1	A bill to be entitled
2	An act relating to mental health of students; amending
3	s. 394.463, F.S.; revising data the Department of
4	Children and Families is required to analyze when
5	creating its annual report on the initiation of
6	certain involuntary examinations; amending s. 1002.33,
7	F.S.; requiring charter schools to be in compliance
8	with laws relating to reporting involuntary
9	examinations; conforming cross-references; amending s.
10	1006.07, F.S.; requiring district school boards to
11	designate a mental health coordinator; providing
12	requirements and duties for mental health
13	coordinators; requiring the Department of Education,
14	by a specified date, to share with the Department of
15	Children and Families data received from school
16	districts relating to involuntary examinations;
17	amending s. 1011.62, F.S.; revising requirements for
18	plans relating to mental health assistance
19	allocations; providing an effective date.
20	
21	Be It Enacted by the Legislature of the State of Florida:
22	
23	Section 1. Subsection (4) of section 394.463, Florida
24	Statutes, is amended to read:
25	394.463 Involuntary examination
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26 DATA ANALYSIS.-Using data collected under paragraph (4) 27 (2) (a) and s. 1006.07(10), the department shall, at a minimum, 28 analyze data on both the initiation of involuntary examinations 29 of children and the initiation of involuntary examinations of 30 students who are removed from a school; identify any patterns or trends and cases in which involuntary examinations are 31 32 repeatedly initiated on the same child or student; study root 33 causes for such patterns, trends, or repeated involuntary 34 examinations; and make recommendations to encourage the use of alternatives to eliminate inappropriate initiations of such 35 36 examinations. The department shall submit a report on its findings and recommendations to the Governor, the President of 37 38 the Senate, and the Speaker of the House of Representatives by 39 November 1 of each odd-numbered year. Section 2. Paragraph (b) of subsection (16) of section 40 41 1002.33, Florida Statutes, is amended to read:

42

43

1002.33 Charter schools.-

(16) EXEMPTION FROM STATUTES.-

44 (b) Additionally, a charter school shall be in compliance45 with the following statutes:

46 1. Section 286.011, relating to public meetings and
47 records, public inspection, and criminal and civil penalties.

48

2. Chapter 119, relating to public records.

3. Section 1003.03, relating to the maximum class size,
except that the calculation for compliance pursuant to s.

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51	1003.03 shall be the average at the school level.
52	4. Section 1012.22(1)(c), relating to compensation and
53	salary schedules.
54	5. Section 1012.33(5), relating to workforce reductions.
55	6. Section 1012.335, relating to contracts with
56	instructional personnel hired on or after July 1, 2011.
57	7. Section 1012.34, relating to the substantive
58	requirements for performance evaluations for instructional
59	personnel and school administrators.
60	8. Section 1006.12, relating to safe-school officers.
61	9. Section 1006.07(7), relating to threat assessment
62	teams.
63	10. Section 1006.07(9), relating to School Environmental
64	Safety Incident Reporting.
65	11. Section 1006.07(10), relating to reporting of
66	involuntary examinations.
67	<u>12.</u> Section 1006.1493, relating to the Florida Safe
68	Schools Assessment Tool.
69	<u>13.12. Section 1006.07(6)(d)</u> 1006.07(6)(c) , relating to
70	adopting an active assailant response plan.
71	14.13. Section 943.082(4)(b), relating to the mobile
72	suspicious activity reporting tool.
73	15.14. Section 1012.584, relating to youth mental health
74	awareness and assistance training.
75	Section 3. Subsections (6) and (10) of section 1006.07,
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76 Florida Statutes, are amended to read:

1006.07 District school board duties relating to student discipline and school safety.—The district school board shall provide for the proper accounting for all students, for the attendance and control of students at school, and for proper attention to health, safety, and other matters relating to the welfare of students, including:

(6) SAFETY AND SECURITY BEST PRACTICES.—Each district
school superintendent shall establish policies and procedures
for the prevention of violence on school grounds, including the
assessment of and intervention with individuals whose behavior
poses a threat to the safety of the school community.

88 School safety specialist.-Each district school (a) 89 superintendent shall designate a school safety specialist for 90 the district. The school safety specialist must be a school 91 administrator employed by the school district or a law 92 enforcement officer employed by the sheriff's office located in 93 the school district. Any school safety specialist designated 94 from the sheriff's office must first be authorized and approved 95 by the sheriff employing the law enforcement officer. Any school 96 safety specialist designated from the sheriff's office remains 97 the employee of the office for purposes of compensation, 98 insurance, workers' compensation, and other benefits authorized 99 by law for a law enforcement officer employed by the sheriff's office. The sheriff and the school superintendent may determine 100

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101 by agreement the reimbursement for such costs, or may share the 102 costs, associated with employment of the law enforcement officer 103 as a school safety specialist. The school safety specialist must earn a certificate of completion of the school safety specialist 104 105 training provided by the Office of Safe Schools within 1 year after appointment and is responsible for the supervision and 106 107 oversight for all school safety and security personnel, policies, and procedures in the school district. The school 108 109 safety specialist shall:

110 1. Review school district policies and procedures for 111 compliance with state law and rules, including the district's 112 timely and accurate submission of school environmental safety 113 incident reports to the department pursuant to s. 1001.212(8).

