AN ACT

Relating to a medical health database maintained by the Department of State Police; creating new provisions; and amending ORS 181.641.

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

SECTION 1. (1)(a) The Department of State Police shall create and maintain a medical health database within the Law Enforcement Data System in order to provide law enforcement agencies with information to help the agencies assist persons with a qualifying illness or condition in obtaining medical, mental health and social services.

(b) The department shall provide each community mental health and developmental disabilities program director with the ability to input and remove data from the medical health database.

(c) The medical health database may not be accessible to any person who is not employed by a community mental health and developmental disabilities program or a law enforcement agency as defined in ORS 181.010.

(2) Not later than seven days after receiving a completed enrollment form described in subsection (6)(a) of this section, a community mental health and developmental disabilities program director shall enter an individual’s information into the medical health database if the director:

(a) Has verified that the individual has a qualifying illness or condition; and

(b) Has obtained the express written consent of:

(A) The individual;

(B) A person authorized to make medical decisions for the individual, if the individual is subject to a guardianship, advanced directive for health care, declaration for mental health treatment or power of attorney that authorizes the person to make medical decisions for the individual; or

(C) A parent of the individual, if the individual is under 14 years of age.

(3) To be valid, the express written consent described in subsection (2)(b) of this section must be witnessed by at least two adults as follows:

(a) Each witness shall witness either the signing of the instrument by the individual or the person described in subsection (2)(b)(B) or (C) of this section, or the individual’s or person’s acknowledgment of the signature of the individual or person.

(b) At least one witness shall be a person who is not:

(A) A relative of the individual by blood, marriage or adoption; or
(B) An owner, operator or employee of a health care facility in which the individual is a patient or resident.

c) The individual’s primary care physician or mental health service provider, or any relative of the physician or provider, may not be a witness.

(4) The community mental health and developmental disabilities program director shall destroy the completed enrollment form and remove an individual’s information from the medical health database:

(a) If the director receives a completed revocation of consent form described in subsection (6)(b) of this section, signed by the individual or a person described in subsection (2)(b)(B) or (C) of this section;

(b) If the individual or a person described in subsection (2)(b)(B) of this section provides the director with a court order or other document demonstrating that the person no longer has the authority to make medical decisions for the individual;

(c) When an individual for whom consent was obtained under subsection (2)(b)(C) of this section becomes 14 years of age; or

(d) Three years from the date on which the individual’s information was entered into the database.

(5) Not less than 90 days prior to removing an individual from the medical health database under subsection (4)(c) or (d) of this section, the director shall provide notice of the impending removal to the individual and the person described in subsection (2)(b)(B) or (C) of this section.

(6) The Department of Human Services shall develop:

(a) An enrollment form that allows for the collection of information to be entered into the medical health database, and that clearly states that consent by the individual or a person described in subsection (2)(b)(B) or (C) of this section is voluntary, revocable and is not a precondition for receiving medical care or mental health treatment or for discharge from a facility or program.

(b) A revocation of consent form that allows an individual or a person described in subsection (2)(b)(B) or (C) of this section to revoke the consent to include the individual’s information in the medical health database.

(7) The medical health database must contain the following information:

(a) The individual’s name, date of birth, last known address and physical description;

(b) Any pertinent information related to the individual’s illness or condition, including related symptoms, that may assist law enforcement agencies in carrying out the purposes of this section;

(c) The date on which the information was first entered into the medical health database and the date of any subsequent updates; and

(d) Contact information for at least two of the following persons:

(A) The individual’s primary care physician;

(B) The individual’s case manager in the community mental health and developmental disabilities program;

(C) A probation officer;

(D) A family member; or

(E) Any other person willing to serve as an emergency contact person for the individual.

(8) Each community mental health and developmental disabilities program director shall provide the local public safety coordinating council described in ORS 423.560 with an annual report on the use of the medical health database. The report may not include personally identifiable information that is contained in the medical health database.

(9) As used in this section:

(a) “Community mental health and developmental disabilities program director” includes a designee of the director.
(b) “Dementia” means the progressive deterioration of intellectual functioning and other cognitive skills, including but not limited to aphasia, apraxia, memory, agnosia and executive functioning, that leads to a significant impairment in social or occupational function and that represents a significant decline from a previous level of functioning.

(c) “Developmental disability” has the meaning given that term in ORS 40.460 (18a)(d).

(d) “Qualifying illness or condition” means:

(A) Dementia;

(B) A developmental disability;

(C) An Axis I diagnosis that is described in the Diagnostic and Statistical Manual of Mental Disorders published by the American Psychiatric Association; or

(D) A physical or behavioral disorder that causes disorientation or otherwise may impede an individual’s ability to interact effectively with a law enforcement officer.

SECTION 2. ORS 181.641 is amended to read:

181.641. The Department of Public Safety Standards and Training shall include in the minimum training required for basic certification as a police officer under ORS 181.665:

(1) The law, theory, policies and practices related to vehicle pursuit driving and, as facilities and funding permit, vehicle pursuit training exercises; and

(2) At least 24 hours of training in the recognition of mental illnesses utilizing a crisis intervention training model, at least one hour of which must include training on the appropriate use of the medical health database described in section 1 of this 2009 Act.