

Date of Hearing: June 19, 2019

ASSEMBLY COMMITTEE ON EDUCATION

Patrick O'Donnell, Chair

SB 428 (Pan) – As Amended May 17, 2019

**[Note: This bill is double referred to the Assembly Health Committee and will be heard by that Committee as it relates to issues under its jurisdiction.]**

**SENATE VOTE:** 38-0

**SUBJECT:** Pupil health: school employee training: youth mental health first aid

**SUMMARY:** Requires the California Department of Education (CDE) to identify an evidence-based training program in youth mental health first aid for a local educational agency (LEA) to use to train classified and certificated school employees having direct contact with pupils. Specifically, **this bill**:

- 1) Requires the CDE to identify an evidence-based training program in youth mental health first aid for a local educational agency (LEA) to use to train classified and certificated school employees having direct contact with pupils.
- 2) Requires the CDE to ensure that the training program:
  - a) Is a peer-reviewed, evidence-based training program;
  - b) Provides instruction on recognizing the signs and symptoms of mental illness and substance use disorders, including common psychiatric conditions such as schizophrenia, bipolar disorder, major clinical depression, and anxiety disorders, and common substance use disorders such as opioid and alcohol abuse;
  - c) Provides instruction on how school staff can best provide referrals to mental health services, substance use disorder services, or other support to individuals in the early stages of developing a mental illness or substance use disorder;
  - d) Ensures the safe deescalation of crisis situations involving individuals with a mental illness;
  - e) Is capable of assessing trainee knowledge before and after training is provided in order to measure training outcomes;
  - f) Is administered by a nationally recognized nonprofit training authority in mental illness and substance use disorders; and
  - g) Includes in-person training with certified instructors who can recommend resources available in the community for individuals with a mental illness or substance use disorder.

- 3) Defines “certified instructors” to mean individuals who obtain or have obtained a certification to provide the selected training in mental illness and substance use disorders by a nationally recognized authority in behavioral health training programs.
- 4) Requires, on or before January 1, 2023, a LEA to certify to the CDE that at least 10% of its classified employees and at least 10% of its certificated employees having direct contact with pupils at each schoolsite, or at least two classified and at least two certificated employees having direct contact with pupils at each schoolsite, whichever is greater, have received the youth mental health first aid training.
- 5) Defines “local educational agency” to mean a county office of education, school district, state special school, or charter school that serves pupils in any of grades 7 to 12, inclusive.
- 6) Makes implementation of the act contingent upon an appropriation is made in the annual Budget Act or another statute.

**EXISTING LAW:**

- 1) Requires the Superintendent of Public Instruction to send a notice to each middle school, junior high school, and high school that encourages each school to provide suicide prevention training to each school counselor at least one time while employed as a counselor, provides information on the availability of the suicide prevention training curriculum developed by the CDE, and informs schools about the suicide prevention training provided by the department and describes how a school might retain those services. (Education Code (EC) 49604)
- 2) Requires the governing board or body of a school district, county office of education or a charter school that serves pupils in grades 7 to 12, inclusive, to, before the beginning of the 2017–18 school year, adopt, at a regularly scheduled meeting, a policy on pupil suicide prevention in grades 7 to 12, inclusive. Requires that the policy be developed in consultation with school and community stakeholders, school-employed mental health professionals, and suicide prevention experts and shall, at a minimum, address procedures relating to suicide prevention, intervention, and postvention. Requires the policy to address any training to be provided to teachers of pupils in grades 7 to 12, inclusive, on suicide awareness and prevention. Requires the policy to specifically address the needs of high-risk groups, including, but not limited to, all of the following:
  - a) Youth bereaved by suicide;
  - b) Youth with disabilities, mental illness, or substance use disorders;
  - c) Youth experiencing homelessness or in out-of-home settings, such as foster care; and
  - d) Lesbian, gay, bisexual, transgender, or questioning youth. (EC 215)

**FISCAL EFFECT:** According to the Senate Appropriations Committee, “While the bill’s requirements would be subject to an appropriation, the CDE estimates a cost of \$150 for a person to be trained in youth mental health first aid. Assuming at least 10 percent of all certificated and classified staff statewide would be trained in each of the next 10 years, this bill could result in Proposition 98 General Fund cost pressures of about \$6.8 million per year.

