

BILL ANALYSIS

C.S.H.B. 11
By: Price
Public Health
Committee Report (Substituted)

BACKGROUND AND PURPOSE

Interested parties are concerned that children who are suffering from mental health conditions or struggling with substance abuse do not receive sufficient early interventions with respect to their condition which, these parties report, can result in considerable personal and financial costs to the children and their parents or caregivers. C.S.H.B. 11 seeks to address these concerns by amending the law regarding health care services for students and by improving the consideration of the mental health of students in school planning, educator training requirements, curriculum requirements, educational programs, and state and regional programs and services.

CRIMINAL JUSTICE IMPACT

It is the committee's opinion that this bill does not expressly create a criminal offense, increase the punishment for an existing criminal offense or category of offenses, or change the eligibility of a person for community supervision, parole, or mandatory supervision.

RULEMAKING AUTHORITY

It is the committee's opinion that this bill does not expressly grant any additional rulemaking authority to a state officer, department, agency, or institution.

ANALYSIS

C.S.H.B. 11 amends the Education Code to replace the requirement that a public school district improvement plan include strategies for discipline management with a requirement that such a plan include strategies for positive behavior interventions and support. The bill replaces the requirement that the required training for educator certification include instruction on effective strategies for teaching and intervening with students with mental or emotional disorders with a requirement that such training include instruction on effective strategies for teaching and intervening with students with mental health conditions or who engage in substance abuse.

C.S.H.B. 11 revises the continuing education requirements for a classroom teacher and for a principal and includes among such requirements instruction regarding students with mental health conditions, as defined by the bill, or who engage in substance abuse, as defined by the bill. The bill authorizes continuing education requirements for a classroom teacher and for a principal to include instruction regarding how grief and trauma affect student learning and behavior and how evidence-based, grief-informed, and trauma-informed strategies support the academic success of students affected by grief and trauma. The bill includes among the continuing education requirements for a counselor instruction regarding counseling students concerning mental health conditions and substance abuse. The bill changes the maximum amount of hours of continuing education requirements that an educator, including a classroom teacher and a principal or other administrator, may be allowed to fulfill under State Board for Educator Certification (SBEC) rules by participating in a certain mental health first aid training program from 12 hours to 8 hours if the program is offered using an online or videoconferencing format or to 16 hours if the program is offered through a classroom instruction format that requires in-person attendance, with the educator permitted to receive credit for twice the number of hours of instruction provided. The bill removes statutory language limiting the number of hours of

continuing education that an educator may fulfill in such a program to the number of hours the educator actually spends participating in the program. The bill requires the SBEC, not later than March 1, 2018, to propose rules to comply with the bill's continuing education provisions.

C.S.H.B. 11 authorizes the staff development provided by a school district to an educator other than a principal to include training in recognizing signs of mental health conditions and substance abuse and in positive behavior intervention and support strategies. The bill repeals a provision requiring the Texas Education Agency (TEA), in coordination with the Health and Human Services Commission (HHSC), to establish and maintain a website to provide resources for teachers who teach students with special health needs. The bill instead requires TEA, in coordination with HHSC, to establish and maintain a website to provide resources for school district or open-enrollment charter school employees regarding working with students with mental health conditions, students who engage in substance abuse, or students with physical health needs. The bill requires TEA to include on the website information about the interventions for, treatment of, and management of mental health conditions, substance abuse, and physical health needs, and how those factors may affect a student's well-being or ability to succeed in school; grief-informed and trauma-informed practices; building skills related to managing emotions, establishing and maintaining positive relationships, and responsible decision-making; positive behavior interventions and supports; a safe and supportive school climate; and food allergies that are common among students, methods for preventing exposure to a specific food when necessary to protect a student's health, and treating a student who is suffering from an allergic reaction to a food. The bill requires TEA, in cooperation with HHSC, to establish the website not later than December 1, 2017.

C.S.H.B. 11 requires each school district that offers kindergarten through grade 12 to include mental health, including instruction about mental health conditions and substance abuse, as a component of the health curriculum offered in the required enrichment curriculum in addition to the required physical health component. The bill revises the duties of the State Board of Education (SBOE) and TEA with regard to addressing substance abuse in the health curriculum. The bill repeals a provision relating to SBOE adoption of essential knowledge and skills that address the nonmedical use of prescription drugs and to the requirement that TEA compile a list of evidence-based prescription drug misuse awareness programs as defined.

C.S.H.B. 11 specifies that the duty of a local school health advisory council to recommend the number of hours of instruction to be provided in health education includes instruction in physical health education and mental health education, requires a council's recommendations regarding health education to address physical health concerns and mental health concerns to ensure the integration of physical health education and mental health education, replaces the council's duty to make recommendations regarding instruction to prevent the use of tobacco with the duty to make recommendations regarding instruction about substance abuse, and requires a council's recommendations regarding school health services to include physical health services and mental health services, if provided at a campus by the school district or by a third party under a contract with the district. The bill requires a district board of trustees to make a good faith effort to appoint to the local school health advisory council at least one psychiatrist or nonphysician mental health professional, defined by the bill as a psychologist licensed to practice in Texas and designated as a health-service provider, a registered nurse with a master's or doctoral degree in psychiatric nursing, a licensed clinical social worker, or a professional counselor licensed to practice in Texas and authorizes a school district to employ a nonphysician mental health professional. The bill includes among the information a school district is required to publish in the student handbook and post on the district's website, if the district has a website, a statement of the policies and procedures adopted to promote the physical health and mental health of students, the physical health and mental health resources available at each campus, contact information for the nearest providers of essential public health services under the Local Public Health Reorganization Act, and the contact information for the nearest local mental health authority.

C.S.H.B. 11 authorizes a school district to develop an interim intervention, support, or crisis plan to provide immediate services and supports to a student while the student's full individual and

initial evaluation for purposes of special education services is being conducted.

C.S.H.B. 11 replaces the authorization for a district board of trustees to cooperate with local law enforcement officials and the Texas Alcoholic Beverage Commission in attempting to provide a safe alcohol-free environment to students coming to or going from school and in enforcing certain Alcoholic Beverage Code provisions with a requirement that such a board cooperate with such entities in attempting to provide a safe drug-free and alcohol-free environment to students coming to or going from school and in enforcing those provisions.

C.S.H.B. 11 expands the required components of the coordinated health programs TEA is required to make available to each school district to include mental health education and substance abuse education.

C.S.H.B. 11 authorizes a school district or open-enrollment charter school to establish a school-based health center at one or more campuses on the recommendation of an advisory council or on the initiative of the district board of trustees or the governing body of an open-enrollment charter school, respectively. The bill specifies that among the permissible services for a school-based health care center to provide are physical health care services and adds as a permissible service category treatment for mental health conditions or substance abuse. The bill requires the staff of a school-based health center, on determining that a student is in need of a referral for physical health services or mental health services, to notify the student's parent or guardian or another person having legal control of the student verbally and in writing of the basis for the referral and includes a course of treatment that includes multiple treatment occasions of the same type of service among the services for which specific written consent by such a person is required for a referral to be provided.

C.S.H.B. 11 extends the authorization for a district board of trustees to establish a local health education and health care advisory council to the governing body of an open-enrollment charter school and expands the scope of statutory provisions relating to that authorization to include charter schools. The bill requires TEA, in cooperation with HHSC and not later than March 1, 2018, to develop guidelines for school districts regarding partnering with a local mental health authority and with community mental health services providers and substance abuse services providers to increase student access to school-based mental health services and obtaining school-based mental health services through Medicaid. The bill changes the entity required to keep a record of efforts made to coordinate the services of a school-based health center in certain rural areas with existing providers in the area from a local health education and health care advisory council to the applicable school district or open-enrollment charter school.

C.S.H.B. 11 amends the Health and Safety Code by transferring to the Education Code and amending provisions regarding mental health, substance abuse, and youth suicide programs in public elementary, junior high, middle, and high schools within the general education setting. The bill transfers from the Department of State Health Services to TEA the duty to provide and annually update, in coordination with HHSC and regional education service centers, a list of recommended best practice-based programs regarding mental health, substance abuse, and youth suicide and regarding additional matters as added and revised by the bill. The bill requires TEA, in coordination with HHSC and regional education service centers, to provide that list not later than August 1, 2018 and requires the list, as published on each entity's website, to be in an easily accessible, searchable, and user-friendly format. The bill replaces the authorization for a district board of trustees to adopt a policy concerning the listed program areas with a requirement that a school district develop practices and procedures concerning each listed program area. The bill clarifies the authorization for TEA, HHSC, and each regional education service center to accept certain donations.

C.S.H.B. 11 establishes that any change made by the bill that imposes a new duty or requirement on a school district or an open-enrollment charter school applies beginning with the 2018-2019 school year.

C.S.H.B. 11 amends the Civil Practice and Remedies Code to make conforming changes.

C.S.H.B. 11 repeals the following provisions of the Education Code:

- Section 21.463
- Section 28.002(w)

EFFECTIVE DATE

September 1, 2017.

COMPARISON OF ORIGINAL AND SUBSTITUTE

While C.S.H.B. 11 may differ from the original in minor or nonsubstantive ways, the following comparison is organized and formatted in a manner that indicates the substantial differences between the introduced and committee substitute versions of the bill.

INTRODUCED

HOUSE COMMITTEE SUBSTITUTE

ARTICLE 1. MENTAL HEALTH OF STUDENTS IN PUBLIC SCHOOLS

Same as introduced version.

SECTION 1.01. Subchapter D, Chapter 11, Education Code, is amended by adding Section 11.183 to read as follows:

SECTION 1.01. Section 5.001, Education Code, is amended by adding Subdivisions (5-a) and (9) to read as follows:

Sec. 11.183. SAFE AND SUPPORTIVE SCHOOL CLIMATE ASSESSMENT AND PROMOTION. (a) In this section:

(1) "Behavioral health disorder" means co-occurring mental illness and substance abuse.

(5-a) "Mental health condition" means an illness, disease, or disorder, other than epilepsy, dementia, substance abuse, or intellectual disability, that:

(2) "Mental illness" means an illness, disease, or condition, other than epilepsy, dementia, substance abuse, or intellectual or developmental disability, that:

(A) substantially impairs a person's thought, perception of reality, emotional process, or judgment; or

(A) substantially impairs a person's thought, perception of reality, emotional process, or judgment; or

(B) grossly impairs behavior as demonstrated by recent disturbed behavior.

