SENATE BILL No. 506

DIGEST OF INTRODUCED BILL

Citations Affected: IC 12-21; IC 16-31-3-2; IC 20-26-5-34.4; IC 21-48; IC 25-1-19.

Synopsis: Suicide prevention programming. Requires the division of mental health and addiction to: (1) establish a psychiatric crisis intervention pilot program; (2) develop a statewide program for suicide prevention; and (3) employ a coordinator of the statewide program for suicide prevention. Requires certain licensed professionals to annually complete suicide awareness training. Requires school employees to complete child suicide awareness and prevention training every five years. Requires approved postsecondary educational institutions to adopt a policy concerning suicide information and resources. Makes an appropriation.

Effective: July 1, 2017.

Head

January 17, 2017, read first time and referred to Committee on Health and Provider Services.



Introduced

First Regular Session 120th General Assembly (2017)

PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in this style type, and deletions will appear in this style type.

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in a statute in *this style type* or *this style type* reconciles conflicts between statutes enacted by the 2016 Regular Session of the General Assembly.

SENATE BILL No. 506

A BILL FOR AN ACT to amend the Indiana Code concerning human services and to make an appropriation.

Be it enacted by the General Assembly of the State of Indiana:

1 2	SECTION 1. IC 12-21-1-3, AS AMENDED BY P.L.28-2012, SECTION 3, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
3	JULY 1, 2017]: Sec. 3. The division is composed of the following:
4	(1) The director.
5	(2) The division of mental health and addiction planning and
6	advisory council.
7	(3) A coordinator for a statewide program for suicide
8	prevention.
9	(3) (4) Other personnel necessary for the performance of the
10	functions imposed upon the division under law.
11	SECTION 2. IC 12-21-5-5 IS ADDED TO THE INDIANA CODE
12	AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY
13	1, 2017]: Sec. 5. (a) The division shall develop a statewide program
14	for suicide prevention.
15	(b) The division shall employ a coordinator of the statewide
16	program for suicide prevention to implement and maintain the
17	statewide program for suicide prevention.



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1	(c) The statewide program for suicide prevention must include
2	a state plan for suicide prevention that must address the following:
3	(1) Educational opportunities and activities to increase
4	awareness and knowledge of the public.
5	(2) Training for individuals who may have frequent contact
6	with individuals at risk of suicide on warning signs and
7	tendencies that may evidence that an individual is considering
8	suicide.
9	(3) Materials to increase public awareness of suicide and
10	suicide prevention.
11	(4) Enhancement of crisis services relating to suicide
12	prevention.
13	(5) Assistance for school corporations on suicide awareness
14	and intervention training.
15	(6) Coordination of the establishment of advisory groups in
16	each county to support the statewide program.
17	(7) Coordination with appropriate entities to identify and
18	address barriers in providing services to individuals at risk of
19	suicide.
20	(8) Development of an Internet web site containing
21	information and resources related to suicide awareness,
22	prevention, and intervention.
23	(9) Development of recommendations for improved collection
24	of data on suicide and factors related to suicide.
25	(10) Development and submission of proposals for funding
26	from federal agencies or other sources of funding.
27	SECTION 3. IC 12-21-7 IS ADDED TO THE INDIANA CODE AS
28	A NEW CHAPTER TO READ AS FOLLOWS [EFFECTIVE JULY
29	1, 2017]:
30	Chapter 7. Psychiatric Crisis Intervention Pilot Program
31	Sec. 1. As used in this chapter, "division" means the division of
32	mental health and addiction established by IC 12-21-1-1.
33	Sec. 2. As used in this chapter, "pilot programs" means the
34	psychiatric crisis intervention pilot programs established by
35	section 3 of this chapter.
36	Sec. 3. (a) The division shall establish psychiatric crisis
37	intervention pilot programs in at least three (3) locations. The pilot
38	programs must be established in rural and urban areas.
39 40	(b) The psychiatric crisis intervention pilot programs
40	established under subsection (a) must be selected and evaluated
41	based on the need for psychiatric crisis services listed in this
42	subsection and policies and procedures determined by the division.

