House Bill 3037

Sponsored by Representative DEXTER; Representative REYNOLDS

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 **as introduced**.

Directs medical examiner to report suspected suicides involving decedents 24 years of age or younger to local mental health authority.

Directs Oregon Health Authority to develop statewide suicide post-intervention protocol. Authorizes cross-reporting between local mental health authorities. Takes effect on 91st day following adjournment sine die.

A BILL FOR AN ACT

Relating to youth suicide response; amending ORS 146.100 and 418.735; and prescribing an effective
 date.

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

5 **SECTION 1.** ORS 146.100 is amended to read:

6 146.100. (1) Death investigations shall be under the direction of the district medical examiner 7 and the district attorney for the county where the death occurs.

8 (2) For purposes of ORS 146.003 to 146.189, if the county where death occurs is unknown, the 9 death shall be deemed to have occurred in the county where the body is found, except that if in an 10 emergency the body is moved by conveyance to another county and is dead on arrival, the death 11 shall be deemed to have occurred in the county from which the body was originally removed.

(3) The district medical examiner or an assistant district medical examiner for the county wheredeath occurs shall be immediately notified of:

14 (a) All deaths requiring investigation; and

(b) All deaths of persons admitted to a hospital or institution for less than 24 hours, althoughthe medical examiner need not investigate nor certify such deaths.

(4) No person having knowledge of a death requiring investigation shall intentionally or know-ingly fail to make notification thereof as required by subsection (3) of this section.

(5) The district medical examiner or medical-legal death investigator shall immediately notify the
district attorney for the county where death occurs of all deaths requiring investigation except for
those specified by ORS 146.090 (1)(d) to (g).

(6) All peace officers, health care providers as defined in ORS 192.556, supervisors of penal institutions and supervisors of hospitals or institutions caring for the ill or helpless shall cooperate with the medical examiner by providing a decedent's medical records and tissue samples and any other material necessary to conduct the death investigation of the decedent and shall make notification of deaths as required by subsection (3) of this section. A person who cooperates with the medical examiner in accordance with this subsection does not:

(a) Waive any claim of privilege applicable to, or the confidentiality of, the materials and re-cords provided.

30 (b) Waive any claim that the materials and records are subject to an exemption from disclosure

1

HB 3037

under ORS 192.311 to 192.478. 1 2 (7) Records or materials described in subsection (6) of this section may be released by the medical examiner only pursuant to a valid court order. 3 (8)(a) The district medical examiner or medical-legal death investigator shall notify the 4 local mental health authority in the county where the death occurred if the decedent was 5 24 years of age or younger and the manner of death is confirmed by a pathologist authorized 6 under ORS 146.045 (2)(b) to be suicide. The pathologist's confirmation may be oral or in 7 writing. 8 9 (b) The notification under this subsection must include the decedent's name, date of birth, date of death, manner of death and cause of death. 10 (c) The notification under this subsection may include any other information that the 11 12 district medical examiner or medical-legal death investigator determines is necessary to preserve the public health and that is not otherwise protected from public disclosure by state 13 or federal law, including information regarding the decedent's extracurricular activities. 14 15 (d) The district medical examiner or medical-legal death investigator must provide the notification under this subsection no later than: 16 (A) 48 hours after receiving notification of the death if the county where the death oc-17 18 curred has a population of 400,000 or more; or 19 (B) 72 hours after receiving notification of the death if the county where the death occurred has a population of fewer than 400,000. 20(e) As used in this subsection, "local mental health authority" has the meaning given 2122that term in ORS 430.630. 23SECTION 2. ORS 418.735 is amended to read: 418.735. (1) As used in this section[,]: 24 (a) "Cause of death" has the meaning given that term in ORS 146.003. 25(b) "Local mental health authority" has the meaning given that term in ORS 430.630. 2627(c) "Manner of death" has the meaning given that term in ORS 146.003. (d) "Third-party notification" means notification from a source other than a patient in 28a program administered by the local mental health authority during the patient's treatment. 2930 (2)(a) The Oregon Health Authority shall develop a plan for communication among local mental 31 health authorities and local systems to improve notifications and information-sharing when [a death 32that is suspected to be a suicide involves] an individual who is 24 years of age or younger **dies and** the manner of death is suspected to be suicide. The plan must address community suicide re-33 34 sponse and post-intervention efforts to address loss and the potential of contagion risk. The Oregon Health Authority shall collaborate with the following entities in developing and implementing the 35 plan: 36 37 [(a)] (A) Public school districts; 38 [(b)] (B) Public universities listed in ORS 352.002[, if the death involves an individual who is 24 years of age or younger]; 39 [(c)] (C) Private post-secondary institutions of education [, if the death involves an individual who 40 is 24 years of age or younger]; and 41 [(d)] (D) Any facility that provides services or resources to runaway or homeless youth. 42

