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## SENATE COMMITTEE ON EDUCATION

Senator Carol Liu, Chair  
2015 - 2016 Regular

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**Bill No:** AB 1025  
**Author:** Thurmond  
**Version:** June 2, 2015  
**Urgency:** No  
**Consultant:** Lynn Lorber  
**Hearing Date:** July 8, 2015  
**Fiscal:** Yes

**Subject:** Pupil health: multitiered and integrated interventions pilot program

**NOTE:** This bill has been referred to the Committee on Education and the Committee on Health. A "do pass" motion should include referral to the Committee on Health.

### SUMMARY

This bill requires the California Department of Education to establish a three-year pilot program in school districts to encourage inclusive practices that integrate mental health, special education, and school climate interventions following a multi-tiered framework.

### BACKGROUND

The federal Individuals with Disabilities Education Act provides that students with exceptional needs identified as having "emotional disturbance" may be eligible to receive mental health services. Mental health services are considered "related services" and include counseling, psychological services, parent counseling and training, and residential placement, among others. (United States Code, Title 20, § 1400, et seq. and Code of Federation Regulations, Title 34, § 300.34)

AB 114 (Committee on Budget, Chapter 43, Statutes of 2011) shifted responsibility for mental health services for students from counties to local educational agencies (LEAs). Any and all services identified in a student's individualized education program (IEP) must be provided, whether directly by LEA employees or through contract with outside providers such as county mental health agencies. LEAs are required to ensure services are provided to students regardless of who provides or pays for those services. (Education Code § 56139)

AB 104 (Committee on Budget, Ch. 13, 2015) among other things, appropriates \$10 million to the Superintendent of Public Instruction to provide technical assistance and develop statewide resources to assist local educational agencies to establish and align systems of learning and behavioral supports.

### *Multi-tiered interventions*

Many schools voluntarily follow models of tiered interventions to address student needs prior to imposing discipline or making referrals to special education. Models include Schoolwide Positive Behavior Interventions and Supports, Response to Intervention and Positive Environments, Network of Trainers. Typically, the base tier is a schoolwide approach involving instruction, school climate, etc. The middle tier is targeted to students who did not respond to the schoolwide efforts and involved more intense

interventions such as tutoring. The top tier focuses on a smaller group of students who continue to need support and may include very intense and frequent services such as counseling.

The Student Success Team, formerly Student Study Team, is a positive schoolwide early identification and intervention process. Working as a team, the student, parent, teacher and school administrator identify the student's strengths and assets upon which an improvement plan can be designed. As a regular school process, the team intervenes with school and community support and an improvement plan that all team members agree to follow. Follow-up meetings are planned to provide a continuous casework management strategy to ensure the needs of students are met.

### ***Positive behavior interventions and supports***

Existing law:

- 1) Encourages schools, as comprehensive school safety plans are reviewed and updated, to include in school safety plans clear guidelines for the roles and responsibilities of mental health professionals, community intervention professionals, school counselors, school resource officers, and police officers on school campus, if the school district uses these people. The guidelines may include primary strategies to create and maintain a positive school climate, promote school safety, and increase pupil achievement, and prioritize mental health and intervention services, restorative and transformative justice programs, and positive behavior interventions and support. (Education Code § 32282.1)
- 2) Provides that corrective action other than out-of-school suspension includes study teams, guidance teams, resource panel teams, or other intervention-related teams that assess the behavior, and develop and implement individualized plans to address the behavior in partnership with the pupil and his or her parents. (EC § 48900.5)
- 3) Requires that the individualized education team for each student with exceptional needs consider the use of positive behavioral interventions and supports for students whose behavior impedes his or her learning. (EC § 56341.1)

### **ANALYSIS**

This bill requires the California Department of Education (CDE) to establish a three-year pilot program in school districts to encourage inclusive practices that integrate mental health, special education, and school climate interventions following a multi-tiered framework. Specifically, this bill:

- 1) Requires the CDE to establish a three-year pilot program in three schools in each of five school districts that submit applications providing estimates for the amount of funding being requested for startup and evaluation of the program and specifying their intended models.
- 2) Requires the CDE to establish the pilot program as part of the plan to provide technical assistance and disseminate statewide resources that encourage and assist

local educational agencies in establishing and aligning schoolwide, data-driven systems of learning and behavioral supports.

