

August 23, 2017

The Honorable Edmund G. Brown, Jr.
Governor
State Capitol, Suite 1173
Sacramento, CA 95814

**RE: AB 89 (Levine) – Psychologists: Suicide Prevention Training – REQUEST
FOR SIGNATURE**

Dear Governor Brown:

The Board of Psychology (Board) is pleased to sponsor AB 89 (Levine) and requests that you sign AB 89 when it reaches your desk. This bill would, effective January 1, 2020, require all licensees and applicants for licensure as a psychologist to have completed a minimum of six (6) hours of coursework, and/or applied experience under supervision in suicide assessment and intervention. This requirement can be met through coursework in a qualifying degree program, continuing education courses, or as part of supervised applied experience. For current licensees, this requirement could be fulfilled with new or past coursework, applied experience, or continuing education courses in suicide assessment and intervention.

Need and Purpose

Suicide is a critical public health issue in the State of California, where on average, one person dies of suicide every two hours and twice as many people die of suicide than by homicide. The Centers for Disease Control and Prevention's (CDC's) data show that, between 2000 and 2015, suicide was the third leading cause of death for Californians ages 15 to 34, and the tenth leading cause of death for Californians of all ages. Furthermore, CDC data also show that the overall suicide rate in California increased by 21.4 percent between the years 2000 and 2015.

After much review, consideration, and deliberation, our Board feels it is time to take a leading role in this area and require suicide prevention training of our licensees. In response to your veto message of AB 2198 (Levine, 2014), the Board conducted surveys of doctoral programs and pre- and post-doctoral internship and practicum programs, reviewed national research, and reviewed licensure requirements for licensed psychologists in 2015 and 2016. The Board's surveys (attached) indicated that not all programs require suicide assessment and intervention training, with almost 3 percent of programs reporting that they did not require training in suicide assessment and over 7 percent of programs reporting that they did not require training in suicide intervention. Additionally, the Board's surveys showed that there were significant variances in the amount of education and training being provided to psychologists and applicants, ranging from integrating pieces of the education and training across multiple courses (not quantified in hours), to dedicating time in courses or training programs ranging anywhere from 6 to 50 hours.

National research also indicates a need for suicide prevention training; where a study conducted by the National Center for Biotechnology Information (NCBI), a division of the National Library of Medicine (NLM) at the National Institutes of Health (NIH), found only 40-50 percent of graduate training programs in clinical and counseling psychology include formal training on suicide assessment and management.¹ Additionally, during the Board's review of licensure requirements and drafting of the suicide prevention training requirement language, the Board held multiple meetings where we received productive feedback from the public, suicide prevention advocates, persons affected by suicide, licensed psychologists and other mental health providers, and

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professional associations. The Board carefully weighed the data collected, national research, and the public input received during the review process, and determined that this issue required Board leadership and action.

In April of 2014, the American Psychological Association reported on findings supporting the conclusion that more training is needed. Suicide can be the most dangerous issue that psychologists and other mental health professionals face with their patients, but training in suicide risk assessments is lacking, according to a task force report and summit organized by the American Association of Suicidology (AAS).

The then APA president Nadine J. Kaslow, PhD stated, "Many psychology graduate students are trained only on suicide statistics and risk factors, not in clinical methods of conducting meaningful suicide risk assessments. As health-care professionals, the deaths we're most likely to encounter are from suicide." Dr. Kaslow, an Emory University professor and chief psychologist of Atlanta's Grady Health System, has studied suicide in youth and adults. (Smith, April 2014, Monitor on Psychology, Vol 45, No. 4, p. 42)

Competency in the assessment and treatment of suicidal patients is not a fixed quality, but rather requires ongoing education and training for licensees who may have received their training many years ago. By sponsoring AB 89 and highlighting the critical importance of suicide prevention training in the field of psychology, the Board hopes to encourage licensees to periodically re-evaluate their level of competency in assessing and treating suicidal patients and further encourage licensees to seek additional training in suicide assessment and intervention. Additionally, the Board hopes that the passage of AB 89 will encourage graduate programs, internship programs, and post-doctoral training programs to evaluate the amount of training provided in these programs to ensure that their students and trainees complete the program feeling confident that they have the training they need to practice responsibly as psychologists.