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(3) "Substance abuse" means a patterned use of a substance, including a controlled substance, as defined by Chapter 481, Health and Safety Code, and alcohol, in which the person consumes the substance in amounts or with methods that are harmful to the person's self or to others.

(9) "Substance abuse" means a patterned use of a substance, including a controlled substance, as defined by Chapter 481, Health and Safety Code, and alcohol, in which the person consumes the substance in amounts or with methods that are harmful to the person's self or to others.

(b) The board of trustees of each independent school district shall adopt a process for assessing whether the school climate in the district and each campus in the district is safe and supportive and promotes the social and emotional wellness of students.

(c) The board shall adopt a policy to promote a safe and supportive school climate in the district and each campus in the district that includes the use of:

(1) instructional methods and trauma-informed practices for promoting a safe and supportive school climate and social and emotional wellness; and

(2) special programs addressing students' mental illness, substance abuse, and behavioral health disorder challenges.

SECTION 1.02. Section 11.252(a), Education Code, is amended to read as follows:

(a) Each school district shall have a district improvement plan that is developed, evaluated, and revised annually, in accordance with district policy, by the superintendent with the assistance of the district-level committee established under Section 11.251. The purpose of the district improvement plan is to guide district and campus staff in the improvement of student performance for all student groups in order to attain state standards in respect to the achievement indicators adopted under Sections 39.053(c)(1)-(4). The district improvement plan must include provisions for:

(1) a comprehensive needs assessment addressing district student performance on the achievement indicators, and other appropriate measures of performance, that are disaggregated by all student groups served by the district, including categories of ethnicity, socioeconomic status, sex, and populations served by special programs, including students in special education programs under Subchapter A, Chapter 29;

(2) measurable district performance objectives for all appropriate achievement indicators for all student populations, including students in special education programs under Subchapter A, Chapter 29, and other measures of student performance that may be identified through the comprehensive needs assessment;

(3) strategies for improvement of student performance that include:

(A) instructional methods for addressing the needs of student groups not achieving their full potential;

(B) methods for addressing the needs of students for special programs, including:

(i) suicide prevention programs, in accordance with Subchapter G [~~Q-1~~], Chapter 38 [~~161, Health and Safety Code~~], which include [~~includes~~] a parental or guardian notification procedure;

(ii) conflict resolution programs;

SECTION 1.02. Section 11.252(a), Education Code, is amended to read as follows:

(a) Each school district shall have a district improvement plan that is developed, evaluated, and revised annually, in accordance with district policy, by the superintendent with the assistance of the district-level committee established under Section 11.251. The purpose of the district improvement plan is to guide district and campus staff in the improvement of student performance for all student groups in order to attain state standards in respect to the achievement indicators adopted under Sections 39.053(c)(1)-(4). The district improvement plan must include provisions for:

(1) a comprehensive needs assessment addressing district student performance on the achievement indicators, and other appropriate measures of performance, that are disaggregated by all student groups served by the district, including categories of ethnicity, socioeconomic status, sex, and populations served by special programs, including students in special education programs under Subchapter A, Chapter 29;

(2) measurable district performance objectives for all appropriate achievement indicators for all student populations, including students in special education programs under Subchapter A, Chapter 29, and other measures of student performance that may be identified through the comprehensive needs assessment;

(3) strategies for improvement of student performance that include:

(A) instructional methods for addressing the needs of student groups not achieving their full potential;

(B) methods for addressing the needs of students for special programs, including:

(i) suicide prevention programs, in accordance with Subchapter G [~~Q-1~~], Chapter 38 [~~161, Health and Safety Code~~], which include [~~includes~~] a parental or guardian notification procedure;

(ii) conflict resolution programs;

- (iii) violence prevention programs; and
- (iv) dyslexia treatment programs;
- (C) dropout reduction;
- (D) integration of technology in instructional and administrative programs;
- (E) positive behavior [discipline] management;
- (F) staff development for professional staff of the district;
- (G) career education to assist students in developing the knowledge, skills, and competencies necessary for a broad range of career opportunities; and
- (H) accelerated education;
- (4) strategies for providing to middle school, junior high school, and high school students, those students' teachers and school counselors, and those students' parents information about:
 - (A) higher education admissions and financial aid opportunities;
 - (B) the TEXAS grant program and the Teach for Texas grant program established under Chapter 56;
 - (C) the need for students to make informed curriculum choices to be prepared for success beyond high school; and
 - (D) sources of information on higher education admissions and financial aid;
 - (5) resources needed to implement identified strategies;
 - (6) staff responsible for ensuring the accomplishment of each strategy;
 - (7) timelines for ongoing monitoring of the implementation of each improvement strategy;
 - (8) formative evaluation criteria for determining periodically whether strategies are resulting in intended improvement of student performance; and
 - (9) the policy under Section 38.0041 addressing sexual abuse and other maltreatment of children.

SECTION 1.03. Section 21.001, Education Code, is amended to read as follows:

Sec. 21.001. DEFINITIONS

[~~DEFINITION~~]. In this chapter:

(1) "Behavioral health disorder," "mental illness," and "substance abuse" have the meanings assigned by Section 11.183.

(2) "Commissioner" [— "commissioner"] includes a person designated by the commissioner.

SECTION 1.04. Section 21.044(c-1), Education Code, is amended to read as

- (iii) violence prevention programs; and
- (iv) dyslexia treatment programs;
- (C) dropout reduction;
- (D) integration of technology in instructional and administrative programs;
- (E) positive behavior interventions and support [discipline management];
- (F) staff development for professional staff of the district;
- (G) career education to assist students in developing the knowledge, skills, and competencies necessary for a broad range of career opportunities; and
- (H) accelerated education;
- (4) strategies for providing to middle school, junior high school, and high school students, those students' teachers and school counselors, and those students' parents information about:
 - (A) higher education admissions and financial aid opportunities;
 - (B) the TEXAS grant program and the Teach for Texas grant program established under Chapter 56;
 - (C) the need for students to make informed curriculum choices to be prepared for success beyond high school; and
 - (D) sources of information on higher education admissions and financial aid;
 - (5) resources needed to implement identified strategies;
 - (6) staff responsible for ensuring the accomplishment of each strategy;
 - (7) timelines for ongoing monitoring of the implementation of each improvement strategy;
 - (8) formative evaluation criteria for determining periodically whether strategies are resulting in intended improvement of student performance; and
 - (9) the policy under Section 38.0041 addressing sexual abuse and other maltreatment of children.

No equivalent provision.

SECTION 1.03. Section 21.044(c-1), Education Code, is amended to read as

follows:

(c-1) Any minimum academic qualifications for a certificate specified under Subsection (a) that require a person to possess a bachelor's degree must also require that the person receive, as part of the training required to obtain that certificate, instruction regarding mental health, substance abuse, and youth suicide. The instruction required must:

(1) be provided through a program selected from the list of recommended best practice-based programs established under Section 38.301 [~~161.325, Health and Safety Code~~]; and

(2) include effective strategies [~~for teaching and intervening with students with mental or emotional disorders~~], including de-escalation techniques and positive behavioral interventions and supports, for teaching and intervening with students with mental illness or a behavioral health disorder or who engage in substance abuse.

SECTION 1.05. Section 21.054, Education Code, is amended by amending Subsections (d), (e), (f), and (g) and adding Subsection (d-2) to read as follows:

(d) Continuing education requirements for a classroom teacher must provide that not more than 25 percent of the training required every five years include instruction regarding:

(1) collecting and analyzing information that will improve effectiveness in the classroom;

(2) recognizing early warning indicators that a student may be at risk of dropping out of school;

(3) integrating technology into classroom instruction; and

(4) educating diverse student populations, including:

(A) students with learning disabilities [~~; including mental health disorders~~];

(B) students with intellectual or developmental disabilities;

(C) students with mental illness or a behavioral health disorder or who engage in substance abuse;

(D) students who are educationally disadvantaged;

(E) [~~(C)~~] students of limited English

follows:

(c-1) Any minimum academic qualifications for a certificate specified under Subsection (a) that require a person to possess a bachelor's degree must also require that the person receive, as part of the training required to obtain that certificate, instruction regarding mental health, substance abuse, and youth suicide. The instruction required must:

(1) be provided through a program selected from the list of recommended best practice-based programs established under Section 38.301 [~~161.325, Health and Safety Code~~]; and

(2) include effective strategies [~~for teaching and intervening with students with mental or emotional disorders~~], including de-escalation techniques and positive behavioral interventions and supports, for teaching and intervening with students with mental health conditions or who engage in substance abuse.

SECTION 1.04. Section 21.054, Education Code, is amended by amending Subsections (d), (e), (f), and (g) and adding Subsections (d-2) and (e-2) to read as follows:

(d) Continuing education requirements for a classroom teacher must provide that not more than 25 percent of the training required every five years include instruction regarding:

(1) collecting and analyzing information that will improve effectiveness in the classroom;

(2) recognizing early warning indicators that a student may be at risk of dropping out of school;

(3) integrating technology into classroom instruction; and

(4) educating diverse student populations, including:

(A) students who are eligible to participate in special education programs under Subchapter A, Chapter 29 [~~with disabilities, including mental health disorders~~];

(B) students who are eligible to receive educational services required under Section 504, Rehabilitation Act of 1973 (29 U.S.C. Section 794);

(C) students with mental health conditions or who engage in substance abuse;

(D) students who are educationally disadvantaged;

(E) [~~(C)~~] students of limited English

proficiency; and
(F) [~~D~~] students at risk of dropping out of school.

(d-2) Continuing education requirements for an educator may include instruction regarding how grief and trauma affect student learning and behavior and how evidence-based, grief-informed, and trauma-informed strategies support the academic success of students affected by grief and trauma.

(e) Continuing education requirements for a principal must provide that not more than 25 percent of the training required every five years include instruction regarding:

(1) effective and efficient management, including:

(A) collecting and analyzing information;
(B) making decisions and managing time; and

(C) supervising student discipline and managing behavior;

(2) recognizing early warning indicators that a student may be at risk of dropping out of school;

(3) integrating technology into campus curriculum and instruction; and

(4) educating diverse student populations, including:

(A) students with learning disabilities;

including mental health disorders;

(B) students with intellectual or developmental disabilities;

(C) students with mental illness or a behavioral health disorder or who engage in substance abuse;

(D) students who are educationally disadvantaged;

(E) [~~C~~] students of limited English proficiency; and

(F) [~~D~~] students at risk of dropping out of school.

(f) Continuing education requirements for a counselor must provide that not more than 25 percent of training required every five

proficiency; and
(F) [~~D~~] students at risk of dropping out of school.

