

BILL ANALYSIS

Senate Research Center

H.B. 18
By: Price et al. (Watson)
Education
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Engrossed

AUTHOR'S / SPONSOR'S STATEMENT OF INTENT

H.B. 18 amends current law 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.

RULEMAKING AUTHORITY

Rulemaking authority previously granted to the State Board of Education on behalf of the State Board for Educator Certification is modified in SECTION 1.04 (Section 21.054, Education Code) of this bill.

SECTION BY SECTION ANALYSIS

ARTICLE 1. MENTAL HEALTH OF STUDENTS IN PUBLIC SCHOOLS

SECTION 1.01. Amends Section 5.001, Education Code, by amending Subdivision (5-a) and adding Subdivision (9), as follows:

(5-a) Redefines "mental health condition" to mean a persistent or recurrent pattern of thoughts, feelings, or behaviors, rather than an illness, disease, or disorder, other than epilepsy, dementia, substance abuse, or intellectual disability, that:

(A) constitutes a mental illness, disease, or disorder, other than or in addition to epilepsy, substance abuse, or an intellectual disability;

(B) impairs a person's social, emotional, or educational functioning and increases the risk of developing a condition described by Paragraph (A), rather than substantially impairs a person's thought, perception of reality, emotional process, or judgment. Creates this paragraph from existing text and deletes existing Paragraph (B) (relating to grossly impairing behavior as demonstrated by recent disturbed behavior).

(9) Defines "substance abuse."

SECTION 1.02. Amends Section 11.252(a), Education Code, as follows:

(a) Requires the district improvement plan to include provisions for:

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

(3) strategies for improvement of student performance that include:

(A) makes no changes to this subdivision;

(B) evidence-based practices that address, rather than methods for addressing, the needs of students for special programs, including:

(i) suicide prevention programs, in accordance with Subchapter G, Chapter 38 (Health and Safety), which include a parental or guardian notification procedure, rather than suicide prevention programs, in accordance with Subchapter O-1 (Mental Health, Substance Abuse, and Youth Suicide), Chapter 161, Health and Safety Code, which includes a parental or guardian notification procedure; and

(ii)-(iv) makes no changes to these subparagraphs;

(C)-(D) makes no changes to these subdivisions;

(E) positive behavior interventions and support, including interventions and support that integrate best practices on grief-informed and trauma-informed care, rather than discipline management;

(F) makes no changes to this paragraph;

(G)-(H) makes nonsubstantive changes to these paragraphs; and

(I) implementation of a comprehensive school counseling program under Section 33.005 (Developmental Guidance and Counseling Programs);

(4) strategies for providing to elementary school, middle school, junior high school, and high school students, rather than middle school, junior high school, and high school students, those students' teachers and school counselors, and those students' parents information about:

(A) higher education admissions and financial aid opportunities, including state financial aid opportunities such as the TEXAS grant program and the Teach for Texas grant program established under Chapter 56 (Student Financial Assistance);

(B) transfers existing text to Paragraph (A); and

(C)-(D) redesignates these paragraphs as Paragraphs (B)-(C); and

(5)-(9) makes no changes to these subdivisions.

SECTION 1.03. Amends Section 21.044(c-1), Education Code, as follows:

(c-1) Creates Subdivision (1)(A) and (B) from existing text and makes nonsubstantive changes. Requires the instruction required to:

(1) be provided through:

(A) a program selected from the list of recommended best practice-based programs and research-based practices established under Section 38.351, rather than Section 161.325 (Mental Health Promotion and Intervention, Substance Abuse Prevention and Intervention, and Suicide Prevention); or

(B) a course offered by any accredited public or private postsecondary educational institution as part of a degree program; and

(2) include effective strategies, including de-escalation techniques and positive behavioral interventions and supports, for teaching and intervening with students with mental health conditions or who engage in substance abuse, rather than include effective strategies for teaching and intervening with students with mental

or emotional disorders, including de-escalation techniques and positive behavioral interventions and supports.