There could also be General Fund cost pressure of approximately \$332,000 and the equivalent of .75 positions over a three-year period for CDE to identify an evidence-based training program. Activities would include researching the latest information on youth mental health first aid and available vendors, collaborating with local, state and national subject matter experts, and tracking the training of LEA staff to ensure they are meeting the bill's requirements."

## COMMENTS:

***Key provisions of the bill.*** This bill would require the California Department of Education (CDE) to identify an evidence-based training program for LEAs to train classified and certificated staff having direct contact with children on youth mental health first aid. The purpose of this training is to increase school and community-level capacity to identify and address mental health and substance use issues among youth.

***Need for the bill.*** According to the author, "California is in the midst of a youth mental health crisis. Depression symptoms are at an all-time high for high school students. According to the U.S. Department of Health and Human Services, nearly 1 in 3 California high school students surveyed reported feeling sad or hopeless almost every day for two or more weeks in a row. Nearly 1 in 5 reported that they have seriously considered attempting suicide. Teachers and school staff are on the frontlines of these crises and as such should be trained to identify and help students who are suffering. Research shows that the sooner people get help for mental health and substance use concerns, the more likely they are to have positive outcomes."

***Importance of prevention and early intervention.*** Research suggests that nearly half of all children with emotional or behavioral health difficulties receive no mental health services. Among the few children and youth who do receive mental health services, most do so at school. One study found that 70.8 percent of California children identified with mental health needs through a statewide survey did not receive treatment.

Mental health problems that are not addressed early in life can inflict severe consequences including serious difficulties at home, with peers, and in school; a higher risk for dropping out of school; and increased risk of engaging in substance use, criminal behavior, and other risk-taking behaviors.

***School-based and school-linked mental health services for pupils.*** Across the country, school systems are increasingly joining forces with community health, mental health, and social service agencies to promote student well-being and to prevent and treat mental health disorders. Because children spend more time in school than in community mental health centers, schools are well positioned to link students with mental health services.

Mental health services that are provided in schools may include counseling, brief interventions to address behavior problems, assessments and referrals to other systems. Providing mental health services in a school-based setting helps address barriers to learning and provides supports so that all students can achieve in school and ultimately in life. Schools are also places where prevention and early intervention activities can occur in a non-stigmatizing environment.

Research suggests that comprehensive school mental health programs offer three tiers of support:

- promotion activities for all students. Universal mental health
- services for students identified as at risk for a mental health problem. Selective prevention
- students who already show signs of a mental health problem. Indicated services for

Schools offering such programs may rely on partnerships with community systems, such as community mental health centers, hospitals, and universities. Schools, working with their community partners, can collect prevalence data to build a foundation to plan, develop, and implement comprehensive mental health programs and services through strong school-community partnerships.

***Teachers on the front lines of student mental health crises, but are often not prepared.***

School personnel who interact with students on a daily basis are in a prime position to recognize mental health problems and make appropriate referrals for help. A national study conducted by the Jason Foundation, for example, found that the number one person a student would contact to help a friend who might be suicidal was a teacher.

According to the CDE Student Mental Health Policy Workgroup, “research indicates that teachers feel they lack the training needed for supporting children’s mental health needs. In surveys, teachers cite disruptive behavior and their lack of information and training in mental health issues as major barriers to instruction.” Research (Reinke, 2011) indicates that teachers report a lack of experience and training for supporting children’s mental health needs.

***Student mental health policy workgroup recommendations.*** The former Superintendent of Public Instruction (SPI), Tom Torlakson, convened a Student Mental Health Policy Workgroup, with funding from the California Mental Health Services Authority (CalMHS), with the goals of assessing the current mental health needs of California students and gathering evidence to support its policy recommendations to the SPI and to the California Legislature. The workgroup issued several recommendations. Among them, the workgroup recommended that:

- Appropriate credentialing programs (starting with multiple/single-subject and administrative services credentials) include mental health and wellness curricula with information about mental health conditions and how they manifest at school.
- All LEAs provide professional development to educators and other community members, so they can identify mental health issues as they arise, especially during adolescence.

