By: Price, et al. (Senate Sponsor - Watson, West) H.B. No. 18 (In the Senate - Received from the House April 16, 2019; April 17, 2019, read first time and referred to Committee on Education; May 10, 2019, reported favorably by the following vote: Yeas 7, Nays 4; May 10, 2019, sent to printer.) 1-1 1-2 1-3 1-4 1-5

1-6 COMMITTEE VOTE 1-7 Nay Yea Absent PNV 1-8 Taylor Х Х 1-9 Lucio 1-10 1-11 Bettencourt Х Х Campbell 1-12 Fallon Х Hall 1-13 Х Hughes Х 1-14 1**-**15 1**-**16 Paxton Х Powell 1-17 Х Watson 1-18 Х West

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A BILL TO BE ENTITLED AN ACT

relating to consideration of the mental health of public school 1-21 students in training requirements for certain school employees, 1-22 1**-**23 curriculum requirements, counseling programs, educational programs, state and regional programs and services, and health care 1-24 1-25 services for students and to mental health first aid program 1-26 training and reporting regarding local mental health authority and 1-27 school district personnel. BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS: 1-28

ARTICLE 1. MENTAL HEALTH OF STUDENTS IN PUBLIC SCHOOLS

1-30 SECTION 1.01. Section 5.001, Education Code, is amended by amending Subdivision (5-a) and adding Subdivision (9) to read as 1-31 follows: 1-32

(5-a) "Mental health condition" means <u>a persistent or</u> 1-33 recurrent pattern of thoughts, feelings, or behaviors [an illness, 1-34 disease, or disorder, other than epilepsy, dementia, substance abuse, or intellectual disability,] that: 1-35 1-36

(A) <u>constitutes a mental illness, disease, or</u> other than or in addition to epilepsy, substance abuse, 1-37 1-38 disorder, or an intellectual disability; or 1-39

(B) [substantially] impairs a person's social, educational functioning and increases the risk of condition described by Paragraph (A) [thought, 1-40 emotio<u>nal,</u> risk_of 1-41 οr 1-42 developing а 1-43 perception of reality, emotional process, or judgment; or

grossly impairs behavior as demonstrated by [(B) 1-44 behavior]. 1-45 recent disturbed

"Substance abuse" means a patterned use of a 1-46 (9) substance, including a controlled substance, as defined by Chapter 481, Health and Safety Code, and alcohol, in which the person 1-47 1-48 1-49 consumes the substance in amounts or with methods that are harmful to the person's self or to others. 1-50

1-51 SECTION 1.02. Section 11.252(a), Education Code, is amended to read as follows: 1-52

1-53 (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 1-54 1-55 1-56 1-57 1-58 1-59 standards in respect to the achievement indicators adopted under 1-60 Section 39.053(c). The district improvement plan must include 1-61

H.B. No. 18 2-1 provisions for: 2-2 (1)a comprehensive needs assessment addressing 2-3 district student performance on the achievement indicators, and other appropriate measures of performance, that are disaggregated 2-4 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 2-5 2-6 2-7 2-8 under Subchapter A, Chapter 29; (2) measurable district performance objectives for 2-9 all appropriate achievement indicators for all student populations, including students in special education programs under Subchapter A, Chapter 29, and other measures of student 2**-**10 2**-**11 2-12 performance that may be identified through the comprehensive needs 2-13 assessment; 2-14 2**-**15 2**-**16 (3)strategies for improvement of student performance that include: 2-17 (A) instructional methods for addressing the 2-18 needs of student groups not achieving their full potential; 2-19 evidence-based practices that (B) address 2-20 2-21 [methods for addressing] the needs of students for special programs, including: (i) suicide prevention programs, in accordance with Subchapter <u>G</u> $\begin{bmatrix} 0-1 \end{bmatrix}$, Chapter <u>38</u> $\begin{bmatrix} 161 \end{bmatrix}$, Health and Safety Codel which include line later 2-22 2-23 Safety Code], which include [includes] a parental or guardian 2-24 2**-**25 2**-**26 notification procedure; (ii) conflict resolution programs; 2-27 violence prevention programs; and (iii) 2-28 (iv) dyslexia treatment programs; 2-29 (C) dropout reduction; 2-30 (D) integration of technology in instructional 2-31 and administrative programs; 2-32 (E) positive behavior interventions and support, 2-33 including interventions and support that integrate best practices 2-34 grief-informed and trauma-informed care [discipline on 2-35 management]; 2-36 (F) staff development for professional staff of 2-37 the district; 2-38 (G) career education to assist students in 2-39 developing the knowledge, skills, and competencies necessary for a 2-40 broad range of career opportunities; [and] 2-41 (H) accelerated education; and 2-42 implementation of a comprehensive school (I)counseling program under Section 33.005; 2-43 2-44 (4) strategies for providing to elementary school, 2-45 middle school, junior high school, and high school students, those 2-46 students' teachers and school counselors, and those students' 2-47 parents information about: 2-48 (A) higher education admissions and financial 2-49 aid opportunities, including state financial aid opportunities such as[+ 2-50 2-51 the TEXAS grant program and the Teach for [(B)] Texas grant program established under Chapter 56; 2-52 2-53 (B) [(C)] the need for students to make informed 2-54 curriculum choices to be prepared for success beyond high school; 2-55 and 2-56 (C) [(D)] of information on higher sources 2-57 education admissions and financial aid; 2-58 (5) resources needed to implement identified 2-59 strategies; 2-60 (6) staff responsible for ensuring the accomplishment 2-61 of each strategy; 2-62 (7) timelines for ongoing monitoring of the 2-63 implementation of each improvement strategy; 2-64 (8) formative evaluation criteria for determining 2-65 periodically whether strategies are resulting in intended 2-66 improvement of student performance; and 2-67 (9) the policy under Section 38.0041 addressing sexual abuse and other maltreatment of children. 2-68 2-69 SECTION 1.03. Section 21.044(c-1), Education Code, is

