

MEMORANDUM

DATE	May 9, 2016
TO	Board Members
FROM	Karen Johnson Licensing Coordinator <i>Karen Johnson</i>
SUBJECT	Agenda Item 27.a.1-4. Consider Previously Proposed Statutory Language Regarding Coursework in Suicide Risk Assessment and Intervention

Background:

AB 2198 (Levine, 2014) would have mandated a six hour one time continuing education requirement on the subject of suicide prevention, assessment and training for licensees of the Board. It would also require applicants for psychology licensure whose graduate studies began on or after January 1, 2016, take a 15 hour course in suicide assessment, treatment and management. The Board took an oppose position at their August, 2014 meeting. Staff provided testimony to the Legislature and wrote opposition letters to the author and committee members. The bill was vetoed by Governor Brown; however, in his veto message he asked, "...licensing Boards to address the issues which this bill raises and take whatever actions are needed".

Attachments:

1. Governor Brown's Veto Message
2. Diagram of the legislative mandated coursework
3. Compilation of first survey responses received 4/10/15 (15), and results of the second survey sent to graduate, internship, and clinical programs (70)
4. Proposed draft statutory language

Action Requested:

The Board must decide how to address the request in the veto message.



OFFICE OF THE GOVERNOR

SEP 18 2014


To the Members of the California State Assembly:

I am returning Assembly Bill 2198 without my signature.

This bill would require certain mental health professionals to complete a training program in "suicide assessment, treatment, and management."

California has an extensive regulatory scheme that aims to ensure that California physicians, psychologists and counselors are skilled in the healing arts to which they have committed their lives. Rather than further legislating in this field, I would ask our licensing boards to evaluate the issues which this bill raises and take whatever actions are needed.

Sincerely,


Edmund G. Brown Jr.

BOARD OF PSYCHOLOGY

**HISTORY OF ONE-TIME CONTINUING EDUCATION RENEWAL REQUIREMENTS SINCE THE INCEPTION OF THE BOARD OF PSYCHOLOGY'S
CONTINUING EDUCATION PROGRAM (OPERATIVE JANUARY 1, 1996)**

SPOUSAL/PARTNER ABUSE ASSESSMENT, DETECTION AND INTERVENTION STRATEGIES					
APPLIES TO:	EXEMPTION ALLOWED?	ADDED/AMENDED BY:	B&P CODE SECTION:	SPECIFIC REQUIREMENTS	OPERATIVE DATE:
Licensees who began graduate study prior to 01/01/2004	Yes	Stats. 2002, ch. 481, § 3 (SB 564)	2915	A continuing education course during his or her first renewal period after the operative date of this section in spousal/partner abuse assessment, detection, and intervention strategies, including community resources, cultural factors, and same gender abuse dynamics.	01/01/2004

AGING AND LONG-TERM CARE					
APPLIES TO:	EXEMPTION ALLOWED?	ADDED/AMENDED BY:	B&P CODE SECTION:	SPECIFIC REQUIREMENTS	OPERATIVE DATE:
Licensees who began graduate study prior to 01/01/2004	No	Stats. 2002 ch. 541 § 5 (SB 953)	2915.7	A three-hour continuing education course in aging and long-term care during his or her first renewal period after the operative date of this section. The course could include, but is not limited to, the biological, social, and psychological aspects of aging.	01/01/2005
	Yes	Stats 2004 ch. 695 § 20 (SB 1913)		Statute was amended to allow a licensee whose practice does not include direct provision of mental health services to apply to the Board for an exception to this requirement.	
		Stats. 2010, ch. 552, § 3 (AB 2435)		On and after January 1, 2012, this coursework shall include instruction on the assessment and reporting of, as well as treatment related to, elder and dependent adult abuse and neglect.	

To Whom It May Concern,

The Board of Psychology (Board) is seeking your assistance in gathering information about the course content, training, supervision, practicum experience, and applied clinical training of its licensees' graduate and internship programs.

Specifically, we are gathering information regarding the coverage of suicide assessment, treatment, and management in the various graduate and internship programs designed to lead to licensure by the Board.

This request is in response to questions raised by AB 2198 (Levine, 2014) regarding whether licensed mental health professionals receive sufficient training in suicide assessment, treatment, and management. This bill proposed requiring licensees of this Board and the Board of Behavioral Sciences, to take a six-hour continuing education course covering these topics.

