

BILL ANALYSIS

Senate Research Center

C.S.S.B. 1178
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Education
4/1/2013
Committee Report (Substituted)

AUTHOR'S / SPONSOR'S STATEMENT OF INTENT

National prevalence estimates indicate that one in five children have a mental illness or addictive disorder, meaning that approximately one million Texas public school students are dealing with these issues on a daily basis. These illnesses can cause mild to significant impairment in home and school activities and can lead to school failure, disciplinary placements and juvenile justice involvement and, in extreme cases, suicide.

In one study of disciplinary placements among Harris County school districts, special education students who were categorized as having an emotional disturbance were over four times more likely to be placed in a disciplinary alternative education program (DAEP) than the student population overall and more than two times more likely to be placed in a DAEP than the special education population overall.

Without training in how to recognize and appropriately respond to students with mental or emotional issues, teachers may inadvertently reinforce or escalate the very behavior they are trying to reduce. On the other hand, such training can help teachers better manage their classrooms and help link students and their families to needed services, either on-campus or in the community. While some school districts across Texas already require some level of training in this area for teachers and/or administrators, specific mental health training in educator preparation programs is not required.

H.B. 1386, 82nd Legislature, Regular Session, 2011, allowed school districts to implement early mental health intervention and suicide prevention programs from a list developed by the Department of State Health Services and the Texas Education Agency. The bill required that the programs on that list include trainings for teachers, nurses, counselors, administrators and other staff in how to recognize warning signs of mental health/suicide and how to intervene effectively.

C.S.S.B. 1178 makes the training component a requirement.

C.S.S.B. 1178 amends current law relating to training for public school educators in identifying mental health and suicide risks among students.

RULEMAKING AUTHORITY

This bill does not expressly grant any additional rulemaking authority to a state officer, institution, or agency.

SECTION BY SECTION ANALYSIS

SECTION 1. Amends Section 161.325, Health and Safety Code, by adding Subsections (c-1) and (c-2), as follows:

(c-1) Requires each school district, except as otherwise provided by this subsection, to provide training described in the components set forth under Subsection (b) (relating to early mental health intervention and suicide prevention training requirements for certain persons) for teachers, counselors, principals, and all other appropriate personnel. Requires a school district to provide the training at an elementary school campus only to

the extent that sufficient funding and programs are available. Authorizes a school district to implement a program on the list to satisfy the requirements of this subsection.

(c-2) Requires each school district, for any training under Subsection (c-1), to maintain records that include the name of each district employee who participated in the training. Requires a school district employee described under Subsection (c-1) to participate in the training at least one time.

SECTION 2. Amends Subchapter O-1, Chapter 161, Health and Safety Code, by adding Section 161.326, as follows:

Sec. 161.326. IMMUNITY. Provides that this subchapter does not:

- (1) waive any immunity from liability of a school district or of district school officers or employees;
- (2) create any liability for a cause of action against a school district or against district school officers or employees; or
- (3) waive any immunity from liability under Section 74.151 (Liability for Emergency Care), Civil Practice and Remedies Code.

SECTION 3. Effective date: September 1, 2013.