SECTION 1.04. Amends Section 21.054, Education Code, by amending Subsections (d), (d-2), (e), (e-2), (f), and (g) and adding Subsection (d-1), as follows:

(d) Requires continuing education requirements for a classroom teacher to provide that at least, rather than not more than, 25 percent of the training required every five years include instruction regarding:

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

(4) educating diverse student populations, including:

(A) students who are eligible to participate in special education programs under Subchapter A (Special Education Program), Chapter 29, rather than students with disabilities, including mental health disorders;

(B) students who are eligible to receive educational services required under Section 504, Rehabilitation Act of 1973 (29 U.S.C. Section 794);

(C) students with mental health conditions or who engage in substance abuse;

(D) students with intellectual or developmental disabilities;

(E) creates this paragraph from existing text and makes no further changes;

(F)-(G) redesignates Paragraphs (C)-(D) as these paragraphs and makes a nonsubstantive change;

(5) makes nonsubstantive changes to this subdivision; and

(6) how mental health conditions, including grief and trauma, affect student learning and behavior and how evidence-based, grief-informed, and trauma-informed strategies support the academic success of students affected by grief and trauma, rather than authorizing continuing education requirements for a classroom teacher to include instruction regarding how mental health conditions, including grief and trauma, affect student learning and behavior and how evidence-based, grief-informed, and trauma-informed strategies support the academic success of students affected by grief and trauma. Deletes the designation of existing Subdivision (d-2).

(d-1) Authorizes the instruction required under Subsection (d) to include two or more listed topics together.

(d-2) Requires the instruction required under Subsection (d)(6) to be:

(1) based on relevant best practice-based programs and research-based practices; and

(2) approved by the commissioner of education (commissioner), in consultation with the Health and Human Services Commission (HHSC).

(e) Requires continuing education requirements for a principal to provide that at least, rather than not more than, 25 percent of the training required every five years include instruction regarding:

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

(4) effective implementation of a comprehensive school counseling program under Section 33.005;

(5) mental health programs addressing a mental health condition;

(6) educating diverse student populations, including:

(A) students who are eligible to participate in special education programs under Subchapter A, Chapter 29, rather than students with disabilities, including mental health disorders;

(B) students with intellectual or developmental disabilities;

(C) students who are eligible to receive educational services required under Section 504, Rehabilitation Act of 1973 (29 U.S.C. Section 794);

(D) students with mental health conditions or who engage in substance abuse;

(E) creates this paragraph from existing text and makes no further changes; and

(F)-(G) redesignates existing Paragraphs (C)-(D) as these paragraphs and makes a nonsubstantive change;

(7) redesignates existing Subdivision (5) as this subdivision and makes nonsubstantive changes; and

(8) how mental health conditions, including grief and trauma, affect student learning and behavior and how evidence-based, grief-informed, and trauma-informed strategies support the academic success of students affected by grief and trauma, rather than authorizing continuing education requirements for a principal to include instruction regarding how grief and trauma affect student learning and behavior and how evidence-based, grief-informed, and trauma-informed strategies support the academic success of students affected by grief and trauma. Deletes the designation of existing Subdivision (e-2).

(e-2) Requires the instruction required under Subsection (e)(8) to be:

(1) based on relevant best practice-based programs and research-based practices; and

(2) approved by the commissioner, in consultation with HHSC.

(f) Requires continuing education requirements for a counselor to provide that at least, rather than not more than, 25 percent of training required every five years include instruction regarding:

(1) makes no changes to these subdivisions;

(2) makes a nonsubstantive change to this subdivision;

(3) informing students concerning:

(A) makes no changes to this paragraph; and

(B) makes a nonsubstantive change to this paragraph;

(4) counseling students concerning mental health conditions and substance abuse, including through the use of grief-informed and trauma-informed interventions and crisis management and suicide prevention strategies; and

(5) effective implementation of a comprehensive school counseling program under Section 33.005.

