

By: Thompson of Harris, Hunter, Dutton,
Coleman, Allen, et al.

H.B. No. 2954

A BILL TO BE ENTITLED

AN ACT

relating to a suicide prevention, intervention, and postvention
program for certain public elementary schools.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

SECTION 1. Subchapter G, Chapter 38, Education Code, is
amended by adding Section 38.3515 to read as follows:

Sec. 38.3515. SUICIDE PREVENTION, INTERVENTION, AND
POSTVENTION PROGRAM. (a) In this section:

(1) "Licensed mental health professional" includes:

(A) a psychologist licensed to practice in this
state and designated as a health-service provider;

(B) a registered nurse with a master's or
doctoral degree in psychiatric nursing;

(C) an advanced practice registered nurse, as
defined by Section 301.152, Occupations Code, who holds a
nationally recognized board certification in psychiatric or mental
health nursing;

(D) a licensed clinical social worker, as defined
by Section 505.002, Occupations Code;

(E) a licensed professional counselor, as
defined by Section 503.002, Occupations Code;

(F) a licensed marriage and family therapist, as
defined by Section 502.002, Occupations Code;

(G) a licensed specialist in school psychology,

1 as defined by Section 501.002, Occupations Code; and

2 (H) a school counselor certified under
3 Subchapter B, Chapter 21.

4 (2) "Postvention" includes activities that promote
5 healing necessary to reduce the risk of suicide by a person affected
6 by the suicide of another.

7 (b) To the extent funds are appropriated to the agency for
8 that purpose, the agency, in coordination with the Health and Human
9 Services Commission, shall establish a suicide prevention,
10 intervention, and postvention program for optional implementation
11 at an elementary school campus of a school district or
12 open-enrollment charter school described by Subsection (c).

13 (c) A school district or open-enrollment charter school is
14 eligible to participate in the program established under this
15 section if the district or school or a campus of the district or
16 school has:

17 (1) experienced suicide loss among elementary school
18 students enrolled in the district or school in the 2016-2017 school
19 year or a subsequent school year; or

20 (2) a reasonable concern regarding the risk of suicide
21 among elementary school students enrolled in the district or school
22 based on:

23 (A) students' exposure to traumatic events or
24 experiences, including the loss of an educator or another student
25 in the district; or

26 (B) increased rates of traumatic stress
27 symptoms, including self-harm or incidents of bullying on a

1 district or school campus.

2 (d) The agency may prioritize for funding purposes school
3 districts or open-enrollment charter schools described by
4 Subsection (c)(1). A school district or open-enrollment charter
5 school that implements the program may prioritize campuses within
6 the district or school to participate in the program based on the
7 direct impact of student suicides on the campuses.

8 (e) For each elementary school campus at which the program
9 is implemented, the school district or open-enrollment charter
10 school shall:

11 (1) conduct a needs-based assessment to identify
12 individual needs of each campus in the program;

13 (2) coordinate with the Health and Human Services
14 Commission and a district or school that has implemented a
15 comprehensive Suicide Safer Early Intervention and Prevention
16 system, a program through Project AWARE (Advancing Wellness and
17 Resiliency in Education), or another similar primary prevention,
18 intervention, and postvention program to provide school-based
19 suicide prevention best practices for each campus in the program;

20 (3) provide recommendations for research-based best
21 practices for suicide prevention, intervention, and postvention
22 policies;

23 (4) ensure that informational materials distributed
24 by the district or school are age-appropriate and evidence-based;
25 and

26 (5) provide suicide prevention, intervention, and
27 postvention support to each campus in the program, including by:

1 (A) identifying the individual needs of the
2 campus through the assessment conducted under Subdivision (1); and

3 (B) implementing research-based best practices
4 for suicide prevention, intervention, and postvention by working
5 with licensed mental health professionals, teachers, nurses,
6 administrators, and other staff, as well as law enforcement
7 officers and social workers who regularly interact with students,
8 to prevent suicide among students enrolled at the campus.

