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## Education Committee

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### HB 1221

**Brief Description:** Improving crisis planning in schools to prevent youth suicide.

**Sponsors:** Representatives Orwall, Harris, Wylie, Frame, Kilduff, Dolan, Ortiz-Self, Lovick, Lekanoff, Sells, Doglio, Bergquist, Stanford, Appleton, Slatter, Tarleton, Thai, Jinkins, Fey, Macri, Pollet and Goodman.

#### Brief Summary of Bill

- Directs each educational service district to provide behavioral health coordination.
- Requires certain notifications when school district staff have information about possible student self-harm.
- Requires school mental health professionals to be trained on safety planning with the families of students identified as at-risk for suicide.
- Creates a two-year Mental Health Promotion and Suicide Prevention Program.
- Funds the development of youth-informed mental health promotion and suicide prevention resources.
- Expands the Partnership Access Line to school mental health professionals.

**Hearing Date:** 2/4/19

**Staff:** Megan Wargacki (786-7194).

#### Background:

Regional Behavioral Health Coordination. In 2017, the Office of the Superintendent of Public Instruction (OSPI) was directed to designate two educational services districts in which to pilot one lead staff person for children's mental health and substance use disorder services. Some of the duties of this staff person include: coordinating Medicaid billing for schools and districts; facilitating partnerships with community providers; and sharing service models. In 2018, the staff person was also tasked with delivering a mental health literacy curriculum. A report on the

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results of the pilot projects, and whether to expand the projects, is due to the Governor and the Legislature by December 1, 2019.

Plans Related to Emotional or Behavioral Distress in Students. In 2014, school districts were required to adopt a plan for recognition, initial screening, and response to emotional or behavioral distress in students, including but not limited to indicators of possible substance abuse, violence, youth suicide, and sexual abuse. School districts must annually provide the plan to all district staff. The plan must include certain minimum components related to staff trainings, partnership development, communicating with students families, and district and staff response to certain situations.

Training on Youth Suicide Screening and Referral. With some exceptions, school nurses, school social workers, school psychologists, and school counselors must complete a three hour training program on youth suicide screening and referral as a condition of certification.

#### Healthy Youth Survey.

The Healthy Youth Survey is a collaboration between the OSPI, the Department of Health, the Department of Social and Health Services, and the Liquor and Cannabis Board. The survey includes questions about safety and violence; health-related behaviors, including depression and suicide; alcohol, tobacco, and other drug use; and related risk and protective factors. This information can be used to identify trends in the patterns of youth behavior over time.

Forefront Suicide Prevention. Forefront Suicide Prevention, a social impact center at the University of Washington School of Social Work, was founded in 2013. The center empowers individuals and communities to take sustainable action to prevent suicide, champions systemic changes, and restores hope.

Partnership Access Line. The Partnership Access Line is a telephone consultation service available at no charge to primary care providers who wish to consult with a pediatric psychiatrist regarding the assessment and provision of appropriate diagnosis and treatment of children with mental and behavioral health disorders.

#### **Summary of Bill:**

Regional Behavioral Health Coordination. Each educational service district (ESD) must provide behavioral health coordination, for example:

- support for school district implementation of required plans for recognition, initial screening, and response to emotional or behavioral distress in students;
- facilitate partnerships and coordination between various entities;
- share service delivery models;
- provide Medicaid billing related training, technical assistance, and coordination between school districts; and
- guide implementation of best practices in response to, and to recover from, the suicide or attempted suicide of a student.

Each ESD must consult with Forefront Suicide Prevention at the University of Washington (Forefront) regarding: best practices related to suicide prevention and recovery; and training and technical assistance in implementing the behavioral health coordination.

Notification of Possible Student Self-Harm. Beginning in the 2019-20 school year, school district staff who have knowledge or a reasonable suspicion that a student has expressed a desire to end his or her life or otherwise harm himself or herself must disclose the knowledge or reasonable suspicion to either: the student's parent or guardian; or the school nurse, school counselor, school social worker, or school psychologist, who must then contact the student's parent or guardian.

Mental Health Promotion and Suicide Prevention Program. The Office of the Superintendent of Public Instruction (OSPI) must select up to 12 high schools located east of the crest of the Cascade mountains to participate in the Mental Health Promotion and Suicide Prevention Program (Program) during the 2020-21 through 2021-22 school years. The selected high schools must engage a multidisciplinary team, cooperate with the regional behavioral health navigator, and encourage the development of student-led behavioral health promotion and awareness activities.

Forefront must work with the school districts of the selected high schools to deliver specified program components, for example:

- training, course materials, and consultation on the use of suicide prevention, social emotional learning, and mental health awareness curricula;
- support in revising plans related to emotional or behavioral distress in students; and
- link high schools to mental health referral networks and provide behavioral health screening support.

Forefront must develop public-private partnerships to support the implementation of the Program in middle and high schools across the state.

By January 6, 2023, the Washington State Institute for Public Policy must report to the Governor, the Legislature, and the OSPI with an evaluation of the Program. The report must describe the implementation and outcomes of the selected high schools compared to the high schools located west of the crest of the Cascade mountains that began implementing the Program in the 2019-20 school year. The Healthy Youth Survey and assessment data must be used to evaluate changes in student behavioral health, suicidal health, and academic outcomes due to participation in the program.

Provisions directing Forefront to perform specified suicide prevention activities that were never funded are repealed.

Plans Related to Emotional or Behavioral Distress in Students. School districts must tailor the plan to each school's specific needs. Beginning in the 2019-20 school year, and annually thereafter, school districts must submit the plan to the OSPI and to its ESD. Districts must resubmit the plan any time that substantial changes are made to it.

Youth-Informed Mental Health Promotion and Suicide Prevention Resources. Forefront must award grants to school districts and youth advocacy organizations to develop youth-informed mental health promotion and suicide prevention resources, such as social media messages and videos. Forefront, in collaboration with the OSPI, must select and provide support and guidance to grant recipients on the content of the mental health promotion and suicide prevention resources. The OSPI must post the resources on its website.

Safety Planning with Students' Families. By January 1, 2020, the training program on youth suicide screening and referral must include safety planning with the parents or guardians of students identified as at-risk for suicide, where the planning includes limiting access to lethal means.

The Partnership Access Line. The Partnership Access Line must be expanded to provide telephone consultation services at no charge to school nurses, school social workers, school psychologists, and school counselors. The Health Care Authority must encourage these school staff to use the service when they are concerned about a student's mental health and do not know to whom to refer the student.

**Appropriation:** None.

**Fiscal Note:** Requested on January 30, 2019.

**Effective Date:** The bill takes effect 90 days after adjournment of the session in which the bill is passed.