(g) Requires the State Board for Educator Certification (SBEC) to adopt rules that allow an educator to fulfill continuing education requirements by participating in an evidence-based mental health first aid training program or an evidence-based grief-informed and trauma-informed care program, rather than requiring SBEC to adopt rules that allow an educator to fulfill up to 12 hours of continuing education by participating in a mental health first aid training program offered by a local mental health authority under Section 1001.203 (Grants For Training Certain University Employees, School District Employees, and School Resource Officers in Mental Health First Aid), Health and Safety Code. Requires the rules adopted under this subsection to allow an educator to complete a program described by this subsection and receive credit toward continuing education requirements for twice the number of hours of instruction provided under that program, not to exceed 16 hours. Requires the program to be offered through a classroom instruction format that requires in-person attendance. Deletes existing text providing that the number of hours of continuing education an educator is authorized to fulfill under this subsection is prohibited from exceeding the number of hours the educator actually spends participating in a mental health first aid training program.

SECTION 1.05. Amends Sections 21.451(d) and (d-1), Education Code, as follows:

(d) Provides that the staff development:

(1) may include training in:

(A) makes no changes to this paragraph;

(B) positive behavior intervention and support strategies, including classroom management, district discipline policies, and the student code of conduct adopted under Chapter 37 (Discipline; Law and Order), rather than conflict resolution, discipline strategies, including classroom management, district discipline policies, and the student code of conduct adopted under Section 37.001 (Student Code of Conduct) and Chapter 37 preventing, identifying, responding to, and reporting incidents of bullying; and

(C) redesignates Paragraph (E) as this paragraph;

(2) subject to Subsection (e) (relating to requiring the district to provide the training to certain educators in certain circumstances) and to Section 25.3541 (Appraisal and Professional Development System For Principals) and rules adopted under that section, is required to include training that is evidence-based, as defined by Section 8101, Every Student Succeeds Act (20 U.S.C. Section 7801), and that meets certain criteria, including that it relates to instruction of students with disabilities who also have other intellectual or mental health conditions; and

(3) is required to include training, rather than suicide prevention training, on:

(A) suicide prevention;

(B) recognizing signs of mental health conditions and substance abuse;

(C) strategies for establishing and maintaining positive relationships among students, including conflict resolution;

(D) how grief and trauma affect student learning and behavior and how evidence-based, grief-informed, and trauma-informed strategies support the academic success of students affected by grief and trauma; and

(E) preventing, identifying, responding to, and reporting incidents of bullying.

(d-1) Creates Subdivision (1) and Paragraphs (A) and (B) of that subdivision from existing text and makes nonsubstantive changes. Provides that the training required by Subsection (d)(3):

(1) is required to:

(i) and (ii) redesignates existing paragraphs (A) and (B) as these subparagraphs and makes a nonsubstantive change; and

(B) use a best practice-based program recommended by HHSC in coordination with the Texas Education Agency (TEA) under Section 38.351, rather than requiring the suicide prevention training required by Subsection (d)(3) to use a best practice-based program recommended by the Department of State Health Services (DSHS) in coordination with TEA under Section 161.325, Health and Safety Code; and

(2) is authorized to include two or more listed topics together. Deletes the designation of existing Subdivision (d-1).

SECTION 1.06. Amends Section 21.462, Education Code, as follows:

Sec. 21.462. New heading: RESOURCES REGARDING STUDENTS WITH MENTAL HEALTH OR SUBSTANCE ABUSE CONDITIONS. Requires TEA, in coordination with HHSC, to establish and maintain an Internet website to provide resources for school district or open-enrollment charter school employees regarding working with students with mental health conditions or who engage in substance abuse.

SECTION 1.07. Amends Sections 28.002(a) and (r), Education Code, as follows:

(a) Creates Subdivision (2)(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;

(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; and

(ii) mental health, including instruction about mental health conditions, substance abuse, skills to manage emotions, establishing and maintaining positive relationships, and responsible decision-making; and

(C)-(H) makes no changes to these paragraphs.

