

26:2MM-1

LEGISLATIVE HISTORY CHECKLIST

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LAWS OF: 2005 **CHAPTER:** 274
NJSA: 26:2MM-1 (Establishes NJ Elderly Person Suicide Prevention Advisory Council in DHSS)
BILL NO: A1098 (Substituted for S1664)

SPONSOR(S): Johnson and others

DATE INTRODUCED: Pre-filed

COMMITTEE: **ASSEMBLY:** Senior Issues

SENATE: Health, Human Services and Senior Citizens

AMENDED DURING PASSAGE: No

DATE OF PASSAGE: **ASSEMBLY:** March 11, 2004

SENATE: December 15, 2005

DATE OF APPROVAL: January 6, 2006

FOLLOWING ARE ATTACHED IF AVAILABLE:

[FINAL TEXT OF BILL](#) (Original version of bill enacted)

A1098

[SPONSOR'S STATEMENT](#): (Begins on page 5 of original bill) [Yes](#)

COMMITTEE STATEMENT: **[ASSEMBLY](#):** [Yes](#)

[SENATE](#): [Yes](#)

FLOOR AMENDMENT STATEMENT: No

LEGISLATIVE FISCAL NOTE: No

S1664

[SPONSOR'S STATEMENT](#): (Begins on page 5 of original bill) [Yes](#)

COMMITTEE STATEMENT: **[ASSEMBLY](#):** No

[SENATE](#): [Yes](#)

FLOOR AMENDMENT STATEMENT: No

LEGISLATIVE FISCAL ESTIMATE: No

VETO MESSAGE: No

GOVERNOR'S PRESS RELEASE ON SIGNING: No

FOLLOWING WERE PRINTED:

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HEARINGS: No

NEWSPAPER ARTICLES: No

IS 12/19/07

P.L. 2005, CHAPTER 274, *approved January 6, 2006*
Assembly, No. 1098

1 **AN ACT** establishing a New Jersey Elderly Person Suicide Prevention
2 Advisory Council and supplementing Title 26 of the Revised
3 Statutes.

4

5 **BE IT ENACTED** *by the Senate and General Assembly of the State*
6 *of New Jersey:*

7

8 1. The Legislature finds and declares that:

9 a. According to the National Institute of Mental Health, elderly
10 Americans are disproportionately likely to die by suicide; individuals
11 65 years of age and older comprise only 13% of the United States
12 population, but they accounted for 18% of all suicide deaths in 2000;

13 b. In New Jersey, individuals 65 years of age and older also
14 comprise about 13% of the State population and they accounted for
15 17% of all suicide deaths in the State in 2000;

16 c. The national suicide rate for men is relatively constant from 25
17 to 64 years of age, but increases significantly after 65 years of age,
18 with men accounting for 84% of suicides among individuals 65 years
19 of age and older in 2000; and for women the national suicide rate
20 peaks between 45 and 64 years of age and does so again after 75 years
21 of age;

22 d. When categorized by race and gender, white men 85 years of
23 age and older have among the highest suicide rates nationally, with 59
24 deaths per 100,000 persons in 2000, which is more than five times the
25 national rate of 10.6 per 100,000, and according to "Healthy New
26 Jersey 2010," issued by the Department of Health and Senior Services,
27 the seventh leading cause of premature death among New Jerseyans is
28 suicide, with the highest rates among elderly white males;

29 e. The risk factors for suicide among elderly Americans differ from
30 those among younger groups; elderly persons have a higher prevalence
31 of depression, greater use of highly lethal methods and greater social
32 isolation;

33 f. The presence of mental illness (especially depression and alcohol
34 abuse), the presence of physical illness or impairment, unrelieved pain,
35 financial stress and social isolation (especially being widowed in males)
36 and the availability of firearms in the home contribute to the higher
37 incidence of suicide among elderly Americans;

38 g. Suicide among elderly Americans may even be underreported by
39 40% or more; omitted from statistics are "silent suicides," such as
40 deaths from noncompliance with medical instructions, prescription