Although AB 2198 was vetoed by the Governor, this bill prompted discussion about the amount of instruction students are receiving on this topic, as well as the specific content areas of the instruction, at both the Board level and in the Legislature.

The attached survey focuses on graduate class programs, but any information regarding crisis intervention and suicide prevention will be beneficial.

So that we may answer these questions, we ask that you please complete the brief questionnaire attached to this letter by **Wednesday January 28, 2015**, and send it back to the Board to my attention. Please feel free to include any additional information that you have available.

Sincerely,
Jon Burke

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Board of Psychology Survey Coursework in Suicide Assessment, Treatment, and Management

Instructions: Please complete the following questions and email back to the Board at the following address by Wednesday, January 28:

Please feel free to attach additional information, such as syllabi or course descriptions that you feel may be helpful. Thank you very much for your time!

1. School/ Clinic Name:
2. Degree/ Internship Program Name:
3. Course(s) Required by this Degree/ Internship Program Which Cover the Topics of Suicide Assessment, Treatment, and Management:
4. Number of Units/Hours Each Required Course Spends on These Topics:
5. A Description of the Topics/Methods Covered by Each Required Course:
6. Additional Relevant Courses Offered but not Required in the Degree/ Internship Program (Please include number of units/hours and a brief description):

Table 1
Board of Psychology Graduate Programs Survey Results
Coverage of Suicide Assessment, Treatment, and Management

Required Courses in Degree Covering Topic	Units or Hours Courses Spend on Topic	Topic Areas Covered
University of California, Berkeley Ph.D. in Clinical Science, Department of Psychology		
Intoduction to Clinical Methods	4 hours (One semester)	Readings, role plays, and speakers of risk assessment, clinical interviewing, the epidemiology of suicide, involuntary hospitalization, contact with social support and other professionals, the debate about suicide contracts, management of suicidal clients, panel with advanced students sharing experienced of working with clients who have suicidal ideation, thoughts, and feelings.
Seminar in Professional Development	16 hours (Four semesters)	
Speciality Clinic	16 hours (Four semesters)	
The Wright Institute, Doctor of Psychology Program		
Psychopathology I	N/A	Suicide, depression, anxiety, trauma, and many other conditions are discussed in a wide variety of courses and the material addressing these areas of concern are introduced repeatedly through courses, practica, and internship. Students are also taught about suicide assessment and intervention in oreintation and throughout their training during supevsion.
Psychopathology II		
Assessment I, II and III		
Case Conference (2 year sequence)		
Ethics		

Intervention Courses (Brief, CBT, Psychodynamic, etc.)		
Biological Bases of Behavior		
Supervision and Consultation		
Several of the Elective Courses		
Alliant University, Fresno Campus Ph.D. Clinical Psychology		
P520 Introduction to Psychotherapy	4 hours	Didactic education, role play, discussion.
P671 Behavior Therapy	4 hours	
P570 Child/Adolscent Assessment/Psychopathology	4 hours	
P801 Ethics and Law	4 hours	
University of Southern California, Ph.D. in Clinical Psychology --Clinical Science Model		
Psychology 514, Psychopathy	1 hour	Introduced to theories about the causes of suicide, the prevalence and incident of suicide and the correlation between suicide and mental disorders.
Psychology 515, Clinical Assessment	1 hour	Demographic factors associated with suicide, including factors that are most closely associated with risk for suicide. Assessing for active versus passive suicide idation, how to assess for suicide plan, intent, and means and what factors can protect a person.
Psychology 595, Practicum in Clinical Psychology: Clinical Interviewing	2 hours	How to conduct a suicide risk assessment, how to identify both the risk factors for suicide and protective factors that reduce risk, as well as the ethical factors involved in assessment.
Psychology 595, Practicum in Clinical Psychology: Assessment	2 hours	Students learn specific questions that should ask a patient or client to assess for suicide risk.
Psychology 619, Psychological Intervention	2 hours	Students learn about suicide risk assessment in the context of professional ethics and duties. They also learn about suicide risk with respect to certain mental diorders and learn some specific techniques from Dialectical Behavior Therapy about how to reduce threats of suicide.