(r) Requires the State Board of Education (SBOE), in adopting the essential knowledge and skills for the health curriculum under Subsection (a)(2)(B), to adopt essential knowledge and skills that address the science, risk factors, causes, dangers, consequences, signs, symptoms, and treatment of substance abuse, including the use of illegal drugs, abuse of prescription drugs, abuse of alcohol such as by binge drinking or other excessive drinking resulting in alcohol poisoning, inhaling solvents, and other forms of substance abuse, rather than requiring SBOE to adopt essential knowledge and skills that address the dangers, causes, consequences, signs, symptoms, and treatment of binge drinking and alcohol poisoning. Requires TEA to compile a list of evidence-based substance abuse, rather than alcohol, awareness programs from which a school district is required to choose a program to use in the district's middle school, junior high school, and high school health curriculum. Define "evidence-based substance abuse awareness program" to mean a program, practice, or strategy that has been proven to effectively prevent substance abuse among students, as determined by evaluations that are evidence-based, rather than defining "evidence-based alcohol awareness program" to mean a program, practice, or strategy that has been proven to effectively prevent or delay alcohol use among students, as determined by evaluations that use valid and reliable measures and that are published in peer-reviewed journals.

SECTION 1.08. Amends Sections 28.004(c), (d), and (k), Education Code, as follows:

(c) Creates Subdivision (1)(A) from existing text. Provides that the local school health advisory council's duties include recommending:

(1) the number of hours of instruction to be provided in:

(A) health education in kindergarten through grade eight; and

(B) if the school district requires health education for high school graduation, health education, including physical health education and mental health education, in grades 9 through 12;

(2) policies, procedures, strategies, and curriculum appropriate for specific grade levels designed to prevent physical health concerns, including obesity, cardiovascular disease, Type 2 diabetes, and mental health concerns through coordination of:

(A) health education, which is required to address physical health concerns and mental health concerns to ensure the integration of physical health education and mental health education;

(B)-(D) makes no changes to these paragraphs;

(E) instruction on substance abuse prevention, rather than instruction to prevent the use of e-cigarettes, as defined by Section 161.081 (Definitions), Health and Safety Code, and tobacco;

(F) school health services, including mental health services;

(G) a comprehensive school counseling program under Section 33.005, rather than counseling and guidance services; and

(H)-(I) makes no changes to these paragraphs;

(3) makes no changes to this subdivision;

(4) strategies for integrating the curriculum components specified by Subdivision (2) with the following elements in a coordinated school health program for the district:

(A) school health services, including physical health services and mental health services, if provided at a campus by the district or by a third party under a contract with the district;

(B) a comprehensive school counseling program under Section 33.005 rather than counseling and guidance services; and

(C)-(D) makes no changes to these paragraphs; and

(5) makes no changes to this subdivision.

(d) Authorizes the board of trustees to appoint to the local school health advisory council one or more persons from each of the following groups or a representative from a group other than a group specified under this subsection:

(1) classroom teachers employed by the district, rather than public school teachers;

(2) school counselors certified under Subchapter B (Certification of Educators), Chapter 21, employed by the district;

(3) school administrators employed by the district, rather than public school administrators;

(4) creates Subdivision (3) from existing text and redesignates Subdivisions (3)-(10) as Subdivisions (4)-(11);

(5) health care professionals licensed or certified to practice in this state, including medical or mental health professionals; and

(6)-(11) makes no further changes to these subdivisions.

(k) Requires a school district to publish in the student handbook and post on the district's Internet website, if the district has an Internet website:

(1) a statement of the policies and procedures adopted to promote the physical health and mental health of students, the physical health and mental health resources available at each campus, contact information for the nearest providers of essential public health services under Chapter 121 (Local Public Health Reorganization Act), Health and Safety Code, and the contact information for the nearest local mental health authority;

(2) creates this subdivision from existing text and renumbers the following subdivisions accordingly;

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

(5) for each campus in the district, a statement of whether the campus has a full-time nurse or full-time school counselor.

SECTION 1.09. Amends Section 30.002(b), Education Code, as follows:

(b) Requires TEA to:

(1)-(4) makes no changes to these subdivisions; and

(5) maintain an effective liaison between special education programs provided for children with visual impairments by school districts and related initiatives of HHSC, rather than the Department of Assistive and Rehabilitative Services Division for Blind Services, DSHS Mental Health and Substance Abuse Division,

the Texas Workforce Commission (TWC), rather than the Texas School for the Blind and Visually Impaired (TSBVI), and other related programs, agencies, or facilities as appropriate.