1 overdoses, self-starvation or dehydration and other self-induced
2 "accidents";

3 h. Most elderly patients who complete suicide saw their physicians
4 within a few months of their deaths and more than a third did so within
5 the week of their suicide, and warning signs which indicate a serious
6 risk of suicide include: loss of interest in things or activities that are
7 usually seen as enjoyable; lessening of social interactions, self-care and
8 grooming; violating medical regimens or prescription dosages;
9 experiencing or expecting loss of a spouse; feeling hopeless or
10 worthless; and putting personal affairs in order, including giving things
11 away or making changes to a will; and

12 i. Physicians, nurses and other health care professionals who treat
13 and care for elderly patients need to be aware of the higher incidence
14 of suicide among elderly Americans and recognize the risk factors
15 associated with this age group.

16

17 2. As used in this act:

18 "Alcohol and drug counselor" means a person who is a certified
19 alcohol and drug counselor or a licensed clinical alcohol and drug
20 counselor pursuant to P.L.1997, c.331 (C.45:2D-1 et seq.).

21 "Attempted suicide" means destructive behavior intended by the
22 actor to result in the actor's harm or death.

23 "Completed suicide" means a death that is known or reasonably
24 suspected to have resulted from an intentional act of the deceased,
25 regardless of whether it has been ruled a suicide by a medical
26 examiner.

27 "Council" means the New Jersey Elderly Person Suicide Prevention
28 Advisory Council established pursuant to section 3 of this act.

29 "Department" means the Department of Health and Senior Services.

30 "Elderly person" means a person 65 years of age and older.

31 "Licensed clinical social worker" means a person who holds a
32 current, valid license issued pursuant to subsection a. of section 6 or
33 subsection a. or d. of section 8 of P.L.1991, c.134 (C.45:15BB-1 et
34 seq.).

35

36 3. There is established in the Department of Health and Senior
37 Services the New Jersey Elderly Person Suicide Prevention Advisory
38 Council.

39 a. The purpose of the council shall be to examine existing needs of
40 and services for elderly persons at risk of suicide and make
41 recommendations to the department for suicide prevention and
42 intervention strategies to help reduce the incidence of attempted and
43 completed suicides among elderly persons.

44 b. The council shall consist of nine members as follows:

45 (1) the Commissioners of Health and Senior Services and Human
46 Services and the chairman of the Community Mental Health Citizens

1 Advisory Board established pursuant to P.L.1957, c.146 (C.30:9A-1
2 et seq.), or their designees, who shall serve ex officio;

3 (2) two public members appointed by the Governor, one of whom
4 shall be a person with personal or family experience with suicide of an
5 elderly person and one of whom shall be an alcohol and drug
6 counselor;

7 (3) two public members appointed by the Speaker of the General
8 Assembly, who are not members of the same political party, one of
9 whom shall be a registered professional nurse and one of whom shall
10 be a licensed clinical social worker; and

11 (4) two public members appointed by the President of the Senate,
12 who are not members of the same political party, one of whom shall
13 be a physician who has been specially trained in caring for elderly
14 persons and has a certificate of added qualifications in geriatrics and
15 one of whom shall be a geropsychiatrist.

16 c. The public members shall be appointed no later than 60 days
17 after the enactment of this act.

18 d. The public members shall serve for a term of five years; but, of
19 the members first appointed, two shall serve for a term of three years,
20 two shall serve for a term of four years and two shall serve for a term
21 of five years. Members are eligible for reappointment upon the
22 expiration of their terms. Vacancies in the membership of the council
23 shall be filled in the same manner provided for the original
24 appointments.

25 e. The council shall organize as soon as practicable following the
26 appointment of its members and shall select a chairperson and vice-
27 chairperson from among the members. The chairperson shall appoint
28 a secretary who need not be a member of the council.

29 f. The public members shall serve without compensation, but shall
30 be reimbursed for necessary expenses incurred in the performance of
31 their duties and within the limits of funds available to the council.

32 g. The council shall be entitled to call to its assistance and avail
33 itself of the services of the employees of any State, county or
34 municipal department, board, bureau, commission or agency as it may
35 require and as may be available to it for its purposes.