Psychology 695, Advanced Practicum in Clinical Psychology	2 hours	Students learn about the specific procedures in the department clinic they are expected to follow if they have clients who appear to be suicidal. This includes questions to ask, what resources to contact and the important of getting assistance from supervisors.
Fuller Theological Seminary, Graduate School of Psychology Ph.D. Clinical and Psy.D.		
Consultation Group	N/A	Primary focus is teaching students case presentation skills, but case discussions occasionally occur.
PC 819 Cognitive and Behavioral Therapy	4 units	How to ask questions about suicidal ideation or thoughts and plans for suicide if any, and how to intervene including crisis intervention.
Practicum 0	0 units	Didactic training in symptoms, etiology, course, assessment, valuation, interventions, and treatment plan. Role-plays also used.
PC 803 Legal and Ethical Issues	2 units	Covers topics of the law regarding the necessary and acceptable violation of confidentiality in cases of suicidal risk for the purpose of protecting the client from self-harm. Also covers the ethical ramifications of having a suicidal client under one's care.
PG 843 Psychopathology	4 units	Psychopathology covers the topic of suicide assessment within the context of mood disorders.
California State University, Dominguez Hills Master of Arts in Psychology -- Clinical Option		
PSY 564 Psychotherapeutic Techniques	3 units	Suicide assessment, therapeutic conversations, RSA process, assessment of client resources, safety.
PSY 567 Individual Assessment	3 units	
Biola University, Rosemead School of Psychology Ph.D. and Psy.D. in Clinical Psychology		
*No courses required specifically on this topic, but this topic is covered in required prepracticum and practicum courses.	N/A	Suicide assessment and risk management.

Table 2

**Board of Psychology Internship Programs Survey Results
Coverage of Suicide Assessment, Treatment and Management**

Well Span Behavioral Health Doctoral Internship in Clinical Psychology		
Crisis Intervention and Involuntary Commitment Process	1 hour	Assessing safety, safety planning, handling involuntary commitment, managing chronic suicidality. Methods include didactic prevention, demonstration, role playing and review of videotaped sessions.
Assessing Safety in Intake Evaluations	1 hour	
Techniques for Treating Severe Depression	4 hours	
Treating Personality Disorders	7 hours	
California State University, Domingez Hills Psychology Internship Program		
5-Day Orientation		Training on responding to emergencies, with major emphasis on responding to suicidal symptoms. Review of risk factors/warning signs, assessment of risk, decisions re: hospitalization vs. outpatient treatment in the facility, safety planning, on-going treatment.
Didactic Training	2 hours	
Case Consultation	2 hours/week	Discussion and review of any cases where suicidal risk is of concern. Modeling for interns of how such cases are handled.
Individual Supervision with Primary Supervisor		Review of all intern's caseload with respect to potential for self-harm, needed monitoring, safety planning.
Supervisor Joint Work with Intern		Active supervisor support to/joint work with intern during times when psychiatric hospitalizations are implemented.

The LGBT Community Center of the Desert Predoctoral Ph.D. Interns and Registered MFT Interns

ASIST Training	16 hours	History of Suicide Intervention Program, exploration of attitudes and myths re: suicide, introduction of intervention model, role-plays suicide intervention model.
Webinar Training by American Association of Suicidology	3 hours	
Harvard Medical School Presentation by Douglas Jacobs, M.D.	2 hours	

Life Skills Treatment Program Clinical Psychology Internship

N/A	N/A	Psychology interns are provided materials (from APA, CPA, and multiple other sources) throughout the training year. The assessment/treatment of suicidal ideation, verbalizations, and behavior are addressed. In group and individual supervision. Relevant research, articles and other written materials are reviewed through the training year. Intern questions about suicide are discussed in group and individual supervision.
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Alvarado Parkway Institute Behavioral Health System

