

POLICY BRIEF:

SCHOOL CLIMATE LEGISLATION FROM THE 86TH LEGISLATIVE SESSION

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Hogg Foundation
for Mental Health

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BACKGROUND

Leading into the 86th legislative session, there were a number of events that attributed to the attention given to mental health and safety in schools. Recent tragedies in Texas, including Hurricane Harvey and the Santa Fe High School shooting, emphasized the need to explore how to best support all students, their teachers, and the school system in its entirety. While most children in our schools are not living with a serious emotional disturbance or a diagnosed mental health condition, many may be struggling to achieve mental well-being. Moreover, Texas children are turning inward and harming themselves; 1 out of 8 Texas high school students reported attempting suicide last year, almost twice the national average.¹

One approach taken by lawmakers and stakeholders was to increase schools' resources for implementation of school hardening activities. Various funding opportunities and provisions in legislation focused the attention on the physicality of buildings and a preparedness approach such as one-time investments in infrastructure (e.g., bulletproof glass, metal detectors, physical barriers, and security cameras), requiring mandatory school drills for emergencies, and the utilization of school marshals and/or increased police presence on school campuses.

While recognizing the need for local discretion, a diverse group of advocates (mental health, gun safety, disability, and others) argued that increasing the policing of students, including the use of school marshals, diverts needed resources away from appropriate interventions, supports, and services. Diversion of appropriate resources can place schools and law enforcement in situations where student discipline is managed by policing staff. Contradictory to the intent of making schools safer, this type of punitive discipline can negatively affect students' sense of safety, well-being, and ability to learn.² Evidence increasingly points to a strong relationship between exclusionary discipline and academic failure, arrest, juvenile justice system involvement, criminal justice system involvement, and incarceration.³

During the 2018-19 school year, one in ten Texas students were suspended, expelled, or removed from school.⁴ Additionally, 91 percent of reported reasons for discipline were coded as a violation of local code of conduct, so available data doesn't readily show why students are being disciplined.⁵ Without adequate or appropriate resources in the school or community, some teachers may request assistance from law enforcement, unintentionally leading to increased criminalization of our youth. Schools with

on-campus police report 3.5 times as many arrests as schools without police, are 5 times more likely to refer children to the juvenile justice system for "disorderly conduct," and have increased school suspensions and removals.⁶ In Texas, a 2018 study reviewing the impact of federal grants for school police on 2.5 million students found a 6 percent increase in middle school discipline rates, a 2.5 percent decrease in high school graduation rates, and a 4 percent decrease in college enrollment rates.⁷

Further, students of color and those with disabilities experience more arrests and removals than white students and those without disabilities. The following table illustrates that while these student groups may make up a small percentage of total student population, they are often disproportionately given in- and out-of-school suspensions, as well as expulsions to Juvenile Justice Alternative Education Programs (JJAEPs) and Disciplinary Alternative Education Programs (DAEPs).

2018-2019 Texas Discipline Response Summary

	Special Education	African American	Hispanic/Latinx	White
% of Total Student Population ⁸	9.8 %	12.6 %	52.6 %	27.4 %
% of In-School Suspensions	17.1%	25.6 %	48.9 %	21.4 %
% Of Out-of-School Suspensions	20.7%	32.4 %	50.2 %	14.0 %
% of JJEAP Expulsions	16.9 %	19.5 %	57.5 %	18.6 %
% of DAEP Removals	17.6 %	22.8 %	53.3 %	20.4 %

Source: Texas Education Agency. (2019, September 19). State Level Annual Discipline Summary: PEIMS Discipline Data for 2018-2019. Retrieved December 10, 2019, from https://rptsvr1.tea.texas.gov/cgi/sas/broker?_service=marykay&_program=adhoc.download_static_summary.sas&district=&agg_level=STATE&referrer=Download_State_Summaries.html&test_flag=&_debug=0&school_yr=19&report_type=html&Download_State_Summary=Next.

In addition to school hardening, school safety efforts also often focused on increasing access to campus and community mental health services. Increasing mental health education, services, and supports in schools is an important component to improving school climate. Integration of mental health into schools can encourage normalizing discussions, increase access to care, and provides opportunity for early identification and intervention, especially in rural schools where mental health resources in the community are often more scarce.⁹

This integration has been shown to help increase recognition that behavioral health is a part of overall health rather than stand alone items. By increasing knowledge, attitudes around mental health may improve, stigmatization may be assuaged, and the ability to recognize and appropriately respond to a mental health concern may be gained by students and educators.¹⁰ When students are socially, emotionally, and mentally well, they are able to better engage in their learning. Mental health initiatives and services are related to increased test scores, commitment to school, attendance, grades, and graduation rates, while improving truancy and disciplinary rates.¹¹

Cultivating well-being at schools also includes utilizing trauma-informed education, positive behavior interventions and supports (PBIS), restorative discipline practices, and social emotional learning (SEL) so that all students and teachers are impacted positively. Providing a multi-tiered system of support, by implementing strategies and supports that cultivate a positive school climate, not only helps students and teachers feel safe and supported, but also improves academic achievement.¹²

Discussion of increased mental health services in reaction to a school shooting can however lead policymakers to directly correlate violence to mental illness, which research has shown should not be done.¹³ There is often misinformation shared that attempts to connect mental illness with school safety. Mental illness does not predict dangerousness. Research shows us that loneliness, isolation, anger, and despair are more accurate predictors of violence than a mental health diagnosis.^{14,15}

Much work was started by lawmakers, advocates, and other stakeholders during the 86th legislative session that addressed the intersection of public schools and mental health. As policies are implemented, policy makers and advocates should continue to look down the road about how to continue the work to support students, teachers, and schools. While not an exhaustive list, following are summaries of new legislative provisions passed and funded. This policy brief is offered to help a variety of stakeholders better understand the array of changes generated by the recent legislation.

Senate Bill 11 (Taylor/Bonnen)

Effective September 1, 2019

Bill caption: Relating to policies, procedures, and measures for school safety and mental health promotion in public schools and the creation of the Texas Child Mental Health Care Consortium

As a direct response to the Santa Fe High School shooting, Governor Abbott called for a convening of round tables inclusive of stakeholders impacted by gun violence and experts in education, security, and mental health. As a result, the *Schools and Firearm Safety Action Plan* was released with a number of recommendations. Following the report and leading into the 86th legislative session, school safety was declared an emergency item by the governor. Many advocated for a number of changes, but two views on how the legislature and schools should respond became clear: school hardening and mental health.

While both reactions to the traumatic event are with good intent, there were disagreements surrounding allocation of resources and the implementation of certain initiatives. Senate Bill 11 was an attempt to bridge the two. Senate Bill 11 aims to address safe and supportive schools, with mental health as one component of the legislation. It also includes provisions related to school hardening strategies and staff training on how to respond during an emergency.

As the legislative session concluded, questions as to whether the legislation effectively balanced mental health and security arose. As school districts begin to implement provisions of the bill, students and teachers will begin to see changes affecting curriculum, resources, safety drills, continuing education, and potentially the physicality of their buildings. It is likely that what is learned through implementation of SB 11 and other legislation will be the basis for continued discussions during the interim and the next legislative session.

