), 4996.27(b) & (c), 4999.66(b) & (c))

This Bill:

- 1) Authorizes the State Department of Public Health to establish the Office of Suicide Prevention (Office) within its department. (Health and Safety Code (HSC) §131300(a))
- 2) Allows the responsibilities of the Office to include all of the following (HSC §131300(a)(1)-(6)):
 - Providing strategic guidance to statewide/regional partners regarding best practices on suicide prevention;
 - Conducting state level assessment of regional/statewide suicide prevention policies and practices;
 - Using data to identify opportunities to reduce suicide;
 - Marshaling the insights and energy of medical professionals with mental health experience or expertise, licensed health care professionals with mental health experience, scientists, other academic experts, public health experts, public servants, and people with lived experience (including peers and survivors) to address the suicide crisis;
 - Disseminating information to advance statewide progress, including coordinated, targeted, and culturally appropriate campaigns to reach populations with high rates of suicide; and
 - Report progress to reduce rates of suicide to the Legislature.
- 3) Permits the Office to focus resources on groups with the highest risk, including youth, Native American youth, older adults, veterans, and LGBTQ people. (HSC §131300(b))
- 4) Allows the Office to share and receive data from all entities with relevant data. (HSC §131305)
- 5) Allows the Office to apply for and utilize federal grants. (HSC §131310)
- 6) If established, requires the Office to consult with the Mental Health Services Oversight and Accountability Commission to implement suicide prevention efforts consistent with their suicide prevention report titled “Striving for Zero” as described in the Budget Act of 2020. (HSC §131315(a))
- 7) Requires the Mental Health Services Oversight and Accountability Commission to transfer its suicide prevention contracts to the Office. (HSC §131315(b))

Comments:

- 1) Author's Intent.** The purpose of the creation of the Office of Suicide Prevention is to study and address the suicide crisis. The author notes that suicide is the second leading cause of death among young people ages 15-24 in the U.S., with a nationwide survey finding in 2015 that 1 in 6 high school students reported seriously considering suicide in the previous year. In its 2019 report on California's strategic plan for suicide prevention from 2020 to 2025, the Mental Health Services Oversight and Accountability Commission (MHSOAC) made a variety of recommendations to improve policies and outcomes statewide. One of its recommendations was that the state develop an Office of Suicide Prevention to create visible, state-level leadership on the issue.
- 2) Previous Position.** The Board considered a previous version of this bill at its June 5, 2020 meeting and took a "support" position.

At the same meeting, it also separately directed staff to reach out to the author's office regarding the wording in HSC §131300(a)(4). The Board wanted to suggest that this sentence also include licensed health care professionals with mental health experience.

Since the June meeting, this bill has been amended. HSC §131300(a)(4) now reads as follows with respect to the responsibilities of the Office:

HSC §131300(a)(4) Marshaling the insights and energy of medical professionals with mental health experience or expertise, licensed health care professionals with mental health experience, scientists, and other academic experts, as well as public health experts, public servants, and people with lived experience, including peers and survivors, to address the crisis of suicide.

- 3) Related Legislation.** AB 1436 (Levine, Chapter 527, Statutes of 2018) requires, beginning January 1, 2021, applicants for any license with the Board to demonstrate completion of at least 6 hours of coursework or supervised experience in suicide risk assessment and intervention. Current licensees will also be required to demonstrate completion of this coursework or supervised experience in their first renewal period after this date. The Board had a "support" position on this bill.

4) Support and Opposition.

