

BILL ANALYSIS

C.S.S.B. 831
By: Taylor
Public Health
Committee Report (Substituted)

BACKGROUND AND PURPOSE

Mental health and substance abuse issues can lead to a number of negative outcomes for children, including school failure, involvement with the juvenile justice system, and, in extreme cases, suicide. Interested parties contend that prevention and early intervention are key to addressing these problems and improving long-term outcomes for children and that, because a significant portion of a child's time is spent at school, schools are sometimes the best places for the initiation of needed mental health and substance abuse programs.

The Department of State Health Services, in coordination with the Texas Education Agency, provides and annually updates a list of best practice-based early mental health intervention and suicide prevention programs that public elementary, junior high, middle, and high schools may implement. However, the best practice-based list does not include mental health promotion, positive youth development, or substance abuse prevention and intervention programs and is not required to be accessible on the websites of the agencies with whom school districts most frequently interact.

C.S.S.B. 831 seeks to expand the list of prevention and intervention programs available to school districts and make the list more easily accessible in an effort to encourage school districts to address certain mental health problems as early as possible.

RULEMAKING AUTHORITY

It is the committee's opinion that this bill does not expressly grant any additional rulemaking authority to a state officer, department, agency, or institution.

ANALYSIS

Section 531.0055, Government Code, as amended by Chapter 198 (H.B. 2292), Acts of the 78th Legislature, Regular Session, 2003, expressly grants to the executive commissioner of the Health and Human Services Commission all rulemaking authority for the operation of and provision of services by the health and human services agencies. Similarly, Sections 1.16-1.29, Chapter 198 (H.B. 2292), Acts of the 78th Legislature, Regular Session, 2003, provide for the transfer of a power, duty, function, program, or activity from a health and human services agency abolished by that act to the corresponding legacy agency. To the extent practical, this bill analysis is written to reflect any transfer of rulemaking authority and to update references as necessary to an agency's authority with respect to a particular health and human services program.

C.S.S.B. 831 amends the Health and Safety Code to require the list of recommended best practice-based programs required to be provided and annually updated by the Department of State Health Services (DSHS) for implementation in public elementary, junior high, middle, and high schools within the general education setting to include programs in mental health promotion and positive youth development, substance abuse prevention, and substance abuse intervention, in addition to programs in early mental health intervention and suicide prevention. The bill requires DSHS to coordinate with regional education service centers, in addition to the Texas

Education Agency (TEA), in providing and updating the list and requires DSHS, TEA, and each regional education service center to make the list easily accessible on their websites.

EFFECTIVE DATE

September 1, 2013.

COMPARISON OF ORIGINAL AND SUBSTITUTE

While C.S.S.B. 831 may differ from the engrossed version in minor or nonsubstantive ways, the following comparison is organized and highlighted in a manner that indicates the substantial differences between the engrossed and committee substitute versions of the bill.

SENATE ENGROSSED

SECTION 1. The heading to Subchapter O-1, Chapter 161, Health and Safety Code, is amended to read as follows:

SUBCHAPTER O-1. ~~[EARLY]~~ MENTAL HEALTH, SUBSTANCE ABUSE, [INTERVENTION] AND ~~[PREVENTION OF]~~ YOUTH SUICIDE

SECTION 2. The heading to Section 161.325, Health and Safety Code, is amended to read as follows:

Sec. 161.325. ~~[EARLY]~~ MENTAL HEALTH PROMOTION AND INTERVENTION, SUBSTANCE ABUSE PREVENTION AND INTERVENTION, AND SUICIDE PREVENTION.

SECTION 3. Section 161.325, Health and Safety Code, is amended by amending Subsections (a), (b), (d), (e), and (i) and adding Subsections (a-1) and (a-2) to read as follows:

(a) The department, in coordination with the Texas Education Agency and regional education service centers, shall provide and annually update a list of recommended best practice-based programs in the areas specified under Subsection (a-1) ~~[early mental health intervention and suicide prevention programs]~~ for implementation in public elementary, junior high, middle, and high schools within the general education setting. Each school district may select from the list a program or programs appropriate for implementation in the district.

