

Part 11 Suicide Prevention Programs

62A-15-1101 Suicide prevention -- Reporting requirements.

- (1) As used in the section:
 - (a) "Bureau" means the Bureau of Criminal Identification created in Section 53-10-201 within the Department of Public Safety.
 - (b) "Division" means the Division of Substance Abuse and Mental Health.
 - (c) "Intervention" means an effort to prevent a person from attempting suicide.
 - (d) "Postvention" means mental health intervention after a suicide attempt or death to prevent or contain contagion.
 - (e) "State suicide prevention coordinator" means an individual designated by the division as described in Subsections (2) and (3).
- (2) The division shall appoint a state suicide prevention coordinator to administer a state suicide prevention program composed of suicide prevention, intervention, and postvention programs, services, and efforts.
- (3) The state suicide prevention program may include the following components:
 - (a) delivery of resources, tools, and training to community-based coalitions;
 - (b) evidence-based suicide risk assessment tools and training;
 - (c) town hall meetings for building community-based suicide prevention strategies;
 - (d) suicide prevention gatekeeper training;
 - (e) training to identify warning signs and to manage an at-risk individual's crisis;
 - (f) evidence-based intervention training;
 - (g) intervention skills training; and
 - (h) postvention training.
- (4) The state suicide prevention coordinator shall coordinate with the following to gather statistics, among other duties:
 - (a) local mental health and substance abuse authorities;
 - (b) the State Board of Education, including the public education suicide prevention coordinator described in Section 53A-15-1301;
 - (c) the Department of Health;
 - (d) health care providers, including emergency rooms;
 - (e) federal agencies, including the Federal Bureau of Investigation;
 - (f) other unbiased sources; and
 - (g) other public health suicide prevention efforts.
- (5) The state suicide prevention coordinator shall provide a written report to the Health and Human Services Interim Committee, by the October meeting every year, on:
 - (a) implementation of the state suicide prevention program, as described in Subsections (2) and (3);
 - (b) data measuring the effectiveness of each component of the state suicide prevention program;
 - (c) funds appropriated for each component of the state suicide prevention program; and
 - (d) five-year trends of suicides in Utah, including subgroups of youths and adults and other subgroups identified by the state suicide prevention coordinator.
- (6) The state suicide prevention coordinator shall report to the Legislature's:
 - (a) Education Interim Committee, by the October 2015 meeting, jointly with the State Board of Education, on the coordination of suicide prevention programs and efforts with the State

- Board of Education and the public education suicide prevention coordinator as described in Section 53A-15-1301; and
- (b) Health and Human Services Interim Committee, by the October 2017 meeting, statistics on the number of annual suicides in Utah, including how many suicides were committed with a gun, and if so:
 - (i) where the victim procured the gun and if the gun was legally possessed by the victim;
 - (ii) if the victim purchased the gun legally and whether a background check was performed before the victim purchased the gun;
 - (iii) whether the victim had a history of mental illness or was under the treatment of a mental health professional;
 - (iv) whether any medication or illegal drugs or alcohol were also involved in the suicide; and
 - (v) if the suicide incident also involved the injury or death of another individual, whether the shooter had a history of domestic violence.
 - (7) The state suicide prevention coordinator shall consult with the bureau to implement and manage the operation of a firearm safety program, as described in Subsection 53-10-202(18) and Section 53-10-202.1.
 - (8) In accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, the division shall make rules governing the implementation of the state suicide prevention program, consistent with this section.

Amended by Chapter 144, 2016 General Session

Amended by Chapter 164, 2016 General Session

Amended by Chapter 168, 2016 General Session

62A-15-1102 Study on gun use -- Report.

- (1) As used in this section:
 - (a) "Coordinator" means the state suicide prevention coordinator described in Section 62A-15-1101.
 - (b) "Legal intervention" means an incident in which an individual is shot by another individual who has legal authority to use deadly force.
 - (c) "Shooter" means an individual who uses a gun in an act that results in the death of the actor or another individual, whether the act was a suicide, homicide, legal intervention, act of self-defense, or accident.
- (2) The coordinator shall, by October 30, 2018, conduct a study on use of guns in the state and on an ongoing basis report on the progress and findings of the study to the Health and Human Services Interim Committee.
- (3) By October 30, 2016, the coordinator shall:
 - (a) determine what information, and from which state, local, and federal agencies, will be necessary to complete the study;
 - (b) determine how much the study will cost;
 - (c) make recommendations for legislation, if any, that will be necessary to facilitate information-sharing between local, state, federal, and private entities and the coordinator; and
 - (d) report the findings described in Subsections (3)(a) through (c) to the Health and Human Services Interim Committee.
- (4) The study described in Subsection (2) shall investigate:
 - (a) the number of deaths in the state that involved a gun, including deaths from suicide, homicide including gang-related violence, legal intervention, self-defense, and accidents;

- (b) where and how a gun that was involved in a death described in Subsection (4)(a) was procured, and whether that procurement was legal;
 - (c) demographic information on the shooter and, where applicable, a victim of a death described in Subsection (4)(a), including gender, race, age, criminal history, and gang affiliation, if any;
 - (d) the total estimated number of gun owners in the state;
 - (e) information on the shooter, including whether the shooter has a history of:
 - (i) mental illness; or
 - (ii) domestic violence; and
 - (f) whether gun deaths are seasonal.
- (5) The coordinator shall ensure that the study described in Subsection (2) is conducted in an unbiased manner, with no preconceived conclusions about potential results.
- (6) The coordinator may contract with another state agency, private entity, or research institution to assist the coordinator and office with the study required by Subsection (2).
- (7)
- (a) The coordinator shall submit a final report on the study described in Subsection (2), including proposed legislation and recommendations, to the Health and Human Services Interim Committee before November 30, 2018.
 - (b) The final report shall include references to all sources of information and data used in the report and study.

Enacted by Chapter 164, 2016 General Session