

House Bill 320

By: Representatives Scott of the 76th, Davis of the 87th, Schofield of the 63rd, and Hutchinson of the 106th

A BILL TO BE ENTITLED

AN ACT

1 To amend Part 3 of Article 16 of Chapter 2 of Title 20 of the Official Code of Georgia
2 Annotated, relating to the health of students generally, so as to require the State Board of
3 Education to adopt rules to require all certificated public school personnel to receive annual
4 training in depression and suicide awareness and prevention; to provide for the establishment
5 and purpose of the Student Mental Health Screenings Grant Program; to provide for the
6 allocation of grant awards under such program; to provide for grant application requirements;
7 to provide for implementation of grant funded mental health screening programs by local
8 school systems; to provide for local school systems to partner with organizations and
9 healthcare providers specializing in pediatric and adolescent mental health to perform mental
10 health screenings; to provide for requirements of the Department of Education to develop a
11 model policy and guidance and to approve training materials; to revise requirements for local
12 school systems to adopt certain policies; to provide for a definition; to provide for legislative
13 findings; to provide for construction; to provide for related matters; to repeal conflicting
14 laws; and for other purposes.

15 BE IT ENACTED BY THE GENERAL ASSEMBLY OF GEORGIA:

16 **SECTION 1.**

17 The General Assembly finds that:

18 (1) Depression is the most common mental health disorder among American teenagers and
19 adults, with over 2.8 million young people between the ages of 12 and 17 experiencing at
20 least one major depressive episode each year, approximately 10 to 15 percent of teenagers
21 exhibiting at least one symptom of depression at any time, and roughly 5 percent of
22 teenagers suffering from major depression at any time. Teenage depression is two to three
23 times more common in females than in males;

24 (2) Various biological, psychological, and environmental risk factors may contribute to
25 teenage depression, which can lead to substance and alcohol abuse, social isolation, poor
26 academic and workplace performance, unnecessary risk taking, early pregnancy, and
27 suicide, which is the third leading cause of death among teenagers. Approximately 20
28 percent of teenagers with depression seriously consider suicide and one in 12 attempt
29 suicide. Untreated teenage depression can also result in adverse consequences into and
30 throughout adulthood;

31 (3) Most teenagers who experience depression suffer from more than one episode. It is
32 estimated that although teenage depression is highly treatable through combinations of
33 therapy, individual and group counseling, and certain medications, fewer than one-third of
34 teenagers experiencing depression seek help or treatment.; and

35 (4) The proper detection and diagnosis of depression is key in reducing the risk of teenage
36 suicide and improving physical and mental health outcomes for young people. It is
37 therefore fitting and appropriate to establish school based depression screenings to help
38 identify the symptoms of depression and facilitate access to appropriate treatment.

SECTION 2.

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40 Part 3 of Article 16 of Chapter 2 of Title 20 of the Official Code of Georgia Annotated,
41 relating to the health of students generally, is amended by revising Code Section 20-2-779.1,
42 relating to suicide prevention and awareness training and no duty of care imposed, as
43 follows:

44 "20-2-779.1.

45 (a)(1) The ~~Department~~ State Board of Education shall adopt rules to require that all
46 certificated public school personnel receive annual training in depression and suicide
47 awareness and prevention. This training shall be provided within the framework of
48 existing in-service training programs ~~offered~~ and materials approved by the Department
49 of Education or as part of required professional development offered by a local school
50 system.

51 (2)(A) Subject to appropriations, the State Board of Education is authorized to
52 establish the Student Mental Health Screenings Grant Program. The purpose of such
53 grant program shall be to provide funding and resources to allow local school systems
54 to implement mental health screening programs in schools to identify students in the
55 grades six through 12 who are at risk of depression and suicide.

56 (B) Awards under the grant program shall be allocated to local school systems in a
57 manner to be determined by the State Board of Education; provided, however, that the
58 State Board of Education shall, to the greatest extent possible, approve applications
59 from at least one local school system each in the northern, central, and southern
60 regions of the state and shall seek a cross section of local school systems from urban,
61 suburban, and rural areas of the state.

62 ~~(2)(b)(1)~~ The Department of Education shall, in consultation with the Department of
63 Behavioral Health and Developmental Disabilities, the Suicide Prevention Program
64 established pursuant to Code Section 37-1-27, and depression and suicide prevention
65 experts, develop and approve a list of ~~approved~~ training materials to fulfill the

66 requirements of this subsection which may include training materials currently ~~being~~ used
67 by a local school system if such training materials meet any criteria established by the
68 department.