(d-2) Continuing education requirements for a classroom teacher may include instruction regarding how grief and trauma affect student learning and behavior and how evidence-based, grief-informed, and trauma-informed strategies support the academic success of students affected by grief and trauma.

(e) Continuing education requirements for a principal must provide that not more than 25 percent of the training required every five years include instruction regarding:

(1) effective and efficient management, including:

(A) collecting and analyzing information;
(B) making decisions and managing time; and

(C) supervising student discipline and managing behavior;

(2) recognizing early warning indicators that a student may be at risk of dropping out of school;

(3) integrating technology into campus curriculum and instruction; and

(4) educating diverse student populations, including:

(A) students who are eligible to participate in special education programs under Subchapter A, Chapter 29 [with disabilities, including mental health disorders];

(B) students who are eligible to receive educational services required under Section 504, Rehabilitation Act of 1973 (29 U.S.C. Section 794);

(C) students with mental health conditions or who engage in substance abuse;

(D) students who are educationally disadvantaged;

(E) [~~C~~] students of limited English proficiency; and

(F) [~~D~~] students at risk of dropping out of school.

(e-2) Continuing education requirements for a principal may include instruction regarding how grief and trauma affect student learning and behavior and how evidence-based, grief-informed, and trauma-informed strategies support the academic success of students affected by grief and trauma.

(f) Continuing education requirements for a counselor must provide that not more than 25 percent of training required every five

years include instruction regarding:

- (1) assisting students in developing high school graduation plans;
- (2) implementing dropout prevention strategies; ~~and~~
- (3) informing students concerning:
 - (A) college admissions, including college financial aid resources and application procedures; and
 - (B) career opportunities; and
 - (4) counseling students concerning mental illness, behavioral health disorders, and substance abuse.

(g) The board shall adopt rules that allow an educator to

fulfill ~~[up to 12 hours of]~~ continuing education requirements by participating in a mental health first aid training program offered by a local mental health authority under Section 1001.203, Health and Safety Code. The rules adopted under this subsection must allow an educator who

completes a mental health first aid training program offered:

- (1) using an online or videoconferencing format to fulfill not more than eight hours of continuing education requirements; or
- (2) through a classroom instruction format that requires in-person attendance to fulfill not more than 16 hours of continuing education requirements, with the educator

permitted to receive credit for twice the number of hours of instruction provided. [The number of hours of continuing education an educator may fulfill under this subsection may not exceed the number of hours the educator actually spends participating in a mental health first aid training program.]

SECTION 1.06. Sections 21.451(d) and (d-1), Education Code, are amended to read as follows:

(d) The staff development:

- (1) may include training in:
 - (A) recognizing signs of mental illness, behavioral health disorders, and substance abuse;
 - (B) technology;
 - (C) ~~(B)~~ conflict resolution;
 - (D) ~~(C)~~ discipline strategies, including classroom management, district discipline policies, and the student code of conduct

years include instruction regarding:

- (1) assisting students in developing high school graduation plans;
- (2) implementing dropout prevention strategies; ~~and~~
- (3) informing students concerning:
 - (A) college admissions, including college financial aid resources and application procedures; and
 - (B) career opportunities; and
 - (4) counseling students concerning mental health conditions and substance abuse.

(g) The board shall adopt rules that allow an educator, including a classroom teacher and a principal or other administrator, to fulfill ~~[up to 12 hours of]~~ continuing education requirements by participating in a mental health first aid training program offered by a local mental health authority under Section 1001.203, Health and Safety Code. The rules adopted under this subsection must allow an educator, including a classroom teacher and a principal or other administrator, who completes a mental health first aid training program offered:

- (1) using an online or videoconferencing format to fulfill not more than eight hours of continuing education requirements; or
- (2) through a classroom instruction format that requires in-person attendance to fulfill not more than 16 hours of continuing education requirements, with the educator, including a classroom teacher and a principal or other administrator, permitted to

receive credit for twice the number of hours of instruction provided. [The number of hours of continuing education an educator may fulfill under this subsection may not exceed the number of hours the educator actually spends participating in a mental health first aid training program.]

SECTION 1.05. Sections 21.451(d), (d-1), and (e), Education Code, are amended to read as follows:

(d) The staff development:

- (1) may include training in:
 - (A) recognizing signs of mental health conditions and substance abuse;
 - (B) technology;
 - (C) ~~(B)~~ conflict resolution;
 - (D) positive behavior intervention and support [(C) discipline] strategies, including classroom management, district discipline

adopted under ~~[Section 37.001 and]~~ Chapter 37; and

(E) ~~[(D)]~~ preventing, identifying, responding to, and reporting incidents of bullying;

(2) subject to Subsection (e) and to Section 21.3541 and rules adopted under that section, must include training that is evidence-based ~~[based on scientifically based research]~~, as defined by Section 8101, Every Student Succeeds Act, ~~[9101, No Child Left Behind Act of 2001]~~ (20 U.S.C. Section 7801), and that:

(A) relates to instruction of students with disabilities; and

(B) is designed for educators who work primarily outside the area of special education; and

(3) must include suicide prevention training that must be provided:

(A) on an annual basis, as part of a new employee orientation, to all new school district and open-enrollment charter school educators; and

(B) to existing school district and open-enrollment charter school educators on a schedule adopted by the agency by rule.

(d-1) The suicide prevention training required by Subsection (d)(3) must use a best practice-based program recommended by the Health and Human Services Commission ~~[Department of State Health Services]~~ in coordination with the agency under Section 38.301 ~~[461.325, Health and Safety Code]~~.

SECTION 1.07. Subchapter J, Chapter 21, Education Code, is amended by adding Section 21.462 to read as follows:

Sec. 21.462. RESOURCES FOR TEACHERS OF STUDENTS WITH MENTAL HEALTH NEEDS.

The agency, in coordination with the Health and Human Services Commission, shall

adopted under ~~[Section 37.001 and]~~ Chapter 37; and

(E) ~~[(D)]~~ preventing, identifying, responding to, and reporting incidents of bullying;

(2) subject to Subsection (e) and to Section 21.3541 and rules adopted under that section, must include training that is evidence-based ~~[based on scientifically based research]~~, as defined by Section 8101, Every Student Succeeds Act ~~[9101, No Child Left Behind Act of 2001]~~ (20 U.S.C. Section 7801), and that:

(A) relates to instruction of students with disabilities; and

(B) is designed for educators, including classroom teachers, who work primarily outside the area of special education; and

(3) must include suicide prevention training that must be provided:

(A) on an annual basis, as part of a new employee orientation, to all new school district and open-enrollment charter school educators, including classroom teachers; and

(B) to existing school district and open-enrollment charter school educators, including classroom teachers, on a schedule adopted by the agency by rule.

(d-1) The suicide prevention training required by Subsection (d)(3) must use a best practice-based program recommended by the Health and Human Services Commission ~~[Department of State Health Services]~~ in coordination with the agency under Section 38.301 ~~[461.325, Health and Safety Code]~~.

(e) A school district is required to provide the training described by Subsection (d)(2) to an educator, including a classroom teacher, who works primarily outside the area of special education only if the educator does not possess the knowledge and skills necessary to implement the individualized education program developed for a student receiving instruction from the educator. A district may determine the time and place at which the training is delivered.

SECTION 1.06. Subchapter J, Chapter 21, Education Code, is amended by adding Section 21.462 to read as follows:

Sec. 21.462. RESOURCES REGARDING STUDENTS WITH HEALTH NEEDS.

The agency, in coordination with the Health and Human Services Commission, shall

establish and maintain an Internet website to provide resources for teachers regarding teaching students with mental illness or a behavioral health disorder or who engage in substance abuse.

establish and maintain an Internet website to provide resources for school district or open-enrollment charter school employees regarding working with students with mental health conditions, students who engage in substance abuse, or students with physical health needs. The agency must include on the Internet website information about:

(1) the interventions for, treatment of, and management of mental health conditions, substance abuse, and physical health needs, and how mental health conditions, substance abuse, or physical health needs may affect a student's well-being or ability to succeed in school;

(2) grief-informed and trauma-informed practices; building skills related to managing emotions, establishing and maintaining positive relationships, and responsible decision-making; positive behavior interventions and supports; and a safe and supportive school climate; and

(3) food allergies that are common among students, methods for preventing exposure to a specific food when necessary to protect a student's health, and treating a student who is suffering from an allergic reaction to a food.

SECTION 1.08. Section 21.463, Education Code, is amended to read as follows:

Sec. 21.463. RESOURCES FOR TEACHERS OF STUDENTS WITH SPECIAL PHYSICAL HEALTH NEEDS.

The agency, in coordination with the Health and Human Services Commission, shall establish and maintain an Internet website to provide resources for teachers who teach students with special physical health needs. The agency shall include on the website information about:

(1) the treatment and management of chronic physical illnesses and how such illnesses impact a student's well-being or ability to succeed in school; and

(2) food allergies that are common among students, including information about preventing exposure to a specific food when necessary to protect a student's health and information about treating a student suffering from an allergic reaction to a food.

SECTION 1.09. Subchapter A, Chapter 28, Education Code, is amended by adding Section 28.0011 to read as follows:

Sec. 28.0011. DEFINITIONS. In this

No equivalent provision. (*But see SECTION 3.01 below.*)

No equivalent provision.

chapter, "behavioral health disorder," "mental illness," and "substance abuse" have the meanings assigned by Section 11.183.

SECTION 1.10. Sections 28.002(a) and (r), Education Code, are amended to read as follows:

(a) Each school district that offers kindergarten through grade 12 shall offer, as a required curriculum:

(1) a foundation curriculum that includes:

- (A) English language arts;
- (B) mathematics;
- (C) science; and
- (D) social studies, consisting of Texas, United States, and world history, government, economics, with emphasis on the free enterprise system and its benefits, and geography; and

(2) an enrichment curriculum that includes:

- (A) to the extent possible, languages other than English;
- (B) physical health, with emphasis on the importance of proper nutrition and exercise;

(C) mental health, with emphasis on instruction about mental illness, behavioral health disorders, and substance abuse;

(D) physical education;

(E) [~~(D)~~] fine arts;

(F) [~~(E)~~] career and technology education;

(G) [~~(F)~~] technology applications;

(H) [~~(G)~~] religious literature, including the Hebrew Scriptures (Old Testament) and New Testament, and its impact on history and literature; and

(I) [~~(H)~~] personal financial literacy.

