



102ND GENERAL ASSEMBLY

State of Illinois

2021 and 2022

HB3197

Introduced 2/19/2021, by Rep. Deb Conroy

SYNOPSIS AS INTRODUCED:

New Act

Creates the Suicide Treatment Improvements Act. Provides that all at-risk patients must be provided with one-on-one suicide prevention counseling by the public or private psychiatric facility at which the at-risk patient is being treated. Provides that the services shall be covered by each group or individual policy of accident and health insurance or managed care plan amended, delivered, issued, or renewed after the effective date of the Act. Requires all psychiatric facilities to provide suicide prevention counselors who are available 24 hours a day, 7 days a week. Provides that specified persons and entities must obtain a history and suicide risk assessment for the person's or entity's at-risk patient from information provided by the at-risk patient and the at-risk patient's caregivers. Provides that if an at-risk patient is admitted to the emergency room of a psychiatric facility, a suicide prevention counselor must immediately assess the at-risk patient and provide specified services. Provides that under no circumstances may a psychiatric facility discharge an at-risk patient into a homeless situation or cause an at-risk patient who is not a threat to others to be sent to a jail. Provides requirements for specified persons and entities to treat and converse with at-risk patients. Provides that all State and local suicide and crisis hotlines must provide suicide prevention counseling and general counseling. Contains provisions regarding law enforcement officers who respond to situations concerning at-risk patients. Provides that violators of the Act may be subject to civil penalties, termination of employment, civil lawsuit, or loss of licensure, certification, or accreditation. Effective July 1, 2021.

LRB102 16873 CPF 22281 b

FISCAL NOTE ACT
MAY APPLY

A BILL FOR

1 AN ACT concerning health.

2 **Be it enacted by the People of the State of Illinois,**
3 **represented in the General Assembly:**

4 Section 1. Short title. This Act may be cited as the
5 Suicide Treatment Improvements Act.

6 Section 5. Definitions. In this Act:

7 "At-risk patient" means a patient who has attempted
8 suicide or who has suicidal ideations, behaviors, or
9 tendencies, as indicated by a formal suicide risk assessment
10 under this Act.

11 "Department" means the Department of Public Health.

12 "Mental health screener" means a psychiatrist,
13 psychologist, social worker, registered professional nurse, or
14 other individual trained to do outreach only for the purposes
15 of psychological assessment who is employed by a screening
16 service and possesses the license, academic training, or
17 experience required by rules adopted by the Department; except
18 that a psychiatrist or a licensed clinical psychologist who
19 meets the requirements for mental health screeners are not
20 required to comply with any additional requirements adopted by
21 the Department.

22 "Outpatient treatment provider" means a community-based
23 mental health facility or center, including, but not limited

1 to, a suicide treatment center, that is licensed or funded by
2 the Department of Public Health to provide outpatient mental
3 health treatment services.

4 "Person who is or may be suicidal" means a person who is
5 experiencing a mental health crisis, is experiencing or
6 expressing suicidal ideations or tendencies, or is undertaking
7 or contemplating suicidal actions, but who has not yet been
8 subject to a formal suicide risk assessment conducted pursuant
9 to this Act.

10 "Psychiatric facility" means a State psychiatric hospital,
11 a county psychiatric hospital or the psychiatric unit of a
12 county hospital, a short-term care facility, a special
13 psychiatric hospital, or the psychiatric unit of a general
14 hospital or other health care facility licensed by the
15 Department of Public Health.

16 "Screening service" means a public or private ambulatory
17 care service designated by the Department that provides mental
18 health services, including assessment, emergency, and referral
19 services, to persons with mental illness in a specified
20 geographic area.

21 "Suicide prevention counselor" means a licensed
22 psychiatrist, clinical psychologist, or other mental health
23 professional, or a properly qualified paraprofessional crisis
24 counselor, who has specialized certification or has completed
25 specialized training in the standardized assessment of suicide
26 risk and the provision of suicide prevention counseling to

1 at-risk patients.

