SUMMARY

The following summary is not prepared by the sponsors of the measure and is not a part of the body thereof subject to consideration by the Legislative Assembly. It is an editor's brief statement of the essential features of the measure.

Directs Oregon Health Authority and specified professional regulatory boards to require licensees regulated by authority or board to complete [six hours of] continuing education related to suicide risk assessment, treatment and management [every six years] at specified intervals and to report completion of continuing education to authority or board. Allows authority and boards to establish minimum requirements that licensee must meet to be exempt from requirement to complete continuing education.

Takes effect on 91st day following adjournment sine die.

A BILL FOR AN ACT
Relating to continuing education for professionals; creating new provisions; amending ORS 675.140, 675.597, 675.805, 676.860 and 676.863; and prescribing an effective date.

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

SECTION 1. (1) As used in this section:
(a) “Board” means:
(A) The Oregon Board of Psychology;
(B) The Oregon Board of Licensed Professional Counselors and Therapists;
(C) The State Board of Licensed Social Workers;
(D) The Teacher Standards and Practices Commission; and
(E) The Traditional Health Workers Commission.
(b) “Licensee” means:
(A) A clinical social worker, as defined in ORS 675.510;
(B) A regulated social worker, as defined in ORS 675.510;
(C) A licensed marriage and family therapist, as defined in ORS 675.705;
(D) A licensed psychologist, as defined in ORS 675.010;
(E) A licensed professional counselor, as defined in ORS 675.705;
(F) A school counselor, as defined by rule by the Teacher Standards and Practices Commission; and
(G) The following professionals regulated by the Oregon Health Authority by rules adopted pursuant to subsection (9) of this section or employed in a program operated or overseen by the authority:
(i) A qualified mental health associate;
(ii) A qualified mental health professional;
(iii) A certified alcohol and drug counselor;
(iv) A prevention specialist;
(v) A problem gambling treatment provider;
(vi) A recovery mentor;
(vii) A community health worker;
(viii) A personal health navigator;
(ix) A personal support specialist;
(x) A peer wellness specialist;
(xi) A doula;
(xii) A family support specialist;
(xiii) A youth support specialist; and
(xiv) A peer support specialist.

(2)(a) The authority and a board shall require a licensee regulated by the authority or the board to complete two hours every two years or three hours every three years of continuing education related to suicide risk assessment, treatment and management and report to the authority or the board the licensee’s completion of the continuing education described in this subsection. The authority and the board shall ensure that the timelines for completion of the continuing education align with the licensee’s professional authorization issuance and renewal timelines.

(b) The authority and a board shall approve continuing education opportunities that are applicable and relevant to the licensees regulated by the authority or the board. A board may encourage a licensee regulated by the board to complete continuing education opportunities recommended by the authority.

(3) A licensee shall report the completion of the continuing education described in subsection (2) of this section to the board that regulates the licensee or to the authority if the licensee is a professional listed in subsection (1)(b)(G) of this section.

(4)(a) The authority and a board shall document completion of the continuing education described in subsection (2) of this section by a licensee regulated by the board to complete continuing education opportunities recommended by the authority.

(b) In consultation with the authority, a board shall adopt rules requiring licensees to submit documentation of completion to the board.

(c) The authority shall adopt rules requiring licensees regulated by the authority to submit documentation of completion to the authority.

(5) The authority and a board may adopt rules to:

(a) Identify the experience and training that a licensee regulated by the authority or the board must have in order to be exempt from the requirements of subsection (2) of this section.

(b) Allow the concurrent completion of continuing education described in subsection (2) of this section with continuing education opportunities related to professional ethics or cultural competency if the opportunities also provide the continuing education described in subsection (2) of this section.

(6) A board, on or before March 1 of each odd-numbered year, shall report to the authority on the information described in subsection (4) of this section, as well as information about the implementation of the continuing education described in subsection (2) of this section.

(7) The authority, on or before August 1 of each odd-numbered year, shall report to the interim committees of the Legislative Assembly related to health care on the information
submitted to the authority under subsection (6) of this section and information collected by
the authority under subsection (4) of this section. The authority shall remove any personally
identifiable information collected by or submitted to the authority under subsection (4) or (6)
of this section.

(8) The authority may use the information collected by the authority under subsection
(4) of this section in conjunction with the information described in ORS 676.860 to facilitate
improvements in suicide risk assessment, treatment and management efforts in this state.

(9)(a) The authority and a board may adopt rules to carry out this section.

(b) The authority may adopt rules to define and regulate the professions listed in sub-
section (1)(b)(G) of this section.

SECTION 2, ORS 676.860 is amended to read:

