



OREGON PSYCHIATRIC  
PHYSICIANS ASSOCIATION

Date: May 18, 2021

To: The Honorable Chair Sara Gelser  
The Honorable Vice-Chair Dick Anderson  
Members of the Senate Human Services, Mental Health and Recovery

From: Daniel Nicoli, DO, Oregon Psychiatric Physicians Association

RE: HB 3139, Parental Disclosure of suicide attempt

Chair Gelser, Vice-Chair Anderson and members of the committee:

My name is Dr. Daniel Nicoli. I'm a child and adolescent psychiatrist and co-chair of the Oregon Psychiatric Physicians Association Legislative Committee. I'm here on behalf of OPPIA to testify in support of HB 3139A. This bill requires disclosing a minor's relevant health information to parents or guardians where there's a serious and imminent risk of suicide, subject to clinician judgement.

OPPIA worked with Rep. Noble, the Wilson family and suicide prevention advocates to develop amendments to address unintended consequences with the bill as introduced. The amended bill allows for flexibility for clinician judgement and better defines the threshold of "serious and imminent risk of a suicide attempt" when notification would take place. My colleagues and I have seen cases in a variety of settings where kids receiving a suicide risk assessment would have been harmed by their parents or other family members if they knew their child sought help. This was typically older teenagers, including LGBTQI+ teens and victims of abuse in the home. Any disclosure to parents needs to be done on a case-by-case basis and allow for clinical judgment and standards of care. It is important to consider that children presenting for an emergency evaluation of suicidal ideation are more likely than the general population to be from a home that is abusive or not supportive. There should always be flexibility to make exceptions, such as if there is abuse in the home.

The amended bill will allow us to proceed in a way that includes experts on youth suicide prevention to support better communication, opportunities for family support in safety planning and reduction of deaths by suicide.

Many of us are parents and we do not dare imagine the grief of losing a child to suicide. We, too, would likely go through a process of trying to find answers to what else could have been done and how the outcome could have been different. We would also think about how we

would have done anything to save our child. We thank the sponsors of this bill for bringing this important issue forward.

If this bill should pass, OPPA is interested in working with Rep. Noble, Rep. Reynolds, the Wilson family and other stakeholders to develop an implementation guide for community mental health and other associations and organizations. We recommend that it be based on the Oregon Council of Child and Adolescent Psychiatry (OCCAP) [suicide prevention tools](#) available on their website. This could be widely distributed to providers to promote awareness.

Thank you for the opportunity to provide our perspective on this bill.