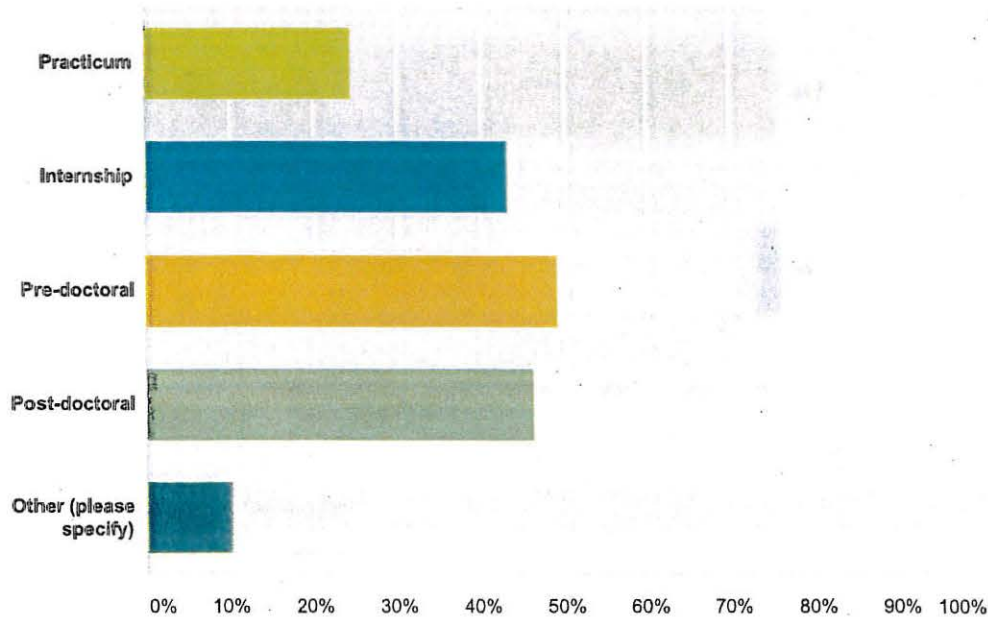
*Specific Courses not required, but interns must come prepared with testing courses, theory courses and experience in group therapy.	N/A	Inservice training regarding the use of self-harm intervention packet which includes an informational handout regarding suicide and self-harm as well as a thorough intervention plan identifying triggers, protective factors and strategies to gain support and intervene. Didactic training is provided regarding correlates to suicide, statistics pertaining to suicide and mental illness and cultural variables, as well as intervention strategies.
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University of San Diego, Counseling Center Psychology Internship Program

Risk Assessment and Management	6 hours	Didactic information on broad assessment of risks and protective factors for suicide safety planning in suicidal individuals as well as access to CAMS materials.
Suicidal Self Injury Seminar		
Job Corps Center Psychology Training Program --CAPIC Internship and Clinical Practicum		
Staff Training	N/A	Mandatory training in suicide prevention to reinforce the skill set of staff members from all departments in order to effectively listen, observe, consult, and intervene.
Suicide Prevention Activity for Students	1 month/year	Presentations and information provided regarding suicide prevention
Didactic Program for Interns	N/A	Focuses on building upon the training they get in their graduate programs. Two readings are required including "Cultural considerations in Adolescent Suicide Prevention and Psychosocial Treatment" and "Preventing Youth Suicide: A Handbook for Educators and Human Service Providers."
Pasadena City College -- Internship and Clinical Practicum		
Didactic Program for Interns	Two Weeks	30 page handout on suicide assessment.
Weekly Case Conference	1 per week	All suicide ideation cases are reviewed and discussed.
Suicide Ideation Procedures and Resources	N/A	Procedures for 5150 for Suicide Ideation cases. Video on suicide assessment produced by the Menninger Foundation. Resources on helping those "left behind by suicide".
Suicide Assessment, Treatment, and Management	40-50 hours per year	Overall time spent on this topic during year log internship.

Q1 Please indicate the name of program/setting.

Answered: 69 Skipped: 3



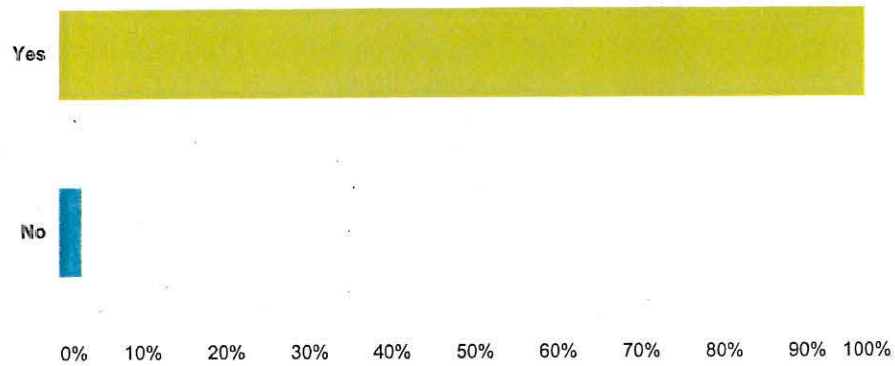
Answer Choices	Responses	
Practicum	24.64%	17
Internship	43.48%	30
Pre-doctoral	49.28%	34
Post-doctoral	46.38%	32
Other (please specify)	10.14%	7