(b) The Oregon Health Authority shall develop a statewide post-intervention protocol to
 enable local mental health authorities to deploy uniform and effective post-intervention ef forts. In developing the post-intervention protocol, the authority shall take into consider-

HB 3037

1 ation the Youth Suicide Intervention and Prevention Plan developed by the Youth Suicide

2 Intervention and Prevention Coordinator under ORS 418.731 and 418.733 and may consult with

3 local mental health authorities, youth-serving entities, individuals with lived experience in

suicide ideation, attempts and loss, tribes, medical examiners, colleges and universities and
 national experts in suicide post-intervention.

6 (3) No later than 72 hours after receiving a third-party notification, including notice un-7 der ORS 146.100, of the death of an individual described in subsection (2)(a) of this section, 8 if the deceased individual was not domiciled in the county where the death occurred, the lo-9 cal mental health authority shall provide notice of the death to the local mental health au-10 thority in the county where the deceased individual was domiciled.

(4)(a) The local mental health authority in the county where an individual described in subsection (2)(a) of this section was domiciled may notify the local mental health authority in any other county in which the deceased individual had significant contacts, as described by the Oregon Health Authority by rule.

15 [(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 and any public 16 school district, public university listed in ORS 352.002 or private post-secondary institution of education 17 18 the individual was attending at the time of the individual's death shall inform the Oregon Health Au-19 thority, 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 20authority shall serve as a resource to the local mental health authority and any public school district, 2122public university listed in ORS 352.002 or private post-secondary institution of education the individual 23was attending at the time of the individual's death as needed by the community.]

[(4)(a)] (b) [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 in the county where an individual described in subsection (2)(a) of this section was domiciled 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 insti tution of education the individual was attending at the time of the individual's death;

32 (B) The juvenile department;

33 (C) Community developmental disabilities programs;

34 (D) Local child welfare agencies;

35 (E) Local substance use disorder programs; or

(F) Any other organization or person identified by the local mental health authority as neces sary to receive notice to preserve the public health.

38 (c) No later than seven days after receiving notice of the death of an individual described in subsection (2)(a) of this section, each local mental health authority in a county in which 39 the deceased individual had significant contacts, as described by the Oregon Health Authority 40 by rule, and any public school district, public university listed in ORS 352.002 or private 41 post-secondary institution of education the individual was attending at the time of the 42individual's death shall inform the Oregon Health Authority, in a manner and in a format 43 determined by the authority, of activities implemented to support local entities and individ-44 uals affected by the suicide and to prevent the risk of contagion. The authority shall serve 45

HB 3037

as a resource to the local mental health authorities and any public school district, public 1 2 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 as needed by the community. 3 [(b)] (5) [The notification in paragraph (a) of this subsection] The notifications described in 4 subsections (3) and (4) of this section must contain the following information regarding the de-5 ceased individual to enable the local systems to deploy effective post-intervention efforts: 6 (A) The name of the deceased individual; 7 (B) The birth date of the deceased individual; 8 9 (C) The date of death of the deceased individual; (D) The suspected manner of death; 10 11 (E) A description of the cause of death; and 12[(D)] (F) 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 13federal law. 14 15[(c) As used in this subsection, "third-party notification" means notification from a source other 16than a patient in a program administered by the local mental health authority during the patient's treatment.] 1718 SECTION 3. This 2021 Act takes effect on the 91st day after the date on which the 2021 19 regular session of the Eighty-first Legislative Assembly adjourns sine die. 20