(a-1) The list must include programs in the

HOUSE COMMITTEE SUBSTITUTE

SECTION 1. Same as engrossed version.

SECTION 2. Same as engrossed version.

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(a-1) The list must include programs in the

following areas:

- (1) early mental health intervention;
- (2) ~~culturally competent~~ mental health promotion and positive youth development;
- (3) substance abuse prevention;
- (4) substance abuse intervention; and
- (5) suicide prevention.

(a-2) The department, the Texas Education Agency, and each regional education service center shall make the list easily accessible on their websites.

(b) The programs on the list must include components that provide for training counselors, teachers, nurses, administrators, and other staff, as well as law enforcement officers and social workers who regularly interact with students, to:

(1) recognize students at risk of committing suicide, including students who are or may be the victims of or who engage in bullying;

(2) recognize students displaying early warning signs and a possible need for early mental health or substance abuse intervention, which warning signs may include declining academic performance, depression, anxiety, isolation, unexplained changes in sleep or eating habits, and destructive behavior toward self and others; and

(3) intervene effectively with students described by Subdivision (1) or (2) by providing notice and referral to a parent or guardian so appropriate action, such as seeking mental health or substance abuse services, may be taken by a parent or guardian.

(d) The board of trustees of each school district may adopt a policy concerning [early] mental health promotion and intervention, substance abuse prevention and intervention, and suicide prevention that:

(1) establishes a procedure for providing notice of a recommendation for early mental health or substance abuse intervention regarding a student to a parent or guardian of the student within a reasonable amount of time after the identification of early warning signs as described by Subsection (b)(2);

(2) establishes a procedure for providing notice of a student identified as at risk of committing suicide to a parent or guardian

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- (2) mental health promotion and positive youth development;
- (3) substance abuse prevention;
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(1) establishes a procedure for providing notice of a recommendation for early mental health or substance abuse intervention regarding a student to a parent or guardian of the student within a reasonable amount of time after the identification of early warning signs as described by Subsection (b)(2);

(2) establishes a procedure for providing notice of a student identified as at risk of committing suicide to a parent or guardian of

of the student within a reasonable amount of time after the identification of early warning signs as described by Subsection (b)(2);

(3) establishes that the district may develop a reporting mechanism and may designate at least one person to act as a liaison officer in the district for the purposes of identifying students in need of early mental health or substance abuse intervention or suicide prevention; and

(4) sets out available counseling alternatives for a parent or guardian to consider when their child is identified as possibly being in need of early mental health or substance abuse intervention or suicide prevention.

(e) The policy must prohibit the use without the prior consent of a student's parent or guardian of a medical screening of the student as part of the process of identifying whether the student is possibly in need of early mental health or substance abuse intervention or suicide prevention.

(i) Nothing in this section is intended to interfere with the rights of parents or guardians and the decision-making regarding the best interest of the child. Policy and procedures adopted in accordance with this section are intended to notify a parent or guardian of a need for mental health or substance abuse intervention so that a parent or guardian may take appropriate action. Nothing in this section shall be construed as giving school districts the authority to prescribe medications. Any and all medical decisions are to be made by a parent or guardian of a student.

SECTION 4. This Act takes effect September 1, 2013.

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(i) Nothing in this section is intended to interfere with the rights of parents or guardians and the decision-making regarding the best interest of the child. Policy and procedures adopted in accordance with this section are intended to notify a parent or guardian of a need for mental health or substance abuse intervention so that a parent or guardian may take appropriate action. Nothing in this section shall be construed as giving school districts the authority to prescribe medications. Any and all medical decisions are to be made by a parent or guardian of a student.

SECTION 4. Same as engrossed version.