3-1	amended to read as follows:
3-2	(c-1) Any minimum academic qualifications for a certificate
3-3	specified under Subsection (a) that require a person to possess a
3-4	bachelor's degree must also require that the person receive, as
3-5	part of the training required to obtain that certificate,
3-6	instruction regarding mental health, substance abuse, and youth
3-7	suicide. The instruction required must:
3-8	(1) be provided through:
3-9	(A) a program selected from the list of
3-10	
3-11	practices established under Section <u>38.351; or</u>
3-12	(B) a course offered by any accredited public or
3-13	private postsecondary educational institution as part of a degree
3-14	program [161.325, Health and Safety Code]; and
3-15	(2) include effective strategies [for teaching and
3-16	intervening with students with mental or emotional disorders],
3-17	including de-escalation techniques and positive behavioral
3-18	interventions and supports, for teaching and intervening with
3-19	students with mental health conditions or who engage in substance
3-20	abuse.
3-21	SECTION 1.04. Section 21.054, Education Code, is amended by
3-22	amending Subsections (d), (d-2), (e), (e-2), (f), and (g) and
3-23	adding Subsection (d-1) to read as follows:
3-24	(d) Continuing education requirements for a classroom
3-25	teacher must provide that at least [not more than] 25 percent of the
3-26	training required every five years include instruction regarding:
3-27	(1) collecting and analyzing information that will
3-28	improve effectiveness in the classroom;
3-29	(2) recognizing early warning indicators that a
3-30	student may be at risk of dropping out of school;
3-31	(3) digital learning, digital teaching, and
3-32	integrating technology into classroom instruction;
3-33	(4) educating diverse student populations, including:
3-34	(A) students who are eligible to participate in
2 2 5	anagial adjugation programs under Cubabapter A. Chapter 20 (with
3-35	special education programs under Subchapter A, Chapter 29 [with
3-35 3-36	disabilities, including mental health disorders];
3-36	disabilities, including mental health disorders];
3 - 36 3 - 37	disabilities, including mental health disorders]; (B) students who are eligible to receive
3-36 3-37 3-38	disabilities, including mental health disorders]; (B) students who are eligible to receive educational services required under Section 504, Rehabilitation
3-36 3-37 3-38 3-39	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);
3-36 3-37 3-38 3-39 3-40	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
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3-36 3-37 3-38 3-39 3-40 3-41 3-42 3-43 3-44 3-45 3-44 3-45 3-46 3-47 3-48 3-49 3-50 3-51 3-55 3-56 3-62 3-62 3-64	disabilities, including mental health disorders];(B)students who are eligible to receiveeducational servicesrequired under Section 504, RehabilitationAct of 1973 (29 U.S.C. Section 794);(C)students with mental health conditions or whoengage in substance abuse;(D)students with intellectual or developmentaldisabilities;(E)students with intellectual or developmentaldisadvantaged;(F)(-C)(G)(-C)studentsofproficiency; and(G)(-C)(-C)continuingeducationrequirementsfor aclassroomteacher(B)(-C)(C)continuing(C)(-C)(C)(-C)(C)(-C)(C)(-C)(C)(-C)(C)(-C)(C)(-C)(C)(-C)(C)<
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3-36 3-37 3-38 3-39 3-40 3-41 3-42 3-42 3-43 3-44 3-45 3-46 3-47 3-48 3-47 3-48 3-51 3-52 3-55 3-56 3-66 3-66 3-67 3-7	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 with intellectual or developmental disabilities; (E) students who are educationally disadvantaged; (E) students of limited English proficiency; and (G) (H) students at risk of dropping out of school; [and] (5) understanding appropriate relationships, boundaries, and communications between educators and students; and[-] (6) [(d-2) Continuing education requirements for a classroom teacher may include instruction regarding] how mental health conditions, including grief and trauma, affect student trauma-informed strategies support the academic success of students affected by grief and trauma. (d-1) The instruction required under Subsection (d) (6) must be: (1) based on relevant best practice-based programs and (
3-36 3-37 3-38 3-39 3-40 3-41 3-42 3-43 3-43 3-445 3-445 3-445 3-445 3-445 3-445 3-445 3-445 3-445 3-445 3-445 3-445 3-445 3-445 3-45 3-552 3-554 3-557 3-557 3-557 3-557 3-653 3-653 3-6555 3-6555 3-6555 3-65555 3-6555555555555555555555555555555555555	disabilities, including mental health disorders];(B)students who are eligible to receiveeducational servicesrequired under Section 504, RehabilitationAct of 1973 (29 U.S.C. Section 794);(C)students with mental health conditions or whoengage in substance abuse;(D)students with intellectual or developmentaldisabilities;(E)students with intellectual or developmentaldisadvantaged;(F)[4C+](G)[4D+]students at risk of dropping out ofschool;(and)(5)understanding appropriate relationships,boundaries, and communications between educators and students;and[-](6)(6)(1)(6)(1)(1)(2)(2)(3)(4-1)(4-1)(6)(6)(1)(1)(2)(3)(4-2)(4-2)(6)(6)(7

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4-1	effective and efficient management, including:
4-2	(A) collecting and analyzing information;
4-3	(B) making decisions and managing time; and
4-4	(C) supervising student discipline and managing
4-5	behavior;
4-6	(2) recognizing early warning indicators that a
4-7	student may be at risk of dropping out of school;
4-8	(3) digital learning, digital teaching, and
4-9	integrating technology into campus curriculum and instruction;
4-10	(4) effective implementation of a comprehensive
4-11	school counseling program under Section 33.005;
4-12	(5) mental health programs addressing a mental health
4-13	condition;
4 - 14	(6) educating diverse student populations, including:
4-15	(A) students who are eligible to participate in
4 - 16	special education programs under Subchapter A, Chapter 29 [with
4-17	disabilities, including mental health disorders];
4-18	(B) students with intellectual or developmental
4-19	disabilities;
4-19 4 - 20	
4-20 4 - 21	(C) students who are eligible to receive educational services required under Section 504, Rehabilitation
4-21 4-22	Act of 1973 (29 U.S.C. Section 794);
4-23	(D) students with mental health conditions or who
4-24	engage in substance abuse;
4-25	(E) students who are educationally
4-26	disadvantaged;
4-27	(F) [(C)] students of limited English
4-28	proficiency; and
4-29	(G) [(D)] students at risk of dropping out of
4-30	school; [and]
4-31	(7) [(5)] preventing, recognizing, and reporting any
4-32	sexual conduct between an educator and student that is prohibited
4-33	under Section 21.12, Penal Code, or for which reporting is required
4-34	under Section 21.006 of this code; and [-]
4 - 35	(8) [(e-2) Continuing education requirements for a
4-36	principal may include instruction regarding] how mental health
4-37	conditions, including grief and trauma, affect student learning and
4-38	behavior and how evidence-based, grief-informed, and
4-39	trauma-informed strategies support the academic success of
4-40	students affected by grief and trauma.
4-41	(e-2) The instruction required under Subsection (e)(8) must
4-42	be:
4-43	(1) based on relevant best practice-based programs and
4-44	research-based practices; and
4-45	(2) approved by the commissioner, in consultation with
4-46	the Health and Human Services Commission.
4-47	(f) Continuing education requirements for a counselor must
4-48	provide that at least [not more than] 25 percent of training
4-49	required every five years include instruction regarding:
4-50	(1) assisting students in developing high school
4-51	graduation plans;
4-52	(2) implementing dropout prevention strategies; [and]
4-53	(3) informing students concerning:
4-54	(A) college admissions, including college
4-55	financial aid resources and application procedures; and
4-56	(B) career opportunities;
4-57	(4) counseling students concerning mental health
4-58	conditions and substance abuse, including through the use of
4-59	grief-informed and trauma-informed interventions and crisis
4-60	management and suicide prevention strategies; and
4-61	(5) effective implementation of a comprehensive
4-62	school counseling program under Section 33.005.
4-63	(q) The board shall adopt rules that allow an educator to
4-64	fulfill [up to 12 hours of] continuing education requirements by
4-65	participating in an evidence-based [a] mental health first aid
4-66	training program or an evidence-based grief-informed and
4 - 67	trauma-informed care program [offered by a local mental health
4 - 68	authority under Section 1001.203, Health and Safety Code]. The
4 - 69	rules adopted under this subsection must allow an educator to