Additionally, through the legislative process, SB 10 (Nelson) was amended onto this bill. SB 10 created the Children's Mental Health Care Consortium (Consortium). The goal is to leverage institutions of higher education's expertise and capacity to enhance collaboration between institutions, improve access to behavioral health care for youth, and address the youth psychiatric workforce shortage. The Consortium will be responsible for increasing access to care through the development of a Child Psychiatry Access Network (CPAN) and the Texas Child Access Through Telemedicine (TCHAT) initiative, while also addressing workforce issues through child psychiatry workforce expansion and child and adolescent psychiatry fellowships.

More information about the bill and the Consortium's responsibilities can be found below.

Section	Required Action
<p><u>Facilities Standards</u></p>	<p>Section 1, Texas Education Code (TEC) Sec. 7.061</p> <p>TEA's commissioner is required to adopt or amend rules to ensure that building standards for instructional facilities and other public and charter school facilities provide a secure and safe environment. The rules shall include best practices for:</p> <ul style="list-style-type: none"> • Design and construction of new facilities; and • Improvement, renovation and retrofitting existing buildings. <p>Rules shall be reviewed and amended as needed by the TEA commissioner by September 1 of even-numbered years.</p>
<p><u>District Improvement Plans</u></p>	<p>Section 2, TEC Sec. 11.252</p> <p>Each school district's required district improvement plan must include its trauma-informed care policy now required and later expanded on in Section 18.</p>
<p><u>Charter School Inclusion</u></p>	<p>Section 3, TEC Sec. 12.104</p> <p>Charters schools are now subject to the school safety requirements under TEC Sections:</p> <ul style="list-style-type: none"> • 37.108: multihazard emergency operations plan; safety and security audit; • 31.1081: public hearing on multihazard emergency operations plan noncompliance; • 37.1082: multihazard emergency operations plan noncompliance; appointment of conservator or board of managers. • 37.109: school safety and security committee; • 37.113: notification regarding bomb threat or terroristic threat; • 37.114: emergency evacuations and mandatory school drills; • 37.115: threat assessment and safe and support school program and team; • 37.207: model safety and security audit procedure; and • 37.2071: district multihazard emergency operations plan review and verification.
<p><u>School Safety Training Time Waivers</u></p>	<p>Section 6, TEC Sec. 25.0815</p> <p>TEA's Commissioner will provide a waiver for fewer minutes of operation and instructional time at school districts that require each educator to attend approved school safety training courses. Eligibility for the waiver is dependent on the training course being approved by the TxSSC.</p> <p>The waiver must allow for sufficient time for the educators to attend the course and cannot result in inadequate instructional time for students or cause a reduction of more than 420 minutes.</p>
<p><u>Health Curriculum Expansion</u></p>	<p>Note: The Texas Essential Knowledge and Skills (TEKS) requires that instruction on health education be taught in elementary (k-5) and middle school (6-8) (Texas Administrative Code 74.2(a) and 74.3(a)). While instruction on health education TEKS is not required in high school, school districts may offer the class as an elective or choose to require it for graduation per Texas Education Code 28.002 (g).</p> <p>Sections 7 and 30, TEC Sec. 28.002</p> <p>Beginning with the 2019-20 school year, instruction about health with an emphasis on mental health, substance abuse, skills to manage emotions, establishing and maintaining positive relationships, responsible decision-making, and suicide prevention must be included in all grade levels' health education curriculum.</p>

	<p>The State Board of Education by rule shall require each school district to incorporate instruction on digital citizenship and legal consequences of cyberbullying.</p> <ul style="list-style-type: none"> • Digital citizenship is defined as “the standards of appropriate, responsible, and healthy online behavior, including the ability to access, analyze, evaluate, create, and act on all forms of digital communication.” • Cyberbullying is defined by Texas TEC Sec. 37.0832 as “bullying that is done through the use of any electronic communication device, including through the use of a cellular or other type of telephone, a computer, a camera, electronic mail, instant messaging, text messaging, a social media application, an Internet website, or any other Internet-based communication tool.”
<p><u>School Health Advisory Committees (SHAC)</u></p>	<p>Section 8, TEC Sec. 28.004</p> <p>Beginning with the 2019-20 school year, SHACs will be responsible for recommending to school districts:</p> <ul style="list-style-type: none"> • Grade-appropriate policies, procedures, strategies and curriculum on mental health concerns, including suicide; • Strategies to increase parental awareness of risky behaviors, early warning signs of suicide risk factors, and behavioral health concerns; and • Available community programs and services that address risk behaviors, suicide risks, and behavioral health concerns.
<p><u>School District Peace Officers and School Resource Officers</u></p>	<p>Note: Prior to the passage of SB 11, only school districts with more than 30,000 students were required to adopt a policy requiring school district peace officers and school resource officers to complete a specialized education and training program.</p> <p>Section 9, TEC Sec. 37.0812</p> <p>All school districts with a school resource officer or a school district peace officer, (regardless of student enrollment size) must adopt a policy requiring all officers to complete specialized education and training.</p> <p>Note: Per Occupations Code 1701.263, officers must receive and complete 16-hours of specialized education and training with curriculum incorporating:</p> <ul style="list-style-type: none"> • Child and adolescent development and psychology; • Positive behavioral interventions and supports, conflict resolution techniques, and restorative justice techniques; • De-escalation techniques and techniques for limiting the use of force, including the use of physical, mechanical, and chemical restraints; • The mental and behavioral health needs of children with disabilities or special needs; and • Mental health crisis intervention. <p>Section 24 and 29, Texas Occupations Code Sec. 1701.263</p> <p>As of September 1, 2019, TEA by rule shall require all new officers to receive and complete the education and training within 180 days of placement.</p> <p>School districts that were previously exempt due to enrollment of 30,000 students or less must adopt the new training policy by October 1, 2019.</p> <p>All current officers will be required to receive and complete their education and training as soon as practicable and no later than August 31, 2020.</p>

**Multihazard
Emergency
Operations Plan
(MEOP) and School
Safety and Security
Committee
(Committee)**

Note: Each school district and public junior college must adopt and implement a multihazard emergency operations plan (MEOP) (TEC 37.108). A MEOP is a plan developed to respond to both man-made and natural emergencies and addresses prevention, mitigation, preparedness, response, and recovery. School districts and public junior colleges must also establish a Committee that is responsible for developing and implementing emergency plans consistent with the district's MEOP, and providing recommendations related to MEOP updates (TEC Sec. 37.109). Rules for each district's Committee were determined by the Texas School Safety Center (TxSSC) and membership is determined by the district.

Definitions and direction for MEOPs will be created by TxSSC in conjunction with the governor's office of homeland security and the commissioner of education or of higher education. MEOP requirements and processes can be found in the following two sections:

MEOPs are required to include:

Section 10 (a), TEC Sec. 37.108

- Responding to an emergency training for district employees, including substitute teachers;
- Measures to ensure all school personnel (including substitute teachers) have classroom access to a communication device able to immediately call emergency personnel and agencies);
- Measures to ensure communications technology and infrastructure are adequate in emergencies;
- Mandatory implementation of *lockdown, lockout, shelter-in-place, and evacuation* drills;

Section 10 (f), TEC Sec. 37.108

- Members of the committee and committee meeting dates;
- A chain of command for final decision making during an emergency or disaster;
- A policy for providing substitute teachers access to necessary building and materials to carry out duties during an emergency or mandatory drill; and
- Provisions that address physical and psychological safety for responding to a natural disaster, active shooter, and any other dangerous scenario determined by TEA or TxSSC;
- Provisions for ensuring safety of students in portable buildings;
- Provisions for ensuring students and personnel with disabilities are provided equal access to safety;
- Provisions for providing immediate notification to parents, guardians, or others in parental relationship in circumstances involving a threat to the health and safety of students;
- Provisions for supporting the psychological safety of students, school personnel, and the community during the response and recovery phase including:
 - Alignment with best practices found under Texas Health and Safety Code 161.325 (related to mental health promotion and intervention, substance abuse prevention and intervention, and suicide prevention);
 - Strategies to ensure required training for suicide prevention, and grief and trauma-informed professional development for appropriate school personnel;
 - Training on integrating psychological safety and suicide prevention into the MEOP for committee members, school counselors and mental health professionals, educators, and other school personnel from an approved list determined by TEA's commissioner and TxSSC; and
 - Implementation of trauma-informed policies.