- 3) Prohibits the selection of participating schools from including those that received a federal Substance Abuse and Mental Health Services Administration's "Now is The Time" grant.
- 4) Requires the California Department of Education (CDE) to select schools that meet both of the following criteria:
  - a) At least 60% of the student body is eligible for free and reduced-price meals.
  - b) The application details a model approach that targets the behavioral, emotional, and academic needs of students with multi-tiered and integrated mental health, special education, and school climate interventions.
- 5) Requires an applicant school's model to include all of the following:
  - a) Formalized collaboration with local mental health agencies to provide school-based mental health services that are integrated within a multi-tiered system of support.
  - b) Leverage of school and community resources to offer comprehensive multi-tiered interventions on a sustainable basis.
  - c) An initial school climate assessment that includes information from multiple stakeholders, including school staff, students, and families, that is used to inform the selection of strategies and interventions that reflect the culture and goals of the school.
  - d) A coordination of services team that considers referrals for services, oversees schoolwide efforts, and uses data-informed processes to identify struggling students who require early interventions.
  - e) Whole school strategies that address school climate and universal student well-being, such as positive behavioral interventions and supports or the Olweus Bullying Prevention Program, as well as comprehensive professional development opportunities, that build the capacity of the entire school community to recognize and respond to the unique social-emotional, behavioral, and academic needs of students.
  - f) Targeted interventions for students with identified social-emotional, behavioral, and academic needs, such as a therapeutic group interventions, functional behavioral analysis and plan development, and targeted skills groups.
  - g) Intensive services, such as wraparound, behavioral intervention, or one-on-one support, that can reduce the need for a student's referral to special education or placement in more restrictive, isolated settings.

- h) Specific strategies and practices that ensure parent engagement with the school and provide parents with access to resources that support their children's educational success.
- 6) Requires the California Department of Education (CDE), in accordance with an appropriation in the Budget Act or another statute, to provide startup and evaluation funds to each participating school in the following amounts:
  - a) \$250,000 in year one.
  - b) \$200,000 in year two.
  - c) \$150,000 in year three.
- 7) Requires the State Department of Health Care Services, the Mental Health Services Oversight and Accountability Commission, and the CDE to develop a comprehensive evaluation plan to assess the impact of the pilot program and disseminate best practices.
- 8) Requires outcomes and indicators to be reported by participating schools to include those already being collected by schools, as well as designated measures of student well-being, academic achievement, and school engagement and attendance.
- 9) Requires the CDE to submit a report to the Legislature at the end of the three-year period evaluating the success of the program and making further recommendations. This bill requires the CDE to make the report available to the public and to post it on CDE's website.
- 10) Requires the Mental Health Services Oversight and Accountability Commission to revise its guidelines and regulations for Prevention and Early Intervention Programs of the Mental Health Services Act to require the prevention and early intervention programs in K–12 schools to be designed to support the implementation or expansion of model programs in accordance with the criteria set forth in this bill.
- 11) Sunsets the provisions of this bill on January 1, 2020.

## STAFF COMMENTS

- 1) ***Need for the bill.*** According to the author, “Too often, students in disadvantaged communities face relational and environmental stressors that when left unaddressed, hinder their ability to achieve their full potential. Unfortunately, the needs of students facing such challenges often go unrecognized or are misunderstood. Unaddressed student needs frequently result in more profound behavioral and academic challenges that can necessitate costly, restrictive interventions including entering into the juvenile justice system. The fragmentation of our education and mental health systems only makes the situation worse. The school setting presents an important opportunity to identify and respond to the comprehensive needs of youth, reducing barriers to access as well as the stigma that is often associated with seeking help.”