ORS 676.860. (1) As used in this section:
(a) “Board” means:
(A) Occupational Therapy Licensing Board;
[(B) Oregon Board of Licensed Professional Counselors and Therapists;]
[(C) (B) Oregon Board of Naturopathic Medicine;
[(D)] (C) Oregon Medical Board;
[(E)] (D) Oregon State Board of Nursing;
[(F)] (E) Oregon Board of Physical Therapy; and
[(G)] (F) State Board of Chiropractic Examiners[;].
[(H)] State Board of Licensed Social Workers;
[(I) Oregon Board of Psychology; and]
[(J) Teacher Standards and Practices Commission.]
(b) “Licensee” means a person authorized to practice one of the following professions:
[(A) Clinical social worker, as defined in ORS 675.510;]
[(B) Licensed marriage and family therapist, as defined in ORS 675.705;]
[(C) Licensed professional counselor, as defined in ORS 675.705;]
[(D) Licensed psychologist, as defined in ORS 675.010;]
[(E) (A) Occupational therapist, as defined in ORS 675.210;]
[(F) Regulated social worker, as defined in ORS 675.510;]
[(G) School counselor, as defined by rule by the Teacher Standards and Practices Commission;]
[(H)] (B) Certified registered nurse anesthetist, as defined in ORS 678.245;
[(I)] (C) Chiropractic physician, as defined in ORS 684.010;
[(J)] (D) Clinical nurse specialist, as defined in ORS 678.010;
[(K)] (E) Naturopathic physician, as defined in ORS 685.010;
[(L)] (F) Nurse practitioner, as defined in ORS 678.010;
[(M)] (G) Physician, as defined in ORS 677.010;
[(N)] (H) Physician assistant, as defined in ORS 677.495;
[(O)] (I) Physical therapist, as defined in ORS 688.010; and
[(P)] (J) Physical therapist assistant, as defined in ORS 688.010.
(2) In collaboration with the Oregon Health Authority, a board shall adopt rules to require a
licensee regulated by the board to report to the board, upon reauthorization to practice, the
licensee’s completion of any continuing education regarding suicide risk assessment, treatment and
management.

(3) A licensee shall report the completion of any continuing education described in subsection
(2) of this section to the board that regulates the licensee.

(4)(a) A board shall document completion of any continuing education described in subsection (2) of this section by a licensee regulated by the board. The board shall document the following data:

(A) The number of licensees who complete continuing education described in subsection (2) of this section;

(B) The percentage of the total of all licensees who complete the continuing education;

(C) The counties in which licensees who complete the continuing education practice; and

(D) The contact information for licensees willing to share information about suicide risk assessment, treatment and management with the authority.

(b) The board shall remove any personally identifiable information from the data submitted to the board under this subsection, except for the personally identifiable information of licensees willing to share such information with the authority.

(c) For purposes of documenting completion of continuing education under this subsection, a board may adopt rules requiring licensees to submit documentation of completion to the board.

(5) A board, on or before March 1 of each even-numbered year, shall report to the authority on the data documented under subsection (4) of this section, as well as information about any initiatives by the board to promote suicide risk assessment, treatment and management among its licensees.

(6) The authority, on or before August 1 of each even-numbered year, shall report to the interim committees of the Legislative Assembly related to health care on the information submitted to the authority under subsection (5) of this section. The authority shall include in the report information about initiatives by boards to promote awareness about suicide risk assessment, treatment and management and information on how boards are promoting continuing education described in subsection (2) of this section to licensees.

(7) The authority may use the information submitted to the authority under subsection (5) of this section to develop continuing education opportunities related to suicide risk assessment, treatment and management for licensees and to facilitate improvements in suicide risk assessment, treatment and management efforts in this state.

SECTION 3. ORS 675.140 is amended to read:

675.140. On or before the 10th day of each month, the Oregon Board of Psychology shall pay into the State Treasury all moneys received by the board during the preceding calendar month. The State Treasurer shall credit the moneys to the Oregon Board of Psychology Account. The moneys in the Oregon Board of Psychology Account are continuously appropriated to the board for the purpose of paying the expenses of administering and enforcing ORS 675.010 to 675.150, 675.172[,] and 676.850 and 676.860 section 1 of this 2021 Act.

SECTION 4. ORS 675.597 is amended to read:

675.597. The State Board of Licensed Social Workers Account is established in the State Treasury, separate and distinct from the General Fund. Interest earned by the State Board of Licensed Social Workers Account shall be credited to the account. Moneys in the account are continuously appropriated to the board for the purpose of paying the expenses of administering and enforcing ORS 675.510 to 675.600[,] and 676.850 and 676.860 section 1 of this 2021 Act.

SECTION 5. ORS 675.805 is amended to read:

675.805. All moneys received by the Oregon Board of Licensed Professional Counselors and Therapists under ORS 675.715 to 675.835 shall be paid into the General Fund in the State Treasury and placed to the credit of the Oregon Board of Licensed Professional Counselors and Therapists Account, which is hereby established. Such moneys are appropriated continuously to the board and
shall be used only for the administration and enforcement of ORS 675.172, 675.715 to 675.835[,] and 676.850 and [676.860] section 1 of this 2021 Act.

SECTION 6. ORS 676.863 is amended to read:

676.863. (1) The Oregon Health Authority shall develop a list of continuing education opportunities related to suicide risk assessment, treatment and management and make the list available to each board, as defined in ORS 676.860 and section 1 of this 2021 Act.

(2) In developing the list, the authority shall:

(a) Consider suicide risk assessment, treatment and management training programs recommended by organizations that provide suicide awareness advocacy and education; and

(b) Consult with institutions of higher education and experts in suicide risk assessment, treatment and management.

SECTION 7. Section 1 of this 2021 Act and the amendments to ORS 676.860 by section 2 of this 2021 Act apply to applicants for initial authorization and to licensees applying for renewal of authorization on or after the operative date specified in section 8 of this 2021 Act.

SECTION 8. (1) Section 1 of this 2021 Act and the amendments to ORS 675.140, 675.597, 675.805, 676.860 and 676.863 by sections 2 to 6 of this 2021 Act become operative on July 1, 2022.

(2) A board, as defined in section 1 of this 2021 Act, and the Oregon Health Authority may take any action before the operative date specified in subsection (1) of this section that is necessary to enable the board and the authority to exercise, on and after the operative date specified in subsection (1) of this section, all of the duties, functions and powers conferred on the board and the authority by section 1 of this 2021 Act.

SECTION 9. This 2021 Act takes effect on the 91st day after the date on which the 2021 regular session of the Eighty-first Legislative Assembly adjourns sine die.