

Public Health Committee JOINT FAVORABLE REPORT

Bill No.: SB-1085

Title: AN ACT CONCERNING SUICIDE PREVENTION.

Vote Date: 3/31/2021

Vote Action: Joint Favorable Substitute

PH Date: 3/29/2021

File No.: 537

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SPONSORS OF BILL:

The Public Health Committee

REASONS FOR BILL:

This bill addresses suicide prevention efforts to include renaming the Department of Children and Families Youth Suicide Advisory Board to the "Interagency Suicide Advisory Board" and expands the scope of the board's mission by adding suicide prevention for adults and children. Current law regarding the Youth Suicide Advisory Board only allows for addressing suicide prevention for children. This bill also increases the number of board members from 20 to 22 with the addition of the executive directors of the Commission on Women, Children, Seniors, Equity and Opportunity and the Court Support Services Division, or their designees. By November 1, 2021, the renamed and expanded board must provide an annual report to the Public Health Committee covering its operation and legislative recommendations.

Both the Department of Children and Families (DCF) and the Department of Public Health (DPH) had unique suicide prevention efforts dating back to 1989, with DCF focused on preventing youth suicide. In 2000, DPH efforts focused on addressing interagency lifespan suicide prevention efforts and developing a statewide and comprehensive suicide prevention plan released by 2005. Additionally, in 2006 the Department of Mental Health and Addiction Services (DMHAS) received a youth suicide prevention grant from the federal government with DCF in a grant advisory role. By 2012 DPH's youth suicide prevention efforts and DCF's interagency lifespan suicide prevention efforts were merged to facilitate collaborative efforts between the three agencies with both the expanded scope of work and to advance the state suicide prevention plan. This combined board is now known as the Connecticut Suicide Advisory Board (CTSAB) and tri-chaired by representatives from DMHAS, DCF, and the Connecticut Chapter of the American Foundation for Suicide Prevention (AFSP CT).

To further suicide prevention efforts in the state, this bill requires the addition of at least two contact hours of continuing medical education (CME) in behavioral health for physicians during the first license renewal period requiring CME hours (the second license renewal). These CME requirements are then required once every six years. Suicide prevention training and veteran suicide prevention training are allowed in this required CME.

RESPONSE FROM ADMINISTRATION/AGENCY:

Deidre S. Gifford, MD, MPH, Acting Commissioner, Department of Public Health (DPH):

Commissioner Gifford and DPH support the current structure of the Connecticut Suicide Advisory Board (CTSAB). It is tri-chaired by the Department of Mental Health and Addiction Services (DMHAS), the Department of Children and Families (DCF), and the Connecticut Chapter of the American Foundation for Suicide Prevention (AFSP CT). It is a vital, effective, and well-regarded advisory board with contributions from DPH, DMHAS, and DCF. Each agency provides varied but relevant areas of expertise in the only coordinated and state-wide effort to both prevent and intervene in suicide deaths across the lifespan.

DPH shared data about suicide rates in Connecticut for the past decade for different demographics. The suicide rates for teenagers between 11-17 years old being the lowest across all age categories since 2015. However, the overall suicide rate has increased due to the rise in suicides by middle-aged, non-Hispanic, white men.

Miriam Delphin-Rittman Ph.D., Commissioner, Department of Mental Health and Addiction Services (DMHAS):

Commissioner Delphin-Rittman explained DMHAS's current efforts as part of the Connecticut Suicide Advisory Board (CTSAB) and their focus on suicide prevention across the lifespan. The CTSAB is an expansion of the Youth Suicide Advisory Board and currently executes the responsibilities listed in Section 1 of this bill. CTSAB is also responsible for developing and implementing the CT Suicide Prevention Plan on a 5-year lifecycle. CTSAB currently operates from the State of Connecticut Suicide Prevention Plan 2025 (PLAN 2025).

DMHAS expressed concern over this bill's requirement for CTSAB to generate a newly created annual report to the Public Health Committee due to the lack of resources to devote to this endeavor. They request submission of the PLAN 2025 and its periodic updates as an acceptable substitute for the annual report requirement listed in this bill. Alternatively, DMHAS requests that the operational plan and legislative recommendations required by the bill's annual report to the Public Health Committee be included in the DMHAS Triennial Report to meet the spirit of the bill without the addition of new resources.