Total Respondents: 69

#	Other (please specify)	Date
1	Pre-doctoral & Post-doctoral	4/27/2015 3:54 PM
2	Doctoral program	4/27/2015 2:15 PM
3	Doctoral Academic Program	4/27/2015 12:18 PM
4	Clinical PsyD program	4/25/2015 3:58 PM
5	Doctoral Program	4/25/2015 3:17 PM
6	Graduate School/psychology	4/23/2015 5:56 PM
7	Doctoral Program in Clinical Psychology	4/22/2015 9:08 AM

Q2 Is assessment of suicide risk a required part of trainees supervised experience?

Answered: 68 Skipped: 4

**Answer Choices**

Yes

No

Total**Responses**

97.06%

2.94%

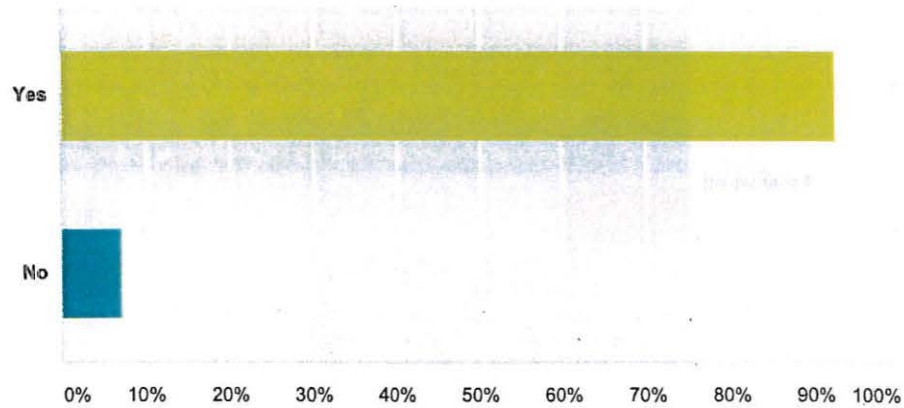
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2

68

Q3 Is suicide intervention a required part of trainees/ supervised experience?