(r) In adopting the essential knowledge and skills for the mental health curriculum under Subsection (a)(2)(C) [~~(a)(2)(B)~~], the State Board of Education shall adopt essential knowledge and skills that address the dangers, causes, consequences, signs, symptoms, and treatment of binge drinking, and alcohol poisoning, and substance abuse. The agency shall compile a list of evidence-based substance abuse [~~alcohol~~] awareness programs from which a school district shall choose a program to use in the district's middle school, junior high school, and high school mental health curriculum. In this subsection, "evidence-based substance abuse [~~alcohol~~] awareness program" means a program, practice, or strategy that has been proven to effectively prevent substance abuse [~~or delay alcohol~~

SECTION 1.07. Sections 28.002(a) and (r), Education Code, are amended to read as follows:

(a) Each school district that offers kindergarten through grade 12 shall offer, as a required curriculum:

(1) a foundation curriculum that includes:

- (A) English language arts;
- (B) mathematics;
- (C) science; and
- (D) social studies, consisting of Texas, United States, and world history, government, economics, with emphasis on the free enterprise system and its benefits, and geography; and

(2) an enrichment curriculum that includes:

- (A) to the extent possible, languages other than English;
- (B) health, with emphasis on:
 - (i) physical health, including the importance of proper nutrition and exercise; and
 - (ii) mental health, including instruction about mental health conditions and substance abuse;

(C) physical education;

(D) fine arts;

(E) career and technology education;

(F) technology applications;

(G) religious literature, including the Hebrew Scriptures (Old Testament) and New Testament, and its impact on history and literature; and

(H) personal financial literacy.

(r) In adopting the essential knowledge and skills for the health curriculum under Subsection (a)(2)(B), the State Board of Education shall adopt essential knowledge and skills that address the dangers, causes, consequences, signs, symptoms, and treatment of binge drinking, and alcohol poisoning, and other forms of substance abuse. The agency shall compile a list of evidence-based substance abuse [~~alcohol~~] awareness programs from which a school district shall choose a program to use in the district's middle school, junior high school, and high school health curriculum.

In this subsection, "evidence-based substance abuse [~~alcohol~~] awareness program" means a program, practice, or strategy that has been proven to effectively prevent substance abuse [~~or delay alcohol~~

~~use~~] among students, as determined by evaluations that ~~use valid and reliable measures and that are published in peer-reviewed journals.~~

SECTION 1.11. Sections 28.004(c), (d), and (k), Education Code, are amended to read as follows:

(c) The local school health advisory council's duties include recommending:

(1) the number of hours of instruction to be provided in physical health education and in mental health education;

(2) policies, procedures, strategies, and curriculum appropriate for specific grade levels designed to prevent physical health concerns, including obesity, cardiovascular disease, Type 2 diabetes, and mental health concerns through coordination of:

(A) health education, which must equally address physical health concerns and mental health concerns to ensure the integration of physical health education and mental health education;

(B) physical education and physical activity;

(C) nutrition services;

(D) parental involvement;

(E) ~~instruction to prevent the use of tobacco~~;

(F) school health services;

(G) counseling and guidance services;

(H) a safe and healthy school environment; and

(I) school employee wellness;

(3) appropriate grade levels and methods of instruction for human sexuality instruction;

(4) strategies for integrating the curriculum components specified by Subdivision (2) with the following elements in a coordinated school health program for the district:

(A) school health services, including physical health services and mental health services, if provided at a campus by the district or by a third party under a contract with the district;

(B) counseling and guidance services;

(C) a safe and healthy school environment; and

(D) school employee wellness; and

(5) if feasible, joint use agreements or strategies for collaboration between the school district and community organizations or agencies.

(d) The board of trustees shall appoint at

~~use~~] among students, as determined by evaluations that are evidence-based [~~use valid and reliable measures and that are published in peer-reviewed journals~~].

SECTION 1.08. Sections 28.004(c), (d), and (k), Education Code, are amended to read as follows:

(c) The local school health advisory council's duties include recommending:

(1) the number of hours of instruction to be provided in health education, including physical health education and mental health education;

(2) policies, procedures, strategies, and curriculum appropriate for specific grade levels designed to prevent physical health concerns, including obesity, cardiovascular disease, Type 2 diabetes, and mental health concerns through coordination of:

(A) health education, which must address physical health concerns and mental health concerns to ensure the integration of physical health education and mental health education;

(B) physical education and physical activity;

(C) nutrition services;

(D) parental involvement;

(E) instruction about substance abuse [~~to prevent the use of tobacco~~];

(F) school health services, including mental health services;

(G) counseling and guidance services;

(H) a safe and healthy school environment; and

(I) school employee wellness;

(3) appropriate grade levels and methods of instruction for human sexuality instruction;

(4) strategies for integrating the curriculum components specified by Subdivision (2) with the following elements in a coordinated school health program for the district:

(A) school health services, including physical health services and mental health services, if provided at a campus by the district or by a third party under a contract with the district;

(B) counseling and guidance services;

(C) a safe and healthy school environment; and

(D) school employee wellness; and

(5) if feasible, joint use agreements or strategies for collaboration between the school district and community organizations or agencies.

(d) The board of trustees shall appoint at

least five members to the local school health advisory council. A majority of the members must be persons who are parents of students enrolled in the district and who are not employed by the district. One of those members shall serve as chair or co-chair of the council. The board of trustees shall appoint at least one psychiatrist or nonphysician mental health professional, as defined by Section 38.0101.

For each school year for which the board of trustees is unable to appoint a psychiatrist or nonphysician mental health professional, the board must submit to the commissioner a statement that the board was unable to appoint a psychiatrist or nonphysician mental health professional despite a good faith effort to do so.

The board of trustees also may appoint one or more persons from each of the following groups or a representative from a group other than a group specified under this subsection:

- (1) public school teachers;
- (2) public school administrators;
- (3) district students;
- (4) health care professionals;
- (5) the business community;
- (6) law enforcement;
- (7) senior citizens;
- (8) the clergy;
- (9) nonprofit health organizations; and
- (10) local domestic violence programs.

(k) A school district shall publish in the student handbook and post on the district's Internet website, if the district has an Internet website:

(1) a statement of the policies adopted to promote the physical health and mental health of students, the physical health and mental health resources available at each campus, contact information for the nearest providers of essential public health services under Chapter 121, Health and Safety Code, and the contact information for the nearest local mental health authority;

(2) a statement of the policies adopted to ensure that elementary school, middle school, and junior high school students engage in at least the amount and level of physical activity required by Section 28.002(1);

(3) ~~(2)~~ a statement of:
(A) the number of times during the preceding year the district's school health

least five members to the local school health advisory council. A majority of the members must be persons who are parents of students enrolled in the district and who are not employed by the district. One of those members shall serve as chair or co-chair of the council. The board of trustees shall make a good faith effort to appoint at least one psychiatrist or nonphysician mental health professional, as defined by Section 38.0101.

The board of trustees also may appoint one or more persons from each of the following groups or a representative from a group other than a group specified under this subsection:

- (1) public school teachers;
- (2) public school administrators;
- (3) district students;
- (4) health care professionals;
- (5) the business community;
- (6) law enforcement;
- (7) senior citizens;
- (8) the clergy;
- (9) nonprofit health organizations; and
- (10) local domestic violence programs.

(k) A school district shall publish in the student handbook and post on the district's Internet website, if the district has an Internet website:

(1) a statement of the policies and procedures adopted to promote the physical health and mental health of students, the physical health and mental health resources available at each campus, contact information for the nearest providers of essential public health services under Chapter 121, Health and Safety Code, and the contact information for the nearest local mental health authority;

(2) a statement of the policies adopted to ensure that elementary school, middle school, and junior high school students engage in at least the amount and level of physical activity required by Section 28.002(1);

(3) ~~(2)~~ a statement of:
(A) the number of times during the preceding year the district's school health

advisory council has met;

(B) whether the district has adopted and enforces policies to ensure that district campuses comply with agency vending machine and food service guidelines for restricting student access to vending machines; and

(C) whether the district has adopted and enforces policies and procedures that prescribe penalties for the use of e-cigarettes, as defined by Section 38.006, and tobacco products by students and others on school campuses or at school-sponsored or school-related activities; and

(4) ~~(3)~~ a statement providing notice to parents that they can request in writing their child's physical fitness assessment results at the end of the school year.

SECTION 1.12. Section 29.003(b), Education Code, is amended to read as follows:

(b) A student is eligible to participate in a school district's special education program if the student:

(1) is not more than 21 years of age and has a visual or auditory impairment that prevents the student from being adequately or safely educated in public school without the provision of special services; or

(2) is at least three but not more than 21 years of age and has one or more of the following disabilities that prevents the student from being adequately or safely educated in public school without the provision of special services:

(A) physical disability;

(B) intellectual or developmental disability ~~[mental retardation]~~;

(C) mental health disorder or social-emotional disorder ~~[emotional disturbance]~~;

(D) learning disability;

(E) autism;

(F) speech disability; or

(G) traumatic brain injury.

SECTION 1.13. Sections 29.004(a), (a-1), and (c), Education Code, are amended to read as follows:

(a) A written report of a full individual and initial evaluation of a student for purposes of special education services shall be completed as follows, except as otherwise provided by this section:

(1) not later than the 20th ~~[45th]~~ school day following the date on which the school district, in accordance with 20 U.S.C.

advisory council has met;

(B) whether the district has adopted and enforces policies to ensure that district campuses comply with agency vending machine and food service guidelines for restricting student access to vending machines; and

(C) whether the district has adopted and enforces policies and procedures that prescribe penalties for the use of e-cigarettes, as defined by Section 38.006, and tobacco products by students and others on school campuses or at school-sponsored or school-related activities; and

(4) ~~(3)~~ a statement providing notice to parents that they can request in writing their child's physical fitness assessment results at the end of the school year.

SECTION 1.09. Section 29.003(b), Education Code, is amended to read as follows:

(b) A student is eligible to participate in a school district's special education program if the student:

(1) is not more than 21 years of age and has a visual or auditory impairment that prevents the student from being adequately or safely educated in public school without the provision of special services; or

(2) is at least three but not more than 21 years of age and has one or more of the following disabilities that prevents the student from being adequately or safely educated in public school without the provision of special services:

(A) physical disability;

(B) intellectual disability ~~[mental retardation]~~;

(C) emotional disturbance;

(D) learning disability;

(E) autism;

(F) speech disability; or

(G) traumatic brain injury.