Section 26

No later than January 1, 2020, TxSSC is responsible for developing rules and best practices for portable building safety, facilities standards, and mandatory school drills.

Section 12, TEC, Sec. 37.109

To the greatest extent possible, a school district's committee must include:

- One or more representatives from a county or city's office of emergency management in which the district is located;
- One or more representatives from the local police department or sheriff's office;
- One or more representatives from the district's police department, if applicable;
- The district's board of trustees president;
- A member of the district's board of trustees;
- The district's superintendent;
- One or more designees of the superintendent, of which one must be a classroom teacher of the district;
- If the district partners with a charter school, a member of the charter schools' governing body; and
- Two parents or guardians of students enrolled in the district.

The committee shall:

- Periodically provide MEOP update recommendations to the district's board of trustees and administrators in accordance with best practices identified by TEA, TxSSC, or an individual included in a registry of school safety or security consulting services established by TxSSC;
- Consult with law enforcement to increase law enforcement presence near campuses;
- Meet once per academic semester and once during the summer unless established by a year-round system district. Committees established by year-round district are required to meet three times per calendar year with no less than two months between meetings; and
- Be subject to open meetings requirements, but may meet in executive session.

Section 10, TEC Sec. 37.108

A safety and security audit of district facilities must be included in each school district's MEOP and completed at least once every three years with results reported to TxSSC. The district shall follow audit procedures developed by TxSSC or by an entity included in TxSSC's *Registry Of Persons Providing School Safety Or Security Consulting Services*. The audit must include certification that the school safety allotment funds are used only for purposes provided by statute.

Note: In accordance with TEC Sec. 37.207, TxSSC is required to develop a model to be used by school districts that includes guidelines for proper audit procedures.

Section 14, TEC Sec. 37.207

If the audit results indicate the district is not complying with standards, TxSSC may require its MEOP to be immediately reviewed. If a district does not report its audit results in the manner required by TxSSC, TxSSC shall provide the district with written notice of its noncompliance and require immediate results of its audit. If the results are not received by TxSSC within 6 months, TxSSC shall notify TEA and require a public hearing ([Section 11, TEC Sec. 37.1082](#)).

Section 15, TEC Sec. 37.2071

TxSSC shall establish a random or need-based cycle for review and verification of each district's MEOP. TxSSC shall review and verify that each MEOP has met all requirements and provide the district with a written notice of any deficiencies that must be corrected. A revised MEOP with plan to correct deficiencies may be approved. If a school district

	<p>does not submit or revise its MEOP within 3 months, TxSSC will send a written notice of noncompliance to the district and TEA.</p> <p>Section 11, TEC Sec. 37.1082</p> <p>If TEA receives a notice from TxSSC of a school district's failure to submit its MEOP, TEA's commissioner may appoint a conservator for the district under <i>Texas TEC Chapter 39A - Accountability Interventions and Sanctions</i>. The conservator may order the district to adopt, implement, and submit a MEOP. If a school district continues to be noncompliant, the commissioner may appoint a board of managers to oversee the district's operations.</p> <p>If a school district does not submit or revise its MEOP within 6 months, TTSC will send a written notice of a public hearing requirement to the district.</p> <p>Section 11, TEC Sec. 37.1081</p> <p>The school board will hold a public hearing to notify the public of, and provide in writing, the district's failure to:</p> <ul style="list-style-type: none"> • Submit or correct deficiencies in their plan; • Report the results of the audit to TxSSC; • The dates of noncompliance; and • The board members and superintendent serving on those dates. <p>TxSSC must be provided a written confirmation that the district held the hearing.</p> <p>A reasonable amount of time shall be given to the public to speak on the issues of noncompliance.</p> <p>Section 15, TEC Sec. 37.2071</p> <p>Any document or information collected, developed, or produced during the review and verification of MEOPs is not subjected to disclosure under Texas Government Code Chapter 552.</p>
<p><u>Bomb Threat or Terroristic Threat Notification</u></p>	<p>Section 13, TEC Sec. 37.113</p> <p>If a school district receives a bomb or terroristic threat to a campus or other district facility where students are present, a school district shall provide notification as soon as possible to parents, guardians, or others in parental relationship.</p>
<p><u>Emergency Evacuations and Mandatory School Drills</u></p>	<p>Section 13, TEC Sec. 37.114</p> <p>TEA commissioner, in conjunction with TxSSC and the state fire marshal, shall adopt rules that:</p> <ul style="list-style-type: none"> • Provide procedures for evacuating and securing schools during an emergency; and • Designate the number of mandatory drills required each semester for fire drills and lockdown, lockout, shelter-in-place, and evacuation drills; not to exceed eight drills per year.
<p><u>Creation of Threat Assessment and Safe and Supportive School Programs and Teams</u></p>	<p>Note: According to the interpretation of the Texas School Safety Center, each school district board of trustees will be required to establish a threat assessment and safe and supportive school team ("team") to serve at one or multiple campuses in their district. The number of teams formed is at the school district's discretion as long as a team is assigned to each campus.¹⁶</p> <p>Section 13, TEC Sec. 37.115</p> <p>School districts' superintendents will be required to ensure the team has expertise in counseling, behavior management, mental health and substance use, classroom</p>

instruction, special education, school administration, school safety and security, emergency management, and law enforcement.

To oversee and monitor the operations of the teams, school districts' superintendents may assign an oversight committee which must include members with expertise in human resources, education, special education, counseling, behavior management, school administration, mental health and substance use, school safety and security, emergency management, and law enforcement.

The school district's board of trustees shall be responsible for adopting policies and procedures for the teams that must:

- Be consistent with model policies and procedures developed by TxSSC;
- Require teams to complete training provided by TxSSC or ESCs on evidenced-based threat assessment programs; and
- Require reporting requirements of team activities to TEA.

Section 17, TEC Sec. 37.220

TxSSC, in coordination with TEA, will develop model policies and procedures to assist schools in establishing and training threat assessment teams. The model policies must include, when appropriate, procedures for:

- Referring a student to a local mental health authority or health care provider for evaluation or treatment;
- Referring a student for evaluation for special education services; and
- Anonymous reporting.

Section 13, TEC Sec. 37.115

In accordance with TEA's guidance, each team must report to TEA:

- Team members' occupations;
- The number and type of threats reported to the team;
- The outcome of each threat assessment;
- School personnel training numbers and percentages; and
- The total number of Class C Misdemeanor citations, arrests, uses of restraints, changes in school placement, referrals to services, suspensions and expulsions, more than 15 unexcused absences, referrals to juvenile court for truancy to students assessed or reported as a threat by the team. These numbers must be disaggregated by gender, recipient of special education services, at-risk of dropping out, foster care, homelessness, dependent of military, pregnant or parent, limited English proficiency and migratory.