complete a program described by this subsection and receive credit 5-1 toward continuing education requirements for twice the number of 5-2 5-3 hours of instruction provided under that program, not to exceed 16 5-4 hours. The program must be offered through a classroom instruction format that requires in-person attendance. [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 5-5 5-6 5-7 participating in a mental health first aid training program.] 5-8 5-9 SECTION 1.05. Sections 21.451(d) and (d-1), Education Code, 5-10 are amended to read as follows: 5-11 (d) The staff development: 5-12 may include training in: (1)5-13 technology; (A) positive behavior intervention and support 5-14 (B) 5**-**15 5**-**16 [conflict resolution; [(C) discipline] strategies, including classroom management, district discipline policies, and the student code of conduct adopted under [Section 37.001 and] Chapter 37; 5-17 5-18 [(D) preventing, identifying, responding to, and reporting incidents of bullying;] and 5-19 5-20 5-21 (C) [(E)] digital learning; 5-22 subject to Subsection (e) and to Section 21.3541 (2)5-23 and rules adopted under that section, must include training that is 5-24 evidence-based, as defined by Section 8101, Every Student Succeeds Act (20 U.S.C. Section 7801), and that: 5-25 5**-**26 (A) relates to instruction of students with disabilities, including students with disabilities who also have 5-27 5-28 other intellectual or mental health conditions; and 5-29 (B) is designed for educators who work primarily 5-30 outside the area of special education; and 5-31 must include [suicide prevention] training on: (3)(A) suicide prevention; 5-32 5-33 (B) recognizing signs health of mental 5-34 conditions and substance abuse; strategies for establishing and maintaining 5-35 (C) 5-36 relationships among students, including conflict positive resolution; 5-37 5-38 (D) how grief and trauma affect student learning 5-39 and how evidence-based, grief-informed, behavior and and trauma-informed 5-40 strategies support the academic success of students affected by grief and trauma; and 5-41 5-42 (E) preventing, identifying, responding to, and reporting incidents of bullying. 5-43 5-44 (d-1) The training required by Subsection (d)(3): 5-45 (1)[that] must: be provided: 5-46 (A) $(i)^{\overline{}} [(A)]$ on an annual basis, as part of a 5-47 5-48 employee orientation, to all new school district new and 5-49 open-enrollment charter school educators; and (ii) [(B)] to existing school district and open-enrollment charter school educators on a schedule adopted by 5-50 5-51 the agency by rule; and [-] 5-52 (B) [(d=1) The suicide prevention training required by Subsection (d)(3) must] use a best practice-based program recommended by the <u>Health and Human Services</u> Commission [Department of State Health Services] in coordination with the 5-53 5-54 5-55 5-56 agency under Section 38.351; and 5-57 5-58 (2) may include two or more listed topics together [161.325, Health and Safety Code]. SECTION 1.06. Section 21.462, Education Code, is amended to 5-59 5-60 5-61 read as follows: 5-62 Sec. 21.462. RESOURCES REGARDING STUDENTS WITH MENTAL 5-63 HEALTH <u>OR SUBSTANCE ABUSE CONDITIONS</u> [NEEDS]. The agency, in coordination with the Health and Human Services Commission, shall 5-64 5-65 establish and maintain an Internet website to provide resources for school district or open-enrollment charter school employees 5-66 5-67 regarding working with students with mental health conditions or 5-68 who engage in substance abuse. The agency must include on the 5-69 Internet website information about:

H.B. No. 18 grief-informed and trauma-informed practices;
 building skills related to managing emotions, 6-1 6-2 establishing and 6-3 maintaining positive relationships, and 6-4 responsible decision-making; 6-5 (3) positive behavior interventions and supports; and 6-6 (4)a safe and supportive school climate. 6-7 SECTION 1.07. Sections 28.002(a) and (r), Education Code, 6-8 are amended to read as follows: 6-9 Each school district that offers kindergarten through (a) 6**-**10 6**-**11 grade 12 shall offer, as a required curriculum: (1)a foundation curriculum that includes: 6-12 English language arts; (A) mathematics; 6-13 (B) 6-14 (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 6**-**15 6**-**16 6-17 6-18 (2) an enrichment curriculum that includes: 6-19 (A) to the extent possible, languages other than 6-20 6-21 English; health, with emphasis on: (B) 6-22 (i) physical health, including the 6-23 importance of proper nutrition and exercise; and (ii) mental health, including instruction about mental health conditions, substance abuse, skills to manage 6-24 6**-**25 6**-**26 emotions, establishing and maintaining positive relationships, and responsible decision-making; 6-27 6-28 (C) physical education; 6-29 (D) fine arts; 6-30 career and technology education; (E) 6-31 technology applications; religious literature, including the Hebrew (F) 6-32 (G) 6-33 Scriptures (Old Testament) and New Testament, and its impact on 6-34 history and literature; and 6-35 personal financial literacy. (H) 6-36 In adopting the essential knowledge and skills for the (r) health curriculum under Subsection (a)(2)(B), the State Board of 6-37 6-38 Education shall adopt essential knowledge and skills that address 6-39 science, dangers, risk factors, causes, [causes,] the consequences, signs, symptoms, and treatment of <u>substance abuse</u>, including the use of illegal drugs, abuse of prescription drugs, abuse of alcohol such as by binge drinking <u>or other excessive</u> drinking resulting in [and] alcohol poisoning, inhaling solvents, 6-40 6-41 6-42 6-43 and other forms of substance abuse. The agency shall compile a list of evidence-based <u>substance abuse</u> [alcohol] awareness programs from which a school district shall choose a program to use in the 6-44 6-45 6-46 district's middle school, junior high school, and high school health curriculum. In this subsection, "evidence-based substance 6-47 6-48 <u>abuse</u> [alcohol] awareness program" means a program, practice, or strategy that has been proven to effectively prevent <u>substance</u> <u>abuse</u> [or delay alcohol use] among students, as determined by 6-49 6-50 6-51 6-52 evaluations that are evidence-based [use valid and reliable 6-53 measures and that are published in peer-reviewed journals]. SECTION 1.08. Sections 28.004(c), (d), and (k), Education 6-54 6-55 Code, are amended to read as follows: 6-56 (c) The local school health advisory council's duties 6-57 include recommending: 6-58 the number of hours of instruction to be provided (1)6-59 in: (A) 6-60 health education in kindergarten through 6-61 grade eight; and 6-62 (B) if the school district requires health education for high school graduation, health education, including physical health education and mental health education, in grades 9 6-63 6-64 through 12; 6-65 6-66 (2) policies, procedures, strategies, and curriculum appropriate for specific grade levels designed to prevent physical 6-67 health concerns, including obesity, cardiovascular disease, Type 2 6-68 diabetes, and mental health concerns through coordination of: 6-69

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7-1	(A) health education, which must address
7 - 2 7 - 3	physical health concerns and mental health concerns to ensure the integration of physical health education and mental health
7-3 7-4	education;
7 - 5	(B) physical education and physical activity;
7-6	(C) nutrition services;
7-7	<pre>(D) parental involvement;</pre>
7-8	(E) instruction <u>on substance abuse prevention</u>
7-9	[to prevent the use of e-cigarettes, as defined by Section 161.081,
7 - 10 7 - 11	Health and Safety Code, and tobacco]; (F) school health services, including mental
7-12	health services;
7-13	(G) a comprehensive school counseling program
7-14	under Section 33.005 [and guidance services];
7-15	(H) a safe and healthy school environment; and
7 - 16 7 - 17	(I) school employee wellness;(3) appropriate grade levels and methods of
7 - 17 7 - 18	(3) appropriate grade levels and methods of instruction for human sexuality instruction;
7-19	(4) strategies for integrating the curriculum
7-20	components specified by Subdivision (2) with the following elements
7-21	in a coordinated school health program for the district:
7-22	(A) school health services, including physical
7-23	health services and mental health services, if provided at a campus
7 - 24 7 - 25	by the district or by a third party under a contract with the district;
7-25	(B) a comprehensive school counseling program
7-27	under Section 33.005 [and quidance services];
7-28	(C) a safe and healthy school environment; and
7-29	(D) school employee wellness; and
7-30	(5) if feasible, joint use agreements or strategies
7-31 7-32	for collaboration between the school district and community organizations or agencies.
7-32	(d) The board of trustees shall appoint at least five
7 - 34	members to the local school health advisory council. A majority of
7-35	the members must be persons who are parents of students enrolled in
7-36	the district and who are not employed by the district. One of those
7-37	members shall serve as chair or co-chair of the council. The board
7-38 7-39	of trustees also may appoint one or more persons from each of the
7 - 39 7 - 40	following groups or a representative from a group other than a group specified under this subsection:
7-41	(1) classroom [public school] teachers employed by the
7-42	district;
7-43	(2) school counselors certified under Subchapter B,
7-44	Chapter 21, employed by the district;
7 - 45 7 - 46	(3) [public] school administrators employed by the district;
7-47	(4) [(3)] district students;
7-48	(5) [(4)] health care professionals <u>licensed or</u>
7-49	certified to practice in this state, including medical or mental
7-50	health professionals;
7 - 51 7 - 52	<pre>(6) [(5)] the business community; (7) [(6)] law enforcement;</pre>
7-53	$\frac{(7)}{(8)} \begin{bmatrix} (7) \\ -(7) \end{bmatrix}$ senior citizens;
7 - 54	(9) [(8)] the clergy;
7-55	(10) [(9)] nonprofit health organizations; and
7-56	(11) [(10)] local domestic violence programs.
7-57	(k) A school district shall publish in the student handbook
7 - 58 7 - 59	and post on the district's Internet website, if the district has an Internet website:
7-60	(1) a statement of the policies and procedures adopted
7-61	to promote the physical health and mental health of students, the
7-62	physical health and mental health resources available at each
7-63	campus, contact information for the nearest providers of essential
7-64	public health services under Chapter 121, Health and Safety Code,
7 - 65 7 - 66	and the contact information for the nearest local mental health authority;
7-67	(2) a statement of the policies adopted to ensure that
7 - 68	elementary school, middle school, and junior high school students
7-69	engage in at least the amount and level of physical activity

