## House Bill 2667

Sponsored by Representative KENY-GUYER; Representatives NOSSE, PILUSO, Senators FREDERICK, GELSER (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**.

Establishes Adult Suicide Intervention and Prevention Coordinator within Oregon Health Authority. Specifies responsibilities. Requires development of strategic plan to address suicides by adults and develop intervention strategies. Requires strategic plan to be updated every five years. Declares emergency, effective on passage.

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## A BILL FOR AN ACT

2 Relating to suicides by adults; and declaring an emergency.

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

4	SE	CTI	[ON	<u> </u>	(1)	As	used	in (	this	section	and	section	<b>2</b> of	this	2019	Act,	"adult"	means	an
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5 individual who is older than 24 years of age.

6 (2) An Adult Suicide Intervention and Prevention Coordinator is established within the 7 division of the Oregon Health Authority that administers mental health and addiction pro-

8 grams. The coordinator shall:

9 (a) Facilitate the development of a statewide strategic plan to address suicides by adults
10 and to develop prevention and intervention strategies for working with adults who are sui11 cidal;

(b) Improve outreach to adults who are at risk for suicide, including but not limited to
 veterans, adults with mental illness, adults living in rural and frontier areas of this state and
 Native Americans; and

(c) Provide technical assistance to state and local partners and coordinate interagency
 efforts to establish suicide prevention and intervention strategies for adults who are suicidal.

17(3) The coordinator shall review data and prepare an annual report to the interim and18regular committees of the Legislative Assembly related to health and to the Oregon Health

19 Authority regarding:

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(a) The number of emergency room admissions for completed and attempted suicides by
 adults;

22 (b) The manner and method of completed and attempted suicides by adults;

23 (c) The counties in which the completed and attempted suicides occurred; and

24 (d) Demographic information regarding adults who completed or attempted suicide, in-

25 cluding but not limited to:

26 (A) Age;

27 (B) Gender;

28 (C) Race;

29 (D) Primary spoken language;

30 (E) Sexual orientation; and

**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.

## $\rm HB\ 2667$

1	(F) The existence of any physical, mental, intellectual or emotional disability.
<b>2</b>	SECTION 2. The Adult Suicide Intervention and Prevention Coordinator shall update the
3	strategic plan described in section 1 of this 2019 Act a minimum of once every five years.
4	Updates must include, but are not limited to:
5	(1) An assessment of current access to mental health intervention, treatment and sup-
6	port for suicidal adults, including an assessment of the:
7	(a) Affordability of treatment and support;
8	(b) Ability of adults to access treatment and support in a timely manner; and
9	(c) Availability of qualified providers who are culturally competent;
10	(2) Recommendations to improve access to appropriate mental health intervention,
11	treatment and support for suicidal adults, including improving the:
12	(a) Affordability of treatment and support;
13	(b) Ability of adults to access treatment and support in a timely manner; and
14	(c) Availability of qualified providers who are culturally competent;
15	(3) Recommendations for best practices to identify and intervene with adults who are
16	suicidal;
17	(4) Recommendations related to the use of traditional media, social media and the
18	Internet to provide opportunities for prevention and intervention of suicides by adults;
19	(5) Recommendations regarding services and strategies to respond to communities af-
20	fected by a completed suicide by an adult;
21	(6) Identification of prevention and intervention strategies used by other states with su-
22	icide rates for adults that are lower than the national average; and
23	(7) A comparison of Oregon's suicide rates for adults with the suicide rates of other
24	states.
25	SECTION 3. This 2019 Act being necessary for the immediate preservation of the public
26	peace, health and safety, an emergency is declared to exist, and this 2019 Act takes effect
27	on its passage.

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