TEA, in coordination with TxSSC, will establish rules for safe and supportive school programs and will be required to include research-based best practices for school safety, providing for:

- Physical and psychological safety;
- Multiphase and multihazard approach for prevention, mitigation, preparedness, response, and recovery in a crisis situation;
- A multi-tiered support system that addresses school climate, social and emotional domains, and mental health; and
- Multidisciplinary and multiagency collaboration for risk assessment and threats in schools and provide appropriate interventions, including rules for the establishment and operation of teams.

The team will be required to conduct a threat assessment to include:

- Assessing and reporting a student who makes threats or exhibits "harmful, threatening, or violent behaviors," in accordance with the district's safe and supportive program's policies and procedures, defined as:

	<ul style="list-style-type: none"> ○ Harmful, threatening, or violent behaviors such as verbal threats, threats of self-harm, bullying, cyberbullying, fighting, the use or possession of a weapon, sexual assault, sexual harassment, dating violence, stalking, or assault that could result in need for intervention/services or discipline; and • Gathering and analyzing data to determine level of risk and appropriate interventions including referring the student for a mental health assessment and implementing an escalation procedure, if appropriate and in accordance with district policy. <ul style="list-style-type: none"> ○ As the team gathers data to determine the risk and appropriate interventions, an action plan will be developed. An “escalation procedure” refers to the team’s ongoing monitoring and the preparation if the students’ level of risk escalates. <p>Each team will:</p> <ul style="list-style-type: none"> • Be responsible for providing guidance to students and staff on how to recognize harmful, threatening, or violent behaviors; • Be responsible for supporting the district in implementing the multihazard emergency operations plan; • Notify the superintendent, who is required to immediately notify the student’s parent or guardian, if a serious risk of violence to self or others is determined; • Follow the district’s suicide prevention protocol if a risk of suicide is determined, and conduct a threat assessment if a threat towards others is also determined; • Follow the district’s substance use and intervention protocol if use or possession of tobacco, drugs, or alcohol is determined; • Be responsible for developing and implementing safe and supportive school programs; and • Not provide mental health services to students under 18 years of age without parent or guardians’ written consent.
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<p><u>Trauma-Informed Policy Requirement</u></p>	<p>Section 18, TEC Sec. 38.036</p> <p>Each school district is required to have a policy requiring the integration of trauma-informed practices into each school environment and must be included in the district improvement plan.</p> <p>The policy must address:</p> <ul style="list-style-type: none"> • Available counseling options for students affected by trauma and grief; • Using resources developed by TEA, methods for increasing staff and parent awareness of trauma-informed care; and • Implementation of trauma-informed practices by district and campus staff with <ul style="list-style-type: none"> ○ Training on methods and implementation must be provided through a best practice program (Health and Safety Code 161.325), part of new employee orientation, offered to existing staff at intervals required by agency rule, and a record of training participants must be maintained. <p>Annual data on the number of teachers, principals, and counselors trained for this policy is required to be reported to TEA.</p> <p>School districts may partner with community mental health organizations to provide the training if insufficient resources are determined.</p>
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<p><u>Mental Health Resources and Statewide Plan for Student Mental Health</u></p>	<p>Section 19 TEC Sec. 38.251</p> <p>TEA, in conjunction with a number of agencies, will develop a rubric for Education Service Centers (ESCs) to identify student mental health resources and will be responsible for updating the rubric every December 1 of odd-numbered years to reflect</p>
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**Creation of Texas
Education Code
Chapter 38,
Subchapter F**

changes in resources that may be available. TEA is responsible for development and distribution of the first rubric to ESCs by December 1, 2019.

The rubric must be able to identify resources related to:

- Training and technical assistance on practices that support student mental health;
- School-based prevention and intervention services;
- Community-based programs that provide school-based prevention and intervention services;
- Communities In Schools programs;
- School-based mental health providers; and
- Public and private funding sources.

TEC Sec. 38.252

No later than March 1, 2020, each ESC will use the rubric to identify resources in their region and create regional inventories of mental health resources, including evidenced-based and best practices that:

- Support the social, emotional and academic development of students;
- Identify students in need of mental or behavioral support before issues arise;
- Connect students and their families to specialized services provided by the school or in the community; and
- Assist schools in aligning their resources to address mental health.

ESCs may consult school districts, local mental health authorities (LMHAs), community mental health service providers, education groups, hospitals, and higher education institutions during the process of developing their regional inventory.

Every March 1 of even-numbered years, each ESC will use revised rubrics to re-evaluate the current resources by identifying new resources and removing resources no longer available. Each ESC will then be responsible for submitting their updated resource inventory to TEA.

TEC Sec. 38.253

No later than March 1, 2020, TEA in collaboration with numerous agencies, providers, and consumers, will be required to create a statewide inventory of the available resources identified by each ESC. The inventory must include:

- Training and technical assistance on practices that support student mental health;
- School-based programs that provide prevention or intervention services to students;
- Community-based programs providing school-based or school-connected prevention or intervention services to students;
- School-based mental health providers; and
- Public and private funding sources available.

TEA will be responsible for revising the statewide inventory every March 1 of even-numbered years.

TEC Sec. 38.254

No later than April 1, 2020, TEA will be responsible for creating a statewide plan for student mental health that ensures all students have access to adequate mental health resources. The plan must be revised every April 1 of even-numbered years. The plan shall include:

- Descriptions of any revisions to the rubric, regional inventory, and the statewide inventory;

	<ul style="list-style-type: none"> • Goals of TEA developed through coordination with educators, mental health professionals, advocacy groups, and parents, related to methods of objectively measuring school climate, increasing the availability of early school-based or connected interventions and resources for students, and improved referral process for students and families to specialized community-based supports; • Recommendations for actions the TEA commissioner can take without legislative direction to achieve TEA's goals; and • Recommendations to the legislature on ensuring all districts are able to meet TEA's goals through legislative appropriations or other legislative action. <p>As soon as practicable after completing or revising the statewide plan, TEA shall submit an electronic copy to the legislature, to its website, and hold public meetings in each ESC region to present and provide opportunity for public comment.</p> <p>TEC Sec. 38.255</p> <p>TEA shall use the statewide plan for its long-term strategic plan and develop legislative appropriations requests.</p> <p>TEC Sec. 38.256</p> <p>No later than November 1 of even-numbered years, TEA shall provide a legislative report of any changes TEA has made to the rubric and analysis of each region's progress towards meeting TEA's goals.</p>
<p><u>School Safety Allotment</u></p>	<p>Section 20, TEC Sec. 42.168</p> <p>From funds appropriated, an allotment based on average daily attendance shall be provided to a school district to improve school safety and security. TEA's commissioner may adopt rules for implementation. At the school district's discretion, the funds must be used for:</p> <ul style="list-style-type: none"> • Securing School Facilities, including: <ul style="list-style-type: none"> ○ Physicality of buildings, like barriers and infrastructure; and ○ Purchase and maintenance of technology, like security cameras and security systems. • Security for the District, including: <ul style="list-style-type: none"> ○ Collaborating with local law enforcement agencies; and ○ Employing district peace officers, private security and school marshals. • School Safety and Security Training and Planning, including: <ul style="list-style-type: none"> ○ Active shooter and emergency response training; ○ Prevention and treatment related to Adverse Childhood Experiences (ACEs); and ○ Prevention, identification, and management of emergencies and threats, including providing mental health personnel and support, behavioral health services, and establishing threat reporting systems. • Programs related to suicide prevention, intervention, and postvention.
<p><u>Creation of the Texas Child Mental Health Care Consortium</u></p> <p>Creation of Texas Health and Safety Code Chapter 113, Title 2</p>	<p>Section 22</p> <p>Texas Health and Safety Code Sec. 113.0052</p> <p>The Consortium will be composed of 13 health-related institutions of higher education (institution), Health and Human Services Commission (HHSC), Texas Higher Education Coordinating Board (THECB), three non-profits, and any other entity that the executive committee considers necessary.</p> <p>Texas Health and Safety Code Sec. 113.053</p> <p>The Consortium is administratively attached to THECB for the purpose of receiving and appropriating funds.</p>