***Youth suicide in California.*** According to the Lucile Packard Foundation for Children’s Health, which compiles and reports data from state agency sources:

- In 2011-13, nearly 20% of California public school students in grades nine, 11, and nontraditional classes reported seriously considering attempting suicide in the past year.
- Reported suicidal ideation is higher among female students and among students from multiracial and Native Hawaiian/Pacific Islander backgrounds.

- In 2013, 481 California youth ages five through 24 were known to have committed suicide.
- The state's youth suicide rate in 2011-13 was 7.7 per 100,000 youth ages 15-24, slightly higher than previous years, but substantially lower than the rate in 1995-97 (9.4 per 100,000).
- In 2013, males accounted for almost 80% of youth suicides in California (354 of 452). Statewide and nationally, many more male youth (ages 15-24) than female youth commit suicide.
- In 2013, there were 3,322 hospitalizations for non-fatal self-inflicted injuries among children and youth ages five through 20 in California.
- In 2013, 62% of hospitalizations for self-inflicted injuries in California involved youth ages 16-20.

**Arguments in support.** Mental Health America Los Angeles supports the bill and argues, “School personnel are on the frontlines of the youth mental health crisis in our state, yet often lack the knowledge and skills it takes to identify and help students who are in need. Depression symptoms are at an all-time high for high school students and more than 1 in 6 reported that they have seriously considered attempting suicide. School personnel need your help to address this crisis. We’re writing to request that you support the bill and enact this innovative program to help our school personnel and California’s youth. Providing the opportunity for school personnel to be trained in Youth Mental Health First Aid would go a long way in giving them the tools they need to respond when mental health crises occur in our schools. This program is also one of the best, most cost-effective early intervention programs to help ensure school safety.”

**Recommended Committee Amendments.** Staff recommends that the bill be amended as follows:

- 1) Clarify that the CDE shall identify an evidence-based training program for a local educational agency (LEA) to use to train classified and certificated school employees having direct contact with pupils on recognizing indicators of mental health concerns. Remove references to youth mental health first aid in the bill.
- 2) Specify that the training program may be a nationally or statewide recognized nonprofit training authority in mental illness and substance use disorders.
- 3) Clarify that the LEA shall provide this training to employees during regularly scheduled work hours.

**Related legislation.** AB 666 (Gabriel) of this Session, would require the California Department of Education (CDE) to develop model referral protocols for voluntary use by schools to address the appropriate and timely referral by school staff of students with mental health concerns.

AB 2639 (Berman & O'Donnell), Chapter 437, Statutes of 2019, requires schools that serve students in grades seven through 12 to review and, if necessary, update their policies on pupil suicide prevention at least every 5 years.

AB 2246 (O'Donnell), Chapter 642, Statutes of 2016, requires schools that serve pupils in grades seven to 12 to adopt a policy on pupil suicide prevention in consultation with school and community stakeholders, school-employed mental health professionals, and suicide prevention experts. AB 2246 also requires that these policies address any training to be provided to teachers on suicide awareness and prevention.

**REGISTERED SUPPORT / OPPOSITION:****Support**

A Black Education Network (Aben)  
A World Fit For Kids  
Abriendo Puertas/Opening Doors  
Aeries Software  
African American Network Of Kern County, Inc.  
Alameda County Casa  
Alder Graduate School Of Education  
Alifano Technologies  
Alliance Of Relative Caregivers  
Almaden Valley Counseling Service  
Alum Rock Counseling Center  
Alum Rock School District  
American Academy Of Pediatrics, California  
American Academy Of Pediatrics, California, Chapter 2  
Aplus+  
Arts Bridging The Gap  
Asian Americans Advancing Justice - California  
Bay Area Central American Chamber Of Commerce  
Benevolence Health Centers  
Bicycle Coffee  
Big Brothers Big Sisters Of Central California  
Blue Shield Of California  
Bohbot & Riles, Pc  
Born This Way Foundation  
Boulder Communication  
Boys & Girls Clubs Of Fresno County  
Bridge Of Faith  
Brighter Beginnings  
Brooke Frost & Associates  
Ca Council Of Community Behavioral Health Agencies  
California Academy Of Child And Adolescent Psychiatry  
California Alliance Of Caregivers  
California Association Of Marriage And Family Therapists  
California Association Of Private School Organizations  
California Catholic Conference