36 h. The Department of Health and Senior Services shall provide
37 staff support to the council.

38

39 4. a. The council shall report annually to the department on the
40 needs of and services for elderly persons at risk of suicide and make
41 any recommendations for suicide prevention and intervention
42 strategies to help reduce the incidence of attempted and completed
43 suicides among elderly persons.

44 b. The department shall report, in a manner and form prescribed
45 by the department, specific recommendations, as appropriate, to the
46 Director of the Division of Consumer Affairs in the Department of

1 Law and Public Safety who shall inform appropriate health care
2 professionals, through the respective professional licensing boards, of
3 the council's recommendations.

4
5 5. This act shall take effect immediately.

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8 STATEMENT

9
10 This bill establishes a nine-member New Jersey Elderly Person
11 Suicide Prevention Advisory Council in the Department of Health and
12 Senior Services. The purpose of the council is to examine existing
13 needs of and services for elderly persons at risk of suicide and make
14 recommendations to the department for suicide prevention and
15 intervention strategies to help reduce the incidence of attempted and
16 completed suicides among elderly persons.

17 The council would consist of the Commissioners of Health and
18 Senior Services and Human Services and the chairman of the
19 Community Mental Health Citizens Advisory Board established
20 pursuant to N.J.S.A.30:9A-1, or their designees, who would serve ex
21 officio, and six public members, as follows: two public members
22 appointed by the Governor, one of whom would be a person with
23 personal or family experience with suicide of an elderly person and one
24 of whom would be an alcohol and drug counselor; two public members
25 appointed by the Speaker of the General Assembly, one of whom
26 would be a registered professional nurse and one of whom would be
27 a licensed clinical social worker; and two public members appointed
28 by the President of the Senate, one of whom would be a physician who
29 has been specially trained in caring for elderly persons and has a
30 certificate of added qualifications in geriatrics and one of whom would
31 be a geropsychiatrist.

32 The bill also provides that the council would report annually to the
33 department on needs of and services for elderly persons at risk of
34 suicide and make any recommendations for suicide prevention and
35 intervention strategies to help reduce the incidence of attempted and
36 completed suicides among elderly persons. In addition, the
37 department would report specific recommendations, as appropriate, to
38 the Director of the Division of Consumer Affairs in the Department of
39 Law and Public Safety who would inform appropriate health care
40 professionals of the council's recommendations.

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43
44 Establishes NJ Elderly Person Suicide Prevention Advisory Council in
45 DHSS.

ASSEMBLY, No. 1098

STATE OF NEW JERSEY 211th LEGISLATURE

PRE-FILED FOR INTRODUCTION IN THE 2004 SESSION

Sponsored by:

Assemblyman GORDON M. JOHNSON

District 37 (Bergen)

Assemblywoman LINDA R. GREENSTEIN

District 14 (Mercer and Middlesex)

Assemblyman BRIAN P. STACK

District 33 (Hudson)

Co-Sponsored by:

Assemblyman Chivukula, Senators Singer and Karcher

SYNOPSIS

Establishes NJ Elderly Person Suicide Prevention Advisory Council in DHSS.

CURRENT VERSION OF TEXT

As introduced.



(Sponsorship Updated As Of: 12/16/2005)

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16 c. The national suicide rate for men is relatively constant from 25
17 to 64 years of age, but increases significantly after 65 years of age,
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20 peaks between 45 and 64 years of age and does so again after 75 years
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22 d. When categorized by race and gender, white men 85 years of
23 age and older have among the highest suicide rates nationally, with 59
24 deaths per 100,000 persons in 2000, which is more than five times the
25 national rate of 10.6 per 100,000, and according to "Healthy New
26 Jersey 2010," issued by the Department of Health and Senior Services,
27 the seventh leading cause of premature death among New Jerseyans is
28 suicide, with the highest rates among elderly white males;

29 e. The risk factors for suicide among elderly Americans differ from
30 those among younger groups; elderly persons have a higher prevalence
31 of depression, greater use of highly lethal methods and greater social
32 isolation;

