

2026 SESSION

INTRODUCED

26102013D

1 **HOUSE BILL NO. 1223**

2 Offered January 14, 2026

3 Prefiled January 14, 2026

4 A BILL to amend the Code of Virginia by adding a section numbered 54.1-2400.1:1, relating to health
5 professionals; mandatory suicide training required.

6 Patron—Delaney

7 Referred to Committee on Health and Human Services

8 **Be it enacted by the General Assembly of Virginia:**

9 **1. That the Code of Virginia is amended by adding a section numbered 54.1-2400.1:1 as follows:**

10 **§ 54.1-2400.1:1. Mandatory suicide training for health care professionals.**

11 *A. Each of the following professionals certified or licensed by a health regulatory board of the
12 Department of Health Professions pursuant to this subtitle shall, at least once every six years, complete
13 training in suicide assessment, treatment, and management that is approved by the relevant health regulatory
14 board:*

- 15 *1. Counselors;
16 2. Licensed substance abuse treatment practitioners;
17 3. Marriage and family therapists;
18 4. Behavioral health technicians;
19 5. Qualified mental health professionals;
20 6. Occupational therapists;
21 7. Psychologists; and
22 8. Social workers.*

23 *The training required pursuant to this subsection shall be at least six hours in length. Such training
24 required by this subsection shall be included on the model list developed pursuant to subsection E. Nothing in
25 this subsection shall affect the validity of training completed prior to July 1, 2027.*

26 *B. All professionals certified or licensed by a health regulatory board of the Department of Health
27 Professions pursuant to this subtitle who are not included in the list of professionals in subsection A shall
28 complete a one-time training in suicide assessment, treatment, and management that is approved by the
29 relevant disciplining authority.*

30 *C. A professional listed in subsection A or included in subsection B shall complete the first training
31 required pursuant to this section by the end of the first full continuing education reporting period after July 1,
32 2027, or during the first full continuing education reporting period after initial licensure or certification,
33 whichever occurs later. A professional listed in subsection A applying for initial licensure may delay
34 completion of the first training required by this section for six years after initial licensure if he can
35 demonstrate successful completion of the training required pursuant to subsection A no more than two years
36 prior to the application for initial licensure. The relevant health regulatory board shall accept training that
37 meets the requirements of this section completed between January 1, 2025, and July 1, 2027, by a
38 professional included in subsection B as satisfactory to meet the one-time training requirement of subsection
39 B.*

40 *D. The hours spent completing training pursuant to the requirements of subsection A or B shall count
41 toward meeting any applicable continuing education or continuing competency requirements for each
42 profession.*

43 *E. The Commissioner of Health and the Department of Health Professions shall work collaboratively to
44 develop a model list of training programs in suicide assessment, treatment, and management and shall
45 update such list at least once every two years.*

46 *1. By January 1, 2027, the Department of Health Professions shall adopt rules establishing minimum
47 standards for the training programs included on the model list. The minimum standards shall require that
48 six-hour trainings, which may occur all at once or in segments, include:*

- 49 *a. Content specific to veterans;
50 b. Assessment of issues related to imminent harm via lethal means or self-injurious behaviors; and
51 c. Content specific to the availability of, services offered by, and best practices for assisting persons with
52 accessing the 988 crisis hotline and the behavioral health crisis response and suicide prevention system.*

53 *2. In developing the model list required pursuant to this subsection, the Commissioner of Health and the
54 Department of Health Professions shall consult with (i) the affected health regulatory boards; (ii) public and
55 private institutions of higher education; (iii) educators; (iv) experts in suicide assessment, treatment, and
56 management; (v) the Department of Veterans Services; and (vi) relevant professional associations.*

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