8-1 required by Section 28.002(1); (3) $\left[\frac{(2)}{(2)}\right]$ a statement of: 8-2 8-3 (A) the number of times during the preceding year the district's school health advisory council has met; 8-4 8-5 (B) whether the district has adopted and enforces policies to ensure that district campuses comply with agency 8-6 vending machine and food service guidelines for restricting student 8-7 8-8 access to vending machines; and whether the district has adopted and enforces 8-9 (C) 8-10 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 8-11 8-12 8-13 school-related activities; [and] (4) [-(3)] a statement providing notice to parents that 8-14 they can request in writing their child's physical fitness assessment results at the end of the school year; and 8**-**15 8**-**16 8-17 (5) for each campus in the district, a statement of the campus has a full-time nurse or full-time school 8-18 whether 8-19 counselor. 8-20 8-21 SECTION 1.09. Section 30.002(b), Education Code, is amended to read as follows: 8-22 (b) The agency shall: 8-23 (1) develop standards and guidelines for all special 8-24 education services for children with visual impairments that it is 8-25 authorized to provide or support under this code; 8-26 (2) supervise regional education service centers and 8-27 other entities in assisting school districts in serving children 8-28 with visual impairments more effectively; 8-29 (3) develop and administer special education services for students with both serious visual and auditory impairments; 8-30 8-31 (4) evaluate special education services provided for 8-32 children with visual impairments by school districts and approve or 8-33 disapprove state funding of those services; and 8-34 (5) maintain an effective liaison between special education programs provided for children with visual impairments by 8-35 8-36 school districts and related initiatives of the Health and Human 8-37 Services Commission [Department of Assistive and Rehabilitative 8-38 Services Division for Blind Services], the Department of State Health Services Mental Health and Substance Abuse Division, the 8-39 Texas <u>Workforce Commission</u> [School for the Blind and Visually Impaired], and other related programs, agencies, or facilities as 8-40 8-41 8-42 appropriate. 8-43 SECTION 1.10. Section 33.004(b), Education Code, is amended 8-44 to read as follows: 8-45 (b) Each school, before implementing a comprehensive school 8-46 [and developmental guidance and] counseling program under Section 8-47 33.005, shall annually conduct a preview of the program for parents and guardians. All materials, including curriculum to be used 8-48 during the year, must be available for a parent or guardian to 8-49 8-50 preview during school hours. Materials or curriculum not included 8-51 in the materials available on the campus for preview may not be 8-52 used. 8-53 SECTION 1.11. Section 33.005, Education Code, is amended to 8-54 read as follows: 8-55 Sec. 33.005. <u>COMPREHENSIVE SCHOOL</u> [DEVELOPMENTAL GUIDANCE AND] COUNSELING PROGRAMS. (a) A school counselor shall work with 8-56 the school faculty and staff, students, parents, and the community 8-57 and 8-58 to plan, implement, evaluate a comprehensive school [developmental guidance and] counseling program that conforms to the most recent edition of the Texas Model for Comprehensive School Counseling Programs developed by the Texas Counseling Association. 8-59 8-60 8-61 8-62 (b) The school counselor shall design the program to 8-63 include: 8-64 a guidance curriculum to help students develop (1) 8-65 their full educational potential, including the student's 8-66 interests and career objectives; 8-67 (2) a responsive services component to intervene on behalf of any student whose immediate personal concerns or problems 8-68 8-69 put the student's continued educational, career, personal, or

9-1 social development at risk; 9-2 an individual planning system to guide a student (3)9-3 as the student plans, monitors, and manages the student's own 9-4 educational, career, personal, and social development; and (4) system support to support the efforts of teachers, staff, parents, and other members of the community in promoting the 9-5 9-6 9-7 educational, career, personal, and social development of students. 9-8 SECTION 1.12. Subchapter A, Chapter 38, Education Code, is 9-9 amended by adding Section 38.0101 to read as follows: CONTRACT Sec. 38.0101. AUTHORITY 9-10 TO EMPLOY OR WITH 9**-**11 NONPHYSICIAN MENTAL HEALTH PROFESSIONAL. (a) A school district may employ or contract with one or more nonphysician mental health 9-12 professionals. 9-13 9-14 section, "nonphysician mental (b) In hea<u>lth</u> this professional" means: 9-15 9**-**16 (1)a psychologist licensed to practice in this state 9-17 and designated as a health-service provider; 9-18 (2) a registered nurse with a master's or doctoral 9-19 degree in psychiatric nursing; a licensed clinical social worker; 9-20 (3) 9**-**21 (4) a professional counselor licensed to practice in 9-22 this state; or 9-23 (5)marriage and family therapist licensed а to 9-24 practice in this state. SECTION 1.13. 9-25 Section 38.013(a), Education Code, is amended 9**-**26 to read as follows: 9-27 The agency shall make available to each school district (a) one or more coordinated health programs [designed to prevent 9-28 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 9-29 9-30 9**-**31 9-32 education and services related to: 9-33 (1) <u>physical</u> health education, including programs 9-34 prevent obesity, <u>cardiovascular</u> disease, oral designed to diseases, and Type 2 diabetes and programs designed to promote the role of proper nutrition [oral health education]; 9-35 9-36 9-37 (2) mental health education, including education about mental health conditions, mental health well-being, skills to 9-38 emotions, establishing and 9-39 maintaining <u>manage</u> positive relationships, and responsible decision-making; (3) substance abuse education, including education 9-40 9-41 9-42 about alcohol abuse, prescription drug abuse, and abuse of other 9-43 controlled substances; (4) physical education and physical activity; and (5) [(3) nutrition services; and 9-44 9-45 9-46 [(4)] parental involvement. 9-47 SECTION 1.14. Sections 38.016(a) and (c), Education Code, 9-48 are amended to read as follows: 9-49 In this section: (a) "Nonphysician mental health professional" has the 9-50 (1)<u>meaning assigned by Section 38.0101.</u> (2) "Parent" includes a guardian or other person 9-51 9-52 9-53 standing in parental relation. (3) [(2)] 9-54 "Psychotropic drug" means a substance that 9-55 is: 9-56 (A) used in the diagnosis, treatment, or 9-57 prevention of a disease or as a component of a medication; and 9-58 (B) intended to have an altering effect on 9-59 perception, emotion, or behavior. 9-60 (c) Subsection (b) does not: 9-61 (1) prevent an appropriate referral under the child find system required under 20 U.S.C. Section 1412, as amended; [or] 9-62 9-63 (2) prohibit a school district employee, or an employee of an entity with which the district contracts, who is a 9-64 9-65 registered nurse, advanced nurse practitioner, physician, or nonphysician mental health professional licensed or certified to 9-66 9-67 <u>practice in this state [or appropriately credentialed mental health</u> professional] from recommending that a child be evaluated by a physician or nonphysician mental health professional [an 9-68 9-69