9 (f) Each school district or open-enrollment charter school
10 that implements the program under this section shall provide
11 written notice to a parent or guardian of each student enrolled at a
12 campus in the program. The required written notice must include:

13 (1) current statewide information on suicide rates;

14 (2) evidence-based informational materials
15 identifying strategies to recognize the signs and symptoms of
16 possible suicidal ideation that are age-appropriate for children
17 who are four years of age or older;

18 (3) information about suicide prevention strategies
19 involving reducing access to lethal means of suicide for a student
20 at risk of suicide;

21 (4) a list of available school and community resources
22 to support students or community members who may be at risk for
23 suicide; and

24 (5) a statement of the right of the student's parent or
25 guardian to decline the student's participation in the program.

26 (g) In addition to the practices and procedures developed by
27 a school district or open-enrollment charter school under Section

1 38.351(i), a district or school that implements the program shall
2 develop practices and procedures concerning suicide prevention,
3 intervention, and postvention that:

4 (1) include a procedure for providing notice to a
5 parent or guardian of a student regarding a recommendation for
6 early mental health intervention for the student within a
7 reasonable amount of time after the identification of early warning
8 signs of risk for suicide, including:

9 (A) declining academic performance;

10 (B) depression;

11 (C) anxiety;

12 (D) isolation;

13 (E) unexplained changes in sleep or eating
14 habits; and

15 (F) destructive behavior toward self and others;

16 (2) include a procedure for providing notice of a
17 student identified as at risk of attempting suicide, including a
18 student who is or may be the victim of or who engages in bullying, to
19 a parent or guardian of the student within a reasonable amount of
20 time after the identification of early warning signs, including the
21 signs listed in Subdivision (1);

22 (3) designate at least one person to act as a liaison
23 officer in the district or school for the purposes of identifying
24 students in need of suicide prevention, intervention, and
25 postvention;

26 (4) provide information concerning available
27 counseling alternatives to parents and guardians of district or

1 school students to consider when a student is identified as
2 possibly in need of suicide prevention, intervention, and
3 postvention; and

4 (5) include procedures to support the return of a
5 student to regular school attendance following hospitalization or
6 residential treatment for a mental health condition or substance
7 abuse.

8 (h) The practices and procedures developed under Subsection
9 (g) must be included in:

10 (1) the annual student handbook; and

11 (2) the district improvement plan under Section
12 [11.252](#).

13 (i) Any school district or open-enrollment charter school
14 that implements the program may:

15 (1) contract with a regional education service center
16 for services; and

17 (2) request the assistance of public and private
18 community-based mental health resources.

19 (j) The agency:

20 (1) may accept donations for purposes of this section
21 from sources without a conflict of interest; and

22 (2) may not accept donations for purposes of this
23 section from an anonymous source.

24 (k) Nothing in this section is intended to interfere with
25 the rights of parents or guardians and the decision-making
26 regarding the best interest of the child. Practices and procedures
27 developed in accordance with this section are intended to notify a

1 parent or guardian of a need for suicide prevention, intervention,
2 or postvention so that a parent or guardian may take appropriate
3 action.

4 (l) Nothing in this section authorizes a school district or
5 open-enrollment charter school employee to recommend prescription
6 medication for a student or to interfere with medical decisions to
7 be made by the student's parent or guardian.

8 (m) The commissioner shall adopt rules to administer this
9 section.

10 (n) This section expires September 1, 2025.

11 SECTION 2. This Act applies beginning with the 2021-2022
12 school year.

13 SECTION 3. The Texas Education Agency is required to
14 implement a provision of this Act only if the legislature
15 appropriates money specifically for that purpose. If the
16 legislature does not appropriate money specifically for that
17 purpose, the Texas Education Agency may, but is not required to,
18 implement a provision of this Act using other appropriations
19 available for that purpose.

20 SECTION 4. This Act takes effect immediately if it receives
21 a vote of two-thirds of all the members elected to each house, as
22 provided by Section 39, Article III, Texas Constitution. If this
23 Act does not receive the vote necessary for immediate effect, this
24 Act takes effect September 1, 2021.