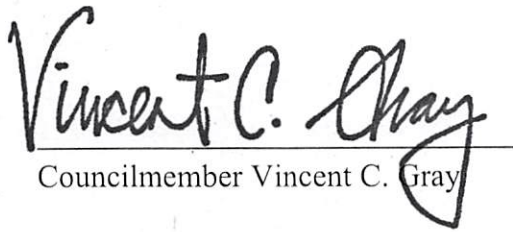
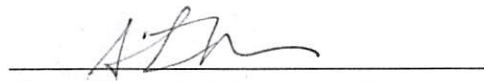
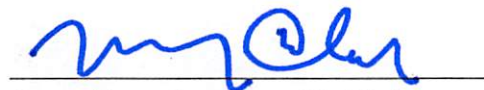



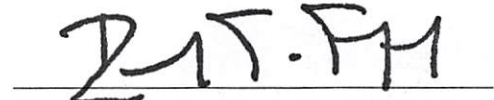
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2 Councilmember Vincent C. Gray

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6 Councilmember Anita Bonds

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10 Councilmember Mary M. Cheh


Councilmember David Grosso


Councilmember Elissa Silverman


Councilmember Brandon T. Todd

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18 A BILL
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21 IN THE COUNCIL OF THE DISTRICT OF COLUMBIA
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24

25 To amend the District of Columbia Health Occupations Revision Act of 1985 to require
26 continuing education for licensed health professionals on the subject of suicide risk
27 assessment, treatment, and management to provide comprehensive care for at-risk
28 patients.
29

30 BE IT ENACTED BY THE COUNCIL OF THE DISTRICT OF COLUMBIA, That this
31 act may be cited as the "Suicide Prevention Continuing Education Amendment Act of 2019".
32

33 Sec. 2. The District of Columbia Health Occupations Revision Act of 1985, effective
34 March 25, 1986 (D.C. Law 6-99; D.C. Official Code § 3-1201.01 *et seq.*), is amended as follows:

35 (a) Section 101 is amended by inserting a new paragraph (13A) as follows:

36 "(13A) "Suicide Postvention" means a crisis intervention strategy designed to assist with
37 the grief process following suicide loss, which, when used appropriately, reduces the risk of

Vincent C. Gray

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W. C. Gray

38 suicide contagion, provides the support needed to help survivors cope with a suicide death, and
39 addresses the social stigma associated with suicide.”.

40 (b) Section 510 (D.C. Official Code § 3-1205.10) is amended as follows:

41 (1) Subsection (b) is amended as follows:

42 (A) Paragraph (5)(B)(vii) is amended by striking the phrase “identify as
43 LGBTQ.” and inserting the phrase “identify as LGBTQ; and” in its place.

44 (B) A new paragraph (6) is added to read as follows:

45 “(6)(A) Except as provided in subsection (b-1)(4) of this section, require that any
46 continuing education requirements for the practice of any health occupation licensed, registered,
47 or certified under this section include 2 credits of evidence-based training in suicide prevention,
48 assessment and screening, treatment, management, and postvention.

49 “(B) The instruction required by subparagraph (A) of this paragraph shall
50 teach attitudes, knowledge, and skills that enable health care professionals to identify and care
51 effectively for patients who are at risk of suicide, which may include:

52 “(i) Suicide assessment, including screening and referral, suicide
53 treatment, and suicide management; and

54 “(ii) Programs listed on the Suicide Prevention Resource Center’s
55 Resources and Programs finder.”.

56 (2) Subsection (b-1)(4) is amended by striking the phrase “subsection (b)(5)” and
57 inserting the phrase “subsections (b)(5) or (b)(6)” in its place.

58 Sec. 3. Fiscal impact statement.

59 The Council adopts the fiscal impact statement in the committee report as the fiscal

60 Impact statement required by section 602(c)(3) of the District of Columbia Home Rule
61 Act, approved December 24, 1973 (87 Stat. 813; D.C. Official Code § 1-206.02(c)(3)).

62 Sec. 4. Effective date.

63 This act shall take effect following approval by the Mayor (or in the event of veto by the
64 Mayor, action by the Council to override the veto), a 30-day period of congressional review as
65 provided in section 602(c)(1) of the District of Columbia Home Rule Act, approved December
66 24, 1973 (87 Stat. 813; D.C. Official Code § 1-206.02(c)(1)), and publication in the District of
67 Columbia Register.