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## SECOND SUBSTITUTE SENATE BILL 5903

State of Washington 66th Legislature 2019 Regular Session

By Senate Ways & Means (originally sponsored by Senators Darneille, Warnick, Das, Nguyen, and O'Ban)

READ FIRST TIME 03/01/19.

AN ACT Relating to implementing policies related to children's 1 2 mental health as reviewed and recommended by the children's mental 3 group; amending RCW 28B.20.445, 28B.30.357, work 43.216.745; adding a new section to chapter 28A.310 RCW; adding a new 4 5 section to chapter 28A.415 RCW; adding a new section to chapter 28A.300 RCW; adding a new section to chapter 28B.20 RCW; adding a new 6 7 section to chapter 74.09 RCW; adding new sections to chapter 71.34 8 RCW; creating new sections; repealing 2018 c 175 s 12 (uncodified); 9 providing a contingent effective date; and providing expiration 10 dates.

- 11 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:
- 12 (1) The legislature finds that the NEW SECTION. Sec. 1. 13 children's mental health work group established in chapter 96, Laws 14 of 2016 reported recommendations related to increasing access to 15 mental health services for children and youth and that many of those 16 recommendations were adopted by the 2017 and 2018 legislatures. The 17 legislature further finds that additional work is needed to improve 18 support for children and families health and that 19 children's mental health work group was reestablished for this 20 purpose in chapter 175, Laws of 2018.

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(2) The legislature finds that there is a workforce shortage of behavioral health professionals and that increasing medicaid rates to a level that is equal to medicare rates will increase the number of providers who will serve children and families on medicaid. Further, the legislature finds that there is a need to increase the cultural and linguistic diversity among children's behavioral health professionals and that hiring practices, professional training, and high-quality translations of accreditation and licensing exams should be implemented to incentivize this diversity in the workforce.

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- 10 (3) Therefore, the legislature intends to implement the 11 recommendations adopted by the children's mental health work group in 12 January 2019, in order to improve mental health care access for 13 children and their families.
- NEW SECTION. Sec. 2. A new section is added to chapter 28A.310 RCW to read as follows:
  - (1) Subject to the availability of amounts appropriated for this specific purpose, each educational service district must provide to the school districts in its region behavioral health coordination that, at a minimum, includes:
  - (a) Providing support for school district development and implementation of plans for recognition, initial screening, and response to emotional or behavioral distress in students as required under RCW 28A.320.127;
  - (b) Facilitating partnerships and coordination between school districts, public schools, and existing regional and local systems of behavioral health care services and supports in order to increase student and family access to these services and supports;
  - (c) Assisting school districts and public schools in building capacity to identify and support students in need of behavioral health care services and to link students and families with community-based behavioral health care services;
  - (d) Identifying, sharing, and integrating, to the extent practicable, behavioral and physical health care service delivery models;
- 35 (e) Providing medicaid billing related training, technical 36 assistance, and coordination between school districts;
- 37 (f) Guidance in implementing best practices in response to, and 38 to recover from, the suicide or attempted suicide of a student; and

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- 1 (g) Providing technical assistance to schools and school 2 districts in implementing or expanding social emotional learning 3 programs.
- 4 (2) Funds appropriated pursuant to this section must be used 5 solely for the purposes outlined in this section.
- NEW SECTION. Sec. 3. (1) Subject to the availability of amounts appropriated for this specific purpose, beginning July 1, 2019, the health care authority shall collaborate with the University of Washington department of psychiatry and behavioral sciences, Seattle children's hospital, and the office of the superintendent of public instruction, to develop a plan to implement a two-year pilot program called the partnership access line for schools.
  - (2) The pilot program must be implemented by January 1, 2020, and shall support two educational service districts selected by the office of the superintendent of public instruction.
    - (3) Elements of the pilot program must include:

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- (a) Developing a general behavioral health support curriculum appropriate for the roles of school staff;
- (b) Delivering behavioral health trainings for school counselors, social workers, psychologists, nurses, teachers, and administrators with content designed specifically for these roles;
- (c) Providing school staff who have participated in training under this section access to telephone consultation with psychologists and psychiatrists to support school staff in managing children with challenging behaviors; and
- (d) Providing timely crisis management appointments, delivered in person or through interactive audio and video technology, between partnership access line clinical staff and school staff when assessed as clinically appropriate by the partnership access line and when similar support is not immediately available in the local community.
- 31 (4) By December 1, 2022, the health care authority shall submit a 32 report to the governor and the legislature describing the services 33 delivered through the pilot program and recommending whether the 34 pilot program should continue or be made permanent.
  - (5) This section expires December 30, 2022.
- 36 <u>NEW SECTION.</u> **Sec. 4.** A new section is added to chapter 28A.415 37 RCW to read as follows:

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- 1 (1) Beginning in the 2019-20 school year, school districts must 2 use one of the professional learning days funded under RCW 3 28A.150.415 to train school district staff in mental health first 4 aid, suicide prevention, social-emotional learning, trauma-informed 5 care, and antibullying strategies.
- 6 (2) Funds appropriated pursuant to this section must be used 7 solely for the purposes outlined in this section.
- 8 <u>NEW SECTION.</u> **Sec. 5.** A new section is added to chapter 28A.300 9 RCW to read as follows:
- 10 (1) Subject to the availability of amounts appropriated for this specific purpose, the office of the superintendent of public instruction shall identify and make available to school districts mental health literacy and healthy relationships instructional materials that are consistent with Washington's health and physical education K-12 learning standards.
- 16 (2) The office of the superintendent of public instruction shall 17 include in health and physical education graduation requirements all 18 social-emotional health, substance use and abuse, and healthy 19 relationship standards adopted in rule by the superintendent.
- NEW SECTION. Sec. 6. A new section is added to chapter 28B.20 RCW to read as follows:
  - Subject to availability of amounts appropriated for this specific purpose, the University of Washington shall establish certificate programs in evidence-based practices for behavioral health care professionals as follows:
  - (1) (a) The University of Washington school of social work, in collaboration with the University of Washington department of psychiatry and behavioral sciences, schools of social work programs across the state, and community behavioral health agencies, shall establish a certificate program in evidence-based practices that have been shown to be effective in treating adolescents and young adults with mental health disorders and suicidal behavior, including:
    - (i) Dialectical behavior therapy; and
- 34 (ii) Wraparound.

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- (b) The certificate program must be designed:
- 36 (i) For graduate students pursuing a master of social work 37 degree; and

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- 1 (ii) To offer stipends, scholarships, and loans to students and 2 to employees of participating public behavioral health agencies that 3 participate in order to retain a trained workforce.
  - (2) (a) The University of Washington department of psychology, in collaboration with the department of psychiatry and behavioral sciences, school of social work, and continuum college, shall establish a certificate program in evidence-based practices that have been shown to be effective in treating adolescents and young adults with mental health disorders, including:
  - (i) Evidence-based parenting interventions;

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- 11 (ii) Evidence-based treatments for anxiety and mood disorders;
  12 and
- 13 (iii) Trauma-focused cognitive behavior therapy.
- 14 (b) The certificate program must be designed for licensed 15 behavioral health care professionals, and mental health professionals 16 as defined in RCW 71.05.020, who wish to receive additional education 17 in evidence-based practices.
- 18 (3) Participants in the certificate programs under this section 19 are eligible to apply for the health professional loan repayment and 20 scholarship program under chapter 28B.115 RCW.
- 21 **Sec. 7.** RCW 28B.20.445 and 2018 c 175 s 11 are each amended to 22 read as follows:
  - Subject to the availability of amounts appropriated for this specific purpose, the child and adolescent psychiatry residency program at the University of Washington shall offer ((one)) two additional twenty-four month residency positions that ((is)) are approved by the accreditation council for graduate medical education to ((one)) two residents specializing in child and adolescent psychiatry. The ((residency)) positions must each include a minimum of ((twelve)) eighteen months of training in settings where children's mental health services are provided under the supervision of experienced psychiatric consultants and must be located west of the crest of the Cascade mountains.
- 34 **Sec. 8.** RCW 28B.30.357 and 2017 c 202 s 9 are each amended to 35 read as follows:
- Subject to the availability of amounts appropriated for this specific purpose, Washington State University shall offer (( $\frac{1}{1}$ )) two twenty-four month residency positions that (( $\frac{1}{1}$ s)) are approved by the