2 Section 10. Psychiatric facilities.

3 (a) All at-risk patients must be provided one-on-one
4 suicide prevention counseling by the public or private
5 psychiatric facility at which the at-risk patient is being
6 treated.

7 (b) Services provided under subsection (a) shall be
8 covered by each group or individual policy of accident and
9 health insurance or managed care plan amended, delivered,
10 issued, or renewed after the effective date of this Act.

11 (c) All psychiatric facilities must provide suicide
12 prevention counselors who are available 24 hours a day, 7 days
13 a week.

14 (d) All public or private mental health screeners,
15 outpatient treatment providers, psychiatric facilities,
16 screening services, or suicide prevention counselors must
17 obtain a history and suicide risk assessment for the person's
18 or entity's at-risk patient from information provided by the
19 at-risk patient and the at-risk patient's caregivers.

20 Section 15. Emergency rooms; daily counseling services;
21 discharge.

22 (a) If an at-risk patient is admitted to the emergency
23 room of a psychiatric facility, a suicide prevention counselor
24 must, in the emergency room, immediately assess the at-risk

1 patient and provide him or her with suicide prevention
2 counseling. The suicide prevention counselor must then
3 determine if the at-risk patient needs to be admitted to the
4 psychiatric facility.

5 (b) A suicide prevention counselor must provide suicide
6 prevention counseling services daily to an at-risk patient at
7 a psychiatric facility.

8 (c) Under no circumstances may a psychiatric facility:

9 (1) discharge an at-risk patient into a homeless
10 situation; or

11 (2) cause an at-risk patient who is not a threat to
12 others to be sent to a jail.

13 Section 20. At-risk patient treatment.

14 (a) All at-risk patients must be treated with the same
15 respect, compassion, and dignity that a patient with physical
16 ailments is treated with.

17 (b) All suicide prevention counselors of an at-risk
18 patient, and all medical and mental health personnel who
19 interact with the at-risk patient of a mental health screener,
20 outpatient treatment provider, psychiatric facility, or
21 screening service, shall:

22 (1) have good bedside manner with the at-risk patient;

23 (2) not traumatize or retraumatize the at-risk patient
24 any more than he or she has already been traumatized;

25 (3) treat the at-risk patient in an age-appropriate

1 manner;

2 (4) look for signs from caregivers to determine if
3 they are or may be abusive, controlling, or dysfunctional;

4 (5) not stigmatize or discriminate against the at-risk
5 patient in any way;

6 (6) receive training to reduce the stigma of mental
7 illness; and

8 (7) not psychologically test the at-risk patient while
9 he or she is in a crisis or has recently been in a crisis.

10 Section 30. Suicide hotline. All State and local suicide
11 and crisis hotlines must provide suicide prevention counseling
12 and general counseling.

13 Section 35. Law enforcement officers.

14 (a) A law enforcement officer who responds to a situation
15 known to involve a person who is or may be suicidal must be
16 accompanied by a suicide prevention counselor.

17 (b) A law enforcement officer who responds to a situation
18 known to involve a person who is or may be suicidal may not use
19 force or draw his or her weapon unless a person present at the
20 situation is a threat to others.

21 (c) A law enforcement officer who responds to a situation
22 known to involve a person who is or may be suicidal must
23 approach the person who is or may be suicidal in a gentle and
24 respectful manner.

1 (d) A suicide prevention counselor under this Section must
2 provide suicide prevention counseling to the person who is or
3 may be suicidal and assess him or her to determine if he or she
4 needs to be taken to a psychiatric facility.

5 Section 40. Failure to comply. In addition to any other
6 disciplinary action otherwise provided by law, a person or
7 entity that violates this Act may be subject to civil
8 penalties established by the Department, termination of
9 employment, civil lawsuit, or loss of licensure,
10 certification, or accreditation.

11 Section 99. Effective date. This Act takes effect July 1,
12 2021.