Texas Health and Safety Code Sec. 113.0101

The Consortium will be governed by an executive committee comprised of the psychiatry chair of each institution or a licensed psychiatrist designated by the chair, representatives from THECB, the three non-profits of the Consortium, a hospital system, HHSC with expertise in delivery of mental health services and mental health facilities, and a designee by the president of the institutions or a designee nominated by the majority.

Texas Health and Safety Code Sec. 113.0104

A member of the executive committee shall be designated to represent the Consortium on the statewide behavioral health coordinating board.

Texas Health and Safety Code Sec. 113.0105

The executive committee will be responsible for coordinating the distribution of funds to the institutions, establishing rules and procedures for the administration of funds, documentation of compliance with applicable laws, and monitoring of funds.

Subchapter D - Access to Care

Texas Health and Safety Code Sec. 113.0151 and Sec. 113.0152

- **Child Psychiatry Access Network (CPAN)**

- The Consortium is responsible for establishing a network of comprehensive child psychiatry access centers (center) established and located at each of the institutions. Centers will provide consultation and training opportunities to pediatricians and primary care providers (PCPs) in their geographic regions regarding mental and behavioral health needs of children and youth.
- Centers may not submit an insurance claim or require a fee for providing consultation or training opportunities.

- **Texas Child Access Through Telemedicine (TCHAT)**

- The Consortium is responsible for establishing or expanding telehealth and telemedicine programs (program) for identifying, assessing, and providing services for behavioral and mental health , with a focus on at-risk children and adolescents.

- Each institution can enter into a Memorandum of Understanding (MOU) with a community mental health provider to create or expand a center or program.
- The Consortium shall leverage resources of a hospital system for centers or programs if consultation services and trainings for pediatricians and PCPs are being provided, and have existing programs for identifying, assessing, and providing behavioral and mental health services for children and adolescents.
- Services may only be provided to persons under the age of 18 with parent or legal guardian consent. The Consortium must develop a model form for providing consent and post on its website.
 - With the exception of services provided by school counselors during developmental guidance and counseling (TEC Sec. 33.005), carrying out their general duties (TEC Sec. 33.006), and counseling regarding postsecondary education (TEC 33.007).

Subchapter E - Child Mental Health Workforce

Texas Health and Safety Code Sec. 113.0201

- **Child Psychiatry Workforce Expansion**

- Funding may be provided to an institution of the Consortium for two full-time child and adolescent psychiatrists to serve as academic medical directors

	<p>at a facility operated by a community mental health provider. Funding may also be provided for two resident rotation positions.</p> <ul style="list-style-type: none"> ○ The academic medical director shall collaborate with the community mental health provider to increase access to mental health care resources by developing training opportunities for residents and supervising residents at a community mental health facility. ○ The institution shall require psychiatric residents to participate in rotations through the community mental health facility. <p>Texas Health and Safety Code Sec. 113.0202</p> <ul style="list-style-type: none"> ● Child and Adolescent Psychiatry Fellowship <ul style="list-style-type: none"> ○ Funding may be provided to an institution of the Consortium for a physician fellowship that will lead to a medical specialty in diagnosis and treatment for psychiatric and associated behavioral health issues affecting children and adolescents. ○ Funding for the fellowship must be used to increase positions, and not replace existing funding. <p>Subchapter F</p> <p>Texas Health and Safety Code Sec. 113.0251</p> <p>No later than December 1 of even-numbered years, the Consortium shall submit to the governor, the Lt. governor, the speaker of the house, and standing committees with jurisdiction over behavioral health, and post to its website, a written report that outlines:</p> <ul style="list-style-type: none"> ● Activities and objectives of the Consortium; ● The institutions that receive funding; and ● Any legislative recommendations.
<p><u>Family Education</u></p>	<p>Section 23, Texas Health and Safety Code Sec 161.325</p> <p>A school district may develop a procedure for providing educational material to parents and families on identifying risk factors, accessing resources for treatment or support provided on and off campus, and accessing available student accommodations provided on campus.</p>

Senate Bill 2432 (Taylor/Sanford)

Effective September 1, 2019

Bill caption: Relating to the removal of a public school student from the classroom following certain conduct.

The expansion of students' mandatory removal from a classroom into a DAEP is concerning. As previously stated, data shows students of color and students with disabilities are disproportionately affected. As other passed legislation allows school districts to expand resources to school marshals and school resource officers, there is a responsibility to conversely ensure schools are supported so threat assessment teams and officer trainings are implemented with fidelity and accuracy. It is important that our most at-risk students are not victims of further inappropriate interventions.

With the passing of SB 2432, mandatory DAEP placement of a student is expanded to harassment. A student is able to be removed if the harassment took place while on school property, at a school-related or sponsored activity off school property, or within 300 feet of school property.

Harassment is defined as “with intent to harass, annoy, alarm, abuse, torment, or embarrass another,” the person:

- Initiates communication and in the course of the communication makes a comment, request, suggestion, or proposal that is obscene;
- Threatens, in a manner reasonably likely to alarm the person receiving the threat, to inflict bodily injury on the person or to commit a felony against the person, a member of the person's family or household, or the person's property;
- Conveys, in a manner reasonably likely to alarm the person receiving the report, a false report, which is known by the conveyor to be false, that another person has suffered death or serious bodily injury; or

Sends repeated electronic communications in a manner reasonably likely to harass, annoy, alarm, abuse, torment, embarrass, or offend another.

House Bill 18 (Price/Watson)

Effective December 1, 2019*

**Section 4.03: Any change in law made by this Act that imposes a new duty or requirement on a school district or an open-enrollment charter school applies beginning with the 2020-21 school year*

Bill caption: Relating to consideration of the mental health of public school students in training requirements for certain school employees, curriculum requirements, counseling programs, educational programs, state and regional programs and services, and health care services for students and to mental health first aid program training and reporting regarding local mental health authority and school district personnel.

An essential component when addressing well-being at schools is supporting teachers and school personnel. Their training and continued education should be inclusive of mental health, trauma, and identification of a student in need of support – ideally before needing a referral for clinical or community-based services. In order to ensure more appropriate interventions, it's important for accurate and comprehensive information and tools to be provided.

Inclusion of mental health and well-being into students' curriculums and district-wide practices can assist in destigmatizing mental health, substance use, trauma, and reaching out for help. Too often, unidentified mental health conditions or trauma are perceived as “bad” behavior, and punitive discipline practices are implemented. Instead of a reactionary approach to a crisis, education and exposure to mental health information can help foster a healthier school climate. More open discussions can promote mental health as not a stand-alone item, but as an integrated part of usual learning and school activity. Normalization may help students' recognition of a mental health concern of their own or of a friend's, and improve students' knowledge and attitudes around mental health.