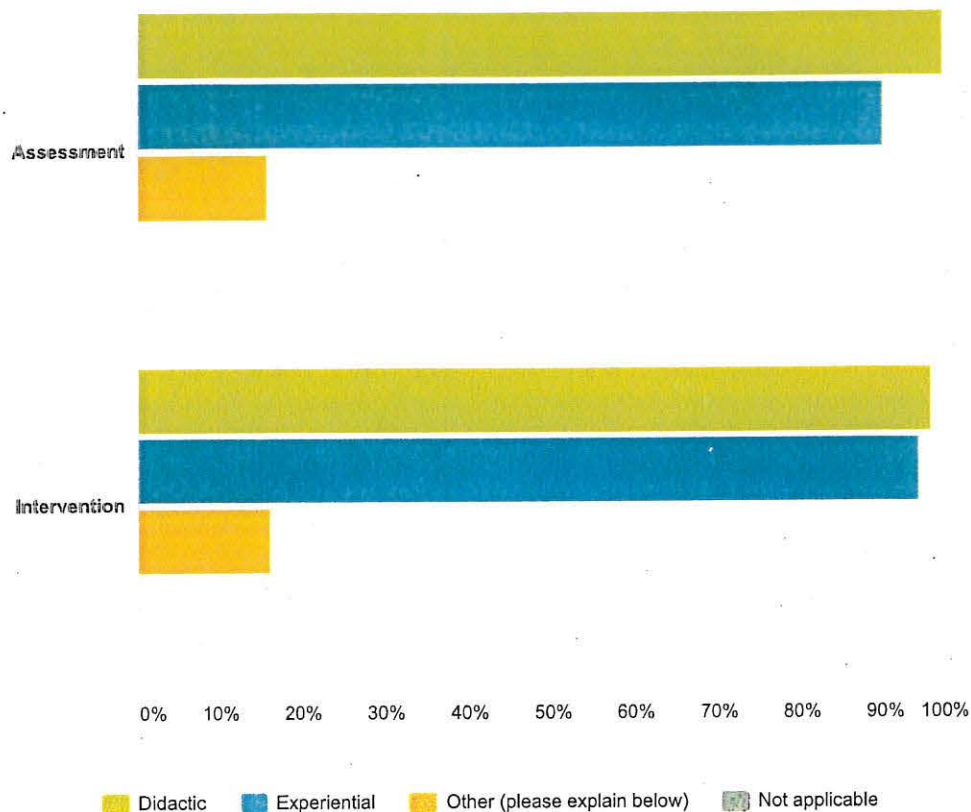
Answered: 68 Skipped: 4



Answer Choices	Responses	
Yes	92.65%	63
No	7.35%	5
Total		68

Q4 How are suicide assessment and intervention taught (check all that apply)?

Answered: 70 Skipped: 2



	Didactic	Experiential	Other (please explain below)	Not applicable	Total Respondents
Assessment	97.14% 68	90.00% 63	15.71% 11	0.00% 0	70
Intervention	95.59% 65	94.12% 64	16.18% 11	0.00% 0	68

#	Please explain	Date
1	Orientation workshop, as well as seminar presentations	4/29/2015 5:46 PM
2	taught in seminar, see suicidal clients with live and reviewed supervision	4/27/2015 2:40 PM
3	Academic work	4/27/2015 2:15 PM
4	as it comes up in clinical cases	4/27/2015 1:47 PM
5	Didactic: through classes and seminars of psychological testing as well as various classes of clinical interventions. Experiential Assessment and intervention is achieved by supervision and closely monitoring the trainee's work. Other: it is understood that post doctoral trainees have covered this subject in their graduate schools as well as previous training sites.	4/27/2015 12:43 PM
6	We do not have a specific course related to suicide assessment and treatment but, the topic is integrated (as an essential competency) in many of our classes.	4/27/2015 12:18 PM

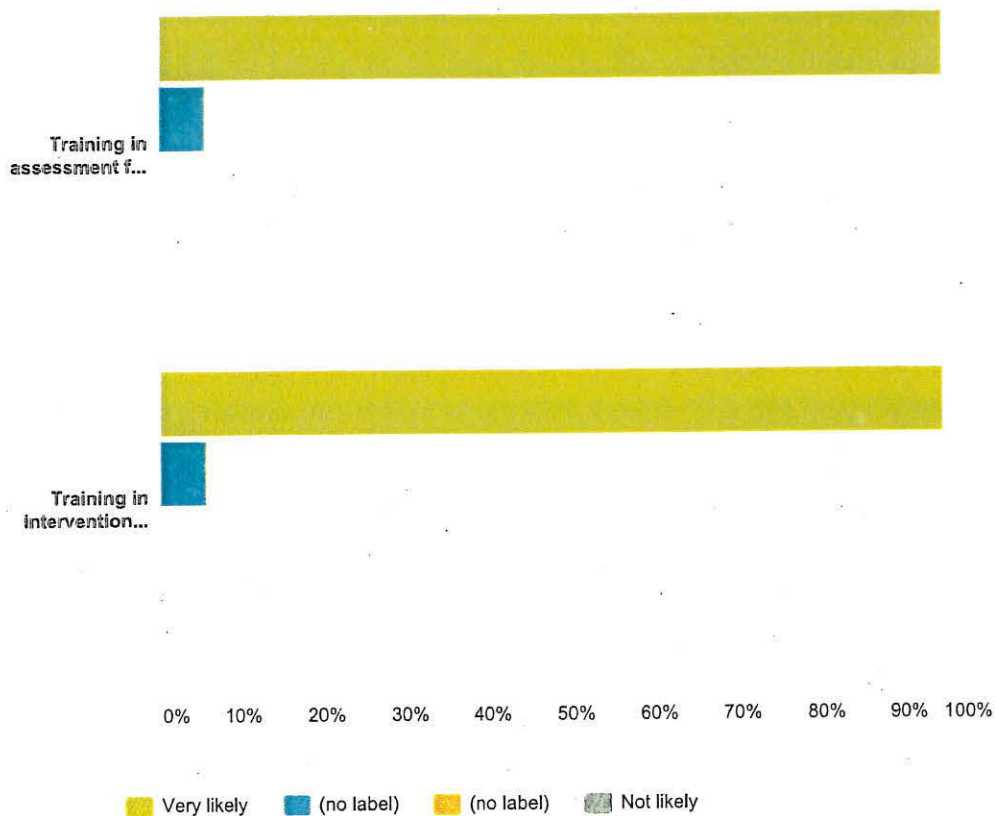
Psychology Suicide Assessment, Treatment and Management

