AMENDED IN SENATE JUNE 24, 2015 AMENDED IN ASSEMBLY MAY 28, 2015 AMENDED IN ASSEMBLY MAY 6, 2015 AMENDED IN ASSEMBLY APRIL 6, 2015

CALIFORNIA LEGISLATURE—2015–16 REGULAR SESSION

ASSEMBLY BILL

No. 580

Introduced by Assembly Member O'Donnell

February 24, 2015

An act to add Section 33319.6 to the Education Code, relating to pupil health.

LEGISLATIVE COUNSEL'S DIGEST

AB 580, as amended, O'Donnell. Pupil mental health:—early identification and referral: model referral-protocols.

Existing law provides that school districts and county offices of education are responsible for the overall development of a comprehensive school safety plan for each of their constituent schools, and encourages school safety plans to include clear guidelines for the roles and responsibilities of certain parties with school-related health and safety responsibilities, as specified.

This bill would require the State Department of Education—and a county office of education designated by the department to jointly develop—a model referral—protocol, protocols, as provided, for addressing pupil mental health concerns. The bill would require the department and designated county office of education to consult with county offices of education and school districts that participated as regional leaders in a statewide pupil mental health initiative supported by the California

AB 580 — 2 —

Mental Health Services Authority, to be selected jointly by the department and designated county office of education. various entities in developing the protocols, including current classroom teachers and administrators. The bill would require the department to post the model referral protocols on its Internet Web site. The bill would make these provisions contingent upon funds being appropriated for its purpose in the annual Budget Act or other legislation, or state, federal, or private funds being allocated for this purpose. The bill would also state various findings and declarations of the Legislature relating to pupil mental health.

Vote: majority. Appropriation: no. Fiscal committee: yes. State-mandated local program: no.

The people of the State of California do enact as follows:

- 1 SECTION 1. (a) The Legislature finds and declares all of the 2 following:
 - (1) Research points to a strong connection between mental wellness and academic achievement.
 - (2) Research demonstrates that early detection and treatment of mental illness improves attendance, behavior, and academic achievement.
 - (3) It is estimated that 20 percent of children have mental health issues, 80 percent of whom are estimated to be undiagnosed and untreated. The lack of attention to a child's mental health has significant effects on his or her school achievement and life outcomes.
 - (4) Mental health challenges disproportionately impact pupils who face stressors such as violence, trauma, and poverty.
 - (5) California's educators report their lack of preparedness in addressing pupil mental health challenges as a major barrier to instruction. Most educators and staff lack training to identify pupils who may be in need of support and to make referrals, as appropriate, to help pupils overcome and manage mental health issues and succeed in school.
 - (6) The State Department of Education has identified inadequate service referral and inconsistent pupil mental health policies as major factors contributing to pupils' lack of access to support for mental health concerns.
- 25 (6)

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-3-**AB 580**

1 (7) Several initiatives are underway to improve the early 2 identification and referral of pupils for help with mental health 3 challenges. These include the California County Superintendents 4 Educational Services Association's K-12 Student Mental Health 5 Initiative, funded by the California Mental Health Services 6 Authority; the federally funded Now is the Time Advancing 7 Wellness and Resilience in Education (AWARE) State Educational 8 Agency grant program Project Cal-Well administered by the State Department of Education; Training Educators through Recognition 10 and Identification Strategies (TETRIS); the Eliminating Barriers 11 to Learning (EBL) project administered by the State Department 12 of Education and funded by the California Mental Health Services 13 Authority; and the Student Mental Health Policy Workgroup 14 established by the Superintendent of Public Instruction and the 15 California Mental Health Services Authority. 16

