

Introduced by Senator Portantino

February 14, 2023

An act to amend Sections 49428.15 and 51925 of the Education Code, relating to pupil health.

LEGISLATIVE COUNSEL'S DIGEST

SB 509, as introduced, Portantino. School employee and pupil training: youth mental and behavioral health: mental health education.

(1) Existing law, subject to an appropriation, requires the State Department of Education to recommend best practices and identify training programs for use by local educational agencies to address youth behavioral health, on or before January 1, 2023, as provided. Existing law requires the department to ensure that each identified training program, among other requirements, provides instruction on recognizing the signs and symptoms of youth behavioral health disorders, including common psychiatric conditions and substance use disorders, and on how school staff can best provide referrals to youth behavioral health services or other support to individuals in the early stages of developing a youth behavioral health disorder.

This bill would require the department, on or before July 1, 2024, to identify training programs that also include instruction on how school staff can best provide referrals to special education services. The bill would provide, for purposes of the instruction on recognizing the signs and symptoms of youth behavioral health disorders, the examples of schizophrenia, bipolar disorder, major clinical depression, and anxiety disorders. The bill would require, on or before January 1, 2027, local educational agencies to certify to the department that 75% of each of its classified and certificated employees, who have direct contact with pupils at school, have received that youth behavioral health training,

as specified. The bill would prohibit the training in youth behavioral health to be a condition of employment or hiring. By imposing training certification duties on local educational agencies, the bill would impose a state-mandated local program.

(2) Existing law requires, if a school district, county office of education, state special school, or charter school offer one or more courses in health education to pupils in middle school or high school, that the course or courses include instruction in mental health that meet certain requirements, as specified.

This bill instead would require a school district, county office of education, state special school, or charter school to ensure that all pupils in grades 1 to 12, inclusive, receive evidence-based, age-appropriate mental health education from instructors trained in the appropriate courses at least once in elementary school, at least once in junior high school or middle school, as applicable, and at least once in high school, as provided. By imposing additional duties on local educational agencies, the bill would impose a state-mandated local program. The bill also would make legislative findings and declarations related to the benefits of mental health education for those pupils.

(3) The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement.

This bill would provide that, if the Commission on State Mandates determines that the bill contains costs mandated by the state, reimbursement for those costs shall be made pursuant to the statutory provisions noted above.

Vote: majority. Appropriation: no. Fiscal committee: yes.
State-mandated local program: yes.

The people of the State of California do enact as follows:

- 1 SECTION 1. (a) The Legislature finds and declares all of the
- 2 following:
- 3 (1) Mental health is critical to overall health, well-being, and
- 4 academic success.
- 5 (2) Mental health challenges affect all age groups, races,
- 6 ethnicities, and socioeconomic classes.
- 7 (3) Millions of Californians, including at least one in five youths,
- 8 live with mental health challenges. Millions more are affected by

1 the mental health challenges of someone else, such as a close friend
2 or family member.

3 (4) Mental health education is one of the best ways to increase
4 awareness and the seeking of help, while reducing the stigma
5 associated with mental health challenges. The public education
6 system is the most efficient and effective setting for providing this
7 education to all youth.

8 (b) For the foregoing reasons, it is the intent of the Legislature
9 in enacting this measure to ensure that all California pupils in
10 grades 1 to 12, inclusive, have the opportunity to benefit from a
11 comprehensive mental health education.

12 SEC. 2. Section 49428.15 of the Education Code is amended
13 to read:

14 49428.15. (a) For purposes of this section, the following
15 definitions apply:

16 (1) “Evidence-based” means peer-reviewed, scientific research
17 evidence, including studies based on research methodologies that
18 control threats to both the internal and the external validity of the
19 research findings.

20 (2) “Evidence-informed” means using research that is already
21 available and has been tested for efficacy and effectiveness. This
22 evidence is then combined with the experiences and expertise of
23 the training program developers to best fit the population intended
24 to be served.

25 (3) “Local educational agency” means a county office of
26 education, school district, state special school, or charter school
27 that serves pupils in any of grades 7 to 12, inclusive.

28 (4) “Youth behavioral health disorders” means pupil mental
29 health and substance use disorders.

30 (5) “Youth behavioral health training” means training addressing
31 the signs and symptoms of a pupil mental health or substance use
32 disorder.

33 (b) The department shall, on or before January 1, 2023,
34 recommend best practices, and identify evidence-based and
35 evidence-informed training programs for schools to address youth
36 behavioral health, including, but not necessarily limited to, staff
37 and pupil training.

38 (c) In identifying one or more evidence-based or
39 evidence-informed youth behavioral health training programs for
40 use by local educational agencies to train school staff or pupils

1 pursuant to subdivision (b), the department shall ensure that each
2 training program meets all of the following requirements:

3 (1) (A) Provides instruction on recognizing the signs and
4 symptoms of youth behavioral health disorders, including common
5 psychiatric conditions and *common* substance use disorders such
6 as opioid and alcohol abuse.