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- 1 accreditation council for graduate medical education to ( $(\frac{1}{2})$ )  $\frac{1}{2}$
- 2 residents specializing in child and adolescent psychiatry. The
- 3 ((residency)) positions must each include a minimum of ((twelve))
- 4 <u>eighteen</u> months of training in settings where children's mental
- 5 health services are provided under the supervision of experienced
- 6 psychiatric consultants and must be located east of the crest of the
- 7 Cascade mountains.

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- 8 <u>NEW SECTION.</u> **Sec. 9.** A new section is added to chapter 74.09 9 RCW to read as follows:
- (1) Subject to the availability of amounts appropriated for this 10 specific purpose, the authority shall collaborate with the University 11 of Washington and a professional association of licensed community 12 13 behavioral health agencies to develop a statewide plan to implement evidence-based coordinated specialty care programs that provide early 14 15 identification and intervention for psychosis in 16 certified community behavioral health agencies. The authority must 17 submit the statewide plan to the governor and the legislature by 18 March 1, 2020. The statewide plan must include:
- 19 (a) Analysis of existing benefit packages, payment rates, and 20 resource gaps, including needs for nonmedicaid resources;
- 21 (b) Development of a discrete benefit package and case rate for 22 coordinated specialty care;
  - (c) Identification of costs for statewide start-up, training, and community outreach;
    - (d) Determination of the number of coordinated specialty care teams needed in each regional service area; and
      - (e) A timeline for statewide implementation.
- 28 (2) The authority shall ensure that:
- 29 (a) At least one coordinated specialty care team is starting up 30 or in operation in each regional service area by October 1, 2020; and
- 31 (b) Each regional service area has an adequate number of 32 coordinated specialty care teams based on incidence and population 33 across the state by December 31, 2023.
- 34 (3) This section expires June 30, 2024.
- NEW SECTION. Sec. 10. (1) Subject to amounts appropriated for this specific purpose, the office of the superintendent of public instruction and the University of Washington school mental health assessment, research, and training center shall jointly convene a

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work group of educators and researchers to develop a statewide multitiered system of school supports that includes academic, social-emotional, and behavioral supports. The work group must include representatives of: Public K-12 schools; school districts; educational service districts; the office of the superintendent of public instruction; families of K-12 students; the department of children, youth, and families; and public universities. The office of the superintendent of public instruction and the University of Washington school mental health assessment, research, and training center must submit the findings and recommendations of the work group to the governor and the legislature by November 1, 2020.

(2) This section expires December 31, 2020.

**Sec. 11.** RCW 43.216.745 and 2017 c 202 s 5 are each amended to 14 read as follows:

(1) (a) Subject to the availability of amounts appropriated for this specific purpose, the department shall establish ((a child care)) an infant and early childhood mental health consultation program linking ((child care)) early learning providers with evidence-based, trauma-informed, and best practice resources regarding caring for infants and young children who present behavioral concerns or symptoms of trauma. The department may contract with an entity with expertise in child development and early learning programs in order to operate the ((child care)) consultation program.

 $((\frac{(2)}{(2)}))$  (b) In establishing and operating the program, the department or contracted entity shall:  $((\frac{(a)}{(a)}))$  (i) Assist  $(\frac{(child care)}{(are)})$  early learning providers in recognizing the signs and symptoms of trauma in children;  $((\frac{(b)}{(b)}))$  (ii) provide support and guidance to  $(\frac{(child care)}{(are)})$  early learning staff;  $((\frac{(c)}{(b)}))$  (iii) consult and coordinate with parents, other caregivers, and experts or practitioners involved with the care and well-being of the young children; and  $((\frac{(ch)}{(b)}))$  (iv) provide referrals for children who need additional services.