SECTION 1.10. Amends Section 33.004(b), Education Code, as follows:

(b) Requires each school, before implementing a comprehensive school counseling program under Section 33.005, rather than a comprehensive and developmental guidance and counseling program, to annually conduct a preview of the program for parents and guardians.

SECTION 1.11. Amends Section 33.005, Education Code, as follows:

Sec. 33.005. New heading: **COMPREHENSIVE SCHOOL COUNSELING PROGRAMS**. (a) Creates this subsection from existing text. Requires a school counselor to work with the school faculty and staff, students, parents, and the community to plan, implement, and evaluate a comprehensive school counseling program that conforms to the most recent edition of the Texas Model for Comprehensive School Counseling Programs developed by the Texas Counseling Association.

(b) Creates this subsection from existing text and makes no further changes.

SECTION 1.12. Amends Subchapter A, Chapter 38, Education Code, by adding Section 38.0101, as follows:

Sec. 38.0101. **AUTHORITY TO EMPLOY OR CONTRACT WITH NONPHYSICIAN MENTAL HEALTH PROFESSIONAL**. (a) Authorizes a school district to employ or contract with one or more nonphysician mental health professionals.

(b) Defines "nonphysician mental health professional" for purposes of this section.

SECTION 1.13. Amends Section 38.013(a), Education Code, as follows:

(a) Requires TEA to make available to each school district one or more coordinated health programs in elementary school, middle school, and junior high school, rather than requiring TEA to make available to each school district one or more coordinated health programs designed to prevent obesity, cardiovascular disease, oral diseases, and Type 2 diabetes in elementary school, middle school, and junior high school students. Requires each program to provide for coordinating education and services related to:

(1) physical health education, including programs designed to prevent obesity, cardiovascular disease, oral diseases, and Type 2 diabetes and programs designed to promote the role of proper nutrition, rather than health education, including oral health education;

(2) mental health education, including education about mental health conditions, mental health well-being, skills to manage emotions, establishing and maintaining positive relationships, and responsible decision-making;

(3) substance abuse education, including education about alcohol abuse, prescription drug abuse, and abuse of other controlled substances;

(4) creates this subdivision from existing text and makes a nonsubstantive change; and

(5) redesignates Subdivision (4) as this subdivision and deletes existing Subdivision (3) relating to nutrition services.

SECTION 1.14. Amends Sections 38.016(a) and (c), Education Code, as follows:

(a) Defines "nonphysician mental health professional," "parents," and "psychotropic drug."

(c) Provides that Subsection (b) does not:

(1) makes a nonsubstantive change to this subdivision;

(2) prohibit a school district employee, or an employee of an entity with which the district contracts, who is a registered nurse, advanced nurse practitioner, physician, or nonphysician mental health professional licensed or certified to practice in this state from recommending that a child be evaluated by a physician or nonphysician mental health professional, rather than prohibit a school district employee who is a registered nurse, advanced nurse practitioner, physician, or certified or appropriately credentialed mental health professional from recommending that a child be evaluated by an appropriate medical practitioner; or

(3) makes no changes to this subdivision.

SECTION 1.15. Amends Section 38.051(b), Education Code, as follows:

(b) Authorizes a school district or open-enrollment charter school, on the recommendation of an advisory council established under Section 38.058 (Health Education and Health Care Advisory Council) or on the initiative of the board of trustees or the governing body of an open-enrollment charter school, rather than authorizing a school district, on the recommendation of an advisory council established under Section 38.038, to establish a school-based health center at one or more campuses to meet the health care needs of students and their families.

SECTION 1.16. Amends Section 38.054, Education Code, as follows:

Sec. 38.054. CATEGORIES OF SERVICES. Provides that permissible categories of services are:

(1) makes no changes to this subdivision;

(2) physical health care, including immunizations, rather than health care, including immunizations;

(3) makes no changes to this subdivision;

(4)–(5) makes nonsubstantive changes to these subdivisions;

(6) treatment for mental health conditions; and

(7) treatment for substance abuse.

