

SENATE BILL REPORT

SB 5126

As of January 29, 2025

Title: An act relating to establishing a statewide network for student mental and behavioral health to maintain, expand, and provide oversight to Washington's school-based mental and behavioral health system for children and adolescents across the state.

Brief Description: Establishing a statewide network for student mental and behavioral health.

Sponsors: Senators Nobles, Cortes, Bateman, Hasegawa, Krishnadasan, Liias, Riccelli, Saldaña, Valdez, Wellman and Wilson, C.; by request of Superintendent of Public Instruction.

Brief History:

Committee Activity: Early Learning & K-12 Education: 1/29/25.

Brief Summary of Bill

- Directs the Office of the Superintendent of Public Instruction to provide strategic direction and state-level coordination to help schools better identify and connect students to behavioral health supports.
- Establishes a regional school-based mental and behavioral health student assistance program through the educational service districts.
- Creates a grant program to support school districts in developing and implementing a plan for recognition, screening, and response to emotional or behavioral distress in students.

SENATE COMMITTEE ON EARLY LEARNING & K-12 EDUCATION

Staff: Ailey Kato (786-7434)

Background: Children and Youth Behavioral Health Work Group. The Children and Youth Behavioral Health Work Group (work group) was first established in 2016. The work group has an advisory group focused on school-based behavioral health and suicide

This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not part of the legislation nor does it constitute a statement of legislative intent.

prevention, which is staffed by the Office of the Superintendent of Public Instruction (OSPI).

In 2022 the work group was tasked with developing a draft strategic plan that describes the current landscape of behavioral health services and a vision for the system. A draft strategic plan is due by August 1, 2025, and the final strategic plan must be included in the work group's 2025 annual report.

Delegation to Educational Service Districts. OSPI may contractually delegate to any of the nine educational service districts (ESD), or a combination of ESDs, all or any portion of a program, project, or service authorized or directed by the Legislature to be performed by OSPI.

Regional School Safety Centers. Subject to appropriations, each ESD must establish a regional school safety center that includes:

- behavioral health coordination;
- school-based threat assessment coordination;
- training, technical assistance, and certain information; and
- the development of collaborative relationships.

Plan for Recognition, Screening, and Response to Emotional or Behavioral Distress in Students. Each school district is required to adopt a plan for recognition, initial screening, and response to emotional or behavioral distress in students such as possible substance abuse, violence, youth suicide, and sexual abuse. The plan must include specified components including training opportunities, how staff should respond to warning signs, partnering with community organizations, protocols for communicating with parents and guardians, and how to respond in a crisis situation.

Washington Integrated Student Supports Protocol. The purpose of the Washington Integrated Student Supports Protocol is to support a school-based approach to promoting the success of all students by coordinating academic and nonacademic supports to reduce barriers to academic achievement and educational attainment. The essential framework of the Washington Integrated Student Supports Protocol includes needs assessments, integration and coordination with community-based providers, and data to determine student progress and needs.

Summary of Bill: State-Level Coordination for Behavioral Health. Subject to appropriations, OSPI must, in collaboration with local education agencies, the Washington Association of Educational Service Districts (AESD), and other state agencies, must establish strategic direction and goals for statewide programming to strengthen the capacity of local education agencies to meet the recognition, initial screening, and response requirements. OSPI must also provide state-level coordination to help schools better promote mental well-being as well as identify and connect students to behavioral health supports in school and interconnected community settings.

At a minimum, the state-level coordination and strategic direction and goals must include:

- tools, guidance and supports in alignment with the Washington Integrated Student Supports Protocol;
- guidance and streamline processes to maximize access to state and federal resources;
- coordination with training and technical assistance entities who support local education agencies;
- evidence-based practices that support mental and behavioral health;
- coordination with organizations representing various groups;
- guidance and technical assistance to facilitate student access to mental and behavioral health supports and reduction of barriers;
- resources to support deploying school-based substance use and behavioral health screening, intervention, and referral activities;
- foundational school substance abuse prevention and intervention resources; and
- a review process for continuous improvement of services and monitoring the impact of statewide efforts.