Vannessa Dorantes, LMSW, Commissioner, Department of Children and Families (DCF):

Ms. Dorantes and DCF do not support this bill. DCF is already part of a successful collaborative effort between state agencies, community organizations, and subject matter experts on youth suicide prevention efforts, the Connecticut State Suicide Advisory Board (CTSAB). DCF tri-chairs with the Department of Mental Health and Addiction Services (DMHAS) and the Connecticut Chapter of the American Foundation for Suicide Prevention (AFSP CT) to successfully manage a large group of volunteers dedicated to preventing self-harm in all age groups across the state.

Using a collaborative approach, the CTSAB addresses the threat of child suicide with partnerships between state agency experts, community organizations, and suicide attempt and loss survivors with an evidence-based prevention plan. This bill would dismantle the CTSAB, removes nearly all mention of children and the DCF Commissioner in the work of the newly proposed board, eliminates most statutory language involving youth, and adds new language referring to the state's aging population.

DCF is concerned that the shift to a lifespan suicide prevention effort using the language currently written in this bill will disproportionately harm children. Youth suicide prevention efforts are a critical area of focus for the CTSAB. DCF requests an amendment to the bill's language to address the unique, complex, and specific needs of children with respect while respecting their developmental age and stage.

Ms. Dorantes also requests the state's children's behavioral health system taken into consideration when designing children's suicide prevention policy. DCF is the lead agency on children's behavioral and mental health services. They offer multiple service connections to help families with children experiencing mental health issues or suicide ideation concerns navigate a complicated and fragmented mental health system. They also encourage the Public Health Committee to read the Connecticut Children's Behavioral Health Plan as reported by DCF. This plan offers several suggestions on how to make an under-funded, and, at times, byzantine mental health system more accessible, along with plan progress reports.

State Representative Holly Cheeseman, 37th Assembly District:

Representative Cheeseman does not support SB 1085. The stated intent of this bill is to create a statewide, interagency coordinating source for youth and adult suicide prevention. However, since 2012, the state has the well-established, successful, and collaborative Connecticut Suicide Advisory Board (CTSAB). The CTSAB already functions as the statewide suicide prevention and response advisory board focused across the lifespan. It is co-chaired by the Department of Children and Families (DCF) and the Department of Mental Health and Addiction Services (DMHAS) with significant input from the Connecticut Chapter of the American Foundation for Suicide Prevention (AFSP CT) and over 150 other interested and invested agencies and organizations.

As written, this bill will exclude many of the diverse coalition members whose work has been integral for this board's continued success. Suicide was a grave concern before the pandemic, and the need for this board's efforts and experience are now exceedingly urgent in a post-pandemic environment. Representative Cheeseman requests that Section 1 of this bill is removed, not disband or reconstitute the CTSAB to create a new yet less expansive and impactful suicide advisory board.

NATURE AND SOURCES OF SUPPORT:

None

NATURE AND SOURCES OF OPPOSITION:

Ann Irr Dagle, President, Brian Dagle Foundation:

Ms. Dagle does not support SB 1085. While the spirit of the bill is well-intentioned with the goal of creating a statewide suicide advisory board, the actual outcome of the bill, as written

will eliminate the Connecticut Suicide Advisory Board (CTSAB). Nationally recognized, the CTSAB is the only collaborative state-level advisory board focused on suicide prevention, intervention, and response across the lifespan. The success of the CTSAB stems from the relationships between each of the board's partners. State and national mental health organizations and professionals, state and local officials, state agencies, non-profits, hospitals, and people with lived experience working together without hierarchy to save lives and support the families devastated by suicide.

Stephen Mendelsohn, Second Thoughts Connecticut:

Mr. Mendelsohn and Second Thoughts Connecticut do not support SB 1085. They are a coalition of disabled people working to increase access to suicide prevention services for people with disabilities and members of the Connecticut Suicide Advisory Board (CTSAB). Connecticut is the only state in the country with a suicide prevention plan that includes people with disabilities and others with chronic illnesses. Their work with this population is remarkably prescient given the explosion of people possibly living with chronic COVID-19 symptoms. This attention to detail and consideration for the most vulnerable in our society is why our state has one of the lowest suicide rates in the country. Dissolving the CTSAB would dismantle a critical asset in our suicide prevention efforts.

Reported by: Kate Hamilton

May 13, 2021