SECTION 1.17. Amends Section 38.057(b), Education Code, as follows:

(b) Requires the staff of a school-based health center, if it is determined that a student is in need of a referral for physical health services or mental health services, rather than mental health services, to notify the person whose consent is required under Section 38.053 (Parental Consent Required) verbally and in writing of the basis for the referral. Prohibits the referral from being provided unless the person provides written consent for the type of service to be provided and provides specific written consent for each treatment occasion or for a course of treatment that includes multiple treatment occasions of the same type of service.

SECTION 1.18. Amends Section 38.058, Education Code, as follows:

Sec. 38.058. HEALTH EDUCATION AND HEALTH CARE ADVISORY COUNCIL. (a) Authorizes the board of trustees of a school district or the governing body of an open-enrollment charter school, rather than the board of trustees of a school district to establish and appoint members to a local health education and health care advisory council to make recommendations to the district or school on the establishment of school-based health centers and to assist the district or school in ensuring that local community values are reflected in the operation of each center and in the provision of health education. Makes conforming changes.

(b) Makes conforming changes. Requires a majority of the members of the council to be parents of students enrolled in the school district or open-enrollment charter school. Requires the board of trustees or governing body, in addition to the appointees who are parents of students, to also appoint at least one person from each of the following groups:

(1) classroom teachers, rather than teachers;

(2) makes no changes to this subdivision;

(3) school counselors;

(4) health care professionals licensed or certified to practice in this state, rather than licensed health care professionals;

(5)–(9) creates Subdivision (4) from existing text, redesignates existing Subdivisions (4)–(8) as these subdivisions, and makes no conforming changes.

SECTION 1.19. Amends Subchapter B, Chapter 38, Education Code, by adding Section 38.0591, as follows:

Sec. 38.0591. ACCESS TO MENTAL HEALTH SERVICES. Requires TEA, in cooperation with HHSC, to develop guidelines for school districts regarding:

(1) partnering with a local mental health authority and with community or other private mental health services providers and substance abuse services providers to increase student access to mental health services; and

(2) obtaining mental health services through the medical assistance program under Chapter 32 (Medical Assistance Program), Human Resources Code.

SECTION 1.20. Amends Section 38.060(c), Education Code, to require the school district or open-enrollment charter school, rather than the health education and health code advisory council, to keep a record of efforts made to coordinate with existing providers.

SECTION 1.21. Transfers Subchapter O-1, Chapter 161, Health and Safety Code, as amended by Chapter 522 (S.B. 179) and Chapter 714 (H.B. 4056), Acts of the 85th Legislature, Regular Session, 2017, to Chapter 38, Education Code, redesignates it as Subchapter G, Chapter 38, Education Code, reenacts it, and amends it, as follows:

SUBCHAPTER G. MENTAL HEALTH, SUBSTANCE ABUSE, AND YOUTH SUICIDE

Sec. 38.351. MENTAL HEALTH PROMOTION AND INTERVENTION, SUBSTANCE ABUSE PREVENTION AND INTERVENTION, AND SUICIDE PREVENTION. (a) Requires TEA, in coordination with HHSC and regional education service centers, to provide and annually update a list of recommended best practice-based programs and research-based practices in the areas specified under Subsection (c) for implementation in public elementary, junior high, middle, and high schools within the

general education setting, rather than requiring DSHS, in coordination with TEA and regional education service centers, to provide and annually update a list of recommended best practice-based programs and research-based practices in the areas specified under Subsection (a-1) for implementation in public elementary, junior high, middle, and high schools within the general education setting.

(b) Creates this subsection from existing text. Authorizes each school district to select from the list provided under Subsection (a) a program or programs appropriate for implementation in the district.

(c) Redesignates Subsection (a-1) as this subsection and makes nonsubstantive changes throughout. Requires the list provided under Subsection (a) to include programs and practices in the following areas:

(1) early mental health prevention and intervention;

(2) deletes existing text referring to mental health promotion;

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

(4) redesignates existing Subdivision (5) as this subdivision, deletes existing text referring to substance abuse intervention, and includes suicide prevention, intervention, and postvention, rather than suicide prevention;

(5) deletes Subdivision (6) and existing text relating to trauma-informed practices and creates this subdivision from existing text;

(6) deletes Subdivision (7) and existing text relating to building certain skills, creates this subdivision from existing text, and makes a nonsubstantive change;

(7) redesignates existing Subdivision (8) as this subdivision and includes positive behavior interventions and supports, rather than supports;

(8) positive youth development, rather than positive behavior interventions and supports and positive youth development; and

(9) safe, supportive, and positive school climate, rather than safe and supportive social climate.