69 ~~(3) Approved~~ Such approved training materials shall include training on how to identify
70 appropriate mental health services, both within the school and also within the larger
71 community, and when and how to refer youth and their families to those services.

72 ~~(4) Approved materials and~~ may include programs that can be completed through
73 self-review of suitable depression and suicide awareness and prevention materials.

74 (2) To assist local school systems in developing their own policies for student depression
75 and suicide awareness and prevention as required in subsection (c) of this Code section,
76 the Department of Education, in consultation with the Suicide Prevention Program within
77 the Department of Behavioral Health and Developmental Disabilities, shall establish a
78 model policy for use by local school systems in accordance with this Code section.

79 (3)(A) To assist local school systems in selecting a research based screening tool to use
80 as part of mental health screening programs, the Department of Education, in
81 consultation with the Suicide Prevention Program within the Department of Behavioral
82 Health and Developmental Disabilities, may develop a list of preapproved research
83 based screening tools that are validated to screen depression and other mental health
84 risks in adolescents.

85 (B) No later than January 1, 2024, the Department of Education, in consultation with
86 the Suicide Prevention Program within the Department of Behavioral Health and
87 Developmental Disabilities, shall develop guidance and resources for local school
88 systems to facilitate the establishment of partnerships with organizations or healthcare
89 providers specializing in pediatric and adolescent mental health to conduct mental
90 health screenings.

91 (4)(A) As used in this paragraph, the term 'telehealth' means services provided by a
92 healthcare provider through the use of information and communications technologies,

93 including, but not limited to, telephones, remote patient monitoring devices, and other
94 electronic means, to facilitate the assessment, diagnosis, consultation, treatment,
95 education, care management, and self-management of a student's healthcare when the
96 healthcare provider is at a remote location and the student is at a school or is
97 participating in any school related function.

98 (B) The Department of Education, in consultation with the Suicide Prevention Program
99 within the Department of Behavioral Health and Developmental Disabilities and
100 appropriate stakeholders, including stakeholders with experience in telehealth, shall, on
101 or before October 1, 2023, develop guidance for the use of telehealth in public schools
102 to provide mental health and behavioral health services, including, but not limited to
103 mental health screenings, to students at school or during any school related function.
104 The guidance developed pursuant to this subparagraph shall include, but shall not be
105 limited to, guidance on the following:

106 (i) Qualifications of individuals authorized, within the scope of their practice, to
107 assist students in accessing mental health and behavioral health services via telehealth
108 while such student is at school or during any school related function;

109 (ii) Qualifications of individuals authorized, within the scope of their practice, to
110 provide mental health and behavioral health services to students via telehealth;

111 (iii) The legal requirements for parental consent for the provision of mental health
112 and behavioral health services to a minor via telehealth while such minor is at school
113 or during any school related function;

114 (iv) Measures necessary to protect the security of data transmitted during the
115 provision of telehealth;

116 (v) Measures necessary to protect the privacy of student data pursuant to Article 15
117 of this chapter and the federal Family Educational Rights and Privacy Act
118 (FERPA), 20 U.S.C. Section 1232g and medical records pursuant to the federal
119 Health Insurance Portability and Accountability Act (HIPAA), P.L. 104-191; and

120 (vi) Potential liability for public schools and local school systems associated with the
121 provision of telehealth to students.

122 ~~(c)(1)(5)(A) Each~~ No later than December 31, 2023, each local school system shall
123 adopt a policy on student depression and suicide awareness and prevention. Such policies
124 shall be developed in consultation with school and community stakeholders, school
125 employed mental health professionals, and suicide prevention experts, and shall, at a
126 minimum, address procedures relating to depression awareness and intervention and
127 suicide awareness, prevention, intervention, and postvention.

128 ~~(B) To assist local school systems in developing their own policies for student suicide~~
129 ~~prevention, the Department of Education, in consultation with the Suicide Prevention~~
130 ~~Program within the Department of Behavioral Health and Developmental Disabilities,~~
131 ~~shall establish a model policy for use by local school systems in accordance with this~~
132 ~~Code section.~~

133 (2) A local school system seeking to participate and receive funding under the grant
134 program provided for in paragraph (2) of subsection (a) shall submit an application to the
135 State School Superintendent, in accordance with application procedures and requirements
136 prescribed by the State Board of Education. An application submitted by a local school
137 system shall include, at a minimum:

138 (A) A description of the mental health screening program to be implemented by the
139 local school system and an explanation of how the local school system will make an
140 annual mental health screening available to each student in the grades six through 12;

141 (B) Details concerning the research based screening tool that will be used by the local
142 school system or whether the local school system will partner with an organization or
143 healthcare provider specializing in pediatric and adolescent mental health to conduct
144 the screenings;

