# **State and Legislative Commitment to Suicide Prevention**

The Utah State Legislature has a strong commitment to suicide prevention, crisis intervention, and suicide postvention supports. This support is evidenced in a broad array of legislation, including school based prevention for K-12 and higher education systems, crisis response services at state and local levels, and suicide prevention across the lifespan.

A foundation for suicide prevention in Utah was formed prior to the first Utah Suicide Prevention State Plan in 2017. From 2012 through 2017, critical legislation included the following:

- Requirement of all licensed school staff to complete suicide prevention training (2012, HB 501)
- Creation of suicide prevention positions in the Division of Substance Abuse and Mental Health and the Utah State Board of Education (2013, HB 154)
- Requirement for secondary schools to implement suicide prevention, intervention and postvention strategies, appropriating funding as well (2014, HB 329)
- Implemented voluntary firearm safety program and distribution of safety brochures and gun locks (2014, HB134)
- Required suicide prevention training to obtain or renew behavioral health license (2015, HB 209
- Creation of the student safety and crisis tip line commission, now known as SafeUT (2015, SB 175)
- Required a suicide prevention/firearm data study (2016, HB 440)

Since 2017, additional legislation continues to demonstrate the commitment by Utah's Legislature to broadly address crisis intervention and suicide prevention. Figure 1 summarizes legislative action since 2017.

Figure 1: Legislation Summary of Critical Legislation Since 2017 (example for designer)

## State and Legislative Commitment to Suicide Prevention



Blue Indicates K-12 Education focused legislation

#### School-based Suicide Prevention and Mental Health Legislation 2017-2021

**H.B. 346 (2017)** Suicide Prevention Programs provided on-going grant funding (\$45,000) for grant awards for elementary programs to foster peer-to-peer suicide prevention, resiliency, and anti-bullying programs in elementary schools.

**H.B. 370 (2018)** Suicide Prevention and Medical Examiner Provisions increased the funding available for the implementation of school-based suicide prevention programs to at least \$1,000.00 per secondary school.

**H.B. 393 (2019)** Suicide Prevention Amendments expanded the scope of suicide prevention in a school to address "increased risk of suicide among youth who are not accepted by family for any reason, including lesbian, gay, bisexual, transgender, or questioning youth."

**H.B. 120 (2019)** Student and School Safety Assessment provided funds for the creation and implementation of student support teams, funded a school-based mental health specialist to be hired by DSAMH, and funded an FTE for a school public safety law enforcement liaison hired by DPS.

**H.B. 373 (2019)** Student Support Amendments \$16 Million ongoing to increase to \$26 Million ongoing in FY2021 funds LEA qualified plans for school-based mental health supports to

augment school-based mental health support personnel and to contract services with the local mental health authorities and/or the local health organizations. The name of the School Crisis and Safety line is changed to SafeUT.

- **H.B. 323 (2020)** School Mental Health funding Amendments passed the legislature to set standards for participating local education agencies (LEAs) to implement approved mental health screening programs for participating students.
- **H.B. 81 (2021)** Mental Health Days for Students adds that mental or behavioral health as a valid excuse for a school absence
- **H.B. 93 (2021)** Youth Suicide Prevention Programs Amendment divides elements of youth suicide prevention programs between elementary grades and secondary grades, and provides \$1000 to Utah's 1002 schools for evidence-based program or emerging best practice in suicide prevention.

## Statewide Mental Health, Treatment, and Crisis Services Legislation 2017-2021

- **S.B. 37 (2017)** Statewide Crisis Line creates the Mental Health Crisis Line Commission and addresses the membership and duties of the Mental Health Crisis Line Commission.
- **S.C.R. 11 (2018)** Concurrent Resolution on Awareness and Treatment of Maternal Depression and Anxiety recognizes maternal depression and anxiety as a serious statewide public health issue.
- **H.B. 308SO1 (2018)** Telehealth Mental Health Pilot Program requires the Division of Substance Abuse and Mental Health to create a telehealth mental health pilot project grant program.
- **H.B. 139 (2018)** Telepsychiatric Consultation Access Amendments requires the state Medicaid program to reimburse for telepsychiatric consultations; and requires certain health benefit plans to provide coverage for the use of physician-to-physician psychiatric consultations using telehealth services.
- **S.B. 31 (2018)** Utah Mobile Crisis Outreach Team Act requires the Mental Health Crisis Line Commission to serve as the mobile crisis outreach team (MCOT) advisory committee; requires the Division of Substance Abuse and Mental Health (division) set standards of care and practices for a statewide behavioral health crisis response system, and to expand and set standards for MCOT and crisis worker certification. This legislation expanded MCOT to Utah, Davis, Weber, and Washington counties and added an additional team to Salt Lake County.