33 f. The presence of mental illness (especially depression and alcohol
34 abuse), the presence of physical illness or impairment, unrelieved pain,
35 financial stress and social isolation (especially being widowed in males)
36 and the availability of firearms in the home contribute to the higher
37 incidence of suicide among elderly Americans;

38 g. Suicide among elderly Americans may even be underreported by
39 40% or more; omitted from statistics are "silent suicides," such as
40 deaths from noncompliance with medical instructions, prescription
41 overdosages, self-starvation or dehydration and other self-induced
42 "accidents";

43 h. Most elderly patients who complete suicide saw their physicians
44 within a few months of their deaths and more than a third did so within
45 the week of their suicide, and warning signs which indicate a serious
46 risk of suicide include: loss of interest in things or activities that are

1 usually seen as enjoyable; lessening of social interactions, self-care and
2 grooming; violating medical regimens or prescription dosages;
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STATEMENT

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The council would consist of the Commissioners of Health and Senior Services and Human Services and the chairman of the Community Mental Health Citizens Advisory Board established pursuant to N.J.S.A.30:9A-1, or their designees, who would serve ex officio, and six public members, as follows: two public members appointed by the Governor, one of whom would be a person with personal or family experience with suicide of an elderly person and one of whom would be an alcohol and drug counselor; two public members appointed by the Speaker of the General Assembly, one of whom would be a registered professional nurse and one of whom would be a licensed clinical social worker; and two public members appointed by the President of the Senate, one of whom would be a physician who has been specially trained in caring for elderly persons and has a certificate of added qualifications in geriatrics and one of whom would be a geropsychiatrist.

The bill also provides that the council would report annually to the department on needs of and services for elderly persons at risk of suicide and make any recommendations for suicide prevention and intervention strategies to help reduce the incidence of attempted and completed suicides among elderly persons. In addition, the department would report specific recommendations, as appropriate, to the Director of the Division of Consumer Affairs in the Department of Law and Public Safety who would inform appropriate health care professionals of the council's recommendations.

ASSEMBLY SENIOR ISSUES COMMITTEE

STATEMENT TO

ASSEMBLY, No. 1098

STATE OF NEW JERSEY

DATED: FEBRUARY 19, 2004

The Assembly Senior Issues Committee reports favorably Assembly Bill No. 1098.

This bill establishes a nine-member New Jersey Elderly Person Suicide Prevention Advisory Council in the Department of Health and Senior Services. The purpose of the council is to examine existing needs of and services for elderly persons at risk of suicide and make recommendations to the department for suicide prevention and intervention strategies to help reduce the incidence of attempted and completed suicides among elderly persons.

The council would consist of the Commissioners of Health and Senior Services and Human Services and the chairman of the Community Mental Health Citizens Advisory Board established pursuant to N.J.S.A.30:9A-1, or their designees, who would serve ex officio, and six public members, as follows: two public members appointed by the Governor, one of whom would be a person with personal or family experience with suicide of an elderly person and one of whom would be an alcohol and drug counselor; two public members appointed by the Speaker of the General Assembly, one of whom would be a registered professional nurse and one of whom would be a licensed clinical social worker; and two public members appointed by the President of the Senate, one of whom would be a physician who has been specially trained in caring for elderly persons and has a certificate of added qualifications in geriatrics and one of whom would be a geropsychiatrist.

The bill also provides that the council would report annually to the department on needs of and services for elderly persons at risk of suicide and make any recommendations for suicide prevention and intervention strategies to help reduce the incidence of attempted and completed suicides among elderly persons. In addition, the department would report specific recommendations, as appropriate, to the Director of the Division of Consumer Affairs in the Department of Law and Public Safety who would inform appropriate health care professionals of the council's recommendations.

SENATE HEALTH, HUMAN SERVICES AND SENIOR
CITIZENS COMMITTEE

STATEMENT TO

ASSEMBLY, No. 1098

STATE OF NEW JERSEY

DATED: SEPTEMBER 27, 2004

The Senate Health, Human Services and Senior Citizens Committee reports favorably Assembly Bill No. 1098.