114 2. Provide the necessary training and resources to 115 students and school district staff in matters relating to youth 116 mental health awareness and assistance; emergency procedures, 117 including active shooter training; and school safety and 118 security.

3. Serve as the school district liaison with local public safety agencies and national, state, and community agencies and organizations in matters of school safety and security.

4. In collaboration with the appropriate public safety
agencies, as that term is defined in s. 365.171, by October 1 of
each year, conduct a school security risk assessment at each
public school using the Florida Safe Schools Assessment Tool

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126 developed by the Office of Safe Schools pursuant to s. 127 1006.1493. Based on the assessment findings, the district's 128 school safety specialist shall provide recommendations to the 129 district school superintendent and the district school board 130 which identify strategies and activities that the district 131 school board should implement in order to address the findings 132 and improve school safety and security. Each district school 133 board must receive such findings and the school safety 134 specialist's recommendations at a publicly noticed district 135 school board meeting to provide the public an opportunity to hear the district school board members discuss and take action 136 137 on the findings and recommendations. Each school safety specialist shall report such findings and school board action to 138 139 the Office of Safe Schools within 30 days after the district 140 school board meeting.

141 (b) Mental health coordinator.-Each district school board 142 shall identify a mental health coordinator for the district. The 143 mental health coordinator shall serve as the district's primary 144 point of contact regarding the district's coordination, 145 communication, and implementation of student mental health policies, procedures, responsibilities, and reporting, 146 147 including: 148 1. Coordinating with the Office of Safe Schools, 149 established pursuant to s. 1001.212. 150 2. Maintaining records and reports regarding student

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151 mental health as it relates to school safety and the mental 152 health assistance allocation under s. 1011.62(14). 153 3. Facilitating the implementation of school district 154 policies relating to the respective duties and responsibilities 155 of the school district, the superintendent, and district school 156 principals. 4. Coordinating with the school safety specialist on the 157 staffing and training of threat assessment teams and 158 159 facilitating referrals to mental health services, as 160 appropriate, for students and their families. 161 5. Coordinating with the school safety specialist on the training and resources for students and school district staff 162 163 relating to youth mental health awareness and assistance. 164 6. Reviewing annually the school district's policies and 165 procedures related to student mental health for compliance with 166 state law and alignment with current best practices and make 167 recommendations, as needed, for amending such policies and 168 procedures to the superintendent and the district school board. 169 (c) (b) School campus tours. - Each school safety specialist 170 shall coordinate with the appropriate public safety agencies, as defined in s. 365.171, that are designated as first responders 171 to a school's campus to conduct a tour of such campus once every 172 173 3 years and provide recommendations related to school safety. 174 The recommendations by the public safety agencies must be 175 considered as part of the recommendations by the school safety

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176 specialist pursuant to paragraph (a).

177 (d) (c) Active assailant response plans. - Each district 178 school board and charter school governing board must adopt an 179 active assailant response plan. By October 1 of each year, 2019, 180 and annually thereafter, each district school superintendent and charter school principal shall certify that all school personnel 181 182 have received annual training on the procedures contained in the active assailant response plan for the applicable school 183 184 district or charter school.

185 (10) REPORTING OF INVOLUNTARY EXAMINATIONS.-Each district school board shall adopt a policy to require the district 186 superintendent to annually report to the department the number 187 of involuntary examinations, as defined in s. 394.455, which are 188 189 initiated at a school, on school transportation, or at a school-190 sponsored activity. By July 1 of each year, the department shall 191 share such data received from school districts during the 192 previous year with the Department of Children and Families.

Section 4. Paragraph (b) of subsection (14) of section 194 1011.62, Florida Statutes, is amended to read:

195 1011.62 Funds for operation of schools.—If the annual 196 allocation from the Florida Education Finance Program to each 197 district for operation of schools is not determined in the 198 annual appropriations act or the substantive bill implementing 199 the annual appropriations act, it shall be determined as 200 follows:

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201 MENTAL HEALTH ASSISTANCE ALLOCATION. - The mental (14)202 health assistance allocation is created to provide funding to 203 assist school districts in establishing or expanding school-204 based mental health care; train educators and other school staff 205 in detecting and responding to mental health issues; and connect 206 children, youth, and families who may experience behavioral 207 health issues with appropriate services. These funds shall be 208 allocated annually in the General Appropriations Act or other 209 law to each eligible school district. Each school district shall 210 receive a minimum of \$100,000, with the remaining balance 211 allocated based on each school district's proportionate share of 212 the state's total unweighted full-time equivalent student 213 enrollment. Charter schools that submit a plan separate from the 214 school district are entitled to a proportionate share of 215 district funding. The allocated funds may not supplant funds 216 that are provided for this purpose from other operating funds 217 and may not be used to increase salaries or provide bonuses. 218 School districts are encouraged to maximize third-party health 219 insurance benefits and Medicaid claiming for services, where 220 appropriate.