Support:

- California Alliance of Child and Family Services (sponsor)
- American Academy of Pediatrics, California
- American Federation of State, County and Municipal Employees, AFL-CIO
- American Foundation for Suicide Prevention California Children's Hospital Association
- Bay Area Children's Association

- Cal Voices (formerly Norcal MHA)
- California Association of Marriage and Family Therapists
- California Children's Hospital Association
- California Council of Community Behavioral Health Agencies
- California Federation of Teachers
- California Hospital Association/California Association of Hospitals and Health Systems
- California Institute for Behavioral Health Solutions
- California Professional Firefighters
- California School Nurses Organization
- California State Association of Counties
- California State PTA
- California Teachers Association
- Children Now
- Community Solutions for Children, Families and Individuals
- County Behavioral Health Directors Association
- Disability Rights California
- Jewish Family and Children's Services of San Francisco, the Peninsula, Marin and Sonoma Counties
- Lucile Packard Children's Hospital/Stanford Children's Health Riverside Sheriffs' Association
- Marin County Office of Education
- Mulvaney's B&I
- NAMI Santa Clara County
- National Association of Social Workers, California Chapter
- NextGen
- Racial and Ethnic Mental Health Disparities Coalition
- Riverside Sheriffs' Association
- Steinberg Institute
- The Trevor Project
- Youth Community Service

Opposition:

- California Right to Life Committee, Inc.

5) History.

2020

07/15/20	From committee chair, with author's amendments: Amend, and re-refer to committee. Read second time, amended, and re-referred to Com. on HEALTH.
07/01/20	Referred to Com. on HEALTH.
06/11/20	In Senate. Read first time. To Com. on RLS. for assignment.
06/10/20	Read third time. Passed. Ordered to the Senate. (Ayes 78. Noes 0.)

06/08/20 Read second time. Ordered to third reading.

06/04/20 Read second time and amended. Ordered returned to second reading.

06/03/20 From committee: Amend, and do pass as amended. (Ayes 18. Noes 0.) (June 3).

06/02/20 In committee: Set, first hearing. Referred to APPR. suspense file.

05/21/20 Re-referred to Com. on APPR.

05/20/20 Read second time and amended.

05/19/20 From committee: Amend, and do pass as amended and re-refer to Com. on APPR. (Ayes 15. Noes 0.) (May 18).

03/17/20 In committee: Hearing postponed by committee.

03/17/20 Re-referred to Com. on HEALTH.

03/16/20 From committee chair, with author's amendments: Amend, and re-refer to Com. on HEALTH. Read second time and amended.

03/16/20 In committee: Hearing postponed by committee.

02/20/20 Referred to Com. on HEALTH.

02/07/20 From printer. May be heard in committee March 8.

02/06/20 Read first time. To print.

Blank Page

AMENDED IN SENATE JULY 15, 2020

AMENDED IN ASSEMBLY JUNE 4, 2020

AMENDED IN ASSEMBLY MAY 20, 2020

AMENDED IN ASSEMBLY MARCH 16, 2020

california legislature—2019–20 regular session

ASSEMBLY BILL

No. 2112

Introduced by Assembly Member Ramos

(Principal coauthors: Assembly Members Arambula and Berman)

(Coauthors: Assembly Members Aguiar-Curry, Bigelow, Burke, Carrillo, Flora, Eduardo Garcia, Quirk-Silva, Rodriguez, Waldron, Wicks, and Wood)

(Coauthors: Senators Beall and Chang)

February 6, 2020

An act to add Chapter 3 (commencing with Section 131300) to Part 1 of Division 112 of the Health and Safety Code, relating to suicide prevention.

legislative counsel's digest

AB 2112, as amended, Ramos. Suicide prevention.

Existing law establishes the State Department of Public Health within the California Health and Human Services Agency.

This bill would authorize the State Department of Public Health to establish the Office of Suicide Prevention within the ~~department and would specify authorized responsibilities of the office if established, including, among other things, department, would require the office to perform specified duties, including providing strategic guidance to statewide and regional partners regarding best practices on suicide~~

prevention and reporting to the Legislature on progress to reduce rates of ~~suicide~~. The bill would suicide, and authorize the office to apply for and use federal grants. The bill would require the office to consult with the Mental Health Services Oversight and Accountability Commission to implement suicide prevention efforts and would require the commission to transfer its suicide prevention contracts to the office, as prescribed.

Vote: majority. Appropriation: no. Fiscal committee: yes.
State-mandated local program: no.

