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.

Directs Oregon Health Authority and specified professional regulatory boards to require licensees regulated by authority or board to complete six hours of continuing education related to suicide risk assessment, treatment and management every six years and to report completion of continuing education to authority or board. Allows authority and boards to establish minimum requirements that licensee must meet to be exempt from requirement to complete continuing education.

Takes effect on 91st day following adjournment sine die.

A BILL FOR AN ACT

Relating to continuing education for professionals; creating new provisions; amending ORS 676.860; and prescribing an effective date.

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

SECTION 1. ORS 676.860 is amended to read:

676.860. (1) As used in this section:

(a) “Board” means:

(A) Occupational Therapy Licensing Board;

(B) Oregon Board of Licensed Professional Counselors and Therapists;

(C) Oregon Board of Naturopathic Medicine;

(D) Oregon Medical Board;

(E) Oregon State Board of Nursing;

(F) Physical Therapist Licensing Board;

(G) State Board of Chiropractic Examiners;

(H) State Board of Licensed Social Workers;

(I) Oregon Board of Psychology; and

(J) Teacher Standards and Practices Commission.

(b) “Licensee” means a person authorized to practice one of the following professions:

(A) Clinical social worker, as defined in ORS 675.510;

(B) Licensed marriage and family therapist, as defined in ORS 675.705;

(C) Licensed professional counselor, as defined in ORS 675.705;

(D) Licensed psychologist, as defined in ORS 675.010;

(E) Occupational therapist, as defined in ORS 675.210;

(F) Regulated social worker, as defined in ORS 675.510;

(G) School counselor, as defined by rule by the Teacher Standards and Practices Commission;

(H) Certified registered nurse anesthetist, as defined in ORS 678.245;

(I) Chiropractic physician, as defined in ORS 684.010;

(J) Clinical nurse specialist, as defined in ORS 678.010;
(K) Naturopathic physician, as defined in ORS 685.010;
(L) Nurse practitioner, as defined in ORS 678.010;
(M) Physician, as defined in ORS 677.010;
(N) Physician assistant, as defined in ORS 677.495;
(O) Physical therapist, as defined in ORS 688.010; [and]
(P) Physical therapist assistant, as defined in ORS 688.010; and

(Q) The following professions as authorized by the Oregon Health Authority:
   (i) Community health worker;
   (ii) Personal health navigator;
   (iii) Personal support specialist;
   (iv) Peer wellness specialist;
   (v) Doula;
   (vi) Family support specialist;
   (vii) Qualified mental health associate;
   (viii) Qualified mental health professional;
   (ix) Certified alcohol and drug counselor;
   (x) Prevention specialist;
   (xi) Recovery mentor;
   (xii) Gambling addiction counselor; and
   (xiii) Peer support specialist.

   (2) [In collaboration with the Oregon Health Authority,] (a) A board shall require a licensee
   regulated by the board to complete six hours every six years of continuing education related to
   suicide risk assessment, treatment and management and shall [adopt rules to] require a
   licensee [regulated by the board] to report to the board[, upon reauthorization to practice,] the
   licensee’s completion of [any] the continuing education [regarding suicide risk assessment, treatment
   and management.] described in this paragraph.

   (b) The Oregon Health Authority shall require a licensee regulated by the authority to
   complete six hours of the continuing education described in paragraph (a) of this subsection
   every six years.

   (3) A licensee shall report the completion of [any] the continuing education described in sub-
   section (2) of this section to the board that regulates the licensee or to the authority if the
   licensee is regulated by the authority.

   (4)(a) The authority and a board shall document completion of [any] the continuing education
   described in subsection (2) of this section by a licensee regulated by the authority or a board. [The
   board shall document the following data:] 

   [(A) The number of licensees who complete continuing education described in subsection (2) of this
   section,;]

   [(B) The percentage of the total of all licensees who complete the continuing education,;]

   [(C) The counties in which licensees who complete the continuing education practice; and]

   [(D) The contact information for licensees willing to share information about suicide risk assess-
   ment, treatment and management with the authority.]

   [(b) The board shall remove any personally identifying information from the data submitted to the
   board under this subsection, except for the personally identifying information of licensees willing to
   share such information with the authority.]

   [(c) For purposes of documenting completion of continuing education under this subsection,]
(b) In consultation with the authority, a board [may] shall adopt rules requiring licensees to submit documentation of completion to the board.

c) The authority shall adopt rules requiring licensees regulated by the authority to submit documentation of completion to the authority.

(5) The authority and a board may adopt rules to identify the experience and training that a licensee regulated by the authority or the board must have in order to be exempt from the requirements of subsection (2) of this section.

[5] (6) A board, on or before March 1 of each even-numbered year, shall report to the authority on the data [documented under] described in subsection (4) of this section, as well as information about [any initiatives by the board to promote suicide risk assessment, treatment and management among its licensees] the implementation of the continuing education described in subsection (2) of this section.

(6) (7) The authority, on or before August 1 of each even-numbered year, shall report to the interim committees of the Legislative Assembly related to health care on the information submitted to the authority under subsection [(5)] (6) of this section and information collected by the authority under subsection (4) of this section. [The authority shall include in the report information about initiatives by boards to promote awareness about suicide risk assessment, treatment and management and information on how boards are promoting continuing education described in subsection (2) of this section to licensees.]

(7) (8) The authority may use the information submitted to the authority under subsection [(5)] (6) of this section to [develop continuing education opportunities related to suicide risk assessment, treatment and management for licensees and to] facilitate improvements in suicide risk assessment, treatment and management efforts in this state.

(9)(a) The authority and a board may adopt rules to carry out this section.

(b) The authority may adopt rules to define and regulate the professions listed in subsection (1)(b)(Q) of this section.

SECTION 2. The amendments to ORS 676.860 by section 1 of this 2019 Act apply to applicants for initial authorization and to licensees applying for renewal of authorization on and after the operative date of this 2019 Act.

SECTION 3. (1) The amendments to ORS 676.860 by section 1 of this 2019 Act become operative on January 1, 2020.

(2) A board, as defined in ORS 676.860 as amended by section 1 of this 2019 Act, and the Oregon Health Authority may take any action that is necessary to enable the board and the authority to exercise, on and after the operative date specified in subsection (1) of this section, all of the duties, functions and powers conferred on the board and the authority by the amendments to ORS 676.860 by section 1 of this 2019 Act.

SECTION 4. This 2019 Act takes effect on the 91st day after the date on which the 2019 regular session of the Eightieth Legislative Assembly adjourns sine die.