(d) Creates this subsection from existing text and deletes Subsection (a-2) and the designation of Subsection (a-3), and existing text relating to requiring DSHS, TEA, and each regional education service center to make the list easily accessible on their websites. Defines "school climate" for purposes of Subsection (c), rather than Subsection (a-1).

(e) Redesignates Subsection (b) as this subsection. Requires the suicide prevention programs on the list provided under Subsection (a) to include components that provide for training school 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 attempting, rather than committing, suicide, including students who are or may be the victims of or who engage in bullying;

(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.

(f) Redesignates existing Subsection (c) as this subsection. Requires TEA and HHSC, rather than DSHS and TEA, in developing the list of best practice-based programs and research-based practices, to consider certain existing suicide prevention methods and courses.

(g) Redesignates existing Subsection (c-1) as this subsection. Requires each school district, except as otherwise provided by this subsection, to provide training described in the components set forth under Subsection (e), rather than Subsection (b), for teachers, school counselors, principals, and all other appropriate personnel, rather than for teachers, counselors, principals, and all other appropriate personnel.

(h) Redesignates existing Subsection (c-2) as this subsection. Provides that, if a school district provides the training under Subsection (g), rather than Subsection (c-1), a school district employee described under that subsection is required to participate in the training at least one time and the school district is required to maintain records that include the name of each district employee who participated in the training.

(i) Redesignates existing Subsection (d) as this subsection. Requires a school district to develop practices and procedures concerning each area listed in Subsection (c), rather than Subsection (a-1), including mental health promotion and intervention, substance abuse prevention and intervention, and suicide prevention, that:

(1) include 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 (e)(2), rather than Subsection (b)(2);

(2) include a procedure for providing notice of a student identified as at risk of attempting suicide 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 (e)(2), rather than include a procedure for providing notice of a student identified as at risk of committing suicide 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);

(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.

(j) Redesignates existing Subsection (e) as this subsection. Provides that the practices and procedures developed under Subsection (i), rather than Subsection (d):

(1) are authorized to address multiple areas listed in Subsection (c) together; and

(2) are required to 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.

(k) Redesignates existing Subsection (f) as this subsection. Requires the practices and procedures developed under Subsection (i), rather than Subsection (d), to be included in certain publications. Makes a nonsubstantive change.

(l) Requires TEA to develop and make available to school districts guiding principles on the coordination of programs and practices in areas listed under Subsection (c).

(m) Redesignates existing Subsection (g) as this subsection. Provides that TEA, HHSC, and each regional education service center are, rather than DSHS is, authorized to accept certain donations and prohibited from accepting certain other donations. Makes nonsubstantive changes.

(n) Redesignates existing Subsection (i) as this subsection and makes no further changes.

(o) Defines "postvention" for purposes of this section.

Sec. 38.352. IMMUNITY. Makes no further changes to this section.

ARTICLE 2. MENTAL HEALTH FIRST AID PROGRAM TRAINING AND REPORTING

SECTION 2.01. Amends Section 1001.205, Health and Safety Code, as follows:

Sec. 1001.205. REPORTS. (a) Requires a local mental health authority, not later than September 30 of each year, to provide to DSHS the number of:

(1) employees and contractors of the authority who were trained as mental health first aid trainers under Section 1001.202 (Grants For Training of Mental Health First Aid Trainers) during the preceding fiscal year, the number of trainers who left the program for any reason during the preceding fiscal year, and the number of active trainers;

(2) university employees, school district employees, and school resource officers who completed a mental health first aid training program offered by the authority under Section 1001.203 (Grants For Training Certain University Employees, School District Employees, and School Resource Officers in Mental Health First Aid) during the preceding fiscal year categorized by local mental health authority region, university or school district, as applicable, and category of personnel; and

(3) makes no changes to this subdivision.