The people of the State of California do enact as follows:

1 SECTION 1. The Legislature hereby finds and declares all of
2 the following:

3 (a) Suicide is a public health crisis that has warranted response
4 from the state.

5 (b) Suicide risk is a lifespan issue, with a variety of groups at
6 significant risk of death by suicide. The federal Centers for Disease
7 Control and Prevention has identified groups with the greatest risk,
8 including youth, older adults, veterans and LGBTQ people.

9 (c) Suicide risk is especially acute for young people. Suicide is
10 the second leading cause of death for youth from 10 to 24 years
11 of age, inclusive.

12 (d) The state has sought to address the causes of suicide,
13 including research and development of a statewide strategic plan
14 on suicide prevention. The state has further sought to address the
15 causes of suicide through specific suicide prevention policies and
16 programs.

17 (e) The state has an obligation to focus resources on combating
18 the crisis of suicide.

19 SEC. 2. Chapter 3 (commencing with Section 131300) is added
20 to Part 1 of Division 112 of the Health and Safety Code, to read:

21 **Chapter 3. The Office of Suicide Prevention**

22 131300. (a) The State Department of Public Health is hereby
23 authorized to establish the Office of Suicide Prevention in the
24 department pursuant to this chapter. The responsibilities of the
25 office, if established, may include all of the following:

1 (1) Providing strategic guidance to statewide and regional
2 partners regarding best practices on suicide prevention.

3 (2) Conducting state level ~~evaluation assessment~~ of regional
4 and statewide suicide prevention policies and practices, including
5 other states' suicide prevention policies, and including specific
6 metrics and domains as appropriate.

7 (3) Using data to identify opportunities to reduce suicide,
8 including utilizing data elements documenting interrupted or
9 aborted suicide attempts and crisis service interventions.

10 (4) Marshaling the insights and energy of medical professionals
11 with mental health experience or expertise, *licensed health care*
12 *professionals with mental health experience*, scientists, and other
13 academic experts, as well as public health experts, public servants,
14 and ~~everyday Californians~~ *people with lived experience, including*
15 *peers and survivors*, to address the crisis of suicide.

16 (5) Disseminating information to advance statewide progress,
17 including coordinated, targeted, and culturally appropriate
18 campaigns to reach populations with high rates of suicide.

19 (6) Reporting to the Legislature on progress to reduce rates of
20 suicide.

21 (b) If established, the office may focus resources on groups with
22 the highest risk, including youth, Native American youth, older
23 adults, veterans, and LGBTQ people.

24 131305. If established, the Office of Suicide Prevention may
25 share and receive data from ~~state~~ *all* entities with data relevant to
26 the responsibilities and objectives of the ~~office~~ *Office, including,*
27 *but not limited to, state, federal, local, and private and*
28 *nongovernmental agencies or organizations.*

29 131310. If established, the Office of Suicide Prevention may
30 apply for and utilize federal grants.

31 131315. *If the Office of Suicide Prevention is established*
32 *pursuant to Section 131300, all of the following shall apply:*

33 (a) *The Office of Suicide Prevention shall consult with the*
34 *Mental Health Services Oversight and Accountability Commission*
35 *to implement suicide prevention efforts consistent with the Mental*
36 *Health Services Oversight and Accountability Commission's*
37 *Suicide Prevention Report "Striving for Zero" and described*
38 *pursuant to Provision 1 of Item 4560-001-3085 of Section 2.00 of*
39 *the Budget Act of 2020.*

1 (b) *The Mental Health Services Oversight and Accountability*
2 *Commission shall transfer its suicide prevention contracts to the*
3 *Office of Suicide Prevention.*

4 (c) *This section does not authorize the Office of Suicide*
5 *Prevention to perform any of the duties required by the commission*
6 *under Part 3.7 (commencing with Section 5845) of Division 5 of,*
7 *or administer any program funded by Part 4.5 (commencing with*
8 *Section 5890) of Division 5 of, the Welfare and Institutions Code.*

O