SECTION 1.10. Section 29.004, Education Code, is amended by adding Subsection (d) to read as follows:

Section 1414(a), as amended, receives written consent for the evaluation, signed by the student's parent or legal guardian, except that if a student has been absent from school during that period on three or more days, that period must be extended by a number of school days equal to the number of school days during that period on which the student has been absent; or

(2) for students under five years of age on ~~by~~ September 1 of the school year and not enrolled in public school and for students enrolled in a private or home school setting, not later than the 20th ~~45th~~ school day following the date on which the school district receives written consent for the evaluation, signed by a student's parent or legal guardian.

(a-1) If a school district receives written consent signed by a student's parent or legal guardian for a full individual and initial evaluation of a student at least 10 ~~35~~ but less than 20 ~~45~~ school days before the last instructional day of the school year, the evaluation must be completed and the written report of the evaluation must be provided to the parent or legal guardian not later than June 30 of that year. The student's admission, review, and dismissal committee shall meet not later than the seventh ~~15th~~ school day of the following school year to consider the evaluation. If a district receives written consent signed by a student's parent or legal guardian less than 10 ~~35~~ school days before the last instructional day of the school year, or if the district receives the written consent at least 10 ~~35~~ but less than 20 ~~45~~ school days before the last instructional day of the school year but the student is absent from school during that period on three or more days, Subsection (a)(1) applies to the date the written report of the full individual and initial evaluation is required.

(c) If a parent or legal guardian makes a written request to a school district's director of special education services or to a district administrative employee for a full individual and initial evaluation of a student, the district shall, not later than the seventh ~~15th~~ school day after the date the district receives the request:

(1) provide an opportunity for the parent or legal guardian to give written consent for the evaluation; or

(2) refuse to provide the evaluation and provide the parent or legal guardian with

notice of procedural safeguards under 20 U.S.C. Section 1415(b).

(d) A school district may develop an interim intervention, support, or crisis plan to provide immediate services and supports to a student while the student's full individual and initial evaluation is being conducted.

SECTION 1.14. Section 29.0041, Education Code, is amended to read as follows:

Sec. 29.0041. INFORMATION AND CONSENT FOR CERTAIN MENTAL HEALTH ASSESSMENTS,

EVALUATIONS, OR EXAMINATIONS

~~[PSYCHOLOGICAL EXAMINATIONS OR TESTS]~~. (a) On request of a child's

parent, before obtaining the parent's consent under 20 U.S.C. Section 1414 for the administration of any mental health assessment, evaluation, or [psychological] examination of [or test to] the child that is included as part of the evaluation of the child's need for special education, a school district shall provide to the child's parent:

(1) the name and type of the assessment, evaluation, or examination [or test]; and

(2) an explanation of how the assessment, evaluation, or examination [or test] will be used to develop an appropriate individualized education program for the child.

(b) If the district determines that an additional mental health assessment, evaluation, or examination [or test] is required for the evaluation of a child's need for special education after obtaining consent from the child's parent under Subsection (a), the district shall provide the information described by Subsections (a)(1) and (2) to the child's parent regarding the additional mental health assessment, evaluation, or examination [or test] and shall obtain additional consent for the assessment, evaluation, or examination [or test].

(c) The time required for the district to provide information and seek consent under Subsection (b) may not be counted toward the 20 school [60 calendar] days for completion of an evaluation under Section 29.004. If a parent does not give consent under Subsection (b) within 10 school [20 calendar] days after the date the district provided to the parent the information required by that subsection, the parent's consent is considered denied.

No equivalent provision.

SECTION 1.15. Section 29.011(b), Education Code, is amended to read as follows:

(b) The commissioner shall require each school district or shared services arrangement to designate at least one employee to serve as the district's or shared services arrangement's designee on transition and employment services for students enrolled in special education programs under this subchapter. The commissioner shall develop minimum training guidelines for a district's or shared services arrangement's designee. An individual designated under this subsection must provide information and resources about effective transition planning and services and interagency coordination to ensure that local school staff communicate and collaborate with:

(1) students enrolled in special education programs under this subchapter and the parents of those students; and

(2) as appropriate, local and regional staff of ~~the~~:

(A) the Health and Human Services Commission;

(B) the ~~[Department of Aging and Disability Services;~~

~~[(C) Department of Assistive and Rehabilitative Services;~~

~~[(D)] Department of State Health Services; [and]~~

(C) the ~~[(E)]~~ Department of Family and Protective Services; and

(D) any other health and human services agency, as defined by Section 531.001, Government Code, that provides relevant services.

SECTION 1.16. Section 29.012(d), Education Code, is amended to read as follows:

(d) The agency ~~[Texas Education Agency], the Health and Human Services Commission, and the Department of Family~~

and Protective Services ~~[Texas Department of Mental Health and Mental Retardation, the Texas Department of Human Services, the Texas Department of Health, the Department of Protective and Regulatory Services, the Interagency Council on Early Childhood Intervention, the Texas Commission on Alcohol and Drug Abuse, and the Texas Juvenile Justice Department]~~

SECTION 1.11. Section 29.011(b), Education Code, is amended to read as follows:

(b) The commissioner shall require each school district or shared services arrangement to designate at least one employee to serve as the district's or shared services arrangement's designee on transition and employment services for students enrolled in special education programs under this subchapter. The commissioner shall develop minimum training guidelines for a district's or shared services arrangement's designee. An individual designated under this subsection must provide information and resources about effective transition planning and services and interagency coordination to ensure that local school staff communicate and collaborate with:

(1) students enrolled in special education programs under this subchapter and the parents of those students; and

(2) as appropriate, local and regional staff of the:

(A) Health and Human Services Commission;

(B) Texas Workforce Commission ~~[Department of Aging and Disability Services];~~

~~(C) [Department of Assistive and Rehabilitative Services;~~

~~[(D)] Department of State Health Services; and~~

(D) ~~[(E)]~~ Department of Family and Protective Services.

SECTION 1.12. Section 29.012(d), Education Code, is amended to read as follows:

(d) The agency ~~[Texas Education Agency], the Health and Human Services Commission, the Texas Workforce Commission, and the Department of Family~~

and Protective Services ~~[Texas Department of Mental Health and Mental Retardation, the Texas Department of Human Services, the Texas Department of Health, the Department of Protective and Regulatory Services, the Interagency Council on Early Childhood Intervention, the Texas Commission on Alcohol and Drug Abuse, and the Texas Juvenile Justice Department]~~

by a cooperative effort shall develop and by rule adopt a memorandum of understanding. The memorandum must:

- (1) establish the respective responsibilities of school districts and of residential facilities for the provision of a free, appropriate public education, as required by the Individuals with Disabilities Education Act (20 U.S.C. Section 1400 et seq.) and its subsequent amendments, including each requirement for children with disabilities who reside in those facilities;
- (2) coordinate regulatory and planning functions of the parties to the memorandum;
- (3) establish criteria for determining when a public school will provide educational services;
- (4) provide for appropriate educational space when education services will be provided at the residential facility;
- (5) establish measures designed to ensure the safety of students and teachers; and
- (6) provide for binding arbitration consistent with Chapter 2009, Government Code, and Section 154.027, Civil Practice and Remedies Code.

SECTION 1.17. Section 29.015(b), Education Code, is amended to read as follows:

(b) A foster parent may act as a parent of a child with a disability, as authorized under 20 U.S.C. Section 1415(b) and its subsequent amendments, if:

- (1) the Department of Family and Protective [~~and Regulatory~~] Services is appointed as the temporary or permanent managing conservator of the child;
- (2) the child has been placed with the foster parent for at least 60 days;
- (3) the foster parent agrees to:
 - (A) participate in making educational decisions on the child's behalf; and
 - (B) complete a training program for surrogate parents that complies with minimum standards established by agency rule; and
- (4) the foster parent has no interest that conflicts with the child's interests.

SECTION 1.18. Section 29.081(d), Education Code, is amended to read as follows:

(d) For purposes of this section, "student at risk of dropping out of school" includes each student who is under 26 years of age and who:

by a cooperative effort shall develop and by rule adopt a memorandum of understanding. The memorandum must:

- (1) establish the respective responsibilities of school districts and of residential facilities for the provision of a free, appropriate public education, as required by the Individuals with Disabilities Education Act (20 U.S.C. Section 1400 et seq.) and its subsequent amendments, including each requirement for children with disabilities who reside in those facilities;
- (2) coordinate regulatory and planning functions of the parties to the memorandum;
- (3) establish criteria for determining when a public school will provide educational services;
- (4) provide for appropriate educational space when education services will be provided at the residential facility;
- (5) establish measures designed to ensure the safety of students and teachers; and
- (6) provide for binding arbitration consistent with Chapter 2009, Government Code, and Section 154.027, Civil Practice and Remedies Code.

SECTION 1.13. Same as introduced version.

SECTION 1.14. Same as introduced version.

- (1) was not advanced from one grade level to the next for one or more school years;
- (2) if the student is in grade 7, 8, 9, 10, 11, or 12, did not maintain an average equivalent to 70 on a scale of 100 in two or more subjects in the foundation curriculum during a semester in the preceding or current school year or is not maintaining such an average in two or more subjects in the foundation curriculum in the current semester;
- (3) did not perform satisfactorily on an assessment instrument administered to the student under Subchapter B, Chapter 39, and who has not in the previous or current school year subsequently performed on that instrument or another appropriate instrument at a level equal to at least 110 percent of the level of satisfactory performance on that instrument;
- (4) if the student is in prekindergarten, kindergarten, or grade 1, 2, or 3, did not perform satisfactorily on a readiness test or assessment instrument administered during the current school year;
- (5) is pregnant or is a parent;
- (6) has been placed in a disciplinary ~~an~~ alternative education program in accordance with Section 37.006 during the preceding or current school year;
- (7) has been expelled in accordance with Section 37.007 during the preceding or current school year;
- (8) is currently on parole, probation, deferred prosecution, or other conditional release;
- (9) was previously reported through the Public Education Information Management System (PEIMS) to have dropped out of school;
- (10) is a student of limited English proficiency, as defined by Section 29.052;
- (11) is in the custody or care of the Department of Family and Protective ~~and~~ Regulatory Services or has, during the current school year, been referred to the department by a school official, officer of the juvenile court, or law enforcement official;
- (12) is homeless, as defined by 42 U.S.C. Section 11302, and its subsequent amendments; or
- (13) resided in the preceding school year or resides in the current school year in a residential placement facility in the district, including a detention facility, substance abuse treatment facility, emergency shelter,

psychiatric hospital, halfway house, or foster group home.