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The pilot programs may include the following services and any
other services determined by the division:
(1) Prevention services.
(2) Assertive community treatment.
(3) Telephone crisis and triage intervention.
(4) Crisis intervention teams.
(5) Mobile crisis outreach teams.
(6) Urgent care centers.
(7) Crisis residential services.
(8) Transportation services.
(9) Medically monitored detoxification.
(10) Hospitalization.
(11) Linkage to community based services.
(c) The division shall evaluate the pilot programs based on
criteria determined by the division and the following:
(1) Recidivism.
(2) Sustainability.
(3) Resources investment.
(4) Cost effectiveness.
(5) Clinical outcomes.
(6) Ability to provide twenty-four (24) hour walk-in crisis
services.
(7) Ability to provide mental health and substance use
disorder inpatient services.
Sec. 4. There is appropriated from the state general fund to the
division of mental health and addiction five million dollars
(\$5,000,000) to implement psychiatric crisis intervention pilot
programs established under section 3 of this chapter.
SECTION 4. IC 16-31-3-2, AS AMENDED BY P.L.77-2012,
SECTION 23, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
JULY 1, 2017]: Sec. 2. The commission shall establish standards for
persons required to be certified or licensed by the commission to
provide emergency medical services. To be certified or licensed, a
person must meet the following minimum requirements:
(1) The personnel certified or licensed under this chapter must do
the following:
(A) Meet the standards for education and training established
by the commission by rule.
(B) Successfully complete a basic or an inservice course of
education and training on sudden infant death syndrome that
is certified by the commission in conjunction with the state
health commissioner.



1	(C) Beginning January 1, 2009, Successfully complete a basic
2	or an inservice course of education and training on autism that
3	is certified by the commission.
4	(D) Successfully complete an evidence based training
5	program concerning suicide assessment, treatment, and
6	management as described in IC 25-1-19.
7	(2) Ambulances to be used must conform with the requirements
8	of the commission and must either be:
9	(A) covered by insurance issued by a company licensed to do
10	business in Indiana in the amounts and under the terms
11	required in rules adopted by the commission; or
12	(B) owned by a governmental entity covered under IC 34-13-3.
13	(3) Emergency ambulance service shall be provided in accordance
14	with rules adopted by the commission. However, the rules
15	adopted under this chapter may not prohibit the dispatch of an
16	ambulance to aid an emergency patient because an emergency
17	medical technician is not immediately available to staff the
18	ambulance.
19	(4) Ambulances must be equipped with a system of emergency
20	medical communications approved by the commission. The
21	emergency medical communication system must properly
22	integrate and coordinate appropriate local and state emergency
23	communications systems and reasonably available area
24	emergency medical facilities with the general public's need for
25	emergency medical services.
26	(5) Emergency medical communications shall be provided in
27	accordance with rules adopted by the commission.
28	(6) A nontransporting emergency medical services vehicle must
29	conform with the commission's requirements.
30	SECTION 5. IC 20-26-5-34.4 IS ADDED TO THE INDIANA
31	CODE AS A NEW SECTION TO READ AS FOLLOWS
32	[EFFECTIVE JULY 1, 2017]: Sec. 34.4. (a) Beginning after June 30,
33	2017, each school corporation and accredited nonpublic school
34	shall require all school employees likely to have direct, ongoing
35	contact with children within the scope of the employee's
36	employment to attend or participate in at least two (2) hours of
37	inservice child suicide awareness and prevention training every
38	five (5) years. The training must include the recognition of signs
39 40	that a child may be considering suicide.
40 41	(b) The format of training under this section may include:
41 42	(1) an in-person presentation; (2) an electronic or technology based medium, including
42	(2) an electronic of technology based medium, including