SurveyMonkey

7	Through specific training using our assessment and intervention tool	4/27/2015 10:53 AM
8	Some postdoctoral fellows also teach and supervise on suicide assessment and intervention	4/27/2015 10:01 AM
9	Observing senior staff with clients	4/26/2015 5:02 PM
10	As part of the didactic courses on psychopathology, legal/ethical issues, and personality assessment. Also in Practicum Case Seminar	4/26/2015 10:47 AM
11	Supervision applied to cases	4/25/2015 5:01 PM
12	Taught in basic intervention courses, with reading, lecture, role play and write up. Follow up in program-based supervision groups.	4/25/2015 3:58 PM
13	through supervision	4/23/2015 3:06 PM
14	Taught via seminars, and with direct supervision on treatment units.	4/22/2015 3:13 PM
15	During individual and group supervision as well as during classes such as standardized psychological testing.	4/22/2015 2:14 PM
16	Suicide assessment and intervention are also addressed in individual and group supervision.	4/22/2015 11:50 AM
17	This is part of our curriculum in Foundation Clinical skills and Assessment courses, we also reinforce all of this in pre-seminars and clinical competency examination before students attend pre-doc internship	4/22/2015 9:08 AM
18	Interns complete a 2-day course on suicide assessment/intervention (including role-play), as well as applied clinical experiences under supervision of a licensed psychologist.	4/22/2015 9:04 AM
19	Weekly supervision	4/22/2015 8:50 AM
20	Our trainees get a lot of hands-on suicide assessment. We begin the year with didactic training for both assessment and intervention. Suicidal ideation is a fairly common presenting issue. Trainees do their own assessments and often ask a senior staff person to join them so that they get to have suicide assessment and intervention modeled for them in session.	4/22/2015 8:27 AM
21	Part of pre-doc work takes place in a Partial Hospitalization and residential program where patients are both assessed for suicide and interventions occur when patients exhibit suicidal behaviors	4/22/2015 8:02 AM
22	During orientation, didactic training is provided re: assessment of suicidality/behavioral emergencies. Trainees are required to page supervisor immediately re: client ideation, plan, intent; clients are assessed by sup with the trainee present not only to ensure safety, but also to model assessment and intervention.	4/22/2015 7:27 AM
23	Direct observation of and by licensed supervisor and other members of the interdisciplinary team.	4/22/2015 6:49 AM

Q5 For the typical trainee in your setting, how likely is that person to receive:

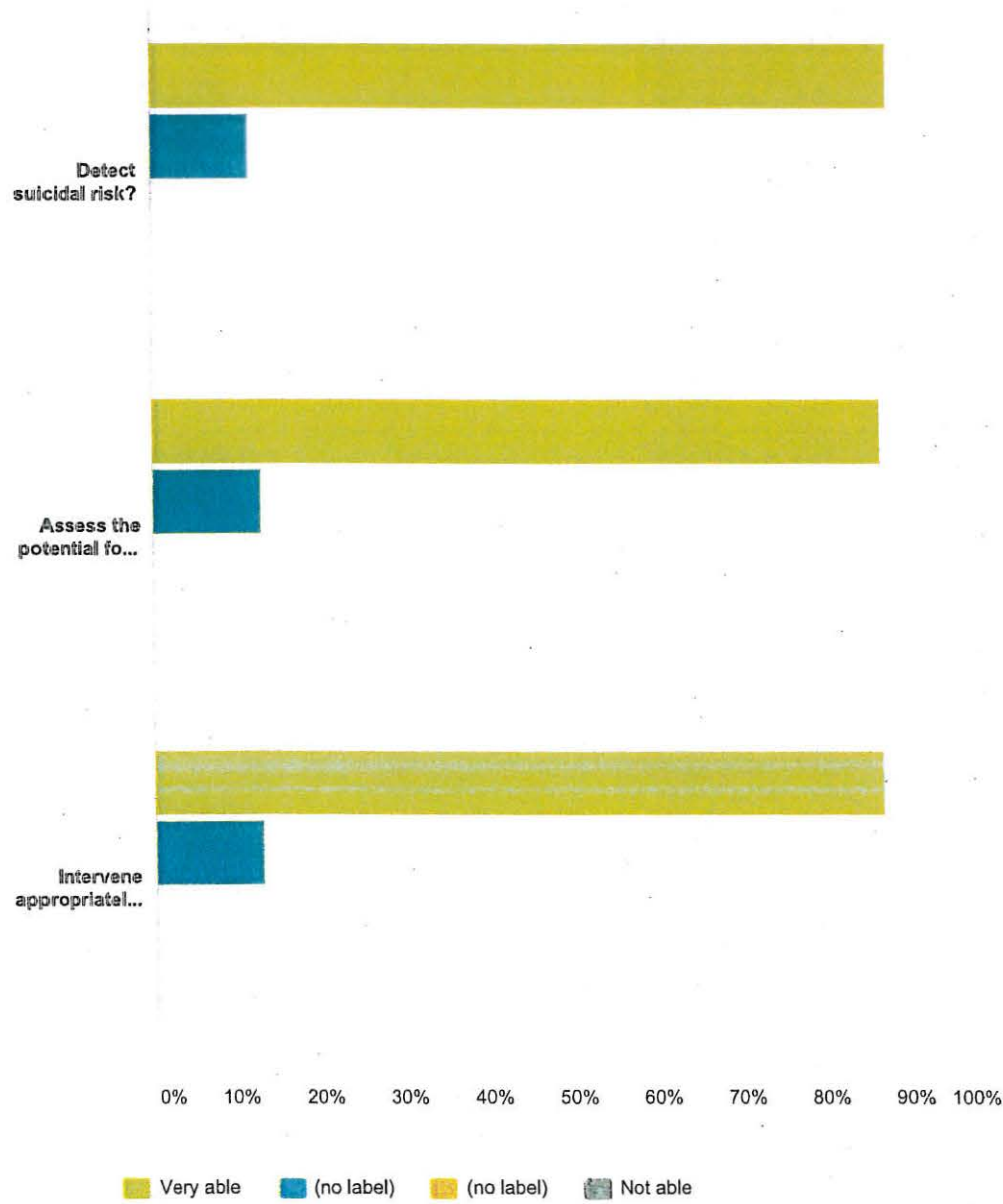
Answered: 70 Skipped: 2



	Very likely	(no label)	(no label)	Not likely	Total
Training in assessment for suicide risk?	94.29%	5.71%	0.00%	0.00%	
	66	4	0	0	70
Training in intervention strategies for a suicidal client?	94.29%	5.71%	0.00%	0.00%	
	66	4	0	0	70

Q6 Upon completion of their training at your site, how able are trainees to:

Answered: 70 Skipped: 2



	Very able	(no label)	(no label)	Not able	Total
Detect suicidal risk?	88.41%	11.59%	0.00%	0.00%	
	61	8	0	0	69
Assess the potential for suicidal action?	87.14%	12.86%	0.00%	0.00%	
	61	9	0	0	70
Intervene appropriately with suicidal individuals?	87.14%	12.86%	0.00%	0.00%	
	61	9	0	0	70

New Statutory Language Regarding Coursework in Suicide Risk Assessment and Intervention

§2915.4. Coursework in suicide risk assessment and intervention.

(a) Any applicant for licensure as a psychologist who began graduate study on or after January 1, 20XX, shall complete, as a condition of licensure, a minimum of 6 contact hours of coursework in suicide risk assessment and intervention.

(b) Coursework taken in fulfillment of other educational requirements for licensure pursuant to this chapter, ~~or in a separate course of study,~~ may, at the discretion of the board, fulfill the requirements of this section.

(c) In order to satisfy the coursework requirement of this section, the applicant shall submit to the board a certification from the chief academic officer of the educational institution from which the applicant graduated stating that the coursework required by this section is included within the institution's required curriculum for graduation, ~~or within the coursework,~~ that was completed by the applicant.

(d) The board shall not issue a license to the applicant until the applicant has met the requirements of this section.

Comment [D1]: Possibly move to pathways code?

Comment [D2]: Bring back veto message from governor, survey results, list of requirements from other sections,

Comment [nm3]: Why would you delete this phrase? It's consistent with the aging and long-term care requirement and it allows for the hours to be satisfied by an elective, I believe.

Comment [D4]: Add "1 time post licensure" language and develop cpd language.