SECTION 1.19. Section 30.0015(b), Education Code, is amended to read as follows:

(b) The agency by rule shall develop and annually disseminate standards for a school district's transfer of an assistive technology device to an entity listed in this subsection when a student with a disability using the device changes the school of attendance in the district or ceases to attend school in the district that purchased the device and the student's parents, or the student if the student has the legal capacity to enter into a contract, agrees to the transfer. The device may be transferred to:

- (1) the school or school district in which the student enrolls;
- (2) a state agency, including the Health and Human Services [~~Texas Rehabilitation~~] Commission [~~and the Texas Department of Mental Health and Mental Retardation~~], that provides services to the student following the student's graduation from high school; or
- (3) the student's parents, or the student if the student has the legal capacity to enter into a contract.

SECTION 1.20. Section 30.002(b), Education Code, is amended to read as follows:

(b) The agency shall:

- (1) develop standards and guidelines for all special education services for children with visual impairments that it is authorized to provide or support under this code;
- (2) supervise regional education service centers and other entities in assisting school districts in serving children with visual impairments more effectively;
- (3) develop and administer special education services for students with both serious visual and auditory impairments;
- (4) evaluate special education services provided for children with visual impairments by school districts and approve or disapprove state funding of those services; and
- (5) maintain an effective liaison between special education programs provided for children with visual impairments by school districts and related initiatives of the Health and Human Services Commission [~~Department of Assistive and Rehabilitative~~

SECTION 1.15. Section 30.0015(b), Education Code, is amended to read as follows:

(b) The agency by rule shall develop and annually disseminate standards for a school district's transfer of an assistive technology device to an entity listed in this subsection when a student with a disability using the device changes the school of attendance in the district or ceases to attend school in the district that purchased the device and the student's parents, or the student if the student has the legal capacity to enter into a contract, agrees to the transfer. The device may be transferred to:

- (1) the school or school district in which the student enrolls;
- (2) a state agency, including the Health and Human Services [~~Texas Rehabilitation~~] Commission and the Texas Workforce Commission [~~Department of Mental Health and Mental Retardation~~], that provides services to the student following the student's graduation from high school; or
- (3) the student's parents, or the student if the student has the legal capacity to enter into a contract.

SECTION 1.16. Section 30.002(b), Education Code, is amended to read as follows:

(b) The agency shall:

- (1) develop standards and guidelines for all special education services for children with visual impairments that it is authorized to provide or support under this code;
- (2) supervise regional education service centers and other entities in assisting school districts in serving children with visual impairments more effectively;
- (3) develop and administer special education services for students with both serious visual and auditory impairments;
- (4) evaluate special education services provided for children with visual impairments by school districts and approve or disapprove state funding of those services; and
- (5) maintain an effective liaison between special education programs provided for children with visual impairments by school districts and related initiatives of the Health and Human Services Commission [~~Department of Assistive and Rehabilitative~~

~~Services Division for Blind Services], the Department of State Health Services Mental Health and Substance Abuse Division[, the Texas School for the Blind and Visually Impaired], and other related programs, agencies, or facilities as appropriate.~~

No equivalent provision.

SECTION 1.21. Section 38.007(b), Education Code, is amended to read as follows:

(b) The board of trustees of a school district shall attempt to provide a safe alcohol-free environment to students coming to or going from school. The board of trustees shall ~~may~~ cooperate with local law enforcement officials and the Texas Alcoholic Beverage Commission in attempting to provide this environment and in enforcing Sections 101.75, 109.33, and 109.59, Alcoholic Beverage Code.

Additionally, the board, if a majority of the area of a district is located in a municipality with a population of 900,000 or more, shall ~~may~~ petition the commissioners court of the county in which the district is located or the governing board of an incorporated city or town in which the district is located to adopt a 1,000-foot zone under Section 109.33, Alcoholic Beverage Code.

SECTION 1.22. Subchapter A, Chapter 38, Education Code, is amended by adding Section 38.0101 to read as follows:

Sec. 38.0101. AUTHORITY TO EMPLOY NONPHYSICIAN MENTAL HEALTH PROFESSIONAL. (a) A school district may employ a nonphysician mental health professional.

(b) In this section, "nonphysician mental health professional" means:

- (1) a psychologist licensed to practice in this state and designated as a health-service provider;
- (2) a registered nurse with a master's or doctoral degree in psychiatric nursing;
- (3) a licensed clinical social worker;
- (4) a professional counselor licensed to practice in this state; or
- (5) a marriage and family therapist licensed

~~Services Division for Blind Services], the Department of State Health Services Mental Health and Substance Abuse Division, the Texas Workforce Commission [School for the Blind and Visually Impaired], and other related programs, agencies, or facilities as appropriate.~~

SECTION 1.17. The heading to Section 38.007, Education Code, is amended to read as follows:

Sec. 38.007. DRUG-FREE AND ALCOHOL-FREE SCHOOL ZONES.

SECTION 1.18. Section 38.007(b), Education Code, is amended to read as follows:

(b) The board of trustees of a school district shall attempt to provide a safe drug-free and alcohol-free environment to students coming to or going from school. The board of trustees shall ~~may~~ cooperate with local law enforcement officials and the Texas Alcoholic Beverage Commission in attempting to provide this environment and in enforcing Sections 101.75, 109.33, and 109.59, Alcoholic Beverage Code. Additionally, the board, if a majority of the area of a district is located in a municipality with a population of 900,000 or more, may petition the commissioners court of the county in which the district is located or the governing board of an incorporated city or town in which the district is located to adopt a 1,000-foot zone under Section 109.33, Alcoholic Beverage Code.

SECTION 1.19. Subchapter A, Chapter 38, Education Code, is amended by adding Section 38.0101 to read as follows:

Sec. 38.0101. AUTHORITY TO EMPLOY NONPHYSICIAN MENTAL HEALTH PROFESSIONAL. (a) A school district may employ a nonphysician mental health professional.

(b) In this section, "nonphysician mental health professional" means:

- (1) a psychologist licensed to practice in this state and designated as a health-service provider;
- (2) a registered nurse with a master's or doctoral degree in psychiatric nursing;
- (3) a licensed clinical social worker; or
- (4) a professional counselor licensed to practice in this state.

to practice in this state.

SECTION 1.23. Section 38.013(a), Education Code, is amended to read as follows:

(a) The agency shall make available to each school district one or more coordinated health programs [~~designed to prevent obesity, cardiovascular disease, oral diseases, and Type 2 diabetes~~] in elementary school, middle school, and junior high school [~~students~~]. Each program must provide for coordinating:

(1) physical health education, including programs designed to prevent obesity, cardiovascular disease, oral diseases, and Type 2 diabetes and programs designed to promote the role of proper nutrition [~~oral health education~~];

(2) mental health education, including education about suicide prevention;

(3) substance abuse education, including education about alcohol abuse, prescription drug abuse, and abuse of other controlled substances;

(4) physical education and physical activity;

(5) [~~(3) nutrition services~~]; and

[~~(4)~~] parental involvement;

(6) activities to promote safe and supportive school climates and students' social and emotional wellness, including the use of trauma-informed practices;

(7) employee wellness; and

(8) community engagement and involvement.

SECTION 1.24. Sections 38.016(a) and (c), Education Code, are amended to read as follows:

(a) In this section:

(1) "Nonphysician mental health professional" has the meaning assigned by Section 38.0101.

(2) "Parent" includes a guardian or other person standing in parental relation.

(3) [~~(2)~~] "Psychotropic drug" means a substance that is:

(A) used in the diagnosis, treatment, or prevention of a disease or as a component of a medication; and

(B) intended to have an altering effect on perception, emotion, or behavior.

(c) Subsection (b) does not:

(1) prevent an appropriate referral under the

SECTION 1.20. Section 38.013(a), Education Code, is amended to read as follows:

(a) The agency shall make available to each school district one or more coordinated health programs [~~designed to prevent obesity, cardiovascular disease, oral diseases, and Type 2 diabetes~~] in elementary school, middle school, and junior high school [~~students~~]. Each program must provide for coordinating education and services related to:

(1) physical health education, including programs designed to prevent obesity, cardiovascular disease, oral diseases, and Type 2 diabetes and programs designed to promote the role of proper nutrition [~~oral health education~~];

(2) mental health education, including education about mental health conditions and mental health wellness;

(3) substance abuse education, including education about alcohol abuse, prescription drug abuse, and abuse of other controlled substances;

(4) physical education and physical activity; and

(5) [~~(3) nutrition services~~]; and

[~~(4)~~] parental involvement.

SECTION 1.21. Same as introduced version.

child find system required under 20 U.S.C. Section 1412, as amended; ~~[or]~~

(2) prohibit a school district employee who is a registered nurse, advanced nurse practitioner, physician, or nonphysician mental health professional ~~[certified or appropriately credentialed mental health professional]~~ from recommending that a child be evaluated by a physician or nonphysician mental health professional ~~[an appropriate medical practitioner]~~; or

(3) prohibit a school employee from discussing any aspect of a child's behavior or academic progress with the child's parent or another school district employee.

SECTION 1.25. Section 38.051(b), Education Code, is amended to read as follows:

(b) On the recommendation of an advisory council established under Section 38.058 or on the initiative of the board of trustees, a school district may establish a

school-based health center at one or more campuses in the district to meet the health care needs of students and their families.

SECTION 1.26. Section 38.054, Education Code, is amended to read as follows:

Sec. 38.054. CATEGORIES OF SERVICES. (a) The permissible categories of services are:

- (1) family and home support;
- (2) physical health care, including immunizations;
- (3) dental health care;
- (4) health education; ~~[and]~~
- (5) preventive health strategies; and
- (6) treatment for mental illness, a behavioral health disorder, or substance abuse.

(b) In this section, "behavioral health disorder," "mental illness," and "substance abuse" have the meanings assigned by Section 11.183.

SECTION 1.27. Section 38.057(b), Education Code, is amended to read as follows:

(b) If it is determined that a student is in need of a referral for physical health services or mental health services, the staff of the center shall notify the person whose consent is required under Section 38.053 verbally and in writing of the basis for the

SECTION 1.22. Section 38.051(b), Education Code, is amended to read as follows:

(b) On the recommendation of an advisory council established under Section 38.058 or on the initiative of the board of trustees or the governing body of an open-enrollment charter school, a school district or open-enrollment charter school may establish a school-based health center at one or more campuses ~~[in the district]~~ to meet the health care needs of students and their families.

SECTION 1.23. Section 38.054, Education Code, is amended to read as follows:

Sec. 38.054. CATEGORIES OF SERVICES. The permissible categories of services are:

- (1) family and home support;
- (2) physical health care, including immunizations;
- (3) dental health care;
- (4) health education; ~~[and]~~
- (5) preventive health strategies; and
- (6) treatment for mental health conditions or substance abuse.

