

CHAPTER 99

AN ACT

HB 4124

Relating to youth suicide; creating new provisions; amending ORS 418.704; and declaring an emergency.

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

SECTION 1. ORS 418.704 is amended to read:

418.704. (1) **As used in this section and section 2 of this 2014 Act:**

(a) **“Youth” means a person 10 through 24 years of age.**

(b) **“Youth suicide” means a completed or attempted suicide by a person 10 through 24 years of age.**

(2) There is established a Youth Suicide **Intervention and Prevention** Coordinator within the Oregon Health Authority. The coordinator shall:

[(1)] (a) Facilitate the development of a state-wide strategic *[plan]* **Youth Suicide Intervention and Prevention Plan** to address youth suicide and youth self-inflicted injury, and develop strategies for intervention with suicidal, depressed and at-risk youth;

[(2)] (b) Improve outreach to special populations of youth that are at risk for suicide and self-inflicted injury; *[and]*

(c) **Identify barriers to accessing intervention services for suicidal, depressed and at-risk youth; and**

[(3)] (d) Provide technical assistance to state and local partners and coordinate interagency efforts to establish youth suicide and youth self-inflicted injury prevention and intervention strategies.

(3) **The coordinator shall review data and prepare an annual report to interim and regular committees of the Legislative Assembly with subject matter jurisdiction over child welfare, mental health and addiction issues, and to the Oregon Health Authority, regarding:**

(a) **The number of emergency room admissions for completed and attempted youth suicides and incidents of youth self-inflicted injury;**

(b) **The manner and method of completed and attempted youth suicides and incidents of youth self-inflicted injury;**

(c) **The counties in which the completed and attempted suicides and self-injury incidents occurred;**

(d) **The number of middle schools and high schools with completed youth suicides among the student body;**

(e) **The number of completed youth suicides where the youth had previously been admitted to a hospital or emergency room for treatment of attempted youth suicide or self-inflicted injury or had been the subject of a request for intervention services related to depression, suicidal ideation or self-injury within the prior 12 months; and**

(f) **Demographic information regarding youth who completed or attempted youth suicide or who had self-injury incidents, including but not limited to:**

(A) **Age;**

(B) **Gender;**

(C) **Race;**

(D) **Primary spoken language;**

(E) **Sexual orientation;**

(F) **The existence of any physical, mental, intellectual or emotional disability; and**

(G) **Foster care status.**

SECTION 2. The Youth Suicide Intervention and Prevention Coordinator shall update the Youth Suicide Intervention and Prevention Plan under ORS 418.704 a minimum of once every five years. Updates must include, but are not limited to:

(1) **An assessment of current access to mental health intervention, treatment and support for depressed or suicidal youth, including affordability, timeliness, cultural appropriateness and availability of qualified providers;**

(2) **Recommendations to improve access to appropriate mental health intervention, treatment and support for depressed or suicidal youth, including affordability, timeliness, cultural appropriateness and availability of qualified providers;**

(3) **Recommendations for best practices to identify and intervene with youth who are depressed, suicidal or at risk for infliction of self-injury;**

(4) **Recommendations for collaboration among schools, school-based health clinics and coordinated care organizations for school-based screening for depression and risk of suicide or infliction of self-injury among middle school and high school students;**

(5) **Recommendations related to the use of social media and the Internet to provide opportunities for intervention and prevention of youth suicide and self-inflicted injury;**

(6) **Recommendations regarding services and strategies to respond to schools and communities following a completed youth suicide;**

(7) **Identification of intervention and prevention strategies used by other states with the five lowest rates of youth suicide and self-inflicted injuries; and**

(8) **A comparison of Oregon’s youth suicide and self-inflicted injury rates with those of other states.**

SECTION 3. The Youth Suicide Intervention and Prevention Coordinator shall present the first update of the Youth Suicide Intervention and Prevention Plan described in section 2 of this 2014 Act to the interim committees of the Legislative Assembly with subject matter jurisdiction over child welfare, mental health and

addiction issues and the Oregon Health Authority on or before January 1, 2015.

SECTION 4. ORS 418.704, as amended by section 1 of this 2014 Act, is amended to read:

418.704. (1) As used in this section and section 2 of this 2014 Act:

(a) "Youth" means a person 10 through 24 years of age.

(b) "Youth suicide" means a completed or attempted suicide by a person 10 through 24 years of age.

(2) There is established a Youth Suicide Intervention and Prevention Coordinator within **that part of the Oregon Health Authority that works with mental health and addiction issues.** The coordinator shall:

(a) Facilitate the development of a statewide strategic Youth Suicide Intervention and Prevention Plan to address youth suicide and youth self-inflicted injury, and develop strategies for intervention with suicidal, depressed and at-risk youth;

(b) Improve outreach to special populations of youth that are at risk for suicide and self-inflicted injury;

(c) Identify barriers to accessing intervention services for suicidal, depressed and at-risk youth; and

(d) Provide technical assistance to state and local partners and coordinate interagency efforts to establish youth suicide and youth self-inflicted injury prevention and intervention strategies.

(3) The coordinator shall review data and prepare an annual report to interim and regular committees of the Legislative Assembly with subject matter jurisdiction over child welfare, mental health and addiction issues, and to the Oregon Health Authority, regarding:

(a) The number of emergency room admissions for completed and attempted youth suicides and incidents of youth self-inflicted injury;

(b) The manner and method of completed and attempted youth suicides and incidents of youth self-inflicted injury;

(c) The counties in which the completed and attempted suicides and self-injury incidents occurred;

(d) The number of middle schools and high schools with completed youth suicides among the student body;

(e) The number of completed youth suicides where the youth had previously been admitted to a hospital or emergency room for treatment of attempted youth suicide or self-inflicted injury or had been the subject of a request for intervention services related to depression, suicidal ideation or self-injury within the prior 12 months; and

(f) Demographic information regarding youth who completed or attempted youth suicide or who had self-injury incidents, including but not limited to:

(A) Age;

(B) Gender;

(C) Race;

(D) Primary spoken language;

(E) Sexual orientation;

(F) The existence of any physical, mental, intellectual or emotional disability; and

(G) Foster care status.

SECTION 5. The amendments to ORS 418.704 by section 4 of this 2014 Act become operative on August 1, 2014.

SECTION 6. This 2014 Act being necessary for the immediate preservation of the public peace, health and safety, an emergency is declared to exist, and this 2014 Act takes effect on its passage.

Approved by the Governor April 1, 2014

Filed in the office of Secretary of State April 2, 2014

Effective date April 1, 2014