appropriate medical practitioner]; or 10-1 (3) prohibit a school employee from discussing any 10-2 aspect of a child's behavior or academic progress with the child's 10-3 10-4 parent or another school district employee. 10-5 SECTION 1.15. Section 38.051(b), Education Code, is amended 10-6 to read as follows: 10-7 (b) On the recommendation of advisory council an established under Section 38.058 or on the initiative of the board 10-8 of trustees or the governing body of an open-enrollment charter school, a school district or open-enrollment charter school may 10-9 10-10 10-11 establish a school-based health center at one or more campuses [in the district] to meet the health care needs of students and their 10-12 10-13 families. SECTION 1.16. Section 38.054, Education Code, is amended to 10-14 10-15 10-16 read as follows: Sec. 38.054. CATEGORIES OF SERVICES. The permissible 10-17 categories of services are: family and home support; 10-18 (1)10-19 (2) physical health care, including immunizations; 10-20 10-21 (3)dental health care; (4)health education; [and] 10-22 preventive health strategies; (5) 10-23 (6)treatment for mental health conditions; and 10-24 (7) treatment for substance abuse. 10-25 10-26 SECTION 1.17. Section 38.057(b), Education Code, is amended to read as follows: 10-27 If it is determined that a student is in need of a (b) referral for <u>physical health services or</u> mental health services, the staff of the center shall notify the person whose consent is 10-28 10-29 10-30 required under Section 38.053 verbally and in writing of the basis for the referral. The referral may not be provided unless the person provides written consent for the type of service to be 10-31 10-32 provided and provides specific written consent for each treatment 10-33 occasion or for a course of treatment that includes multiple treatment occasions of the same type of service. SECTION 1.18. Section 38.058, Education Code, is amended to 10-34 10-35 10-36 10-37 read as follows: 10-38 Sec. 38.058. HEALTH EDUCATION AND HEALTH CARE ADVISORY 10-39 The board of trustees of a school district or the COUNCIL. (a) governing body of an open-enrollment charter school may establish and appoint members to a local health education and health care 10-40 10-41 advisory council to make recommendations to the district or school 10-42 10-43 on the establishment of school-based health centers and \overline{to} assist the district <u>or school</u> in ensuring that local community values are reflected in the operation of each center and in the provision of 10-44 10-45 10-46 health education. A majority of the members of the council must be parents 10-47 (b) of students enrolled in the <u>school</u> district <u>or open-enrollment</u> <u>charter school</u>. In addition to the appointees who are parents of 10-48 10 - 49students, the board of trustees <u>or governing body</u> shall also appoint at least one person from each of the following groups: 10-50 10-51 10-52 (1)classroom teachers; 10-53 (2) school administrators; school counselors;
[licensed] health care professionals licensed or 10-54 (3) 10-55 (4) certified to practice in this state; 10-56 10-57 (5) [(4)] the clergy; (6) [(5)]law enforcement; 10-58 the business community; <u>(7)</u> [(6)] [(7)] 10-59 10-60 (8)senior citizens; and [(8)] students. 10-61 (9) 10-62 SECTION 1.19. Subchapter B, Chapter 38, Education Code, is 10-63 amended by adding Section 38.0591 to read as follows: Sec. 38.0591. ACCESS TO MENTAL HEALTH SERVICES. 10-64 The agency, in cooperation with the Health and Human Services Commission, shall develop guidelines for school districts 10-65 10-66 regard<u>ing</u>: 10-67 (1) partnering with a local mental health authority and with community or other private mental health services 10-68 10-69

and substance abuse services providers 11 - 1providers to increase student access to mental health services; and 11-2 (2) obtaining mental health services through the 11-3 medical assistance program under Chapter 32, Human Resources Code. 11-4 Section 38.060(c), Education Code, is amended 11-5 SECTION 1.20. 11-6 to read as follows: (c) The <u>school district or open-enrollment charter school</u> [council] shall keep a record of efforts made to coordinate with 11-7 11-8 11-9 existing providers. SECTION 1.21. Subchapter O-1, Chapter 161, Health and Safety Code, as amended by Chapter 522 (S.B. 179) and Chapter 714 (H.B. 4056), Acts of the 85th Legislature, Regular Session, 2017, 11-10 11-11 11-12 is transferred to Chapter 38, Education Code, redesignated as 11-13 11-14 Subchapter G, Chapter 38, Education Code, reenacted, and amended to 11**-**15 11**-**16 read as follows: SUBCHAPTER <u>G</u> $[\Theta = 1]$. MENTAL HEALTH, SUBSTANCE ABUSE, AND YOUTH 11-17 SUICIDE Sec. <u>38.351</u> [161.325]. 11-18 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 11-19 11-20 11-21 11-22 11-23 annually update a list of recommended best practice-based programs and research-based practices in the areas specified under 11-24 11-25 11-26 11-27 Subsection (c) $\left[\frac{(a-1)}{a}\right]$ for implementation in public elementary, junior high, middle, and high schools within the general education setting. (b) Each school district may select from the list provided under Subsection (a) a program or programs appropriate for 11-28 Each school district may select from the list provided 11-29 11-30 11-31 implementation in the district. (c) [(a=1)] The list provided under Subsection (a) must include programs and practices in the following areas: 11-32 11-33 (1)early mental health prevention and intervention; 11-34 (2) building skills related to managing emotions, 11-35 positive relationships, establishing and maintaining and 11-36 responsible decision-making; [(2) mental health promotion;] 11-37 11-38 (3) substance abuse prevention and intervention; 11-39 (4) [substance abuse intervention; 11-40 [(5)] suicide prevention, intervention, and 11-41 postvention; 11-42 (5) [(6) trauma-informed practices; [(6)] grief-informed and trauma-informed practices; 11-43 11-44 (6) [(7) building skills related to managing establishing and maintaining positive relationships, and 11-45 emotions. 11-46 responsible decision-making; 11-47 [(7)] positive school climates; [and] (7) [(8)] positive 11-48 behavior interventions and 11 - 49supports; 11-50 (8) [positive behavior interventions and supports 11-51 and] positive youth development; and 11-52 (9) safe, [and] supportive, and positive school 11-53 climate. (d) [(a-2) The department, the Texas Education Agency, and each regional education service center shall make the list easily 11-54 11-55 11-56 accessible on their websites. 11-57 [(a=3)] For purposes of Subsection <u>(c)</u> [(a=1)], "school 11-58 climate" means the quality and character of school life, including interpersonal relationships, teaching and learning practices, and organizational structures, as experienced by students enrolled in 11-59 11-60 11-61 the school district, parents of those students, and personnel employed by the district. 11-62 11-63 (e) [(b)] The suicide prevention programs on the list provided under Subsection (a) must include components that provide 11-64 for training <u>school</u> counselors, teachers, nurses, administrators, and other staff, as well as law enforcement officers and social 11-65 11-66 workers who regularly interact with students, to: 11-67 11-68 (1) recognize students at risk of attempting 11-69 [committing] suicide, including students who are or may be the