- **H.B. 41 (2018)** Mental Health Crisis Line Amendments addressed the operation of the statewide mental health crisis line and local mental health crisis lines.
- **H.B. 32 (2020)** Crisis Services amendments established funding and standards of care for 23 hour Behavioral Health Crisis Receiving Centers (Salt Lake County, Davis County, Utah County, and Washington County); expansion of the SafeUT app to serve frontline workers, including firefighters, police officers and healthcare workers; support of a statewide WarmLine; and expansion of Mobile Crisis Outreach Teams to six rural Local Mental Health Authorities.
- H.B. 35 (2020) Mental Health Treatment Access Amendments requires the Forensic Mental Health Coordinating Council, in consultation with the Utah Substance Use and Mental Health Advisory Council, to study and provide recommendations regarding the long-term need for adult beds at the Utah State Hospital; modifies the membership of the Utah Substance Use and Mental Health Advisory Council; requires the Division of Substance Abuse and Mental Health to: set standards for certification of assertive community treatment teams (ACT teams); make rules outlining the responsibilities of ACT teams; award a grant for the development of one ACT team; and implement and manage a housing assistance program for certain individuals released from the Utah State Hospital.
- **H.B. 25 (2021)** Mental Health Protections for First Responders expands the work group until 2025.
- **H.B. 248 (2021)** Mental Health Support Program for First Responders establishes a grant program to provide mental health resources for first responders.
- **H.B. 288 (2021)** Education and Mental Health Coordinating Council creates the Education and Mental Health Coordinating Council (council); and provides for the membership of the council; requires the council to make certain findings and recommendations regarding behavioral health support to youth and families within the state.
- **S.B. 41 (2021)** Mental Health Access Amendments allows the diagnosis or treatment of mental health conditions to be done via telehealth services.
- **S.B. 47 (2021)** Mental Health Crisis Intervention Council creates the Mental Health Crisis Intervention Council to be responsible for training, developing protocols and standards for mental health crisis intervention teams; adds two additional MCOT teams for a total of 19 statewide

- **S.B. 53 (2021)** Behavioral Emergency Services Amendments creates a new license for behavioral emergency services technicians and behavioral emergency services technicians.
- **S.B. 155 (2021)** 988 Mental health Crisis Assistance creates the Statewide Behavioral Health Crisis Response Account and amends provisions related to the membership and duties of the Behavioral Health Crisis Response Commission, and appropriates general funds for implementation
- **S.B. 161 (2021)** Mental Health Systems Amendments requires insurance plans contracting with the state's Medicaid program for behavioral health services, to provide services via telemedicine and reimburse for treatment at a certain rate.

## Statewide Suicide Prevention Legislation 2017-2021

- **H.B. 346 (2017)** Suicide Prevention Programs provides both one time and ongoing funding to the Division of Substance Abuse and Mental Health to provide general suicide prevention. It establishes a psychological medical examiner in the Department of Health, Office of the Medical Examiner.
- **H.B. 370 (2018)** Suicide Prevention and Medical Examiner Provisions amends provisions regarding medical examiner records; expands the scope of suicide prevention programs in schools; increases the funding available for the implementation of school-based suicide prevention programs; provides for the award of grants for higher education institutions to implement the Safety and Crisis Line, for the development of five new mobile crisis outreach teams, and for communities to provide mental health crisis response training; creates the Statewide Suicide Prevention Coalition; establishes the Governor's Suicide Prevention Fund; and llows a taxpayer to contribute to the Governor's Suicide Prevention Fund.
- **H.B. 17 (2019)** Firearm Violence and Suicide Prevention Amendments requires the DSAMH, in consultation with the Bureau of Criminal Identification, to implement and manage a firearm safety program and a suicide prevention education course by: producing a firearm safety brochure and firearm safety packet; procuring cable-style gun locks; distributing firearm safety packets; administering a program in which a Utah resident who has filed an application for a concealed firearm permit to receive a rebate after the purchase of a firearm safe. and creating a suicide prevention materials and education course; requires a federal firearm dealer to provide a cable-style gun lock supplied by the DSAMH to an individual purchasing a certain firearm; requires the Bureau of Criminal Identification, in conjunction with the DSAMH to: create a firearm safety and suicide prevention web-accessible video; and require an applicant

seeking renewal of a concealed firearm permit to view the video before renewal.

**H.B. 393 (2019)** Suicide Prevention Amendments expands the scope of suicide prevention programs in a school; requires the Division of Occupational and Professional Licensing, in conjunction with the Division of Substance Abuse and Mental Health, to create a suicide prevention web-accessible video; requires certain primary care providers to view the suicide prevention web-accessible video in order to renew a medical license; establishes the Survivors of Suicide Loss Account; establishes the Psychiatric Consultation Program Account; and provides immunity from civil liability for an individual who provides assistance to another individual who has expressed suicide ideation or taken suicidal actions.

**H.B. 267 (2021)** Voluntary Lethal Means Restrictions Amendments creates a process to allow non-restricted individuals to voluntarily surrender firearms for a period of time

**H.B. 336 (2021)** Suicide Prevention Amendments continues safe rebate program, clean-up program and bereavements services; adds technical assistance program for Zero Suicide implementation in healthcare organizations.

**NOTE:** As important as passing legislation and providing funding is to the work of crisis intervention and suicide prevention, it's also important to note the failure of legislation may also be considered a 'win' in suicide prevention. For example during one legislative session, bills were proposed that may have increased risk factors for individuals who identify as LGBTQIA. The bills themselves raised a great deal of awareness and discussion around the risk and protective factors associated with suicide prevention.