<u>Section</u>	<u>Required Action</u>
<u>Employee Training, Education, and Resources</u>	<p>Section 1.03, TEC Sec. 21.044</p> <p>During obtainment of a teaching certificate, a course is required to include effective strategies for teaching students with mental health conditions and those who engage in substance use.</p> <p>Section 1.04, TEC Sec. 21.054</p> <p>At least 25 percent of classroom teachers' and principals' continuing education is</p>

required to include educating diverse student populations (students in special education programs with mental health or substance use conditions, students with intellectual or developmental disabilities, and students eligible for 504 services).

At least 25 percent of school counselors' continuing education is required to include counseling students on mental health and substance use conditions through grief and trauma-informed interventions, and effective implementation of a comprehensive school counseling program.

At least 25 percent of principals' continuing education is required to include effective strategies for implementing a comprehensive school counseling program and mental health programs.

Section 4.02

SBOE shall propose rules no later than May 1, 2020 for the new continuing education requirements.

Section 1.04, TEC Sec. 21.054 and Section 2.01, Texas Health and Safety Code Sec. 1001.205

Teachers, principals, and counselors will receive twice the number of credit hours for continuing education if mental health first aid training is attended in-person.

LMHAs are required to collect data on mental health first aid training by school district, category of personnel trained, the number of trainers who left the program, and the number of active trainers. HHSC is responsible for compiling LMHA's data no later than December 1 of each year and submitting a report to the legislature.

Section 1.05, TEC Sec. 21.451

Staff development training:

- May include positive behavior interventions and supports(PBIS); and
- Must include suicide prevention, recognizing signs of mental health and substance use conditions, how grief and trauma affect learning, preventing/identifying/responding to bullying, instructing student with disabilities who also have mental health conditions, and strategies for positive relationships with students.

Section 1.06, TEC, Sec. 21.462

TEA, in coordination with HHSC, are required to include substance use resources on their website for use by school district and charter school employees.



HB 18: Mental Health Training

TEC 21.054 Statutory Changes	Teachers	Principals	Counselors
Requires at least 25% of CPE hours in specific instructional areas.	X	X	X
Provides specificity on educating students eligible to participate in special education programs.	X	X	
Adds specific instruction regarding grief and trauma informed instruction with specific training components	X	X	
Adds comprehensive counseling program to required training		X	X
Adds mental health programs addressing mental health condition		X	
Adds counseling students with mental health conditions and substance abuse			X
Provides mental health first aid or grief/trauma informed programs to count 2x the CPE hours, up to 16 total	X	X	X

<p><u>Student Education</u></p>	<p>Section 1.07, TEC Sec. 28.002</p> <p>Health curriculum must include health with an emphasis on mental health, including instruction about mental health and substance use conditions, skills to manage emotions, establishing and maintaining positive relationships, and responsible decision-making.</p> <p>During the adoption of TEKS for the health curriculum, SBOE shall adopt TEKS that address the science, risk factors, and causes of substance use conditions, including the use of illegal drugs, abuse of prescription drugs, abuse of alcohol and inhaling solvents, and other forms of substance use.</p> <ul style="list-style-type: none"> • TEA is required to compile a list of evidence-based substance use awareness programs for middle/junior/high school health curriculum that a district must choose from. <p>Section 1.08, TEC Sec. 28.004</p> <p>Local school health advisory committees (SHACs) will make recommendations on policies, procedures, strategies, and curriculum for the integration of mental health and physical health education, substance use prevention, school-based mental health services, and a comprehensive school counseling program.</p> <p>Section 1.13, TEC Sec. 38.013</p> <p>TEA is required to make one or more coordinated health programs available to each school district's elementary, middle, and high school. Texas' coordinated health programs are required to provide the coordination of education and services related to:</p> <ul style="list-style-type: none"> • Physical health education; • Mental health education, including mental health conditions, mental well-being, managing emotions, establishing and maintaining positive relationships, and responsible decision making; and • Substance use education including alcohol, prescription drug, and abuse of controlled substances.
<p><u>District Wide Practices</u></p>	<p>Section 1.02, TEC Sec. 11.252</p> <p>A school district's improvement plan must include provisions for:</p> <ul style="list-style-type: none"> • Evidence-based practices that address PBIS and integrate best practices on trauma-informed care; and • Implementation of a comprehensive school counseling program. <p>Section 1.08, TEC Sec. 28.004</p> <p>Local SHAC's duties include recommendations on:</p> <ul style="list-style-type: none"> • The number of hours of instruction provided for health education in K-8 grade; • The number of hours of instruction provided for health education in grades 9-12 if required for graduation; and • Age-appropriate policies, procedures, strategies, and curriculum related to: <ul style="list-style-type: none"> ○ Health education, including addressing physical and mental health concerns to ensure integration of health education; ○ Coordinating health education with school health services and the district's comprehensive school counseling program; ○ Substance use prevention; ○ School health services, including mental health services; and ○ A comprehensive school counseling program.

The school board of trustees may appoint classroom teachers, school counselors, and licensed professionals, including mental health professionals, to serve on the local SHAC.

Section 1.11, TEC Sec. 33.005

School counselors are required to work with district staff, students, parents, and the community to design and implement a counseling program that conforms to the Texas Model for Comprehensive School Counseling Program developed by the Texas Counseling Association, which includes:

- A guidance curriculum for educational development, including students' interests and career objectives;
- A responsive services component to intervene on behalf of a student whose personal concerns or problems put their educational, career, personal, or social development at risk;
- An individual planning system for students to plan, monitor, and manage their educational, career, personal, and social development; and
- A system of support to reinforce the efforts of teachers, staff, parents, and other members of the community in promoting the educational, career, personal, and social development of students.

Section 1.12, TEC Sec.38.0101

A school district may employ or contract with one or more non-physician mental health professionals to include a psychologist, a registered nurse with an advanced degree in psychiatric nursing, a licensed clinical social worker, a licensed professional counselor or a licensed marriage and family therapist.

Section 1.13 TEC Sec. 38.013

TEA is required to make one or more coordinated school health programs available to each school. These programs are responsible for the coordination of services and education related to:

- Mental health education, including education about mental health conditions, mental well-being, skills to manage emotions, establishing and maintaining positive relationships, and responsible decision-making; and
- Substance use education, including education about alcohol use, prescription drug use, and use of other controlled substances

Section 1.16, TEC Sec. 38.054

School-based health centers are able to provide treatment for mental health and substance use conditions to students with parental consent.

If the school district has a website, each school campus' website is required to include:

- If there is a full-time counselor and nurse physically present on the campus;
- A statement of the policies and procedures adopted to promote physical and mental health of students;
- Available physical and mental health resources at each campus;
- Contact information of providers of essential public health services per Health and Safety Code Chapter 121 in the area; and
- The contact information of its nearest LMHA.

Section 1.19, TEC Sec. 38.0591

No later than May 1, 2020, TEA, in cooperation with HHSC, shall develop guidelines for school districts regarding:

- Partnering with LMHAs, community mental health providers, private mental health providers, and substance use service providers to increase student access to mental health services; and

- Obtaining mental health services through Medicaid.

