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**SUBSTITUTE HOUSE BILL 1468**

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**State of Washington 67th Legislature 2021 Regular Session**

**By** House College & Workforce Development (originally sponsored by Representatives Slatter, Ortiz-Self, Ryu, Leavitt, Simmons, Senn, J. Johnson, Berry, Valdez, Santos, Boehnke, Berg, Peterson, Goodman, Fey, Ormsby, Ramel, Pollet, Davis, Thai, Bronoske, Chopp, Hackney, and Riccelli)

AN ACT Relating to increasing student access to mental health counseling and services at community and technical colleges; adding a new section to chapter 28B.50 RCW; creating a new section; and providing an expiration date.

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

NEW SECTION. **Sec.**  The legislature finds that there continues to be a lack of access to behavioral health counseling and services for students on college campuses. The task force on community and technical college counselors found that there is variance throughout the community and technical college system in counseling models adopted, access to counselors, and general mental health resources available. The legislature intends to increase access to mental health counseling and services for students by establishing a pilot program to issue grants to community and technical colleges to implement strategies identified by the community and technical college counselors task force report.

NEW SECTION. **Sec.**  A new section is added to chapter 28B.50 RCW to read as follows:

(1) Subject to the availability of amounts appropriated for this specific purpose, the college board shall administer a pilot program to increase student access to mental health counseling and services.

(2) The college board, in collaboration with the selection committee, shall select eight community or technical colleges to participate in the pilot program, with half of the participating colleges located outside of the Puget Sound area. The Puget Sound area consists of Snohomish, King, Pierce, and Thurston counties. Each participating college must receive a grant to implement one or more strategies to increase student access to mental health counseling and services, including substance use disorder counseling and services.

(3)(a) A selection committee consisting of the following shall assist with the application selection process:

(i) One community or technical college president;

(ii) One community or technical college vice president for student services or student instruction;

(iii) Two faculty counselors employed at a community or technical college; and

(iv) One community or technical college student.

(b) The selection committee may consult with representatives of an entity within the University of Washington school of social work that has expertise in suicide prevention and the department of health in developing selection criteria.

(4) Community and technical colleges wishing to participate in the pilot program shall apply to the college board. Applicants must identify opportunities for expanding on-campus mental health counseling and services. Applicants must also show a commitment to further develop partnerships by engaging with external community providers, including those who provide crisis services and substance use disorder treatment and counseling. Applications that demonstrate plans to include one or more of the following strategies recommended by the community and technical college counselors task force must be prioritized:

(a) Improve equity, diversity, and inclusion in counseling services, such as by diversifying the counselor workforce by adopting equity-centered recruiting, training, and retention practices or by providing equity training and awareness for all counselors;

(b) Meet mental health needs of students through an all-campus effort;

(c) Engage students to help increase mental health and counseling awareness and promote help-seeking behavior through student groups and other methods;

(d) Increase the visibility of counseling services on campus;

(e) Increase or expand external partnerships with community service providers;

(f) Adopt the use of telebehavioral health, especially in under resourced communities;

(g) Develop an assessment of counseling services to inform improvements and ensure counseling services are meeting student needs; or

(h) Implement counseling approaches grounded in theory that have evidence of being effective.

(5) Colleges selected to participate in the pilot program that use grant funding to hire additional mental health counselors must hire counselors who have specific graduate-level training for meeting the mental and behavioral health needs of students.

(6) Colleges selected to participate in the pilot program shall submit a joint report to the appropriate committees of the legislature and in accordance with RCW 43.01.036 by November 1, 2023. The report must include:

(a) Information on which colleges were selected for the pilot program, how much grant funding was received per college, and what strategies each implemented to increase student access to mental health counseling and services;

(b) Demographic data of students accessing mental health counseling and services, including those students who are considered underrepresented or traditionally have limited access to mental health counseling and services;

(c) Whether the mental health counseling and services provided are meeting the demand of students in terms of type and availability, and whether the various types of mental health counseling and services are being provided by community providers versus on-campus services;

(d) Information and data on the effectiveness, including cost-effectiveness, of each strategy used to increase student access to mental health counseling and services, including substance use disorder counseling and services, such as the number of additional students served, reduced wait times for counseling appointments, or other data that reflects expanded access; and

(e) Lessons learned and recommendations for improving student access to mental health counseling and services at community and technical colleges and with community providers, including whether there were any strategies implemented that proved more effective than others in increasing access.

(7) The pilot program expires July 1, 2025.

(8) This section expires January 1, 2026.

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