

House Bill 2646

Sponsored by Representative SANCHEZ (Presession filed.)

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**.

Requires Department of Education to provide program to train school employees on signs and symptoms of mental illness, psychiatric or psychological disorder, depression or substance abuse disorder, de-escalating mental health or substance use disorder crisis and assisting students in crisis.

Requires school districts to designate mental health points of contact to coordinate and facilitate access for youth and their families to appropriate mental health and substance abuse disorder services and resources.

A BILL FOR AN ACT

1
2 Relating to student mental health; amending ORS 339.341 and 339.343.

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

4 **SECTION 1.** ORS 339.341 is amended to read:

5 339.341. (1) As used in this section:

6 (a) "Cyberbullying" has the meaning given that term in ORS 339.351.

7 (b) "Harassment, intimidation or bullying" has the meaning given that term in ORS 339.351.

8 (c) "Suicidal behavior" includes:

9 (A) Self-directed, injurious behavior with an intent to die as a result of the behavior;

10 (B) Nonfatal, self-directed, potentially injurious behavior with an intent to die as a result of the
11 behavior that may not result in injury; or

12 (C) Thinking about, considering or planning suicide.

13 (d) "Violence" means aggressive behavior with the intention to cause, or an outcome that poses
14 a risk of causing, serious or lethal injury.

15 (2) The Department of Education shall establish and maintain the Statewide School Safety and
16 Prevention System.

17 (3) The system required under this section shall consist of the following:

18 (a) Assistance to school districts and education service districts in decreasing acts of
19 harassment, intimidation or bullying and acts of cyberbullying through the implementation of effective
20 prevention programs that:

21 (A) Incorporate evidenced-based, multitiered practices; and

22 (B) Support resiliency building and trauma-informed care practices.

23 (b) Assistance to school districts and education service districts in decreasing youth suicidal
24 behavior through the implementation of effective prevention programs and student wellness programs
25 that focus on early identification and intervention by school safety and prevention specialists,
26 as described in subsection (4) of this section, who:

27 (A) Provide training, outreach and technical assistance related to youth suicidal behavior prevention
28 and wellness;

29 (B) Support coordination between schools and health agencies, including public and private be-

NOTE: Matter in **boldfaced** type in an amended section is new; matter *[italic and bracketed]* is existing law to be omitted. New sections are in **boldfaced** type.

1 havioral health providers; and

2 (C) Support school districts and education service districts in the establishment of suicidal be-
3 havior prevention programs.

4 (c)(A) **An evidence-based program to train school employees on:**

5 (i) **Recognizing signs and symptoms of a mental illness, psychiatric or psychological dis-**
6 **order, depression or substance use disorder;**

7 (ii) **Safely de-escalating a mental health or substance use disorder crisis;**

8 (iii) **Skills and resources for assisting students in crisis;**

9 (iv) **Available mental health and substance use disorder services and resources;**

10 (v) **When and how to refer youth and their families to appropriate mental health or**
11 **substance use disorder services; and**

12 (vi) **Maintaining a youth's privacy and confidentiality in accordance with applicable fed-**
13 **eral and state privacy laws.**

14 (B) **The program must:**

15 (i) **Measure training outcomes by assessing the knowledge of school employees before and**
16 **after the school employees participate in the program; and**

17 (ii) **Include in-person and online training by instructors who are certified by a nationally**
18 **recognized behavioral health training program to provide training related to mental health**
19 **or substance use disorders.**

20 (C) **The department shall contract with a nonprofit organization that is nationally re-**
21 **cognized as an authority in training related to mental illness and substance use disorder to**
22 **provide the training under the program.**

23 [(c)] (d) Assistance to school districts and education service districts in implementing a multi-
24 disciplinary student safety assessment system to identify, assess and support students who present
25 a potential risk for violence to others. Multidisciplinary school safety assessment teams shall be
26 made available to assist each school district and education service district in assessing students who
27 are engaged in violence or who are posing a threat of violence to others. The teams shall:

28 (A) Assess potential danger and identify circumstances and risk factors that may increase risk
29 for potential violence;

30 (B) Develop management and intervention plans in collaboration with community partners; and

31 (C) Connect students and families to community resources and supports.