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- (8) In spite of these efforts, no model referral protocol exists to guide schools and local educational agencies in appropriate and timely intervention for pupil mental health concerns.
- (9) The State Department of Education, through its Project Cal-Well and its Student Mental Health Policy Workgroup, is well positioned to provide state leadership and guidance to local educational agencies so that they are better able to address pupil mental health concerns.
- (b) It is therefore the intent of the Legislature to direct the development of a model, evidence-based referral protocols for addressing pupil mental health concerns that may be voluntarily used by schoolsites, school districts, county offices of education, charter schools, and teacher and administrator preparation programs.
- SEC. 2. Section 33319.6 is added to the Education Code, to read:
- 33319.6. (a) For purposes of this section, the following terms have the following meanings:
- (1) "Designated county office of education" means a county office of education selected by the department that has experience in administering a statewide pupil mental health initiative supported by the California Mental Health Services Authority.
- (2) "Participating local educational agency" means a county office of education or school district selected jointly by the

AB 580 —4—

department and designated county office of education that has participated as a regional leader in a statewide pupil mental health initiative supported by the California Mental Health Services Authority. The department and designated county office of education shall ensure that participating local educational agencies selected for purposes of this section reflect the geographic and socioeconomic diversity of the state.

- (b) The department and designated county office of education shall jointly, in consultation with participating local educational agencies, current classroom teachers, and current schoolsite classified staff, develop a model referral protocol for addressing pupil mental health concerns. The protocol may be used, on a voluntary basis, by schoolsites, school districts, county offices of education, charter schools, and by teacher and administrator preparation programs operated by institutions of higher education. The protocol shall do all of the following:
- (1) Address the referral by school staff of pupils with mental health concerns. The protocol may, at the discretion of the department and designated county office of education, include the continuum: from prevention, to identification, to referral for services.
 - (2) Reflect a multitiered system of support processes.
- 33319.6. (a) The department shall develop model referral protocols for addressing pupil mental health concerns. In developing these protocols, the department shall consult with the members of the Student Mental Health Policy Workgroup, local educational agencies that have served as state or regional leaders in state or federal pupil mental health initiatives, county mental health programs, current classroom teachers and administrators, current schoolsite classified staff, current schoolsite staff who hold pupil personnel services credentials, current school nurses, current school counselors, and other professionals involved in pupil mental health as the department deems appropriate.
- (b) These protocols shall be designed for use, on a voluntary basis, by schoolsites, school districts, county offices of education, charter schools, and the state special schools for the blind and the deaf, and by teacher, administrator, school counselor, pupil personnel services, and school nurse preparation programs operated by institutions of higher education. The protocols shall do all of the following:

5 AB 580

(1) Address the appropriate and timely referral by school staff of pupils with mental health concerns.

- (2) Reflect a multitiered system of support processes and positive behavioral interventions and supports.
- (3) Be adaptable to varied local service arrangements for mental health services.
- (4) Reflect evidence-based and culturally appropriate approaches to pupil mental health referral.
- (5) Address the inclusion of parents and guardians in the referral process.
- (6) Be written to ensure clarity and ease of use by certificated and classified school employees.
- (7) Reflect differentiated referral processes for pupils with disabilities and other populations for whom the referral process may be distinct.
- (8) Be written to ensure that school employees act only within the authorization or scope of their credential or license. Nothing in this section shall be construed as authorizing or encouraging school employees to diagnose or treat mental illness unless they are specifically licensed and employed to do so.

(8)

- (9) Be consistent with state activities conducted by the department in the administration of federally funded mental health programs.
- (e) The designated county office of education acting jointly with the department shall be selected by the department and shall have experience in administering a statewide pupil mental health initiative supported by the California Mental Health Services Authority.
- (d) The department and designated county office of education are encouraged to consult with the California Mental Health Services Authority, representatives of county mental health programs, and the Student Mental Health Policy Workgroup in the development of this protocol.

(e)

(c) The department shall post the model referral—protocol protocols on its Internet Web site so that—it they may be accessed and used by—local educational—agencies and charter schools. institutions specified in subdivision (b).

40 (f)

AB 580 — 6 —

- 1 (d) This section is contingent upon funds being appropriated 2 for its purpose to either the department or the designated county 3 office of education in the annual Budget Act or other legislation, 4 or other state, federal, or private funds being allocated for this 5 purpose.
- 6 (g)
- 7 (e) The model referral—protocol protocols shall be completed 8 and made available within—one year two years of the date funds 9 are received or allocated to implement this section.