



House of Representatives

File No. 755

General Assembly

January Session, 2021

(Reprint of File No. 164)

House Bill No. 6509
As Amended by House Amendment
Schedules "A" and "B"

Approved by the Legislative Commissioner
May 28, 2021

AN ACT CONCERNING SCHOOL-BASED MENTAL HEALTH CLINICS.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. (*Effective July 1, 2021*) (a) As used in this section:

2 (1) "Mental health programming" means age-appropriate education
3 or outreach initiatives aimed at students for the prevention of mental
4 illness, including, but not limited to, poster and flyer campaigns, films,
5 guest speakers or other school events; and

6 (2) "School-based mental health clinic" means a clinic that: (A) Is
7 located in, or on the grounds of, a school facility of a school district or
8 school board or of an Indian tribe or tribal organization; (B) is organized
9 through school, community and health provider relationships; (C) is
10 administered by a sponsoring facility; and (D) provides on-site mental,
11 emotional or behavioral health services to children and adolescents in
12 accordance with state and local law, including laws relating to licensure
13 and certification.

14 (b) Not later than January 1, 2022, the Departments of Children and
15 Families and Public Health, in consultation with the Connecticut
16 Association of School-Based Health Centers and a children's mental
17 health service provider licensed by the Department of Children and
18 Families, shall develop a plan to promote access to mental health
19 services for children and youth in regions of the state that do not have
20 access to a school-based health center or an expanded school health site,
21 which may include, but need not be limited to, establishing school-
22 based mental health clinics. The mental health services included in such
23 plan may include, but need not be limited to, (1) to the extent permitted
24 by a license or certification of a sponsoring facility, as defined in section
25 19a-6r of the general statutes, the provision of counseling to individual
26 students, groups or families, (2) extending the hours of operation of any
27 school-based mental health clinic to include after school, weekend or
28 summer hours based on community need for services, and (3) the
29 provision of mental health programming for students in partnership
30 with a local or regional board of education.

31 (c) Any mental health service provider who staffs any school-based
32 mental health clinic established in partnership with a local or regional
33 board of education shall be knowledgeable about social-emotional
34 learning and restorative practices and may receive additional training
35 through participation in the social-emotional learning and restorative
36 practices training provided to teachers and administrators of the schools
37 governed by such board.

38 (d) Not later than January 1, 2022, the Departments of Children and
39 Families and Public Health shall jointly submit, in accordance with the
40 provisions of section 11-4a of the general statutes, to the joint standing
41 committee of the General Assembly having cognizance of matters
42 relating to children, a report on the (1) plan developed pursuant to
43 subsection (b) of this section, and (2) availability of any sources of
44 funding for the implementation of such plan.

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>July 1, 2021</i>	New section

The following Fiscal Impact Statement and Bill Analysis are prepared for the benefit of the members of the General Assembly, solely for purposes of information, summarization and explanation and do not represent the intent of the General Assembly or either chamber thereof for any purpose. In general, fiscal impacts are based upon a variety of informational sources, including the analyst's professional knowledge. Whenever applicable, agency data is consulted as part of the analysis, however final products do not necessarily reflect an assessment from any specific department.

OFA Fiscal Note

State Impact: None

Municipal Impact: None

The bill requires the Departments of Children and Families (DCF) and Public Health (DPH) to develop a plan to promote access to mental health services for children and youth in regions of the state that do not have access to a school-based health center or an expanded school health site. This has no fiscal impact as DCF and DPH have the staff expertise to complete this study.

House "A" strikes the original bill and its associated fiscal impact, thus becoming the bill with the above referenced fiscal impact.

The Out Years

State Impact: None

Municipal Impact: None

OLR Bill Analysis**HB 6509 (as amended by House "A" and "B")*****AN ACT CONCERNING SCHOOL-BASED MENTAL HEALTH CLINICS.*****SUMMARY**

This bill requires the Department of Children and Families (DCF) and the Department of Public Health (DPH), in consultation with the Connecticut Association of School-based Health Centers and a DCF-licensed children's mental health service provider, to develop a plan by January 1, 2022, to promote access to mental health services for children and youth in regions of the state that do not have access to a school-based health center or an expanded school health site.

Under the bill, mental health services in the plan may include (1) counseling to individual students, groups, or families, to the extent permitted by a sponsoring facility's license or certification; (2) extended school-based mental health clinic hours, including after school, weekend, or summer hours based on community need for services; and (3) mental health programming for students in partnership with a local or regional board of education. Under the bill, mental health programming means age-appropriate education or outreach initiatives aimed at students to prevent mental illness (e.g., poster and flyer campaigns, films, guest speakers, or other school events).

Under the bill, any mental health service provider who staffs a school-based mental health clinic established in partnership with a local or regional board of education (1) must be knowledgeable about social-emotional learning and restorative practices and (2) may participate in social-emotional learning and restorative practices training provided to teachers and administrators of the schools governed by the board.

The bill requires DCF and DPH to jointly report to the Children's Committee by January 1, 2022, on the plan and funding sources available to implement it.

*House Amendment "A" strikes the underlying bill, which would have required DPH to develop a plan to establish school-based mental health clinics and allowed the department to adopt regulations to establish minimum quality standards for them.

*House Amendment "B" (1) adds provider requirements for school-based mental health clinics established in partnership with a local or regional board of education and (2) requires that the report DCF and DPH submit to the Children's Committee include available funding sources to implement the plan.

EFFECTIVE DATE: July 1, 2021

DEFINITION

School-Based Mental Health Clinic

Under the bill, a "school-based mental health clinic" is a clinic that:

1. is located in or on the grounds of a school facility of a school district or school board or of an Indian tribe or tribal organization;
2. is organized through school, community, and health provider relationships;
3. is administered by a sponsoring facility (e.g., a hospital, community health center, or school system); and
4. provides on-site mental, emotional, or behavioral health services to children and adolescents in accordance with state and local law, including laws relating to licensure and certification.

COMMITTEE ACTION

Committee on Children

Joint Favorable

Yea 9 Nay 4 (03/11/2021)

Public Health Committee

Joint Favorable

Yea 32 Nay 1 (04/15/2021)