- 2) **Author's amendments.** The author wishes to amend this bill as follows:
- a) Requires the designated county office of education (pursuant to recently enacted Budget language, contained in AB 104; see Comment #3) to establish the pilot program, rather than requiring the California Department of Education (CDE) to establish the pilot program.
  - b) Reduce the number of pilot programs, from three to two, schools in each of the five school districts that apply to participate.
  - c) Delete the criteria that applicant schools have a student body where at least 60% of students are eligible for free and reduced-price meals.
  - d) Requires applications to provide evidence of a plan to serve students using a combination of school funds and mental health funds.
  - e) Modifies the required components of an applicant school's model approach to:
    - i) Delete reference to formalized collaboration with local mental health agencies.
    - ii) Add reference to partnerships with the county and demonstrations of access to adequate funding to serve Medi-Cal eligible students who are not receiving special education or related services.
  - f) Delete the requirement that the State Department of Health Care Services, the Mental Health Services Oversight and Accountability Commission, and the CDE to develop a comprehensive evaluation plan to assess the impact of the pilot program and disseminate best practices.
- 3) **Consistent with the Budget?** AB 104 (Committee on Budget, Ch. 13, 2015) among other things, appropriates \$10 million to the Superintendent of Public Instruction (SPI) to provide technical assistance and develop statewide resources to assist local educational agencies to establish and align systems of learning and behavioral supports. AB 104 requires the SPI to designate a county office of education to:
- a) Identify existing, and develop new, resources and professional development activities relative to multi-tiered, evidence-based, data-driven systems of support in academics and behavior.
  - b) Collect and disseminate best practices.
  - c) Develop train-the-trainer models and online training modules.
  - d) Offer regional conferences and workshops.
  - e) Provide technical assistance.

- f) Develop a network of educators to provide coaching and training.
- g) Provide stipends for school personnel to attend training.
- h) Develop evaluation tools to measure the effectiveness of strategies.
- i) Provide competitive startup grants.
- j) Provide demonstration grants.

The language in AB 104 appears to largely reflect recommendations of the Special Education Task Force and components of SB 463 (Hancock, 2015) and this bill.

The author believes this bill is consistent with AB 104 and provides additional specificity for the use of the \$10 million appropriated in the Budget, via AB 104. The Special Education Local Plan Area (SELPA) Administrators, who are opposed to this bill, believe the language in AB 104 is based upon the recommendations of the Special Education Task Force and that this bill is inconsistent with AB 104. Opponents note the language in AB 104 and the Task Force recommendations have a statewide impact and are broader in scope than the pilot program proposed by this bill (covers many types of multi-tiered systems, in addition to positive behavioral interventions and supports). The author believes that this bill supports AB 104 and the Task Force's recommendations, and maintains that initially focusing on pilot programs and evaluating their success is the most effective way to demonstrate how to best blend mental health and education systems, as well as to provide best practices for scaling statewide.

As proposed to be amended, this bill establishes pilot programs in a total of 10 schools. This bill establishes grant amounts that total \$600,000 per school over a three-year period. This bill proposes to utilize \$6 million of the \$10 million that was allocated in the Budget pursuant to AB 104.

This Committee was not involved in the development of the language and associated appropriation in AB 104, and therefore does not have sufficient information to understand whether the intent of the language in AB 104 is to adhere to a statewide approach or whether there were intentions to follow-up with legislation providing additional specificity for the program.

- 4) **Regulations.** This bill requires the Mental Health Services Oversight and Accountability Commission (established by the Mental Health Services Act, Proposition 63) to revise its guidelines and regulations for Prevention and Early Intervention Programs of the Mental Health Services Act to require the prevention and early intervention programs in K–12 schools to be designed to support the implementation or expansion of model programs in accordance with the criteria set forth in this bill. This would result in a change in funding structures that would enable local educational agencies to receive funding for the Early and Periodic Screening, Diagnosis, and Treatment services (see AB 1018, Cooper, 2015).
- 5) **Which school districts are eligible?** This bill establishes criteria that must be met by an applicant school district, such as having a partnership with local mental health

agencies, and requires the establishment of a three-year pilot program in three schools in each of *five school districts that submit applications*. It is not clear how many school districts will meet all the criteria for eligibility for funding; there are at least two existing pilot projects (Bay Area and San Bernardino) that appear to currently meet the requirements established by this bill.