7 (B) *Notwithstanding the deadline specified in subdivision (b),*
8 *on or before July 1, 2024, provides instruction on recognizing the*
9 *signs and symptoms of common psychiatric conditions such as*
10 *schizophrenia, bipolar disorder, major clinical depression, and*
11 *anxiety disorders.*

12 (2) (A) Provides instruction on how school staff can best provide
13 referrals to youth behavioral health services or other support to
14 individuals in the early stages of developing a youth behavioral
15 health disorder.

16 (B) *Notwithstanding the deadline specified in subdivision (b),*
17 *on or before July 1, 2024, provides instruction on how school staff*
18 *can best provide referrals to special education services.*

19 (3) Provides instruction on how to maintain pupil privacy and
20 confidentiality in a manner consistent with federal and state privacy
21 laws.

22 (4) Provides instruction on the safe deescalation of crisis
23 situations involving individuals with a youth behavioral health
24 disorder.

25 (5) Is capable of assessing trainee knowledge before and after
26 training is provided in order to measure training outcomes.

27 (6) Is administered by a nationally recognized training authority
28 in youth behavioral health disorders or by a local educational
29 agency.

30 (7) (A) Includes in-person and virtual training with certified
31 instructors who can recommend resources available in the
32 community for individuals with a youth behavioral health disorder.

33 (B) For purposes of this paragraph, “certified instructors” means
34 individuals who obtain or have obtained a certification to provide
35 the selected youth behavioral health training.

36 (d) *On or before January 1, 2027, a local educational agency*
37 *shall certify to the department that 75 percent of its classified*
38 *employees and 75 percent of its certificated employees having*
39 *direct contact with pupils at each school have received the youth*

behavioral health training described in subdivision (c) in accordance with all of the following:

(1) Except as provided in paragraph (2), the youth behavioral health training is provided to classified and certificated employees during regularly scheduled work hours.

(2) If a classified or certificated employee receives the youth behavioral health training in a manner other than through an in-service training program provided by the local educational agency, the employee may present a certificate of successful completion of the training to the local educational agency for purposes of satisfying the requirements of this subdivision.

(3) The youth behavioral health training shall not be a condition of employment or hiring for classified or certificated employees.

(d)

(e) This section shall be implemented only to the extent that an appropriation is made in the annual Budget Act or another statute for these purposes.

SEC. 3. Section 51925 of the Education Code is amended to read:

51925. Each school district, county office of education, state special school, and charter school ~~that offers one or more courses in health education to pupils in middle school or high school shall include in those courses instruction in mental health that meets the requirements of this article. This section shall not be construed to limit a school district, county office of education, state special school, or charter school in offering or requiring instruction in mental health as specified in this article.~~ shall ensure that all pupils in grades 1 to 12, inclusive, receive evidence-based, age-appropriate mental health education from instructors trained in the appropriate courses at least once in elementary school, at least once in junior high school or middle school, as applicable, and at least once in high school. This instruction shall include all of the following:

(a) Reasonably designed instruction on the overarching themes and core principles of mental health.

(b) Defining signs and symptoms of common mental health challenges. Depending on pupil age and developmental level, this may include defining conditions such as depression, suicidal thoughts and behaviors, schizophrenia, bipolar disorder, eating disorders, and anxiety, including post-traumatic stress disorder.

1 (c) Elucidating the evidence-based services and supports that
2 effectively help individuals manage mental health challenges.

3 (d) Promoting mental health wellness and protective factors,
4 which includes positive development, social and cultural
5 connectedness and supportive relationships, resiliency, problem
6 solving skills, coping skills, self-esteem, and a positive school and
7 home environment in which pupils feel comfortable.

8 (e) The ability to identify warning signs of common mental
9 health problems in order to promote awareness and early
10 intervention so that pupils know to take action before a situation
11 turns into a crisis. This shall include instruction on both of the
12 following:

13 (1) How to seek and find assistance from professionals and
14 services within the school district that includes, but is not limited
15 to, school counselors with a pupil personnel services credential,
16 school psychologists, and school social workers, and in the
17 community for themselves or others.

18 (2) Evidence-based and culturally responsive practices that are
19 proven to help overcome mental health challenges.

20 (f) The connection and importance of mental health to overall
21 health and academic success and to co-occurring conditions, such
22 as chronic physical conditions, chemical dependence, and substance
23 abuse.

24 (g) Awareness and appreciation about the prevalence of mental
25 health challenges across all populations, races, ethnicities, and
26 socioeconomic statuses, including the impact of race, ethnicity,
27 and culture on the experience and treatment of mental health
28 challenges.

29 (h) Stigma surrounding mental health challenges and what can
30 be done to overcome stigma, increase awareness, and promote
31 acceptance. This shall include, to the extent possible, classroom
32 presentations of narratives by trained peers and other individuals
33 who have experienced mental health challenges and how they
34 coped with their situations, including how they sought help and
35 acceptance.

36 SEC. 4. If the Commission on State Mandates determines that
37 this act contains costs mandated by the state, reimbursement to
38 local agencies and school districts for those costs shall be made

1 pursuant to Part 7 (commencing with Section 17500) of Division
2 4 of Title 2 of the Government Code.

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