12-1 victims of or who engage in bullying;

12-2 (2) recognize students displaying early warning signs 12-3 and a possible need for early mental health or substance abuse 12-4 intervention, which warning signs may include declining academic 12-5 performance, depression, anxiety, isolation, unexplained changes 12-6 in sleep or eating habits, and destructive behavior toward self and 12-7 others; [and]

12-8 (3) intervene effectively with students described by 12-9 Subdivision (1) or (2) by providing notice and referral to a parent 12-10 or guardian so appropriate action, such as seeking mental health or 12-11 substance abuse services, may be taken by a parent or guardian; and 12-12 (4) assist students in returning to school following

12-12(4) assist students in returning to school following12-13treatment of a mental health concern or suicide attempt.12-14(f)(f)[(c)]In developing the list of best practice-based

12-14 (f) [(c)] In developing the list of best practice-based 12-15 programs and research-based practices, the <u>agency</u> [department] and 12-16 the <u>Health and Human Services Commission</u> [Texas Education Agency] 12-17 shall consider:

12-18 (1) any existing suicide prevention method developed 12-19 by a school district; and

12-20 (2) any Internet or online course or program developed 12-21 in this state or another state that is based on best practices 12-22 recognized by the Substance Abuse and Mental Health Services 12-23 Administration or the Suicide Prevention Resource Center.

(g)_ [(c=1)] Except 12-24 as otherwise provided by this 12**-**25 12**-**26 subsection, each school district shall provide training described in the components set forth under Subsection (e) [(b)] for 12-27 teachers, <u>school</u> counselors, principals, and all other appropriate 12-28 personnel. A school district is required to provide the training at 12-29 an elementary school campus only to the extent that sufficient 12-30 funding and programs are available. A school district may 12-31 implement a program on the list to satisfy the requirements of this 12-32 subsection.

12-33 (h) [(c-2)] If a school district provides the training 12-34 under Subsection (g) [(c-1)]:

12-35 (1) a school district employee described under that 12-36 subsection must participate in the training at least one time; and 12-27 (2) the school district shall maintain records that

12-37 (2) the school district shall maintain records that 12-38 include the name of each district employee who participated in the 12-39 training.

12-40 (i) [(d)] A school district shall [may] develop practices 12-41 and procedures concerning each area listed in Subsection (c) 12-42 [(a=1)], including mental health promotion and intervention, 12-43 substance abuse prevention and intervention, and suicide 12-44 prevention, that:

12-45 (1) include a procedure for providing notice of a 12-46 recommendation for early mental health or substance abuse 12-47 intervention regarding a student to a parent or guardian of the 12-48 student within a reasonable amount of time after the identification 12-49 of early warning signs as described by Subsection (e)(2) [(b)(2)];

12-50 (2) include a procedure for providing notice of a 12-51 student identified as at risk of <u>attempting</u> [committing] suicide to 12-52 a parent or guardian of the student within a reasonable amount of 12-53 time after the identification of early warning signs as described 12-54 by Subsection (e)(2) [(b)(2)]; 12-55 (3) establish that the district may develop a

12-55 (3) establish that the district may develop a 12-56 reporting mechanism and may designate at least one person to act as 12-57 a liaison officer in the district for the purposes of identifying 12-58 students in need of early mental health or substance abuse 12-59 intervention or suicide prevention; [and]

12-60 (4) set out available counseling alternatives for a 12-61 parent or guardian to consider when their child is identified as 12-62 possibly being in need of early mental health or substance abuse 12-63 intervention or suicide prevention; and

12-64	(5) include procedures:
12-65	(A) to support the return of a student to school
12-66	following hospitalization or residential treatment for a mental
12-67	health condition or substance abuse; and
12-68	(B) for suicide prevention, intervention, and
12-60	noction

H.B. No. 18 (j) [(e)] The practices and procedures developed under 13-1 13-2 Subsection (i): 13-3 (1)may address multiple areas listed in Subsection 13-4 (c) together; and (2) [(d)] must prohibit the use without the prior 13-5 consent of a student's parent or guardian of a medical screening of 13-6 the student as part of the process of identifying whether the student is possibly in need of early mental health or substance 13-7 13-8 13-9 abuse intervention or suicide prevention. 13-10 13-11 (k) [(f)] The practices and procedures developed under Subsection (i) [(d)] must be included in: 13-12 (1) the annual student handbook; and 13-13 (2) district improvement plan under the Section 13-14 11.252[, Education Code]. (1) The agency shall develop and make available to school districts guiding principles on the coordination of programs and practices in areas listed under Subsection (c). 13**-**15 13**-**16 13-17 13-18 (m) [(g)] The <u>agency</u>, the Health and Human Services Commission, and each regional education service center: 13-19 13-20 13-21 (1) [department] may accept donations for purposes of this section from sources without a conflict of interest; and 13-22 (2) [. The department] may not accept donations for purposes of this section from an anonymous source. 13-23 (n) [(i)] 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 and procedures developed in accordance with this section are intended to notify a 13-24 13**-**25 13**-**26 13-27 13-28 parent or guardian of a need for mental health or substance abuse 13-29 intervention so that a parent or guardian may take appropriate 13-30 action. Nothing in this section shall be construed as giving school 13-31 districts the authority to prescribe medications. Any and all 13-32 medical decisions are to be made by a parent or guardian of a 13-33 student. (o) In this section, "postvention" includes activities that promote healing necessary to reduce the risk of suicide by a person affected by the suicide of another. Sec. <u>38.352</u> [161.326]. IMMUNITY. This subchapter does not: 13-34 13-35 13-36 13-37 13-38 (1) waive any immunity from liability of a school 13-39 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; 13-40 13-41 13-42 or 13-43 waive any immunity from liability under Section (3) 13-44 74.151, Civil Practice and Remedies Code. 13-45 ARTICLE 2. MENTAL HEALTH FIRST AID PROGRAM TRAINING AND REPORTING 13-46 SECTION 2.01. Section 1001.205, Health and Safety Code, is amended to read as follows: 13-47 Sec. 1001.205. REPORTS. (a) Not later than September 30 of 13-48 13-49 each year, a local mental health authority shall provide to the 13-50 department the number of: 13-51 (1) employees and contractors of the authority who 13-52 were trained as mental health first aid trainers under Section 1001.202 during the preceding fiscal year, the number of trainers 13-53 who left the program for any reason during the preceding fiscal year, and the number of active trainers; (2) university employees, school district employees, 13-54 13-55 13-56 13-57 and school resource officers who completed a mental health first 13-58 aid training program offered by the authority under Section 1001.203 during the preceding fiscal year categorized by local 13-59 mental health authority region, university or school district, applicable, and category of personnel; and 13-60 as 13-61 (3) individuals who are not university employees, 13-62 school district employees, or school resource officers who 13-63 completed a mental health first aid training program offered by the 13-64 authority during the preceding fiscal year. (b) Not later than December 1 of each year, the department shall compile the information submitted by local mental health 13-65 13-66 13-67 13-68 authorities as required by Subsection (a) and submit a report to the 13-69 legislature containing [the number of]:

H.B. No. 18 (1) the number of authority employees and contractors trained as mental health first aid trainers during the preceding 14-1 14-2 14-3 fiscal year, the number of trainers who left the program for any 14 - 4reason during the preceding fiscal year, and the number of active 14**-**5 trainers; 14-6 (2) the number of university employees, school 14-7 district employees, and school resource officers who completed a mental health first aid training program provided by an authority 14-8 14-9 during the preceding fiscal year categorized by local mental health authority region, university or school district, as applicable, and 14-10 14-11 category of personnel; [and] 14-12 (3) the number of individuals who are not university employees, school district employees, or school resource officers 14-13 14-14 who completed a mental health first aid training program provided by an authority during the preceding fiscal year; and (4) a detailed accounting of expenditures of appropriated for the purpose of implementing this subchapter. 14-15 14-16 of money 14-17 (c) The department shall develop and provide to local mental 14-18 health authorities a form to be used for the reporting of information required under Subsection (a), including the reporting of each category of personnel described by that subsection. SECTION 2.02. Subchapter H, Chapter 1001, Health and Safety 14-19 14-20 14-21 14-22 14-23 Code, is amended by adding Section 1001.207 to read as follows: 14-24 Sec. 1001.207. PROGRAM PROMOTION. (a) The commission shall 14-25 14-26 make available on its official Internet website information about the mental health first aid training program for the purpose of promoting public awareness of the program. An electronic link to an 14-27 14-28 outside source of information is not sufficient. 14-29 (b) The Texas Education Agency shall make available on its official Internet website information about the mental health first aid training program for the purpose of promoting public awareness of the program. An electronic link to an outside source of 14-30 14-32 information is not sufficient. 14-33 14-34 ARTICLE 3. CONFORMING AMENDMENTS SECTION 3.01. Section 74.151(e), Remedies Code, is amended to read as follows: 14-35 Civil Practice and 14-36 14-37 (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 14-38 14-39 14-40 school district or district school officer or employee arising from 14-41 14-42 an act or omission under a program or <u>practice</u> [policy] or procedure 14-43 developed [adopted] under Subchapter G, Chapter 38, Education [0-1, 14-44 Chapter 161, Health and Safety] Code, other than liability arising from wilful or intentional misconduct. SECTION 3.02. Section 38.014 14-45 14-46 38.0141(a), Education Code, is 14-47 amended to read as follows: 14-48 (a) 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 <u>Sections 28.004(k)(2), (3), and (4)</u> 14 - 4914-50 14-51 [Section 28.004(k),] presented in a form determined by the 14-52 14-53 commissioner. The district shall provide the information required 14-54 by this subsection for the district and for each campus in the 14-55 district. 14-56 ARTICLE 4. REPEALER; TRANSITION; EFFECTIVE DATE 14-57 SECTION 4.01. The following provisions of the Education 14-58 Code are repealed: Section 21.463; and 14-59 (1)Section 28.002(w). 14-60 (2) 14-61 SECTION 4.02. (a) Not later than May 1, 2020: 14-62 (1) the State Board for Educator Certification shall propose rules under Section 21.054, Education Code, to comply with 14-63 14-64 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 (2) 14-65 14-66 guidelines required by Section 38.0591, Education Code, as added by 14-67 14-68 this Act. 14-69 (b) Not later than August 1, 2020, the Texas Education

15-1 Agency, in coordination with the Health and Human Services 15-2 Commission and regional education service centers, shall provide a 15-3 list of recommended best practice-based programs as required by 15-4 Section 38.351, Education Code, as transferred, redesignated, 15-5 reenacted, and amended by this Act.

15-5 reenacted, and amended by this Act. 15-6 SECTION 4.03. Any change in law made by this Act that 15-7 imposes a new duty or requirement on a school district or an 15-8 open-enrollment charter school applies beginning with the 15-9 2020-2021 school year.

15-10 SECTION 4.04. (a) Section 1001.205(a), Health and Safety 15-11 Code, as amended by this Act, applies only to a report due under 15-12 that subsection after December 31, 2019. A report due under that 15-13 subsection before that date is governed by the law in effect 15-14 immediately before the effective date of this Act, and that law is 15-15 continued in effect for that purpose. 15-16 (b) Section 1001.205(b), Health and Safety Code, as amended

15-15 continued in effect for that purpose. 15-16 (b) Section 1001.205(b), Health and Safety Code, as amended 15-17 by this Act, applies only to a report due under that subsection 15-18 after March 1, 2020. A report due under that subsection before that 15-19 date is governed by the law in effect immediately before the 15-20 effective date of this Act, and that law is continued in effect for 15-21 that purpose.

15-22 (c) Not later than May 1, 2020, the Health and Human 15-23 Services Commission shall develop and make available the form 15-24 required under Section 1001.205(c), Health and Safety Code, as 15-25 added by this Act. 15-26 SECTION 4.05. Not later than March 1, 2020, the Health and

15-26 SECTION 4.05. Not later than March 1, 2020, the Health and 15-27 Human Services Commission and the Texas Education Agency shall 15-28 update their Internet websites to include the information required 15-29 by Section 1001.207, Health and Safety Code, as added by this Act. 15-30 SECTION 4.06. This Act takes effect December 1, 2019.

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