

## CHAPTER 91

AN ACT

SB 1503

Relating to public health; and prescribing an effective date.

Whereas Oregonians saw a 40 percent increase in deaths related to firearms in the last decade, the vast majority of which are suicide; and

Whereas firearm violence has increased by 21 percent and suicide has increased by four percent since before the COVID-19 pandemic; and

Whereas the suicide rate for juveniles has increased since before the COVID-19 pandemic; now, therefore,

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

**SECTION 1.** (1) The Task Force on Community Safety and Firearm Suicide Prevention is established.

(2) The task force consists of 17 members appointed as follows:

(a) The President of the Senate shall appoint two members from among members of the Senate, one from the majority party and one from the minority party.

(b) The Speaker of the House of Representatives shall appoint two members from among members of the House of Representatives, one from the majority party and one from the minority party.

(c) The Governor shall appoint 13 members, with consideration of geographic diversity, as follows:

(A) A representative of a state public health agency;

(B) A public safety policy advisor to the Governor;

(C) A representative of a nonprofit organization focused on suicide prevention with experience in lethal means safety;

(D) A representative of a community-based firearm safety and protocols program;

(E) A representative of the public health research field;

(F) A behavioral health professional or provider;

(G) An adult behavioral health provider;

(H) A medical provider who has worked with firearm violence victims;

(I) A psychologist who works with youth;

(J) A tribal representative from a suicide prevention program;

(K) A person with lived experience with community safety threats or suicidal ideation;

(L) A representative of law enforcement; and

(M) A professional who works in veterans' mental health.

(3) The task force shall coordinate with the Department of Justice, the Oregon Health Authority, sheriff departments that provide for voluntary storage of firearms, federally recog-

nized Indian tribes in this state, faith-based groups in this state and the Oregon Alliance to Prevent Suicide to study the following issues related to public health best practices for reducing deaths from community safety threats and for suicide prevention:

(a) How to better support youth experiencing suicidal ideation.

(b) How to better support rural Oregonians experiencing suicidal ideation.

(c) How to reduce stigma on suicidal ideation.

(d) Barriers to suicide prevention support.

(e) Current community safety protocol across this state, including at hospitals and behavioral health facilities, and recommendations for improvement of the protocol.

(f) Locations and events most targeted in community safety threats.

(g) Rates of success for extreme risk protection orders and barriers to implementation and capacity for police stations or other entities to implement voluntary surrender or holding of firearms.

(h) Barriers to implementing best practices for community safety and suicide prevention.

(i) How domestic violence is a risk factor for community safety threats and suicide.

(j) Risks to first responders.

(4) The task force may engage a third party to research the issues listed in subsection (3) of this section.

(5) A majority of the voting members of the task force constitutes a quorum for the transaction of business.

(6) Official action by the task force requires the approval of a majority of the voting members of the task force.

(7) The task force shall elect one of its members to serve as chairperson.

(8) If there is a vacancy for any cause, the appointing authority shall make an appointment to become immediately effective.

(9) The task force shall meet at times and places specified by the call of the chairperson or of a majority of the voting members of the task force.

(10) The task force may adopt rules necessary for the operation of the task force.

(11) The task force shall submit reports in the manner provided by ORS 192.245, and may include recommendations for legislation, to the interim committees of the Legislative Assembly related to health care no later than September 15, 2024, and September 15, 2025.

(12) The Department of Justice shall provide staff support to the task force.

(13) Members of the Legislative Assembly appointed to the task force are nonvoting members of the task force and may act in an advisory capacity only.

(14) Members of the task force who are not members of the Legislative Assembly are not

entitled to compensation or reimbursement for expenses and serve as volunteers on the task force.

(15) All agencies of state government, as defined in ORS 174.111, are directed to assist the task force in the performance of the duties of the task force and, to the extent permitted by laws relating to confidentiality, to furnish information and advice the members of the task force consider necessary to perform their duties.

**SECTION 2.** In addition to and not in lieu of any other appropriation, there is appropriated to the Department of Justice, for the biennium ending June 30, 2025, out of the General Fund, the amount of \$250,000, which may be expended

for the purpose of paying a third party for research ordered by the Task Force on Community Safety and Firearm Suicide Prevention, as authorized under section 1 of this 2024 Act.

**SECTION 3.** Section 1 of this 2024 Act is repealed on December 31, 2026.

**SECTION 4.** This 2024 Act takes effect on the 91st day after the date on which the 2024 regular session of the Eighty-second Legislative Assembly adjourns sine die.

Approved by the Governor April 4, 2024

Filed in the office of Secretary of State April 4, 2024

Effective date June 6, 2024  
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