(b) The plans required under paragraph (a) must be focused on a multitiered system of supports to deliver evidence-based mental health care assessment, diagnosis, intervention, treatment, and recovery services to students with one or more mental health or co-occurring substance abuse diagnoses and to

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students at high risk of such diagnoses. The provision of these services must be coordinated with a student's primary mental health care provider and with other mental health providers involved in the student's care. At a minimum, the plans must include the following elements:

231 1. Direct employment of school-based mental health 232 services providers to expand and enhance school-based student services and to reduce the ratio of students to staff in order 233 234 to better align with nationally recommended ratio models. These 235 providers include, but are not limited to, certified school counselors, school psychologists, school social workers, and 236 237 other licensed mental health professionals. The plan also must 238 identify strategies to increase the amount of time that school-239 based student services personnel spend providing direct services 240 to students, which may include the review and revision of 241 district staffing resource allocations based on school or 242 student mental health assistance needs.

243 2. Contracts or interagency agreements with one or more 244 local community behavioral health providers or providers of 245 Community Action Team services to provide a behavioral health 246 staff presence and services at district schools. Services may 247 include, but are not limited to, mental health screenings and 248 assessments, individual counseling, family counseling, group 249 counseling, psychiatric or psychological services, traumainformed care, mobile crisis services, and behavior 250

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251 modification. These behavioral health services may be provided 252 on or off the school campus and may be supplemented by 253 telehealth.

254 3. Policies and procedures, including contracts with255 service providers, which will ensure that:

256 a. Students referred to a school-based or community-based 257 mental health service provider for mental health screening for 258 the identification of mental health concerns and students at 259 risk for mental health disorders are assessed within 15 days of 260 referral. School-based mental health services must be initiated 261 within 15 days after identification and assessment, and support 262 by community-based mental health service providers for students 263 who are referred for community-based mental health services must 264 be initiated within 30 days after the school or district makes a 265 referral.

266 b. Parents of a student receiving services under this 267 subsection are provided information about other behavioral 268 health services available through the student's school or local 269 community-based behavioral health services providers. A school 270 may meet this requirement by providing information about and Internet addresses for web-based directories or guides for local 271 272 behavioral health services. 273 c. Individuals living in a household with a student 274 receiving services under this subsection are provided

275 <u>information about behavioral health services available through</u>

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276 other delivery systems or payors for which such individuals may 277 qualify, if such services appear to be needed or enhancements in 278 those individuals' behavioral health would contribute to the 279 improved well-being of the student students who are referred to 280 a school-based or community-based mental health service provider 281 for mental health screening for the identification of mental 282 health concerns and ensure that the assessment of students at 283 risk for mental health disorders occurs within 15 days of referral. School-based mental health services must be initiated 284 285 within 15 days after identification and assessment, and support 286 by community-based mental health service providers for students 287 who are referred for community-based mental health services must 288 be initiated within 30 days after the school or district makes a 289 referral.

4. Strategies or programs to reduce the likelihood of atrisk students developing social, emotional, or behavioral health problems, depression, anxiety disorders, suicidal tendencies, or substance use disorders.

5. Strategies to improve the early identification of social, emotional, or behavioral problems or substance use disorders, to improve the provision of early intervention services, and to assist students in dealing with trauma and violence.

299 6. Procedures to assist a mental health services provider300 or a behavioral health provider as described in subparagraph 1.

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301 or subparagraph 2., respectively, or a school resource officer 302 or school safety officer who has completed mental health crisis 303 intervention training in attempting to verbally de-escalate a 304 student's crisis situation before initiating an involuntary 305 examination pursuant to s. 394.463. Such procedures must include 306 strategies to de-escalate a crisis situation for a student with 307 a developmental disability as that term is defined in s. 308 393.063.

309 7. Policies of the school district must require that in a 310 student crisis situation, school or law enforcement personnel 311 must make a reasonable attempt to contact a mental health 312 professional who may initiate an involuntary examination 313 pursuant to s. 394.463, unless the child poses an imminent 314 danger to themselves or others, before initiating an involuntary 315 examination pursuant to s. 394.463. Such contact may be in 316 person or using telehealth as defined in s. 456.47. The mental 317 health professional may be available to the school district 318 either by contracts or interagency agreements with the managing 319 entity, one or more local community behavioral health providers, 320 or the local mobile response team or be a direct or contracted 321 school district employee.

322

Section 5. This act shall take effect July 1, 2022.

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