SECTION 1.24. Same as introduced version.

referral. The referral may not be provided unless the person provides written consent for the type of service to be provided and provides specific written consent for each treatment occasion or for a course of treatment that includes multiple treatment occasions of the same type of service.

No equivalent provision.

SECTION 1.28. Subchapter B, Chapter 38, Education Code, is amended by adding Section 38.0591 to read as follows:

Sec. 38.0591. ACCESS TO MENTAL HEALTH SERVICES. The agency, in cooperation with the Health and Human Services Commission, shall develop guidelines for school districts regarding:

(1) partnering with a local mental health authority and with community mental health services providers to increase student access to school-based integrated mental health services; and

(2) obtaining school-based integrated mental health services through the medical assistance program under Chapter 32, Human Resources Code.

SECTION 1.25. Section 38.058, Education Code, is amended to read as follows:

Sec. 38.058. HEALTH EDUCATION AND HEALTH CARE ADVISORY COUNCIL.

(a) The board of trustees of a school district or the governing body of an open-enrollment charter school may establish and appoint members to a local health education and health care advisory council to make recommendations to the district or school on the establishment of school-based health centers and to assist the district or school in ensuring that local community values are reflected in the operation of each center and in the provision of health education.

(b) A majority of the members of the council must be parents of students enrolled in the school district or open-enrollment charter school. In addition to the appointees who are parents of students, the board of trustees or governing body shall also appoint at least one person from each of the following groups:

- (1) teachers;
- (2) school administrators;
- (3) licensed health care professionals;
- (4) the clergy;
- (5) law enforcement;
- (6) the business community;
- (7) senior citizens; and
- (8) students.

SECTION 1.26. Subchapter B, Chapter 38, Education Code, is amended by adding Section 38.0591 to read as follows:

Sec. 38.0591. ACCESS TO MENTAL HEALTH SERVICES. The agency, in cooperation with the Health and Human Services Commission, shall develop guidelines for school districts regarding:

(1) partnering with a local mental health authority and with community mental health services providers and substance abuse services providers to increase student access to school-based mental health services; and

(2) obtaining school-based mental health services through the medical assistance program under Chapter 32, Human Resources Code.

SECTION 1.29. Section 38.060(c), Education Code, is amended to read as follows:

(c) The school district [~~council~~] shall keep a record of efforts made to coordinate with existing providers.

SECTION 1.30. Subchapter O-1, Chapter 161, Health and Safety Code, is transferred to Chapter 38, Education Code, redesignated as Subchapter G, Chapter 38, Education Code, and amended to read as follows:

SUBCHAPTER G [~~O-1~~]. MENTAL HEALTH, SUBSTANCE ABUSE, AND YOUTH SUICIDE

Sec. 38.301 [~~161.325~~]. MENTAL HEALTH PROMOTION AND INTERVENTION, SUBSTANCE ABUSE PREVENTION AND INTERVENTION, AND SUICIDE PREVENTION.

(a) The agency [~~department~~], in coordination with the Health and Human Services Commission [~~Texas Education Agency~~] and regional education service centers, shall provide and annually update a list of recommended best practice-based programs in the areas specified under Subsection (c) [~~(a-1)~~] for implementation in public elementary, junior high, middle, and high schools within the general education setting. The agency, the Health and Human Services Commission, and each regional education service center shall each publish the list on their Internet websites in an easily accessible, searchable, and user-friendly format.

(b) Each school district may select from the list provided under Subsection (a) a program or programs appropriate for implementation in the district.

(c) [~~(a-1)~~] The list provided under Subsection (a) must include programs in the following areas:

- (1) early mental health intervention;
- (2) mental health promotion [~~and positive youth development~~];
- (3) substance abuse prevention;
- (4) substance abuse intervention; [~~and~~]
- (5) suicide prevention;
- (6) ~~grief-informed and trauma-informed practices;~~
- (7) social and emotional wellness and learning;

(8) positive behavior supports and positive

SECTION 1.27. Section 38.060(c), Education Code, is amended to read as follows:

(c) The school district or open-enrollment charter school [~~council~~] shall keep a record of efforts made to coordinate with existing providers.

SECTION 1.28. Subchapter O-1, Chapter 161, Health and Safety Code, is transferred to Chapter 38, Education Code, redesignated as Subchapter G, Chapter 38, Education Code, and amended to read as follows:

SUBCHAPTER G [~~O-1~~]. MENTAL HEALTH, SUBSTANCE ABUSE, AND YOUTH SUICIDE

Sec. 38.301 [~~161.325~~]. MENTAL HEALTH PROMOTION AND INTERVENTION, SUBSTANCE ABUSE PREVENTION AND INTERVENTION, AND SUICIDE PREVENTION.

(a) The agency [~~department~~], in coordination with the Health and Human Services Commission [~~Texas Education Agency~~] and regional education service centers, shall provide and annually update a list of recommended best practice-based programs in the areas specified under Subsection (c) [(a-1)] for implementation in public elementary, junior high, middle, and high schools within the general education setting. The agency, the Health and Human Services Commission, and each regional education service center shall each publish the list on their Internet websites in an easily accessible, searchable, and user-friendly format.

(b) Each school district may select from the list provided under Subsection (a) a program or programs appropriate for implementation in the district.

(c) [~~(a-1)~~] The list provided under Subsection (a) must include programs in the following areas:

- (1) early mental health intervention;
- (2) mental health promotion [~~and positive youth development~~];
- (3) substance abuse prevention;
- (4) substance abuse intervention; [~~and~~]
- (5) suicide prevention;
- (6) ~~grief-informed and trauma-informed practices;~~
- (7) building skills related to managing emotions, establishing and maintaining positive relationships, and responsible decision-making;
- (8) positive behavior interventions and

youth development; and

(9) safe and supportive school climate.

~~(d) [(a 2) The department, the Texas Education Agency, and each regional education service center shall make the list easily accessible on their websites.~~

~~[(b)] The suicide prevention programs on the list provided under Subsection (a) must include components that provide for training counselors, teachers, nurses, administrators, and other staff, as well as law enforcement officers and social workers who regularly interact with students, to:~~

- ~~(1) recognize students at risk of committing suicide, including students who are or may be the victims of or who engage in bullying;~~
- ~~(2) recognize students displaying early warning signs and a possible need for early mental health or substance abuse intervention, which warning signs may include declining academic performance, depression, anxiety, isolation, unexplained changes in sleep or eating habits, and destructive behavior toward self and others;~~

~~(3) intervene effectively with students described by Subdivision (1) or (2) by providing notice and referral to a parent or guardian so appropriate action, such as seeking mental health or substance abuse services, may be taken by a parent or guardian.~~

~~(e) [(e)] In developing the list of programs, the agency [department] and the Health and Human Services Commission [Texas Education Agency] shall consider:~~

- ~~(1) any existing suicide prevention method developed by a school district; and~~
- ~~(2) any Internet or online course or program developed in this state or another state that is based on best practices recognized by the Substance Abuse and Mental Health Services Administration or the Suicide Prevention Resource Center.~~

~~(f) [(e-1)] Except as otherwise provided by this subsection, each school district shall provide training described in the components set forth under Subsection (d) [(b)] for teachers, counselors, principals, and all other appropriate personnel. A school district is required to provide the training at an elementary school campus only to the extent that sufficient funding and programs are available. A school district may implement a program on the list to satisfy the requirements of this subsection.~~

supports, and positive youth development; and

(9) safe and supportive school climate.

~~(d) [(a 2) The department, the Texas Education Agency, and each regional education service center shall make the list easily accessible on their websites.~~

~~[(b)] The suicide prevention programs on the list provided under Subsection (a) must include components that provide for training counselors, teachers, nurses, administrators, and other staff, as well as law enforcement officers and social workers who regularly interact with students, to:~~

- ~~(1) recognize students at risk of committing suicide, including students who are or may be the victims of or who engage in bullying;~~
- ~~(2) recognize students displaying early warning signs and a possible need for early mental health or substance abuse intervention, which warning signs may include declining academic performance, depression, anxiety, isolation, unexplained changes in sleep or eating habits, and destructive behavior toward self and others;~~

~~(3) intervene effectively with students described by Subdivision (1) or (2) by providing notice and referral to a parent or guardian so appropriate action, such as seeking mental health or substance abuse services, may be taken by a parent or guardian.~~

~~(e) [(e)] In developing the list of programs, the agency [department] and the Health and Human Services Commission [Texas Education Agency] shall consider:~~

- ~~(1) any existing suicide prevention method developed by a school district; and~~
- ~~(2) any Internet or online course or program developed in this state or another state that is based on best practices recognized by the Substance Abuse and Mental Health Services Administration or the Suicide Prevention Resource Center.~~

~~(f) [(e-1)] Except as otherwise provided by this subsection, each school district shall provide training described in the components set forth under Subsection (d) [(b)] for teachers, counselors, principals, and all other appropriate personnel. A school district is required to provide the training at an elementary school campus only to the extent that sufficient funding and programs are available. A school district may implement a program on the list to satisfy the requirements of this subsection.~~

(g) [(e-2)] If a school district provides the training under Subsection (f) [(e-1)]:

(1) a school district employee described under that subsection must participate in the training at least one time; and

(2) the school district shall maintain records that include the name of each district employee who participated in the training.

(h) [(d)] The board of trustees of each school district shall [may] adopt a policy

concerning each area listed in Subsection (c), including mental health promotion and intervention, substance abuse prevention and intervention, and suicide prevention that:

(1) establishes a procedure for providing notice of a recommendation for early mental health or substance abuse intervention regarding a student to a parent or guardian of the student within a reasonable amount of time after the identification of early warning signs as described by Subsection (d)(2) [(b)(2)];

(2) establishes a procedure for providing notice of a student identified as at risk of committing suicide to a parent or guardian of the student within a reasonable amount of time after the identification of early warning signs as described by Subsection (d)(2) [(b)(2)];

(3) establishes that the district may develop a reporting mechanism and may designate at least one person to act as a liaison officer in the district for the purposes of identifying students in need of early mental health or substance abuse intervention or suicide prevention; and

(4) sets out available counseling alternatives for a parent or guardian to consider when their child is identified as possibly being in need of early mental health or substance abuse intervention or suicide prevention.

(i) [(e)] The policy

must prohibit the use without the prior consent of a student's parent or guardian of a medical screening of the student as part of the process of identifying whether the student is possibly in need of early mental health or substance abuse intervention or suicide prevention.