This bill establishes a nine-member New Jersey Elderly Person Suicide Prevention Advisory Council in the Department of Health and Senior Services. The purpose of the council is to examine existing needs of and services for elderly persons at risk of suicide and recommend to the department prevention and intervention strategies to help reduce the incidence of attempted and completed suicides among elderly persons.

The council would consist of the Commissioners of Health and Senior Services and Human Services and the chairman of the Community Mental Health Citizens Advisory Board established pursuant to N.J.S.A.30:9A-1, or their designees, who would serve ex officio, and six public members, as follows: two public members appointed by the Governor, one of whom is a person with personal or family experience with suicide of an elderly person and one of whom is an alcohol and drug counselor; two public members appointed by the Speaker of the General Assembly, one of whom is a registered professional nurse and one of whom is a licensed clinical social worker; and two public members appointed by the President of the Senate, one of whom is a physician who has been specially trained in caring for elderly persons and has a certificate of added qualifications in geriatrics and one of whom is a geropsychiatrist.

The bill provides that the council would report annually to the department on the needs of and services for elderly persons at risk of suicide, and make any recommendations for suicide prevention and intervention strategies to help reduce the incidence of attempted and completed suicides among elderly persons. In addition, the department would report specific recommendations, as appropriate, to the Director of the Division of Consumer Affairs in the Department of Law and Public Safety who would inform appropriate health care professionals of the council's recommendations.

This bill is identical to Senate Bill No.1664 (Singer), which the committee also reported favorably on this date.

SENATE, No. 1664

STATE OF NEW JERSEY
211th LEGISLATURE

INTRODUCED JUNE 10, 2004

Sponsored by:

Senator ROBERT W. SINGER

District 30 (Burlington, Mercer, Monmouth and Ocean)

Senator ELLEN KARCHER

District 12 (Mercer and Monmouth)

SYNOPSIS

Establishes NJ Elderly Person Suicide Prevention Advisory Council in DHSS.

CURRENT VERSION OF TEXT

As introduced.



(Sponsorship Updated As Of: 9/28/2004)

1 AN ACT establishing a New Jersey Elderly Person Suicide Prevention
2 Advisory Council and supplementing Title 26 of the Revised
3 Statutes.

4
5 **BE IT ENACTED** by the Senate and General Assembly of the State
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21 of age;

22 d. When categorized by race and gender, white men 85 years of
23 age and older have among the highest suicide rates nationally, with 59
24 deaths per 100,000 persons in 2000, which is more than five times the
25 national rate of 10.6 per 100,000, and according to "Healthy New
26 Jersey 2010," issued by the Department of Health and Senior Services,
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30 those among younger groups; elderly persons have a higher prevalence
31 of depression, greater use of highly lethal methods and greater social
32 isolation;

33 f. The presence of mental illness (especially depression and alcohol
34 abuse), the presence of physical illness or impairment, unrelieved pain,
35 financial stress and social isolation (especially being widowed in males)
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37 incidence of suicide among elderly Americans;

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3 experiencing or expecting loss of a spouse; feeling hopeless or
4 worthless; and putting personal affairs in order, including giving things
5 away or making changes to a will; and

6 i. Physicians, nurses and other health care professionals who treat
7 and care for elderly patients need to be aware of the higher incidence
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15 of five years. Members are eligible for reappointment upon the
16 expiration of their terms. Vacancies in the membership of the council
17 shall be filled in the same manner provided for the original
18 appointments.

19 e. The council shall organize as soon as practicable following the
20 appointment of its members and shall select a chairperson and vice-
21 chairperson from among the members. The chairperson shall appoint
22 a secretary who need not be a member of the council.

23 f. The public members shall serve without compensation, but shall
24 be reimbursed for necessary expenses incurred in the performance of
25 their duties and within the limits of funds available to the council.

26 g. The council shall be entitled to call to its assistance and avail
27 itself of the services of the employees of any State, county or
28 municipal department, board, bureau, commission or agency as it may
29 require and as may be available to it for its purposes.