Lastly, AB 89 takes a critical first step in improving the state's suicide prevention efforts by meeting one of the goals of the 2008 "California Strategic Plan on Suicide Prevention: Every Californian is a Part of the Solution," which proposed developing and implementing guidelines to promote effective and consistent suicide prevention by incorporating suicide prevention training in existing licensing, credentialing, and graduate school programs. Furthermore, AB 89 puts California in line with six other states that require psychologists and licensed health care professionals to obtain a specified minimum number of hours of education or training in suicide assessment and intervention.

By ensuring all psychologists meet a minimum number of hours of education or training in suicide prevention, AB 89 protects consumers of psychological services who rely on psychologists having the basic education and training required to identify and aid a patient with suicidal ideation to find competent treatment and promote public health by enhancing the state's suicide prevention efforts. This legislation puts California in a leadership role with other states that protect consumers of psychological services through mandatory training in this critical area.

Administrative Considerations

To verify compliance with the one-time requirement in AB 89, the Board would use existing Board processes and resources by incorporating verification into the initial or renewal application process and the continuing education (CE) audit process (for current licensees). To accomplish this, the Board would incur a minor one-time cost of \$5,000 for BreZE (the Department of Consumer

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Affairs' licensing software) updates required for verification and data collection for purposes of application and renewal. The Board would also update its initial and renewal applications available online, including related instructional materials, to include appropriate certifications to capture compliance data in the BreEZe system for manually processed applications.

After January 1, 2020, AB 89 implementation would also include verification of compliance by Board staff during the initial and renewal application review process for psychologists and during the continuing education (CE) audit process for licensed psychologists. There would be no additional costs associated with the changes to the initial application review process, renewal application review process, or CE audit process required by this bill.

Verification of compliance for applicants would be added as a component of the initial license application review process, where applicants would be required to provide written documentation showing proof of completion of the six (6) hours of coursework, applied experience, or continuing education in suicide assessment and intervention. If an applicant failed to provide adequate documentation of completion, this would result in denial of a license for the applicant.

Verification of compliance for currently licensed psychologists would include certification under penalty of perjury on a licensee's renewal application that the licensee met the one-time 6-hour requirement. This certification would then be verified through the Board's existing CE audit process, which would include verification of documentation of suicide prevention training. The Board currently audits approximately 10 percent of licensees annually, and staff verifies that licensees meet the required number and types of CE hours required for renewal. Failure to certify completion on the renewal application would result in delayed and/or denied renewal applications if the error were not corrected, and failure to provide adequate documentation could subject the licensee to a citation and fine or formal discipline.

A Fair and Balanced Approach

As with many other aspects of mental health, it is imperative that psychologists lead the way in promoting the highest standards of care for California consumers. AB 89 would ensure that all psychologists in California meet the same minimal requirements in suicide prevention training regardless of where and when they attained their doctoral degree and supervised professional experience. For those that have already received the training/education, there is a mechanism in place to verify completion so that this bill would not be an additional mandate on those licensees. Additionally, AB 89 is supported by existing Board processes and resources with negligible costs to the Board.

AB 89 is a sensible and flexible solution that enhances the state's suicide prevention efforts and protects consumers of psychological services who rely on psychologists having the basic education and training required to identify and aid a patient or client with suicidal ideation in finding competent treatment.

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For these reasons, the Board asks that you sign AB 89. If you have any questions or concerns, please feel free to contact the Board's Executive Officer, Antonette Sorrick, at (916) 574-7113. Thank you.

Sincerely,

A handwritten signature in blue ink, appearing to read 'SC Phillips', written over a light blue horizontal line.

STEPHEN C. PHILLIPS, JD, PsyD
President, Board of Psychology

cc: Assembly Member Levine
Camille Wagner, Secretary of Legislative Affairs, Office of the Governor

Sources:

- 1 Cramer, R. J., Johnson, S. M., McLaughlin, J., Rausch, E. M., & Conroy, M. A. (2013). Suicide Risk Assessment Training for Psychology Doctoral Programs: Core Competencies and a Framework for Training. *Training and Education in Professional Psychology*, 7(1), 1–11.
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3963278/>
- 2 William M. Schmitz Jr., PsyD, Michael H. Allen, MD, Barry N. Feldman, PhD, Nina . Gutin, PhD, Danielle R. Jahn, MA, Phillip M. Kleespies, PhD, Paul Quinett, PhD, and Skip Simpson, JD
<http://inthe forefront.org/sites/default/files/articles/AAS taskforcearticle.pdf>