(2) (a) Subject to the availability of amounts appropriated for this specific purpose, the department shall develop an infant and early childhood mental health consultation model for children ages birth through five and provide the model to the governor and the legislature by November 1, 2019.

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- (b) In the development of the model, the department must consult with public and private partners, including tribal representatives, to ensure the model meets community needs in a culturally responsive manner.
  - (c) The model must include:

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- (i) A workforce development plan that addresses initial training and ongoing professional development for infant and early childhood mental health consultants in accordance with nationally recognized competencies in the field;
- 10 <u>(ii) Consultation standards that are informed by current evidence</u>
  11 in the field, trauma-informed, and culturally responsive;
- 12 (iii) A program evaluation protocol for outcome measurement; and
- 13 <u>(iv) A plan for a data tracking system for consultation</u> 14 activities.
- 15 <u>(d) The department must phase in service delivery and begin</u> 16 <u>implementation in at least two regions by July 1, 2020, followed by</u> 17 <u>full statewide implementation by December 31, 2023.</u>
- NEW SECTION. Sec. 12. (1) Subject to the availability of amounts appropriated for this specific purpose, the department of children, youth, and families must implement a trauma-informed early care and education pilot in at least two regions. The pilot must begin by January 1, 2020, and conclude by December 1, 2021, and must:
- 23 (a) Implement a model for professional development in trauma-24 informed care for child care and early learning providers;
  - (b) Provide additional targeted social and emotional supports beyond what is typically provided in child care and early learning settings, including health and infant and early childhood mental health consultation;
  - (c) Establish communities of practice for family home child care providers to receive trauma-informed training and coaching, reflective supervision and consultation, and peer-to-peer mentoring and support;
  - (d) Establish enhanced trauma-informed early care and education sites that must receive increased subsidy rates and supports to enable the provision of a more intensive level of care that includes trauma-informed family engagement and smaller teacher-child ratios than what is required in the department of children, youth, and families' licensing rules;

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- 1 (e) Implement trauma-informed practices in early achievers 2 coaching and data collection; and
- 3 (f) Establish a system for tracking expulsions from child care 4 and early learning settings.
- 5 (2) By December 1, 2021, the department of children, youth, and 6 families must submit a report to the governor and the appropriate 7 committees of the legislature describing the results of the pilot and 8 recommending whether to continue the pilot or make it permanent.
  - (3) This section expires December 31, 2021.

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- NEW SECTION. Sec. 13. A new section is added to chapter 71.34
  RCW to read as follows:
- Subject to the availability of amounts appropriated for this 12 specific purpose, the health care authority must provide an online 13 training for behavioral health providers regarding state law and best 14 15 practices when providing behavioral health services to children, 16 youth, and families. The training must be free for providers and must 17 include information related to parent-initiated treatment, minor-18 initiated treatment, and other treatment services provided under this 19 chapter.
- NEW SECTION. Sec. 14. A new section is added to chapter 71.34 RCW to read as follows:
- (1) Subject to the availability of amounts appropriated for this 22 23 specific purpose, the authority must conduct an annual survey of a sample group of parents, youth, and behavioral health providers to 24 measure the impacts of implementing policies resulting from the 25 26 enactment of chapter . . . (House Bill No. 1874), Laws of 2019 (including any later amendments or substitutes) during the first 27 three years of implementation. The first survey must be complete by 28 July 1, 2020, followed by subsequent annual surveys completed by July 29 30 1, 2021, and by July 1, 2022. The authority must report on the results of the surveys annually to the governor and the legislature 31 beginning November 1, 2020. The final report is due November 1, 2022, 32 and must include any recommendations for statutory changes identified 33 34 as needed based on survey results.
  - (2) This section expires December 31, 2022.
- NEW SECTION. Sec. 15. Section 14 of this act takes effect only if chapter . . . (House Bill No. 1874), Laws of 2019 (including any

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- 1 later amendments or substitutes) is enacted by the effective date of
- 2 this section.
- 3 <u>NEW SECTION.</u> **Sec. 16.** 2018 c 175 s 12 (uncodified) is repealed.

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