California Center For Rural Policy  
California Children'S Hospital Association  
California Council Of Community Behavioral Health Agencies  
California Education Partners  
California Federation Of Teachers  
California Mathematics Council  
California Pan-Ethnic Health Network  
California Partnership  
California School-Age Consortium  
California State Pta  
California Stem Network  
Canal Alliance  
Carolynn'S Montessori For Toddlers  
Casa Of Merced County  
Casa Of Solano County  
Caulder Lamm Alliance For Children, Inc.  
Center For Leadership, Equity, And Research (Clear)  
Central California Asthma Collaborative  
Central California Children'S Institute  
Child Abuse Prevention Council Of Contra Costa County  
Child Care Coordinating Council Of San Mateo County  
Child Parent Institute  
Children Now  
Children'S Health Council  
Children'S Network Of Solano County  
Civicorps  
Clinica Sierra Vista  
Coalition For Responsible Community Development  
Coleman Advocates For Children & Youth  
Common Sense Kids Action  
Community Action Marin  
Community Clinic Consortium  
Community Education Partnerships  
Community Health Initiative Napa County  
Community Social Model Advocates  
Community Works  
Congregations Organized For Prophetic Engagement  
Cope Family Center  
Counseling And Support Services For Youth (Cassy)  
County Behavioral Health Directors Association  
County Behaviors Health Directors Association Of California  
Cultiva La Salud - Merced County  
Curiodysssey  
Daly City Youth Health Center  
Digital Deployment, Inc.  
Disability Rights California  
Dorris Dann Kids Campus  
Earth Mama Healing Inc.  
East Los Angeles Rising Youth Club

Educate Our State  
Education Française Bay Area (Efba)  
Educational Results Partnership  
Emc Research  
Empowering Pacific Islander Communities (Epic)  
Escuela De La Raza Unida  
Every Neighborhood Partnership  
Expandability  
Eye Luv Lucy Optometry  
Faith In The Valley  
Families Advocating For Chemical And Toxics Safety  
Families Forward Learning Center  
Family Connections  
Family Paths, Inc.  
Fidelity Ehr  
Fine Infant Program  
Firm, Inc.  
First Congregational Church Of Palo Alto, Ucc  
Footsteps Child Care, Inc.  
Fowler Unified School District  
Friends Of The Family  
Full Court Press Communications  
Futures Without Violence  
Gardner Family Health Network  
Girl Scouts Of San Gorgonio Council  
Girls Inc. Of Alameda County  
Girls Inc. Of The Island City  
Give For A Smile  
Good Samaritan Family Resource Center  
Good2know Partners  
Great School Choices  
Guatemalan American Chamber Of Commerce  
Half Moon Bay Brewing  
Harbor Strategic Consulting  
Hathaway-Sycamores  
Health Center Partners Of Southern California  
Health Connected  
Health Officers Association Of California  
Healthier Kids Foundation  
Healthy Chats, Llc  
Healthy Cities Tutoring  
Healthy House Within A Match Coalition  
Heart Of Los Angeles (Hola)  
Helpline Youth Counseling, Inc.  
Hispanic Chambers Of Commerce Of San Francisco  
Home Start, Inc  
Homey  
I'M A Movement Not A Monument  
Inland Congregations United For Change