- 6) **Existing resources.** The California Department of Education's (CDE) website includes an implementation and technical assistance guide for response to intervention, and information on multi-tiered systems of support. <http://www.cde.ca.gov/be/pn/im/documents/memo-ilsb-plsd-oct13item02.doc> The Positive Environments, Network of Trainers is a positive behavior initiative that disseminates through its website information and resources regarding the use of proactive positive strategies. <http://www.pent.ca.gov/>.
- 7) **Fiscal impact.** As proposed to be amended, this bill establishes pilot programs in a total of 10 schools, and grant amounts that total \$600,000 per school over a three-year period. This bill proposes to utilize \$6 million of the \$10 million that was allocated pursuant to AB 104. (Committee on Budget, Ch. 13, 2015)

According to the Assembly Appropriations Committee, this bill, as is currently in print, would impose unknown General Fund administrative costs to CDE, likely in excess of \$400,000. Administrative workload associated with this new program include application development, administering grant awards, coordinating with the Department of Health Care Services to develop a comprehensive evaluation plan to assess the benefits of the program, disseminating best practices, data collection and reporting requirements.

- 8) **Related and prior legislation.**

#### *RELATED LEGISLATION*

SB 463 (Hancock, 2015) requires the CDE, to the extent that funding is available in the Budget Act of 2015, to designate a county office of education to be the fiduciary agent for the Safe and Supportive Schools Train the Trainer Program. SB 463 is pending in the Assembly Education Committee.

AB 1133 (Achadjian, 2015) requires the State Public Health Officer to establish a four-year pilot program to, among other things, provide free regional training and technical assistance in support services that include intervention and prevention services, use of trained staff to meet with students on a short-term weekly basis in a one-on-one setting, the potential for support services to help fulfill state priorities described by the local control funding formula and local goals described by local control and accountability plans, and state resources available to support student mental health and positive learning environments. AB 1133 was held in the Assembly Appropriations Committee.

AB 580 (O'Donnell, 2015) requires the CDE to develop model referral protocols for voluntary use by schools to address the appropriate and timely referral by school staff of students with mental health concerns. AB 580 is pending in the Senate Appropriations Committee.

AB 1018 (Cooper, 2015) requires the CDE and the Department of Health Care Services to convene a task force to examine the delivery of mental health services through the Early and Periodic Screening, Diagnosis, and Treatment services. AB 1018 is pending in the Senate Health Committee.

SB 527 (Liu, 2015) establishes the Safe Neighborhoods and Schools Fund Grant Program, using Proposition 47 funds to reward school districts that have demonstrated a commitment to, and developed a comprehensive plan for, utilizing research-based strategies to increase attendance rates, to reduce school removals of all types and referrals to police, to address trauma, mental health needs and other social and emotional factors that impact pupil outcomes, to address and to remedy school push-out and dropout rates, coordinate pupil support programs with community and other public agencies at schoolsites and across the school district, and create a strong and supportive school culture that identifies and addresses the needs of pupils, including victims of crime, abuse, and neglect. SB 527 is scheduled to be heard by this Committee on July 15.

#### *PRIOR LEGISLATION*

SB 1396 (Hancock, 2014) required the California Department of Education (CDE), to the extent one-time funding is available in the 2014-15 Budget Act, to designate funds to a county office of education to establish professional development activities to support the development and expansion of multi-tiered intervention and support programs, including but not limited to, schoolwide positive behavior intervention and support. SB 1396 was held on the Assembly Appropriations Committee's suspense file.

SB 596 (Yee, 2014) required the CDE to establish a three-year pilot program to encourage inclusive practices that integrate mental health, special education, and school climate interventions following a multi-tiered framework. SB 596 was held in the Assembly.

#### **SUPPORT**

American Federation of State, County and Municipal Employees  
Association of California School Administrators  
Association of Regional Center Agencies  
California Alliance of Child and Family Services  
California Council of Community Mental Health Agencies  
California State PTA  
Children Now  
Common Sense Kids Action  
Disability Rights California  
Mental Health America of California  
National Association of Social Workers, California Chapter

#### **OPPOSITION**

California Right to Life Committee

Special Education Local Plan Area (SELPA) Administrators of California

**-- END --**