32 [(d)] (e) Promotion and use of the statewide school safety tip line established by ORS 339.329.
33 School safety and prevention specialists, as described in subsection (4) of this section, shall work
34 collaboratively with the Oregon State Police to support school districts and education service dis-
35 tricts in accessing and implementing the school safety tip line.

36 (4) The system required under this section shall be supported by school safety and prevention
37 specialists who:

38 (a) Serve regions of this state;

39 (b) Are cross-trained in safety assessments and in the prevention of youth suicide, of acts of
40 bullying, intimidation or harassment and of acts of cyberbullying; and

41 (c) Provide or facilitate training, the development of programs and plans, the coordination of
42 local teams and the provision of ongoing consultation to regional partners, school districts and ed-
43 ucation service districts.

44 (5) The State Board of Education, in consultation with the Oregon Health Authority and other
45 representatives of school districts, education service districts, school employees, human services,

1 mental health professionals and law enforcement agencies, shall adopt rules related to the system
 2 required under this section.

3 **SECTION 2.** ORS 339.343 is amended to read:

4 339.343. (1) This section shall be known and may be cited as Adi's Act.

5 (2) In accordance with rules adopted by the State Board of Education in consultation with the
 6 Oregon Health Authority, each school district shall adopt a policy requiring a comprehensive dis-
 7 trict plan on student suicide prevention for students in kindergarten through grade 12.

8 (3) A plan required under this section must include:

9 (a) Procedures relating to suicide prevention, intervention and activities that reduce risk and
 10 promote healing after a suicide;

11 (b) Identification of the school officials responsible for responding to reports of suicidal risk;

12 (c) **For each school in the school district, designation of a mental health point of contact**
 13 **who has knowledge of appropriate services and resources related to mental health or sub-**
 14 **stance use and whose duties are to coordinate and facilitate access for youth and their**
 15 **families to those services and resources;**

16 [(c)] (d) A procedure by which a person may request a school district to review the actions of
 17 a school in responding to suicidal risk;

18 [(d)] (e) Methods to address the needs of high-risk groups, including:

19 (A) Youth bereaved by suicide;

20 (B) Youth with disabilities, mental illness or substance use disorders;

21 (C) Youth experiencing homelessness or out-of-home settings, such as foster care; and

22 (D) Lesbian, gay, bisexual, transgender, queer and other minority gender identities and sexual
 23 orientations;

24 [(e)] (f) A description of, and materials for, any training to be provided to school employees as
 25 part of the plan, which must include:

26 (A) When and how to refer youth and their families to appropriate mental health services;

27 [and]

28 (B) Programs that can be completed through self-review of suitable suicide prevention materials;
 29 and

30 (C) **The training program described in ORS 339.341 (3)(c); and**

31 [(f)] (g) Any other requirement prescribed by the State Board of Education by rule, based on
 32 consultations with state and national suicide prevention organizations, suicide experts and school-
 33 based mental health providers, and based on reviews of national models.

34 (4) A school district may consult with state or national suicide prevention organizations, the
 35 Department of Education, school-based mental health professionals, parents, guardians, school em-
 36 ployees, students, administrators and school board associations when developing the plan required
 37 under this section.

38 (5) The plan required under this section:

39 (a) Must be written to ensure that a school employee acts only within the authorization and
 40 scope of the employee's credentials or licenses. Nothing in this section shall be construed as au-
 41 thorizing or encouraging a school employee to diagnose or treat mental illness unless the employee
 42 is specifically licensed and employed to do so.

43 (b) Must be:

44 (A) Made available annually to the community of the school district, including students of the
 45 school district, parents and guardians of students of the school district, and employees and volun-

1 teers of the school district.

2 (B) Readily available at the school district office and on the school district website, if applicable.

3 (6) A school district that does not comply with the requirements of this section is considered to
4 be nonstandard under ORS 327.103.

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