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1	self-review modules available on an online system;
2	(3) an individual program of study of designated materials; or
3	(4) any other method approved by the governing body that is
4	consistent with current professional development standards.
5	(c) The inservice training required under this section must count
6	toward the requirements for professional development required by
7	the governing body.
8	(d) A school corporation shall adopt a policy addressing
9	measures intended to increase child suicide awareness and
10	prevention. The policy must address the following:
11	(1) Counseling services for the child and the child's family
12	related to suicide prevention.
13	(2) Availability of referral information for crisis intervention
14	to children, parents, and school corporation staff.
15	(3) Increasing awareness of the relationship between suicide
16	and drug and alcohol use.
17	(4) Training on warning signs and tendencies that may
18	evidence that a child is considering suicide.
19	(5) Availability of information concerning suicide prevention
20	services in the community.
21	(6) Cooperation among the school corporation and suicide
22	prevention services in the community.
23	(7) Development of a plan to assist survivors of attempted
24	suicide and to assist children and school corporation staff in
25	coping with an attempted suicide or student death.
26	(8) Development of any other program or activity that is
27	appropriate.
28	SECTION 6. IC 21-48 IS ADDED TO THE INDIANA CODE AS
29	A NEW ARTICLE TO READ AS FOLLOWS [EFFECTIVE JULY 1,
30	2017]:
31	ARTICLE 48. SUICIDE PREVENTION RESOURCES
32	Chapter 1. Suicide Prevention Resources
33	Sec. 1. (a) Each approved postsecondary educational institution
34	shall adopt a policy to increase awareness of suicide prevention
35	resources available to students and staff, including:
36	(1) crisis intervention resources, including information for
37	national, state, and local suicide prevention hotlines;
38	(2) available mental health programs;
39	(3) programs or resources offering information on crisis
40	hotlines and suicide warning signs;
41	(4) educational and outreach activities related to suicide
42	prevention;



1	(5) post intervention plans, including information on effective
2	communication with students, staff, and parents after the loss
3	of a student due to suicide; and
4	(6) mental health services and other support services,
5	including student organizations.
6	(b) Links to information and resources identified in a policy
7	described in subsection (a) shall be posted on the Internet web site
8	of each approved postsecondary educational institution.
9	SECTION 7. IC 25-1-19 IS ADDED TO THE INDIANA CODE AS
10	A NEW CHAPTER TO READ AS FOLLOWS [EFFECTIVE JULY
11	1, 2017]:
12	Chapter 19. Suicide Awareness Training
13	Sec. 1. As used in this chapter, "provider" means an individual
14	licensed, certified, registered, or permitted by any of the following
15	entities:
16	(1) The medical licensing board (IC 25-22.5-2-1).
17	(2) The Indiana state board of nursing (IC 25-23-1-2).
18	(3) The occupational therapy committee (IC 25-23.5-2-1).
19	(4) The behavioral health and human services licensing board
20	(IC 25-23.6-2-1).
21	(5) The Indiana board of pharmacy (IC 25-26-13-3).
22	(6) The Indiana physical therapy committee (IC 25-27-1-4).
23	(7) The physician assistant committee (IC 25-27.5-3-1).
24	(8) The state psychology board (IC 25-33-1-3).
25	Sec 2. A provider and individuals certified or licensed by the
26	Indiana emergency medical services commission (IC 16-31-2-1),
27	including:
28	(1) an advanced emergency medical technician (as defined in
29	IC 16-18-2-6.5);
30	(2) an emergency medical responder (as defined in
31	IC 16-18-2-109.8);
32	(3) an emergency medical technician (as defined in
33	IC 16-18-2-112); and
34	(4) a paramedic (as defined in IC 16-18-2-266);
35	shall annually complete an evidence based training program
36	concerning suicide assessment, treatment, and management as part
37 38	of any continuing education, continuing competency, or
38 39	recertification requirements.
39 40	Sec. 3. An evidence based training program required by section 2 of this chapter must be a program approved or recommended by
40 41	the American Foundation for Suicide Prevention or the Suicide
41 42	Prevention Resource Center.
42	rievention kesource Center.