Section 1.21, Texas Health and Safety Code Subchapter G

No later than August 1, 2020, TEA, in conjunction with HHSC and regional ESCs, is required to develop a list of recommended best-practices for elementary, junior high, middle and high schools. School districts will choose from the list to develop practices and procedures concerning:

- Early mental health prevention and intervention;
- Substance use prevention and intervention;
- Suicide prevention, intervention, and postvention, which is defined as “activities that promote healing necessary to reduce the risk of suicide by a person affected by the suicide of another”;
- Supporting the return of a student to school following hospitalization or residential treatment for a mental health condition, suicide attempt, or substance use;
- Trauma- and grief-informed practices;
- Building student skills related to managing emotions, establishing and maintaining positive relationships, and responsible decision-making;
- Safe, positive, and supportive school climates; and
- Positive behavior interventions and supports.

House Bill 19 (Price/Watson)

Effective September 1, 2019

Bill caption: Relating to mental health and substance use resources for certain school districts.

To assist schools with the multiple opportunities and provisions created through this sessions' legislation, schools and education service centers will be supported through additional FTEs across the state created through HB 19. LMHAs and ESCs are required to collaborate with one another to provide mental health and substance use resources to school district personnel.

<u>Section</u>	<u>Required Action</u>
<u>Employment</u>	<p>Section 1, TEC Sec. 8.151</p> <p>A non-physician mental health professional (“professional”)employed by an LMHA, will be located at ESCs to serve as a resource for the region’s school districts. LMHAs will consult with the ESC in hiring decisions to ensure the professional is equipped with both mental health and education-setting experience.</p> <p>If more than one LMHA provides services in a region, the LMHA that primarily operates in the ESC’s region is required to employ the professional and consult with the other LMHAs in hiring decisions.</p> <p>Section 1, TEC Sec. 8.153</p> <p>Through an MOU, each ESC is responsible for providing a physical work space for the professional and in exchange, the LMHA is responsible for a reasonable, negotiated, cost-recovery fee for the space not to exceed \$15,000 per year.</p> <p>Section 1, TEC Sec. 8.154</p> <p>The LMHA employing the professional is responsible for supervising and consulting with any other LMHA serving the region for input on supervision.</p>

<p><u>Duties of the Non-Physician Mental Health Professional</u></p>	<p>Section 1, TEC Sec. 8.155</p> <p>The professional will be responsible for, to the greatest extent possible, working collaboratively with the ESC and acting as a resource for the ESC and district by:</p> <ul style="list-style-type: none"> • Helping personnel gain awareness and understanding of mental health and co-occurring mental health and substance use disorders; • Assisting personnel in implementing initiatives related to mental health or substance use under state law, agency rules, interagency MOUs, and related programs; • Ensuring personnel awareness of: <ul style="list-style-type: none"> ○ The list of mental health promotion and intervention, substance use prevention and intervention, and suicide prevention best practice- based programs and research-based practices codified in Section 161.325 of the Health and Safety Code; ○ Other public and private mental health and substance use prevention, treatment and recovery programs available in the school district, including programs provided by an LMHA or other public and private mental health providers; and ○ Other available public and private mental health and substance use prevention, treatment, and recovery program resources administered by LMHAs or HHSC that support schools, students, and families. • Facilitating optional monthly trainings on mental health first aid, the effects of grief and trauma for students with intellectual or developmental disabilities, and prevention and intervention programs effective in helping students with pressures of alcohol, illegal drug, prescriptions drug, and tobacco use. <p>Section 1, TEC Sec. 8.156</p> <p>School districts are not required to participate in the trainings provided by the professional.</p>
<p><u>Data Collection</u></p>	<p>Section 1, TEC Sec. 8.158</p> <p>Before the last business day of each calendar year, each LMHA that employs and supervises a professional must prepare and submit a report to HHSC regarding district and student outcomes resulting from the services provided by the professional.</p> <p>No later than January 31 of the following calendar year, HHSC is responsible for compiling the information submitted by each LMHA and preparing a report. The report will be submitted to the lieutenant governor, the speaker of the house, and each legislative committee with primary jurisdiction over mental health, public education and HHSC.</p> <p>HHSC shall provide a reasonable amount of time for TEA to review and provide input prior to submission of the report.</p>

House Bill 906 (Thompson/Powell)

Effective September 1, 2019

Bill caption: Relating to the establishment of a collaborative task force to study certain public school mental health services.

In order to evaluate state-funded mental health services provided to students and their families, as well as training and services provided to school personnel, **The Collaborative Task Force on Public School Mental Health Services** (task force) will be formed. While being good stewards of funding and providing effective interventions is important, results should be considerate of the interpretation. Measuring and

studying quantitative data such as the number of individuals who receive mental health services is rather straightforward. However, studying the impact of policies and procedures on district well-being can be nuanced and difficult to draw a conclusive answer without consideration of multiple external factors.

Implementing effective services is not only vital in supporting student and teacher mental health, but also a school culture that promotes a safe and supportive learning environment. While studying and measuring outcomes is not inherently a concern, the interpretations and drawing of conclusions will need to be thoughtful and accurate.

<u>Section</u>	<u>Required Action</u>
<p><u>Task Force Establishment</u></p>	<p>Section 1, TEC Sec. 302</p> <p>The task force will study and evaluate the impact of state-funded, on-campus mental health services and training on:</p> <ul style="list-style-type: none"> • The number of violent incidents that occur at school; • The suicide rate of individuals receiving services; • The number of students referred to DFPS and the reasons; • The number of individuals transported to emergency detention; and • The number of students referred to outside counselors.
<p><u>Task Force Membership</u></p>	<p>Section 1, TEC Sec. 38.303</p> <p>No later than October 1, 2019, the commissioner of TEA will appoint members of the task force, which will consist of:</p> <ul style="list-style-type: none"> • TEA's commissioner or their designee; and • Members appointed by TEA's commissioner without regard to race, sex, color, disability, religion, age, or national origin, consisting of: <ul style="list-style-type: none"> ○ Three parents of students receiving mental health services at school; ○ One individual who provides mental health services or training in schools and who is a licensed professional counselor (LPC), a licensed clinical social worker (LCSW), or a school counselor; ○ A psychiatrist; ○ Two administrators of districts or schools providing on-campus mental health services or training; ○ A member of a foundation that invests in on-campus mental health services or training; ○ An employee of an institution of higher education that has history of evaluating mental health services in schools; ○ A Licensed Specialist in School Psychology (LSSP); and ○ Any other members the task force considers necessary. <p>Members may not be compensated or reimbursed for their service on the task force.</p> <p>Section 1, TEC Sec. 38.304</p> <p>The task force shall select a presiding officer at its first meeting to call and conduct meetings, and is permitted to select an assistant presiding officer and secretary.</p>
<p><u>Task Force Meetings</u></p>	<p>Section 1, TEC Sec. 38.306</p> <p>After the initial meeting, the task force shall meet twice every year, and may meet at others times considered appropriate.</p> <p>Meeting via teleconference is allowed.</p>

