

Enrolled
Senate Bill 918

Sponsored by Senators GELSER, WAGNER; Representative KENY-GUYER

CHAPTER

AN ACT

Relating to local mental health authority communications regarding suicides; amending ORS 418.735.

Be It Enacted by the People of the State of Oregon:

SECTION 1. ORS 418.735 is amended to read:

418.735. (1) As used in this section, "local mental health authority" has the meaning given that term in ORS 430.630.

(2) The Oregon Health Authority shall develop a plan for communication among local mental health authorities and local systems to improve notifications and information-sharing when a death that is suspected to be a suicide involves an individual who is 24 years of age or younger. The plan must address community suicide response and post-intervention efforts to address loss and the potential of contagion risk. The following entities may be involved in developing and implementing the plan:

- (a) Public school districts;
 - (b) Public universities listed in ORS 352.002, if the death involves an individual who is 24 years of age or younger;
 - (c) Private post-secondary institutions of education, if the death involves an individual who is 24 years of age or younger; and
 - (d) Any facility that provides services or resources to runaway or homeless youth.
- (3) Within seven days after a death that is suspected to be a suicide of an individual 24 years of age or younger, the local mental health authority in the area where the suicide occurred shall inform the Oregon Health Authority, in a manner and in a format to be determined by the authority, of activities implemented to support local entities and individuals affected by the suicide and to prevent the risk of contagion. The authority shall serve as a resource to the local mental health authority as needed by the community.

(4)(a) If a local mental health authority receives a third-party notification of a death that is suspected to be a suicide of an individual 24 years of age or younger, the local mental health authority shall provide notice of the death to the following local systems that had contact with the deceased individual:

- (A) The principal or superintendent of relevant area public schools, the principal of relevant area private schools or any public university listed in ORS 352.002 or private post-secondary institution of education the individual was attending at the time of the individual's death;**
- (B) The juvenile department;**
- (C) Community developmental disabilities programs;**
- (D) Local child welfare agencies;**

- (E) Local substance use disorder programs; or
- (F) Any other organization or person identified by the local mental health authority as necessary to receive notice to preserve the public health.

(b) The notification in paragraph (a) of this subsection must contain the following information regarding the deceased individual to enable the local systems to deploy effective post-intervention efforts:

- (A) The name of the deceased individual;
- (B) The birth date of the deceased individual;
- (C) The date of death of the deceased individual; and
- (D) Any other information that the local mental health authority determines is necessary to preserve the public health and that is not otherwise protected from public disclosure by state or federal law.

(c) As used in this subsection, “third-party notification” means notification from a source other than a patient in a program administered by the local mental health authority during the patient’s treatment.

Passed by Senate March 19, 2019

Received by Governor:

Repassed by Senate June 10, 2019

.....M.,....., 2019

Approved:

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Lori L. Brocker, Secretary of Senate

.....M.,....., 2019

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Peter Courtney, President of Senate

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Kate Brown, Governor

Passed by House June 3, 2019

Filed in Office of Secretary of State:

.....M.,....., 2019

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Tina Kotek, Speaker of House

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Bev Clarno, Secretary of State