Inland Empire Coverage And Health Initiative (Ie-Chi)  
Inn At Mavericks  
Inner-City Arts  
Interfaith Council Of Contra Costa County  
James Morehouse Project  
Jewish Family Service Of Los Angeles  
Just Keep Livin Foundation  
Kickoff Solutions  
Kids In Common, A Program Of Planned Parenthood Mar Monte  
Kids' Own Wisdom  
Kings Partnership For Prevention  
Krause Center For Innovation  
La Clinica De La Raza, Inc.  
Latin American And Caribbean Business Chamber Of Commerce  
Latino And Latina Roundtable Of The San Gabriel And Pomona Valley  
Latino Coalition For A Healthy California  
Latino Equality Alliance  
Learning For Action  
Learning Rights Law Center  
Lemonade Creative Consulting  
Lgbt Community Center Of The Desert  
Lifelong Medical Care  
Lincoln  
Lisa Cleri Reale & Associates  
Little Manila Rising  
Los Angeles United Methodist Urban Foundation  
Lucile Packard Children'S Hospital\_Stanford Children'S Health  
Lutheran Church Of The Redeemer  
Macla  
Mar Vista Family Center  
Marinkids  
Mendocino Coast Children'S Fund  
Mental Health America Of Los Angeles  
Mental Health And Autism Insurance Project  
Mi Familia Vota  
Milpa (Motivating Individual Leadership For Public Advancement)  
Mindspark Custom Learning Solutions  
Mission City Community Network  
Mission Cultural Center For Latino Arts  
Mountain View/Los Altos/Los Altos Hills Challenge Team  
Mystical Healing Touch  
Napa Running Company  
Nicaraguan American Chamber Of Commerce, Northern California  
North Bay Leadership Council  
North Star Family Center  
Omnific Pictures Documentary And Television Production  
Onepercent For Education  
Open Source Wellness  
Optimal Solutions Consulting

Our Children La  
Pacific Community Solutions, Inc.  
Parent Institute For Quality Education Los Angeles  
Parent Leadership Training Institute Solano  
Parents Helping Parents  
Parents Helping Parents Of San Luis Obispo  
Pdi Surgery Center  
Peace Over Violence  
Peninsula Bridge  
Peninsula Family Service  
People Who Care (Pwc) Children Association  
Physicians For National Health Program - California  
Placer Independent Resource Services  
Plumas Casa  
Points Of Access, Llc  
Portia Bell Hume Behavioral Health And Training Center  
Positive Discipline Community Resources  
Project Edquity  
Project Knucklehead  
Project What!  
Project Yes  
Promise Venture Studio  
Proyecto Pastoral  
Public Health Advocates  
Racial And Ethnic Mental Health Disparities Coalition  
Radical Tendencies Yoga & Mindfulness Education  
Radio BilingüE, Inc.  
Rape Counseling Services Of Fresno  
Redwood City-San Mateo County Chamber Of Commerce  
Restorative Schools Vision Project  
Richmond Main Street Initiative  
Richmond Police Activities League (Pal)  
Rise Together  
Roman Catholic Diocese Of Fresno  
Rpm Consulting  
Sacramento Lgbt Community Center  
San Diego County Urban League  
San Mateo County Economic Development Association  
San Mateo County Office Of Education  
Shields For Families  
Silicon Valley Regional Data Trust  
Silver Giving Foundation  
Sojourn  
Somos Mayfair  
Southside Coalition Of Community Health Centers  
Speak Up  
St. Andrew'S Episcopal Church And Preschool  
Steinberg Institute  
Stockton Schools Initiative

Successful Survivors Foundation  
Summit Bank  
Sunnyvale Silicon Valley Chamber Of Commerce  
Teen Success, Inc.  
Ten Strands  
Tender Greens  
The Big Lift  
The Carol And James Collins Foundation  
The Childs-Pace Foundation, Inc  
The Latina Center  
The Los Angeles Trust For Children'S Health  
The Oakland Public Education Fund  
The Parent Notebook  
The Village Method  
Thrive, The Alliance Of Nonprofits For San Mateo County  
Today'S Youth Matter  
Trauma Camp  
Two Bit Circus Foundation  
United Friends Of The Children  
Urban League Of San Diego County  
Urban Strategies, Inc.  
Usf Center For Child And Family Development, School Based Family Counseling  
Ventura County Office Of Education  
West Covina Council Pta  
Wow Explorations  
Ymca Of Metropolitan Los Angeles  
Young Minds Advocacy  
Youth Community Service  
Youth Justice Coalition  
Youth Leadership Institute Eastern Coachella Valley  
Youth Leadership Institute Fresno  
Youth Leadership Institute Long Beach  
Youth Leadership Institute Marin  
Youth Leadership Institute Merced  
Youth Leadership Institute San Francisco  
Youth Leadership Institute San Mateo  
Zen Threads

## **Opposition**

None on file

**Analysis Prepared by:** Chelsea Kelley / ED. / (916) 319-2087