

HOUSE BILL 948

By Whitson

AN ACT to amend Tennessee Code Annotated, Title 33;  
Title 63 and Title 68, relative to training of health  
professionals.

WHEREAS, the General Assembly finds that, according to the Tennessee Department of Health, there are more than nine hundred fifty (950) suicide deaths in the State of Tennessee annually, more than the number killed by homicide, HIV infection, and drunk driving; and

WHEREAS, four thousand nine hundred twenty-one Tennesseans died by suicide between 2011 and 2015; and

WHEREAS, research indicates that for every suicide death, at least six people experience a major life disruption, equating to over fifty-seven hundred Tennesseans each year; and

WHEREAS, between 2011 and 2015, the suicide rate for the State of Tennessee has exceeded the national average; and

WHEREAS, suicide is the ninth-leading cause of death in the State of Tennessee and the third-leading cause of death among people between the ages of fifteen and twenty-four; and

WHEREAS, national studies have shown that veterans, active-duty military personnel, and National Guardsmen face an elevated risk of suicide as compared to the general population, and that a positive correlation exists between post-traumatic stress disorder and suicide; and

WHEREAS, numerous men and women from Tennessee have deployed in support of the wars in Afghanistan and Iraq; and

WHEREAS, research continues as to the effects of wartime service and injuries such as traumatic brain injury, post-traumatic stress disorder, and other service-related conditions, which may increase the risk of suicide in veterans; and

WHEREAS, as more men and women separate from the military and transition back into civilian life, community mental health providers will become a vital resource to help these veterans and their families deal with issues that may arise; and

WHEREAS, the suicide rate for youth aged 10-17 in Tennessee nearly doubled between 2006 and 2015, contributing to an overall increase in our State's suicide rate; and

WHEREAS, suicide is one of the most disruptive and tragic events a family and a community can experience; and

WHEREAS, it is estimated that ninety percent of people who die by suicide have a diagnosable psychiatric disorder at the time of their death, and most of them exhibit warning signs or behaviors prior to an attempt; and

WHEREAS, it is the intent of the General Assembly to help lower the suicide rate in the State of Tennessee by requiring certain health professionals to complete training in suicide prevention, assessment and screening, treatment, management, and postvention as part of their continuing education, continuing competency, and recertification requirements; and

WHEREAS, mental health professionals have a duty to protect service recipients who are likely to injure or kill themselves unless prevented from doing so, in accordance with Tennessee Code Annotated § 33-3-206; and

WHEREAS, such professionals require specialized training to address suicide risk and suicide intent within service recipients; now, therefore,

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF TENNESSEE:

SECTION 1. Tennessee Code Annotated, Title 63, Chapter 1, Part 1, is amended by adding the following as a new section:

**63-1-122.**

(a) This section shall be known and may be cited as the "Kenneth and Madge Tullis, MD, Suicide Prevention Training Act".

(b) As used in this section:

(1) "Board" means a health-related board created in this title or title 68 and includes the:

(A) Board for professional counselors, marital and family therapists, and clinical pastoral therapists, created by § 63-22-101;

(B) Board of social work licensure, created by § 63-23-101;

(C) Board of alcohol and drug abuse counselors, created by § 68-24-601; and

(D) Board of occupational therapy, created by § 63-13-216; and

(2) "Training program" means an empirically supported training program that covers the following elements:

(A) Suicide prevention;

(B) Suicide assessment and screening;

(C) Suicide treatment;

(D) Suicide management; and

(E) Suicide postvention.

(c) The department of mental health and substance abuse services shall:

(1) Develop, in collaboration with the Tennessee Suicide Prevention Network, a model list of training programs;

(2) When developing the model list, consider training programs of at least two (2) hours in length that are based on expert consensus and adhere to high standards of suicide prevention;

(3) When developing the model list, consult with the boards; public and private institutions of higher education; experts in suicide prevention, assessment, treatment, management, and postvention; and affected professional associations; and

(4) Report, in collaboration with the Tennessee Suicide Prevention Network, the model list of training programs to the department of health no later than December 15, 2017.

(d) A board may approve a training program that excludes an element described in the definition of training program if the element is inappropriate for the profession in question or inappropriate for the level of licensure or credentialing of that profession based on the profession's scope of practice.

(e) Beginning January 1, 2018, each of the following professionals certified or licensed under this title or title 68 shall, at least once every two (2) years, complete a training program that is approved by rule by the respective boards:

(1) A social worker licensed under chapter 23 of this title;

(2) A marriage and family therapist, professional counselor, or pastoral counselor certified or licensed under chapter 22 of this title;

(3) An alcohol and drug abuse counselor certified under title 68, chapter 24;

(4) An occupational therapist licensed under chapter 13 of this title; and

(5) Any other professional staff working in the field of mental health and substance abuse who has direct patient or client contact.

(f)

(1) Except as provided in subdivision (f)(2), a professional listed in subsection (e) must complete a training program approved by the profession's board no later than July 1, 2019.

(2) A professional listed in subsection (e) applying for initial licensure or certification on or after July 1, 2019, is not required to complete the training program required by this section for two (2) years after initial licensure or certification if the professional can demonstrate successful completion of a two-hour academic training program that meets criteria established by the profession's board and that was completed no more than two (2) years prior to the application for initial licensure or certification.

(g) The hours spent completing the training program under this section count toward meeting any applicable continuing education requirements for each profession.

(h) Nothing in this section expands or limits the scope of practice of any profession regulated under this title or title 68.

SECTION 2. The department of health, the department of mental health and substance abuse services, and each board that governs professionals subject to this act are authorized to promulgate rules to effectuate the purposes of this act. All rules shall be promulgated in accordance with the Uniform Administrative Procedures Act, compiled in Tennessee Code Annotated, Title 4, Chapter 5.

SECTION 3. This act shall take effect upon becoming a law, the public welfare requiring it.