(b) Makes nonsubstantive changes throughout. Requires DSHS, not later than December 1 of each year, to compile the information submitted by local mental health authorities as required by Subsection (a) and submit a report to the legislature containing:

(1) the number of authority employees and contractors trained as mental health first aid trainers during the preceding fiscal year, the number of trainers who left the program for any reason during the preceding fiscal year, and the number of active trainers;

(2) the number of university employees, school district employees, and school resource officers who completed a mental health first aid training

program provided by an authority during the preceding fiscal year categorized by local mental health authority region, university or school district, as applicable, and category of personnel;

(3) the number of individuals who are not university employees, school district employees, or school resource officers who completed a mental health first aid training program provided by an authority during the preceding fiscal year; and

(4) a detailed accounting of expenditures of money appropriated for the purpose of implementing this subchapter (Mental Health First Aid Training).

(c) Requires DSHS to develop and provide to local mental health authorities a form to be used for the reporting of information required under Subsection (a), including the reporting of each category of personnel described by that subsection.

SECTION 2.02 Amends Subchapter H, Chapter 1001, Health and Safety Code, by adding Section 1001.207, as follows:

Sec. 1001.207. PROGRAM PROMOTION. (a) Requires HHSC to make available on its official Internet website information about the mental health first aid training program for the purpose of promoting public awareness of the program. Provides that an electronic link to an outside source of information is not sufficient.

(b) Requires TEA to make available on its official Internet website information about the mental health first aid training program for the purpose of promoting public awareness of the program. Provides that an electronic link to an outside source of information is not sufficient.

ARTICLE 3. CONFORMING AMENDMENTS

SECTION 3.01. Amends Section 74.151(e), Civil Practice and Remedies Code, as follows:

(e) Provides that this subsection does not apply to liability of a school district or district school officer or employee arising from an act or omission under a program or practice or procedure developed under Subchapter G, Chapter 38, Education Code, other than liability arising from willful or intentional misconduct, rather than under a program or policy or procedure adopted under Subchapter O-1, Chapter 161, Health and Safety Code, other than liability arising from willful or intentional misconduct.

SECTION 3.02. Amends Section 38.0141(a), Education Code, as follows:

(a) Requires each school district to provide to TEA information as required by the commissioner, including statistics and data, relating to student health and physical activity and information described by Sections 28.004(k)(2), (3), and (4), rather than Section 28.004(k), presented in a form determined by the commissioner.

ARTICLE 4. REPEALER; TRANSITION; EFFECTIVE DATE

SECTION 4.01. Repealer: 21.463 (Resources For Teachers of Students With Special Health Needs), Education Code; and

Repealer: Section 28.002(w) (relating to requiring SBEC to include certain essential knowledge and skills in an enrichment curriculum and defining "evidence-based prescription drug misuse awareness program").

SECTION 4.02. (a) Provides that, not later than May 1, 2020:

(1) SBEC is required to propose rules under Section 21.054 (Continuing Education), Education Code, to comply with the changes in law made to that section by this Act; and

(2) TEA, in cooperation with HHSC, is required to develop the guidelines required by Section 38.0591, Education Code, as added by this Act.

(b) Requires TEA, in coordination with HHSC and regional education service centers, not later than August 1, 2020, to provide a list of recommended best practice-based programs as required by Section 38.351, Education Code, as transferred, redesignated, reenacted, and amended by this Act.

SECTION 4.03. Provides that 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 2020–2021 school year.

SECTION 4.04. (a) Makes application of Section 1001.205(a), Health and Safety Code, as amended by this Act, prospective to December 31, 2019.

(b) Makes application of Section 1001.205(b), Health and Safety Code, as amended by this Act, prospective to March 1, 2020.

(c) Requires HHSC, not later than May 1, 2020, to develop and make available the form required under Section 1001.205(c), Health and Safety Code, as added by this Act.

SECTION 4.05. Requires HHSC and TEA, not later than March 1, 2020, to update their Internet websites to include the information required by Section 1001.207, Health and Safety Code, as added by this Act.

SECTION 4.06. Effective date: December 1, 2019.