Subject to appropriations, OSPI must support and implement elements from the strategic plan of the work group.

Regional School-Based Mental and Behavioral Health Student Assistance Program.

Establishment and Purpose. Subject to appropriations, the regional school-based mental and behavioral health student assistance program (regional program) is established. The purpose is support OSPI through increased regional deployment of behavioral and mental health supports.

Regional School-Based Mental and Behavioral Health Student Assistance Program Components. Each regional program must:

- work in conjunction with OSPI to form a statewide network;
- provide aligned student behavioral health assistance prevention and intervention services by including certain components;
- provide direct student screening;
- collaborate as necessary and appropriate with regional school safety centers; and
- support behavioral health career pathways through hiring new non-licensed staff who receive training, supervision, and internship opportunities.

ESDs licensed as behavioral health agencies may pilot the integration of telehealth services and provide in-person treatment services.

Regional School-Based Mental and Behavioral Health Student Assistance Program Coordination. AESD must provide overall coordination of the regional program across regions by:

- establishing consistent criteria for school participation;
- establishing the overall evaluation and reporting of regional program outcomes;

- engaging with regional programs and providers to measure action plans;
- supporting OSPI in data collection and progress monitoring; and
- submitting an annual report to OPSI.

Grant Program to Develop a Plan for Recognition, Screening, and Response to Emotional or Behavioral Distress in Students. Subject to appropriations, OSPI must establish a grant program to support school districts in developing and implementing a plan for recognition, screening, and response to emotional or behavioral distress.

To the greatest extent possible, OSPI must pair grantees with the state and regional support structures. Fundings may be used to support training, develop model school safety policies and procedures, and identify and implement best practices.

Appropriation: The bill contains a section or sections to limit implementation to the availability of amounts appropriated for that specific purpose.

Fiscal Note: Requested on January 21, 2025.

Creates Committee/Commission/Task Force that includes Legislative members: No.

Effective Date: Ninety days after adjournment of session in which bill is passed.

Staff Summary of Public Testimony: PRO: Students are facing increasing challenges when it comes to mental and behavioral health, especially following COVID. Mental health is not a privilege; it is a necessity and should be a priority. Schools are often the first point of contact when addressing these needs, but the current system is fragmented and difficult to navigate. This bill creates a statewide and centralized framework for all school-based services and strengthens coordination among various agencies. This bill would help ensure consistent and equitable access to life-changing and health resources. Mental health providers can provide early intervention and can prevent students' education from getting derailed. Healthy students are better prepared to succeed in school and beyond. There is an incredible return on investment for these services, particularly in underserved and rural communities. Parents need help when their child is struggling with their mental health, and schools are a logical place to help families.

CON: Schools are not good at managing mental health; schools are for education and learning. Student's health care should be led and determined by the parents not the school. This bill promotes keeping secrets from parents regarding their child's mental health records. When students are told to ruminate on their mental health issues, it gets worse. The bill should specify that the treatment should be nondrug focused. Too many children are being drugged to address their mental health issues, which has negative side effects.

Persons Testifying: PRO: Senator T'wina Nobles, Prime Sponsor; Erica Limon-Trefielo, Communities in Schools of Washington; Dr. Gwen Loosmore, Washington State PTA;

Misha Cherniske, Office of Superintendent of Public Instruction (OSPI); Michelle Price, Association of Educational Service Districts; Amy Cannava, Washington State Association of School Psychologists; Marty Brewer, Superintendent, Port Angeles School District; Eric Bruns, University of Washington SMART Center, Assoc. Director; Anna Nepomuceno, NAMI Washington; Taanvi Arekapudi, Inglemoore High School and NAMI WA Youth; Nandika Devarajan, Redmond High School and NAMI WA Youth; Kenia Soriano Hernandez, Washington Youth Alliance Action Fund; Michael Van Dyke, Washington Chapter of American Academy of Pediatrics.

CON: Gabriel Jacobs; Khushdip Brar, Concerned Citizen; Steven Pearce, Citizens Commission on Human Rights.

Persons Signed In To Testify But Not Testifying: No one.