145 (C) A request and justification for the amount of grant funding sought by the local
146 school system under the grant program;

147 (D) A description of how the grant funding will be used to further the purposes of the
148 mental health screening program, including hiring additional personnel, purchasing
149 materials, or contracting with outside entities;

150 (E) A description of how the mental health screenings will be conducted in a manner
151 that permits real-time evaluation of the screening results and same day intervention by
152 a licensed mental health professional if required based on the results of the screening;

153 (F) As applicable, the details of any partnership with an organization or provider
154 specializing in pediatric and adolescent mental health services, which shall include, but
155 not be limited to, the name of the organization or provider, the number of students to
156 be served by the organization or provider, the expected time frame to screen the
157 students, the costs associated with engaging in a partnership with the organization or
158 provider, and the location where the screenings will take place. A local school system
159 shall detail whether student health insurance information will be required under its
160 agreement with a partner organization or provider, how it will obtain that information,
161 and what accommodations will be made for uninsured or underinsured students and
162 uninsured and underinsured minor students whose parents or guardians have consented
163 to the depression screening;

164 (G) A description of how the local school system will ensure that the parent or
165 guardian of a student whose screening for depression detects an irregularity is notified
166 of such irregularity and how it will advise the parent or guardian of the services
167 available through a partner organization or provider or supply the parent or guardian
168 with resources to assist in the acquisition of the services of a healthcare professional in
169 order to obtain further evaluation and diagnosis; and

170 (H) A description of how the local school system will obtain written informed consent
171 from a minor student's parent or guardian prior to the screening;

172 (3) A local school system that receives an award under the grant program provided for
173 in paragraph (2) of subsection (a) of this Code section shall make available to each

174 student in the grades six through 12 an annual mental health screening which shall
175 include screening for depression and suicide risk. Each such local school system or
176 public school shall meet the following conditions when implementing its mental health
177 screening program:

178 (A) The local school system shall use a research based screening tool in its mental
179 health screening program conducted by a licensed mental health professional or through
180 a partnership with an organization or healthcare provider specializing in pediatric and
181 adolescent mental health to conduct the screenings. Nothing in this subparagraph shall
182 prohibit a local school system from using a self-administered screening tool as part of
183 the depression screening program;

184 (B) Mental health screenings shall be conducted in a manner that permits real-time
185 evaluation of the screening results and same day intervention by a licensed mental
186 health professional as indicated by the screening;

187 (C) The local school system shall ensure that mental health screenings are conducted
188 in a manner that accommodates students who are English language learners, students
189 with disabilities, and students with low reading proficiency when conducting the
190 screenings;

191 (D) Mental health screenings shall be conducted in a manner that ensures the privacy
192 of the student during the screening process and the confidentiality of the results,
193 consistent with state and federal laws applicable to the confidentiality of student records
194 and mental health records;

195 (E) The local school system shall obtain written informed consent from the minor
196 student's parent or guardian prior to such student's mental health screening; and

197 (F) The local school system shall forward data collected from the mental health
198 screenings to the Department of Education and to the Suicide Prevention Program
199 within the Department of Behavioral Health and Developmental Disabilities in a form
200 and manner to be determined by the Department of Education, provided that any data

201 forwarded shall be aggregated and shall not contain any identifying or confidential
202 information with regard to any individual.

203 (4) In the event that a local school system chooses to partner with an organization or
204 healthcare provider specializing in pediatric and adolescent mental health to conduct the
205 mental health screenings, the partner organization or provider may also provide mental
206 health services as deemed necessary by the organization or provider and as consented to
207 by a minor student's parent or guardian. A local school system partnering with an
208 organization or healthcare provider specializing in pediatric and adolescent mental health
209 may develop a form to obtain parental consent and student health insurance information
210 as necessary to satisfy the provisions of any partnership agreement.

211 ~~(b)~~(d) No person shall have a cause of action for any loss or damage caused by any act or
212 omission resulting from the implementation of the provisions of this Code section or
213 resulting from any screening, training, or lack thereof, ~~required by~~ provided for in this
214 Code section.

215 ~~(c)~~(e) The screenings and training, or lack thereof, ~~required by the provisions of~~ provided
216 for in this Code section shall not be construed to impose any specific duty of care.

217 (f) Nothing in this Code section shall be construed to affect a local school system's ability
218 to provide additional or supplemental services to a student as required by, or as consistent
219 with, any applicable provision of state or federal law."

220 **SECTION 3.**

221 All laws and parts of laws in conflict with this Act are repealed.