

## **BILL ANALYSIS**

Senate Research Center  
86R26878 GCB-F

C.S.S.B. 1390  
By: Menéndez  
Education  
4/22/2019  
Committee Report (Substituted)

### **AUTHOR'S / SPONSOR'S STATEMENT OF INTENT**

One in eight high school students in Texas reported a suicide attempt in the past year, which is twice the national average. As the third leading cause of death for youth ages 10 to 24, 4,600 young people die each year by suicide. However, despite their students' higher risk of attempting suicide, Texas schools do not have the training and plans to effectively address suicide and keep students safe and healthy.

According to the Texas Education Agency (TEA), only 44 percent of districts report using a best practice suicide prevention program in 2017. TEA also does not have a system in place to ensure its more than 1,000 school districts are actually training teachers and other personnel in prevention. On top of this, schools are not required to have plans in place to support students and faculty following a suicide attempt or completion. In order for Texas to effectively address suicide in schools, measures need to be put into place to prepare schools for action.

Regular training is critical to effectively respond to students at risk of suicide. Under current state law, only new teachers are required to participate in suicide prevention training in state law. This bill would require all educators to receive training every other year on suicide prevention as part of the routine training requirements. This bill would also improve the response of school districts across Texas by requiring districts to develop a plan for suicide prevention, intervention, and postvention as part of their current efforts to address student mental health and suicide prevention.

In the current health curriculum, there is only an emphasis on the importance of proper nutrition and exercise. S.B. 1390 would add to the curriculum mental health, substance abuse prevention, skills to manage emotions, and suicide prevention. Lastly, the local school health advisory council shall make policy recommendations to school districts to increase parental awareness of suicide-related factors and warning signs, as well as available community suicide prevention services.

The committee substitute for S.B. 1390 would change the teacher training frequency for suicide prevention from every other year to every five years.

C.S.S.B. 1390 amends current law relating to suicide prevention in public school curriculum and certain educational programs concerning suicide prevention and substance abuse prevention.

### **RULEMAKING AUTHORITY**

This bill does not expressly grant any additional rulemaking authority to a state officer, institution, or agency.

### **SECTION BY SECTION ANALYSIS**

SECTION 1. Amends Section 21.451(d), Education Code, as follows:

(d) Provides that the staff development:

(1)–(2) makes no changes to these subdivisions;

(3) is required to include suicide prevention training that is required to be provided:

- (A) makes no changes to this paragraph; and
- (B) to existing school district and open-enrollment charter school educators at least once every five years, rather than on a schedule adopted by the Texas Education Agency (TEA) by rule.

SECTION 2. Amends Section 28.002, Education Code, by amending Subsection (a) and adding Subsection (a-1), as follows:

(a) Creates Paragraph (B)(i) from existing text. Requires each school district that offers kindergarten through grade 12 to offer, as a required curriculum:

- (1) makes no changes to this subdivision; and
- (2) an enrichment curriculum that includes:
  - (A) makes no changes to this paragraph;
  - (B) health, with emphasis on:
    - (i) physical health, including the importance of proper nutrition and exercise;
    - (ii) mental health, including instruction on mental health conditions, substance abuse, skills to manage emotions, establishing and maintaining positive relationships, and responsible decision-making; and
    - (iii) suicide prevention, including recognizing suicide-related risk factors and warning signs; and
- (C)-(H) makes no changes to these paragraphs.

(a-1) Requires the State Board of Education, in adopting the essential knowledge and skills for the health curriculum under Subsection (a)(2)(B), to adopt essential knowledge and skills that address:

- (1) the relationship between drug and alcohol use and suicide;
- (2) recognizing signs of suicidal tendencies and other warning signs of suicide; and
- (3) help-seeking behaviors and available community suicide prevention services.

SECTION 3. Amends Section 28.004, Education Code, by amending Subsection (c) and adding Subsection (o), as follows:

(c) Provides that the local school health advisory council's duties include recommending:

- (1) makes no changes to this subdivision;
- (2) policies, procedures, strategies, and curriculum appropriate for specific grade levels designed to prevent obesity, cardiovascular disease, Type 2 diabetes, and mental health concerns, including suicide, through coordination of:
  - (A)-(I) makes no changes to these paragraphs; and

(3)–(5) makes no changes to these subdivisions.

(o) Requires the local school health advisory council to make policy recommendations to the district to increase parental awareness of suicide-related risk factors and warning signs and available community suicide prevention services.

SECTION 4. Amends and reenacts Section 161.325(a-1), Health and Safety Code, as amended by Chapter 714 (H.B. 4056) and Chapter 522 (S.B. 179), Acts of the 85th Legislature, Regular Session, 2017, as follows:

(a-1) Requires the list to include programs and practices in the following areas:

(1) early mental health prevention and intervention, rather than early mental health intervention;

(2) substance abuse prevention and intervention, rather than substance abuse prevention;

(3) suicide prevention, intervention, and postvention, rather than suicide prevention;

(4) grief-informed and trauma-informed practices;

(5) building skills related to managing emotions, establishing and maintaining positive relationships, and responsible decision-making;

(6) positive behavior interventions and supports and positive youth development; and

(7) safe, supportive, and positive school climate, rather than safe and supportive school climate;

Deletes existing text of Subdivision (2) relating to mental health promotion; merges text of existing Subdivisions (3) and (4); and renames Subdivisions (3)–(9) as (2)–(7).

SECTION 5. Amends Section 161.325, Health and Safety Code, by adding Subsection (a-4) and amending Subsections (b) and (d), as follows:

(a-4) Defines "postvention" for purposes of this section.

(b) Requires the suicide prevention programs on the list to 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) makes no changes to this subdivision;

(2)–(3) makes nonsubstantive changes to these subdivisions; and

(4) assist students in returning to school following treatment of a mental health concern or suicide attempt.

(d) Requires, rather than authorizes, a school district to develop practices and procedures concerning each area listed in Subsection (a-1), including mental health promotion and intervention, substance abuse prevention and intervention, and suicide prevention, that:

(1)–(2) makes no changes to these subdivisions;

(3)–(4) makes nonsubstantive changes to these subdivisions; and

(5) include procedures:

(A) to support the return of a student to school following hospitalization or residential treatment for a mental health condition or substance abuse; and

(B) for suicide prevention, intervention, and postvention.

SECTION 6. Effective date: September 1, 2019.