(j) [(f)] The policy and any necessary procedures adopted under Subsection (h) [(d)] must be included in:

(g) [(e-2)] If a school district provides the training under Subsection (f) [(e-1)]:

(1) a school district employee described under that subsection must participate in the training at least one time; and

(2) the school district shall maintain records that include the name of each district employee who participated in the training.

(h) A [(d) The board of trustees of each] school district shall develop practices and procedures [may adopt a policy]

concerning each area listed in Subsection (c), including mental health promotion and intervention, substance abuse prevention and intervention, and suicide prevention that:

(1) includes [establishes] a procedure for providing notice of a recommendation for early mental health or substance abuse intervention regarding a student to a parent or guardian of the student within a reasonable amount of time after the identification of early warning signs as described by Subsection (d)(2) [(b)(2)];

(2) includes [establishes] a procedure for providing notice of a student identified as at risk of committing suicide to a parent or guardian of the student within a reasonable amount of time after the identification of early warning signs as described by Subsection (d)(2) [(b)(2)];

(3) establishes that the district may develop a reporting mechanism and may designate at least one person to act as a liaison officer in the district for the purposes of identifying students in need of early mental health or substance abuse intervention or suicide prevention; and

(4) sets out available counseling alternatives for a parent or guardian to consider when their child is identified as possibly being in need of early mental health or substance abuse intervention or suicide prevention.

(i) [(e)] The practices and procedures developed under Subsection (h) [policy]

must prohibit the use without the prior consent of a student's parent or guardian of a medical screening of the student as part of the process of identifying whether the student is possibly in need of early mental health or substance abuse intervention or suicide prevention.

(j) [(f)] The practices [policy] and [any necessary] procedures developed [adopted] under Subsection (h) [(d)] must be included in:

- (1) the annual student handbook; and
- (2) the district improvement plan under Section 11.252[, ~~Education Code~~].

(k) [(g)] The agency, the Health and Human Services Commission, and each regional education service center:

(1) [department] may accept donations for purposes of this section from sources without a conflict of interest; and

(2) [—The department] may not accept donations for purposes of this section from an anonymous source.

(l) [(f)] Nothing in this section is intended to interfere with the rights of parents or guardians and the decision-making regarding the best interest of the child. Policy and procedures adopted in accordance with this section are intended to notify a parent or guardian of a need for mental health or substance abuse intervention so that a parent or guardian may take appropriate action. Nothing in this section shall be construed as giving school districts the authority to prescribe medications. Any and all medical decisions are to be made by a parent or guardian of a student.

Sec. 38.302 [~~161.326~~]. IMMUNITY. This subchapter does not:

(1) waive any immunity from liability of a school district or of district school officers or employees;

(2) create any liability for a cause of action against a school district or against district school officers or employees; or

(3) waive any immunity from liability under Section 74.151, Civil Practice and Remedies Code.

ARTICLE 2. CONFORMING AMENDMENTS

SECTION 2.01. Section 74.151(e), Civil Practice and Remedies Code, is amended to read as follows:

(e) Except as provided by this subsection, this section does not apply to a person whose negligent act or omission was a producing cause of the emergency for which care is being administered. This subsection does not apply to liability of a school district or district school officer or employee arising from an act or omission under a program or policy or procedure adopted under Subchapter G, Chapter 38, Education [~~0-1, Chapter 161, Health and Safety~~] Code, other than liability arising from wilful or

- (1) the annual student handbook; and
- (2) the district improvement plan under Section 11.252[, ~~Education Code~~].

(k) [(g)] The agency, the Health and Human Services Commission, and each regional education service center:

(1) [department] may accept donations for purposes of this section from sources without a conflict of interest; and

(2) [—The department] may not accept donations for purposes of this section from an anonymous source.

(l) [(f)] Nothing in this section is intended to interfere with the rights of parents or guardians and the decision-making regarding the best interest of the child. Practices Policy and procedures developed [adopted] in accordance with this section are intended to notify a parent or guardian of a need for mental health or substance abuse intervention so that a parent or guardian may take appropriate action. Nothing in this section shall be construed as giving school districts the authority to prescribe medications. Any and all medical decisions are to be made by a parent or guardian of a student.

Sec. 38.302 [~~161.326~~]. IMMUNITY. This subchapter does not:

(1) waive any immunity from liability of a school district or of district school officers or employees;

(2) create any liability for a cause of action against a school district or against district school officers or employees; or

(3) waive any immunity from liability under Section 74.151, Civil Practice and Remedies Code.

Same as introduced version.

SECTION 2.01. Section 74.151(e), Civil Practice and Remedies Code, is amended to read as follows:

(e) Except as provided by this subsection, this section does not apply to a person whose negligent act or omission was a producing cause of the emergency for which care is being administered. This subsection does not apply to liability of a school district or district school officer or employee arising from an act or omission under a program or practice [policy] or procedure developed [adopted] under Subchapter G, Chapter 38, Education [~~0-1, Chapter 161, Health and Safety~~] Code, other than liability arising

intentional misconduct.

from wilful or intentional misconduct.

SECTION 2.02. Section 25.114(a), Education Code, is amended to read as follows:

No equivalent provision.

(a) In implementing the curriculum for physical education under Section 28.002(a)(2)(D) [~~28.002(a)(2)(C)~~], each school district shall establish specific objectives and goals the district intends to accomplish through the curriculum, including, to the extent practicable, student/teacher ratios that are small enough to enable the district to:

- (1) carry out the purposes of and requirements for the physical education curriculum as provided under Section 28.002(d); and
- (2) ensure the safety of students participating in physical education.

SECTION 2.03. Section 28.003(b), Education Code, is amended to read as follows:

No equivalent provision.

(b) In this section, "educational program" means a course or series of courses in the required curriculum under Section 28.002, other than a fine arts course under Section 28.002(a)(2)(E) [~~28.002(a)(2)(D)~~] or a career and technology course under Section 28.002(a)(2)(F) [~~28.002(a)(2)(E)~~].

SECTION 2.04. Section 28.025(b-1), Education Code, is amended to read as follows:

No equivalent provision.

(b-1) The State Board of Education by rule shall require that the curriculum requirements for the foundation high school program under Subsection (a) include a requirement that students successfully complete:

- (1) four credits in English language arts under Section 28.002(a)(1)(A), including one credit in English I, one credit in English II, one credit in English III, and one credit in an advanced English course authorized under Subsection (b-2);
- (2) three credits in mathematics under Section 28.002(a)(1)(B), including one credit in Algebra I, one credit in geometry, and one credit in any advanced mathematics course authorized under Subsection (b-2);
- (3) three credits in science under Section 28.002(a)(1)(C), including one credit in biology, one credit in any advanced science course authorized under Subsection (b-2), and one credit in integrated physics and

chemistry or in an additional advanced science course authorized under Subsection (b-2);

(4) three credits in social studies under Section 28.002(a)(1)(D), including one credit in United States history, at least one-half credit in government and at least one-half credit in economics, and one credit in world geography or world history;

(5) except as provided under Subsections (b-12), (b-13), and (b-14), two credits in the same language in a language other than English under Section 28.002(a)(2)(A);

(6) five elective credits;

(7) one credit in fine arts under Section 28.002(a)(2)(E) [~~28.002(a)(2)(D)~~]; and

(8) except as provided by Subsection (b-11), one credit in physical education under Section 28.002(a)(2)(D) [~~28.002(a)(2)(C)~~].

SECTION 2.05. Section 38.0141, Education Code, is amended to read as follows:

Sec. 38.0141. REPORTING OF CERTAIN HEALTH AND SAFETY INFORMATION REQUIRED. Each school district shall provide to the agency information as required by the commissioner, including statistics and data, relating to student health and physical activity and information described by Sections 28.004(k)(2), (3), and (4) [~~Section 28.004(k),~~] presented in a form determined by the commissioner. The district shall provide the information required by this section for the district and for each campus in the district.

SECTION 2.06. Section 38.101(a), Education Code, is amended to read as follows:

(a) Except as provided by Subsection (b), a school district annually shall assess the physical fitness of students enrolled in grade three or higher in a course that satisfies the curriculum requirements for physical education under Section 28.002(a)(2)(D) [~~28.002(a)(2)(C)~~].

SECTION 2.07. Section 130.008(c), Education Code, is amended to read as follows:

(c) The contact hours attributable to the enrollment of a high school student in a course offered for joint high school and junior college credit under this section, excluding a course for which the student attending high school may receive course

SECTION 2.02. Same as introduced version.

No equivalent provision.

No equivalent provision.

credit toward the physical education curriculum requirement under Section 28.002(a)(2)(D) [~~28.002(a)(2)(C)~~], shall be included in the contact hours used to determine the junior college's proportionate share of the state money appropriated and distributed to public junior colleges under Sections 130.003 and 130.0031, even if the junior college waives all or part of the tuition or fees for the student under Subsection (b).

ARTICLE 3. REPEALER; EFFECTIVE DATE

SECTION 3.01. Section 28.002(w), Education Code, is repealed.

No equivalent provision. (*But see SECTION 1.08 above.*)

No equivalent provision.

No equivalent provision.

SECTION 3.02. This Act takes effect

85R 25336

Substitute Document Number: 85R 18910

ARTICLE 3. REPEALER; TRANSITION; EFFECTIVE DATE

SECTION 3.01. The following provisions of the Education Code are repealed:

(1) Section 21.463; and

(2) Section 28.002(w).

SECTION 3.02. (a) Not later than December 1, 2017, the Texas Education Agency, in cooperation with the Health and Human Services Commission, shall establish the Internet website to provide resources for school employees, as required by Section 21.462, Education Code, as added by this Act.

(b) Not later than March 1, 2018:

(1) the State Board for Educator Certification shall propose rules under Section 21.054, Education Code, to comply with the changes in law made to that section by this Act; and

(2) the Texas Education Agency, in cooperation with the Health and Human Services Commission, shall develop the guidelines required by Section 38.0591, Education Code, as added by this Act.

(c) Not later than August 1, 2018, the Texas Education Agency, in coordination with the Health and Human Services Commission and regional education service centers, shall provide a list of recommended best practice-based programs as required by Section 38.301, Education Code, as transferred, redesignated, and amended by this Act.

SECTION 3.03. Any change in law made by this Act that imposes a new duty or requirement on a school district or an open-enrollment charter school applies beginning with the 2018-2019 school year.

SECTION 3.04. Same as introduced

17.125.757

September 1, 2017.

version.

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17.125.757

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