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| BILL ANALYSIS |

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| C.S.H.B. 2954 |
| By: Thompson, Senfronia |
| Public Education |
| Committee Report (Substituted) |

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| **BACKGROUND AND PURPOSE** Prior to COVID-19, suicide was the second leading cause of death for children ages 10-14 in the United States and in Texas. Isolation and disruptions due to the pandemic have exacerbated concerns about proactively addressing mental health among students. Among youth, suicide rates generally increase with age, with the highest rates among high school-aged students. However, Texas must address suicide among students of all ages. It is increasingly important that elementary schools have access to resources that address mental health concerns in students, particularly in schools facing issues of suicidality on campus. C.S.H.B. 2954 seeks to provide additional support to school districts and charter schools that have been affected by incidents of suicide or that have a reasonable concern regarding the risk of suicide among elementary school students. C.S.H.B. 2954 creates a program for eligible districts and charter schools to provide additional public and private resources for school districts to access evidence-based materials addressing youth suicide prevention, intervention, or postvention that may be implemented by the district or school. |
| **CRIMINAL JUSTICE IMPACT**It is the committee's opinion that this bill does not expressly create a criminal offense, increase the punishment for an existing criminal offense or category of offenses, or change the eligibility of a person for community supervision, parole, or mandatory supervision. |
| **RULEMAKING AUTHORITY** It is the committee's opinion that rulemaking authority is expressly granted to the commissioner of education in SECTION 1 of this bill. |
| **ANALYSIS** C.S.H.B. 2954 amends the Education Code to require the Texas Education Agency (TEA), to the extent funds are appropriated for that purpose, to establish a suicide prevention, intervention, and postvention program in coordination with the Health and Human Services Commission (HHSC) that a public school district or open-enrollment charter school may implement at an elementary school campus if the district, charter school, or a campus of a district or charter school has experienced a suicide loss in the 2016-2017 school year or a subsequent school year or has a reasonable concern regarding the risk of suicide among elementary school students enrolled in the district or charter school based on:* students' exposure to traumatic events or experiences, including the loss of an educator or another student in the district; or
* increased rates of traumatic stress symptoms, including self-harm or incidents of bullying on a district or school campus.

TEA may prioritize for funding purposes districts or charter schools that have experienced suicide loss among their elementary school students enrolled in the 2016-2017 school year or a subsequent school year. A district or charter school that implements the program may prioritize campuses within the district or school to participate in the program based on the direct impact of student suicides on the campuses.C.S.H.B. 2954 sets out the following as required actions that an eligible district or charter school must take for each elementary school campus at which the program is implemented:* conduct a needs-based assessment of the campus to identify individual needs of each campus;
* coordinate with HHSC and a district or charter school that has implemented a comprehensive suicide safer early intervention and prevention system, a program through Project AWARE (Advancing Wellness and Resiliency in Education), or another similar primary prevention, intervention, and postvention program to provide school‑based suicide prevention best practices for each campus in the program;
* provide recommendations for research-based best practices for suicide prevention, intervention, and postvention policies;
* ensure the distributed informational materials are age-appropriate and evidence-based; and
* provide suicide prevention, intervention, postvention, and other support to each campus in the program, including by
* identifying the individual needs of the campus through the required assessment; and
* implementing research-based best practices for suicide prevention, intervention, and postvention by working with licensed mental health professionals, school staff, law enforcement officers, and social workers who regularly interact with students to prevent suicide among students enrolled at the campus.

The bill authorizes TEA to accept donations for purposes of the program from sources without a conflict of interest. TEA may not accept donations from an anonymous source. C.S.H.B. 2954 requires each district and charter school that implements the program to provide certain written notice to a parent or guardian of each student enrolled at such a campus in the program. A district or charter school that implements the program must develop certain practices and procedures concerning suicide prevention, intervention, and postvention, in addition to the policies and procedures on those subjects that otherwise must be developed under state law. The bill requires a participating district to include the additional practices and procedures in the annual student handbook and the district improvement plan. The bill authorizes any district or charter school that implements the program to take the following actions:* contract with a regional education service center for services; and
* request the assistance of public and private community-based mental health resources.

C.S.H.B. 2954 establishes the following with regard to the intent of its provisions: * there is no intent to interfere with the rights of parents or guardians and the decision‑making regarding the best interest of the child; and
* the prescribed practices and procedures are intended to notify a parent or guardian of a need for suicide prevention, intervention, or postvention so that the parent or guardian may take appropriate action.

The bill's provisions expressly do not authorize a district or charter school employee to recommend prescription medication for a student or to interfere with medical decisions to be made by the student's parent or guardian.C.S.H.B. 2954 requires the commissioner of education to adopt rules to administer the program. The bill's provisions expire September 1, 2025. C.S.H.B. 2954 applies beginning with the 2021-2022 school year.C.S.H.B. 2954 establishes that TEA is required to implement a provision of the bill only if the legislature appropriates money specifically for that purpose. If the legislature does not make such a specific appropriation, TEA may, but is not required to, implement a provision of the bill using other appropriations available for that purpose. |
| **EFFECTIVE DATE** On passage, or, if the bill does not receive the necessary vote, September 1, 2021. |
| **COMPARISON OF ORIGINAL AND SUBSTITUTE** |
| While C.S.H.B. 2954 may differ from the original in minor or nonsubstantive ways, the following summarizes the substantial differences between the introduced and committee substitute versions of the bill.The substitute expands the applicability of the bill's provisions to include an open-enrollment charter school.The substitute includes a provision requiring TEA to establish the program in coordination with HHSC. The substitute includes the following specifications with respect to the bill's provisions relating to program eligibility:* a district or charter school is eligible only if the suicide loss among enrolled elementary students was in the 2016-2017 school year or a subsequent school year; and
* the reasonable concern regarding the risk of suicide on an elementary school campus must be based on students' exposure to traumatic events or experiences, including the loss of an educator or another student in the district or increased rates of traumatic stress symptoms, including self‑harm or incidents of bullying on a district or school campus.

The substitute, as follows:* does not include the following provisions:
* a provision requiring TEA to make certain considerations as described in the Education Code that relate to the annually updated list of recommended best practice-based programs and research-based practices; and
* the provisions requiring TEA, for each elementary campus at which a program is implemented, to conduct eligibility assessments and develop a method for eligible districts to request the assistance of public and private community-based mental health resources; but
* includes the following provisions instead:
* a provision requiring the district or school at which the program is implemented to coordinate with HHSC and with a district or school that has implemented certain prevention, intervention, and postvention programs to provide school-based suicide prevention best practices for each campus in the program; and
* provisions authorizing any district or school that implements the program to contract with a regional education service center for services and request the assistance of public and private community-based mental health resources.

The substitute includes the following provisions: * a provision authorizing a district or charter school to prioritize campuses within the district or school to participate in the program based on the direct impact of student suicides on the campuses;
* provisions specifying that the mental health professionals that districts or schools in the program must work with are licensed mental health professionals and setting out a definition for "licensed mental health professional"; and
* a provision establishing that any requirement for TEA to implement the bill's provisions is contingent on legislative appropriation.
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