



HEALTH SYSTEMS DIVISION

Kate Brown, Governor



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TO: Representative Jeff Barker, Chair
House Judiciary Committee

From: Ann Kirkwood, Youth Suicide Intervention and Prevention Coordinator
Oregon Health Authority

Subject: HB 4075: Student Safety Tip Line

Chair Barker and members of the committee, I am Ann Kirkwood, Suicide Intervention and Prevention Coordinator for the Oregon Health Authority (OHA), Children's Unit.

OHA is neutral on all bills, including this one, but is supportive of the underlying goals of HB 4075 to ensure reporting of threats to student safety through establishing a Student Safety Tip Line.

- The bill recognizes that research demonstrates that a high percentage of threats to self or others are known by peers in advance of an event.
- Threat assessment and response is a highly specialized and high-risk procedure requiring willing, capable and competent partners who have the capacity to respond in an urgent manner.

- Law enforcement and schools need to rely on mental health and substance abuse resources in their communities in order to respond effectively and appropriately.
- Local partnerships and protocols for response should be in place before calls begin coming in to the tip line.
- This is a window of opportunity for Oregon to intervene in the life of high-risk students, both as a law enforcement and school issue, and as a matter of mental and emotional well-being of our students.
- In order for a tip line to respond appropriately to calls for substance use concerns, mental health crises and suicide risk, it will be important to establish a state framework to guide local protocols for involving not only law enforcement and schools, but also other community partners, including community mental health and substance abuse crisis response and treatment programs and juvenile departments.
 - For example, the Colorado Safe2Tell tip line experiences a large number of calls relating to suicide, substance use, depression and self-injury.
 - In the 2014-2015 academic year, 1,514 of the 3,467 calls to Safe2Tell were for suicide, substance use, depression and self-injury, all of which would benefit from a behavioral health response.
- Mental health response by local and county providers may be the most appropriate intervention for the person who poses a threat to self or others,

but also for grief, trauma and elevated suicide risk experienced by the victims and their families.

We have submitted to committee counsel some suggestions for potential amendments to the legislation. These suggestions cover five general topics:

1. We suggest addition of a section to direct the Oregon State Police to collaborate with appropriate behavioral health stakeholders in state, county and local government and community partners to increase the capacity, capability and appropriateness of response.
2. To improve effectiveness of response we suggest adoption of state rules as an overall framework to guide development of local protocols to coordinate law enforcement and school response with local behavioral health providers and appropriate community-based threat assessment response teams.
3. We suggest expanding the scope to reach students in vocational, colleges and universities, and private schools.
4. Overall student safety would benefit from coordinating the tip line with the knowledge and skills evident in Oregon's existing crisis, hot, or warm lines.
5. We also recommend that you consider expanding the legislation to include threats outside schools, or not on school property, to anywhere in the community – as well as threats to potentially non-students -- in order to capture threats to public places, such as movie theaters, workplaces or other gathering places.

Thank you for the opportunity to testify. I am glad to stand for questions.