<p><u>Task Force Support Services</u></p>	<p>Section 1, TEC Sec. 38.307</p> <p>No later than October 1, 2019, TEA's commissioner shall designate an institution of higher education (institution) with experience evaluating mental health services to serve as the lead institution of the task force. The institution will provide staff, faculty, and administrative support as determined necessary.</p> <p>Two additional institutions will be designated to support the task force and the lead institution to ensure administration of the task force. Of the two supporting institutions, one is required to be a predominantly black institution.</p>
<p><u>Task Force Duties</u></p>	<p>Section 1, TEC Sec. 38.308</p> <p>The duties of the task force include:</p> <ul style="list-style-type: none"> • Collecting data on: <ul style="list-style-type: none"> ○ The number of students enrolled in each school district; ○ The number of individuals the school district provides on-campus mental health services to: <ul style="list-style-type: none"> ▪ Of those individuals provided services, the number of individuals referred to inpatient or outpatient mental health providers; ○ The number of individuals the school district has resources to serve for mental health services; ○ The number of individuals transported from school for an emergency detention; and ○ The race, ethnicity, gender, special education status, educationally disadvantaged status, and geographic location of individuals: <ul style="list-style-type: none"> ▪ Provided state-funded mental health services by school districts; ▪ Referred to inpatient or outpatient mental health providers; and ▪ Transported for an emergency detention. • Studying, evaluating, and making recommendations regarding state-funded, on-campus mental health services and training including: <ul style="list-style-type: none"> ○ The outcomes and effectiveness in: <ul style="list-style-type: none"> ▪ Improving academic achievement and attendance; ▪ Reducing student disciplinary rates; ▪ Delivering prevention and early intervention services to promote early mental health skills including: <ul style="list-style-type: none"> • Building emotion regulation skills, establishing and maintaining positive relationships, and decision making; • Preventing substance use and suicide; • Promoting trauma-informed practices; • Promoting a positive school climate; and • Improving physical and emotional safety and well-being in the district and reducing violence. ○ Best practices for implementation of services and trainings for districts and schools; ○ Disparities in race, ethnicity, gender, special education status, and geographic region of individuals receiving services; ○ Best practices for replication of services and training to all districts and schools; and ○ Ensuring federal and state laws regarding confidentiality of student information are followed. <p>The task force will be responsible for submitting a legislative report by November 1st of each even numbered year of the results of The Task Force's activities, all data collected, and legislative recommendations.</p>

Section 1, TEC Sec. 38.309

The task force is responsible for complying with state and federal confidentiality laws for the data gathered, information studied, and evaluations conducted. The data, information and evaluations are prohibited from being shared with other federal or state agencies.

The task force is abolished and the subchapter of The TEC expires December 1, 2025.

House Bill 1387 (Hefner/Creighton)

Effective beginning the 2019-2020 school year

Bill caption: Relating to the number of school marshals that may be appointed to serve on a public school campus or at a private school.

Increasing guns and policing in schools has caused concern among advocates, as increased police presence is often met with discipline and legal consequences.¹⁷ While school marshals have the ability to “make arrests and exercise all authority given to peace officers” during a situation that is perceived to prevent or abate a situation that threatens to cause serious harm or death to others,¹⁸ they are not required to receive the same training as school resource officers. In current statute and rule, training for school marshals does not include interacting or responding to special student populations.^{19,20} This is distinctly different from what is currently required of school resource officers. All school resource officers’ training curriculum includes required education on:

- Child and adolescent development and psychology;
- Positive behavioral interventions and supports, conflict resolution techniques, and restorative justice techniques;
- De-escalation techniques and techniques for limiting the use of force, including the use of physical, mechanical, and chemical restraints;
- The mental and behavioral health needs of children with disabilities or special needs; and
- Mental health crisis intervention.²¹

Without appropriate training, guidance, or preparedness, an improper response could have serious consequences. Misidentification of mental health crises, substance use, or intellectual and developmental disabilities could be misinterpreted as an immediate threat, and inappropriate intervention could be devastatingly exercised. While schools will have differing strategies on how to keep their students safe, implementation and utilization of resources should be considerate of all students. If schools choose to increase utilization of school marshals, school should also ensure the marshals are supported and given additional education and training so they are properly prepared to interact with diverse student populations.

<u>Section</u>	<u>Required Action</u>
<u>School Marshal Appointments</u>	Section 1, TEC Sec. 37.0811 Each public and charter school can appoint one or more school marshal to each building on campus. Texas public and charter schools are able to appoint as many school marshals as determined by school districts’ boards.

	<p>The previous school marshal to student ratio of 200 students to one school marshal in public and charter schools no longer exists.</p> <p>Section 2, TEC Sec. 37.0813</p> <p>Each private school can appoint one or more school marshal to each building on campus.</p> <p>Texas private schools are able to appoint as many school marshals as determined by the governing body.</p> <p>The previous school marshal to student ratio of 200 students to one school marshal in private schools no longer exists.</p>
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House Bill 2184 (Allen/Huffman)

Effective beginning the 2019-2020 school year

Bill caption: Relating to a public school student's transition from an alternative education program to a regular classroom.

As the data reveals, a large number of students are removed from the classroom and a number are placed in alternative education programs (AEP).²² Unfortunately, a student's removal can be a result of unaddressed mental health, trauma, or disability. However, there is opportunity to support the student returning to the classroom, as well as the teacher to whose classroom the student is returning.

A student's return to the classroom without support can be challenging for both the student and teacher. Without support, there is potential for more disruptions in student learning and the teachers' engagement with others in the classroom. Appropriate recommendations and adequate support are important so that future removals may be prevented. More collaboration between the AEP, parents or guardians, and the campus allows for a more concerted effort to create a supportive transition.

<u>Section</u>	<u>Required Action</u>
<p><u>Student Transition</u></p>	<p>Section 1, TEC Sec. 37.023</p> <p>When a student transitions from an AEP, including a DAEP, JJAEP or other residential program or facility operated by TJJD or other governmental entity, to a traditional classroom:</p> <ul style="list-style-type: none"> • The AEP must provide a written notice of the release date to the student's parent or guardian and the administrator of the campus the student is transferring to as soon as practicable; • The campus administrator must be provided results of academic and any other assessments administered; and • A campus administrator shall coordinate the transition and include assistance and recommendations from school counselors, school district peace officers, school resource officers, licensed clinical social workers, campus behavior coordinators, and teachers involved in implementing student's transition plan no later than five instructional days of a student's release.
<p><u>Transition Plan</u></p>	<p>Section 1, TEC Sec. 37.023</p> <p>A personalized transition plan is required to include recommendations for the best educational placement of the student and may include:</p>

- Recommendations for counseling, behavior management, or academic assistance;
- Recommendations on accessing mental health services provided by the school, an LMHA, or another private or public entity;
- Provision of information to the parent or person standing in parental relation about the eligibility process for special education services evaluation; and
- A regular review of the student's progress toward the student's academic or career goals.

The campus administrator or their designee and the student's parent or guardian meet to coordinate transition, if practicable.

Funding

- **House Bill 19 – Mental Health Professionals at ESCs: \$4.6 million**
- **House Bill 500 – Santa Fe High School: \$10.9 million**
 - One-time funding in the supplemental budget, created a grant for a school district that experienced a school shooting resulting in one or more fatalities.
- **House Bill 500 – School Hardening Activities: \$100 million**
 - Appropriated from the “Rainy Day Fund” in the supplemental budget, this one-time funding's use is at schools' discretion but limited to:
 - Exterior doors with push bars
 - Metal detectors at school entrances
 - Erected vehicle barriers
 - Security systems that monitor and record entrances, exits and hallways
 - Campus-wide active shooter alarm systems (separate from fire alarms)
 - Two-way radio system
 - Perimeter security fencing
 - Bullet-resistant glass or film for school entrances
 - Door locking systems
- **Senate Bill 11 – Texas Children’s Mental Health Consortium: \$99 million**
- **Senate Bill 11 – School Safety Allotment: \$100 million**

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