30 h. The Department of Health and Senior Services shall provide
31 staff support to the council.

32
33 4. a. The council shall report annually to the department on the
34 needs of and services for elderly persons at risk of suicide and make
35 any recommendations for suicide prevention and intervention
36 strategies to help reduce the incidence of attempted and completed
37 suicides among elderly persons.

38 b. The department shall report, in a manner and form prescribed
39 by the department, specific recommendations, as appropriate, to the
40 Director of the Division of Consumer Affairs in the Department of
41 Law and Public Safety who shall inform appropriate health care
42 professionals, through the respective professional licensing boards, of
43 the council's recommendations.

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45 5. This act shall take effect immediately.

STATEMENT

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This bill establishes a nine-member New Jersey Elderly Person Suicide Prevention Advisory Council in the Department of Health and Senior Services. The purpose of the council is to examine existing needs of and services for elderly persons at risk of suicide and make recommendations to the department for suicide prevention and intervention strategies to help reduce the incidence of attempted and completed suicides among elderly persons.

The council would consist of the Commissioners of Health and Senior Services and Human Services and the chairman of the Community Mental Health Citizens Advisory Board established pursuant to N.J.S.A.30:9A-1, or their designees, who would serve ex officio, and six public members, as follows: two public members appointed by the Governor, one of whom would be a person with personal or family experience with suicide of an elderly person and one of whom would be an alcohol and drug counselor; two public members appointed by the Speaker of the General Assembly, one of whom would be a registered professional nurse and one of whom would be a licensed clinical social worker; and two public members appointed by the President of the Senate, one of whom would be a physician who has been specially trained in caring for elderly persons and has a certificate of added qualifications in geriatrics and one of whom would be a geropsychiatrist.

The bill also provides that the council would report annually to the department on needs of and services for elderly persons at risk of suicide and make any recommendations for suicide prevention and intervention strategies to help reduce the incidence of attempted and completed suicides among elderly persons. In addition, the department would report specific recommendations, as appropriate, to the Director of the Division of Consumer Affairs in the Department of Law and Public Safety who would inform appropriate health care professionals of the council's recommendations.

SENATE HEALTH, HUMAN SERVICES AND SENIOR
CITIZENS COMMITTEE

STATEMENT TO

SENATE, No. 1664

STATE OF NEW JERSEY

DATED: SEPTEMBER 27, 2004

The Senate Health, Human Services and Senior Citizens Committee reports favorably Senate Bill No. 1664.

This bill establishes a nine-member New Jersey Elderly Person Suicide Prevention Advisory Council in the Department of Health and Senior Services. The purpose of the council is to examine existing needs of and services for elderly persons at risk of suicide and recommend to the department prevention and intervention strategies to help reduce the incidence of attempted and completed suicides among elderly persons.

The council would consist of the Commissioners of Health and Senior Services and Human Services and the chairman of the Community Mental Health Citizens Advisory Board established pursuant to N.J.S.A.30:9A-1, or their designees, who would serve ex officio, and six public members, as follows: two public members appointed by the Governor, one of whom is a person with personal or family experience with suicide of an elderly person and one of whom is an alcohol and drug counselor; two public members appointed by the Speaker of the General Assembly, one of whom is a registered professional nurse and one of whom is a licensed clinical social worker; and two public members appointed by the President of the Senate, one of whom is a physician who has been specially trained in caring for elderly persons and has a certificate of added qualifications in geriatrics and one of whom is a geropsychiatrist.

The bill provides that the council would report annually to the department on the needs of and services for elderly persons at risk of suicide, and make any recommendations for suicide prevention and intervention strategies to help reduce the incidence of attempted and completed suicides among elderly persons. In addition, the department would report specific recommendations, as appropriate, to the Director of the Division of Consumer Affairs in the Department of Law and Public Safety who would inform appropriate health care professionals of the council's recommendations.

This bill is identical to Assembly Bill No. 1098 (Johnson/Greenstein/Stack), which the committee also reported favorably on this date.