By Senator Harrell

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25-01519-20 20201062___ A bill to be entitled

An act relating to involuntary examinations of minors; amending s. 381.0056, F.S.; revising parent and quardian notification requirements that must be met before an involuntary examination of a minor; amending s. 394.463, F.S.; revising data reporting requirements for the Department of Children and Families; amending s. 1001.212, F.S.; revising data reporting requirements for the Office of Safe Schools; amending s. 1002.20, F.S.; revising parent and guardian notification requirements that must be met before conducting an involuntary examination of a minor who is removed from school, school transportation, or a school-sponsored activity; providing an exception; amending s. 1002.33, F.S.; revising parent and quardian notification requirements that must be met before an involuntary examination of a minor who is

activity; providing an exception; amending s. 1006.07, F.S.; creating reporting requirements for schools relating to involuntary examinations of minors; amending s. 1006.12, F.S.; revising training requirements for school safety officers; amending s. 1011.62, F.S.; requiring that certain plans include

removed from a charter school, charter school

transportation, or a charter school-sponsored

procedures to assist certain mental and behavioral health providers in attempts to verbally de-escalate certain crisis situations before initiating an

involuntary examination; requiring the procedures to

25-01519-20 20201062 30 include certain strategies; creating requirements for 31 memoranda of understanding between schools and local 32 mobile crisis response services; providing an effective date. 33 34 35 Be It Enacted by the Legislature of the State of Florida: 36 37 Section 1. Paragraph (a) of subsection (4) of section 381.0056, Florida Statutes, is amended to read: 38 39 381.0056 School health services program.-40 (4)(a) Each county health department shall develop, jointly with the district school board and the local school health 41 42 advisory committee, a school health services plan. The plan must include, at a minimum, provisions for all of the following: 43 44 1. Health appraisal; 2. Records review; 45 46 3. Nurse assessment; 47 4. Nutrition assessment; 5. A preventive dental program; 48 49 6. Vision screening; 50 7. Hearing screening; 51 8. Scoliosis screening; 52 9. Growth and development screening; 53 10. Health counseling; 11. Referral and followup of suspected or confirmed health 54 problems by the local county health department; 55 56 12. Meeting emergency health needs in each school; 57 13. County health department personnel to assist school 58 personnel in health education curriculum development;

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14. Referral of students to appropriate health treatment, in cooperation with the private health community whenever possible;

- 15. Consultation with a student's parent or guardian regarding the need for health attention by the family physician, dentist, or other specialist when definitive diagnosis or treatment is indicated;
- 16. Maintenance of records on incidents of health problems, corrective measures taken, and such other information as may be needed to plan and evaluate health programs; except, however, that provisions in the plan for maintenance of health records of individual students must be in accordance with s. 1002.22;
- 17. Health information which will be provided by the school health nurses, when necessary, regarding the placement of students in exceptional student programs and the reevaluation at periodic intervals of students placed in such programs;
- 18. Notification to the local nonpublic schools of the school health services program and the opportunity for representatives of the local nonpublic schools to participate in the development of the cooperative health services plan; and
- 19. Immediate Notification to a student's parent, guardian, or caregiver before if the student is removed from school, school transportation, or a school-sponsored activity to be and taken to a receiving facility for an involuntary examination pursuant to s. 394.463, including and subject to the requirements and exceptions established under ss. 1002.20(3) and 1002.33(9), as applicable.
- Section 2. Subsection (4) of section 394.463, Florida Statutes, is amended to read:

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394.463 Involuntary examination.

(4) DATA ANALYSIS.—Using data collected under paragraph (2)(a), the department shall, at a minimum, analyze data on both the initiation of involuntary examinations of children and the initiation of involuntary examinations of students who are removed from a school, identify any patterns or trends and cases in which involuntary examinations are repeatedly initiated on the same child or student, study root causes for such patterns, trends, or repeated involuntary examinations, and make recommendations to encourage the use of for encouraging alternatives to eliminate and eliminating inappropriate initiations of such examinations. The department shall submit a report on its findings and recommendations to the Governor, the President of the Senate, and the Speaker of the House of Representatives by November 1 of each odd-numbered odd numbered year.

Section 3. Subsection (7) of section 1001.212, Florida Statutes, is amended to read:

1001.212 Office of Safe Schools.—There is created in the Department of Education the Office of Safe Schools. The office is fully accountable to the Commissioner of Education. The office shall serve as a central repository for best practices, training standards, and compliance oversight in all matters regarding school safety and security, including prevention efforts, intervention efforts, and emergency preparedness planning. The office shall:

(7) Provide data to support the evaluation of mental health services pursuant to s. 1004.44. <u>Such data must include</u>, for each school, the number of involuntary examinations as defined

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in s. 394.455 which are initiated at the school, on school
transportation, or at a school-sponsored activity and the number
of children for whom an examination is initiated.

Section 4. Paragraph (1) of subsection (3) of section 1002.20, Florida Statutes, is amended to read:

1002.20 K-12 student and parent rights.—Parents of public school students must receive accurate and timely information regarding their child's academic progress and must be informed of ways they can help their child to succeed in school. K-12 students and their parents are afforded numerous statutory rights including, but not limited to, the following:

- (3) HEALTH ISSUES.-
- (1) Notification of involuntary examinations.-
- 1. Except as provided in subparagraph 2., the public school principal or the principal's designee shall immediately notify the parent of a student before the student who is removed from school, school transportation, or a school-sponsored activity to be and taken to a receiving facility for an involuntary examination pursuant to s. 394.463.
- 2. The principal or the principal's designee may delay the required notification for no more than 24 hours after the student is removed if:
- \underline{a} . The principal or designee deems the delay to be in the student's best interest and \underline{if} a report has been submitted to the central abuse hotline, pursuant to s. 39.201, based upon knowledge or suspicion of abuse, abandonment, or neglect; or
- b. The principal or principal's designee reasonably believes that such delay is necessary to avoid jeopardizing the health and safety of the student.

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Each district school board shall develop a policy and procedures for notification under this paragraph.

Section 5. Paragraph (q) of subsection (9) of section 1002.33, Florida Statutes, is amended to read:

1002.33 Charter schools.-

- (9) CHARTER SCHOOL REQUIREMENTS.-
- (q) The charter school principal or the principal's designee shall immediately notify the parent of a student before the student who is removed from school, school transportation, or a school-sponsored activity to be and taken to a receiving facility for an involuntary examination pursuant to s. 394.463. The principal or the principal's designee may delay notification for no more than 24 hours after the student is removed if:
- $\underline{1.}$ The principal or designee deems the delay to be in the student's best interest and \underline{if} a report has been submitted to the central abuse hotline, pursuant to s. 39.201, based upon knowledge or suspicion of abuse, abandonment, or neglect; or
- 2. The principal or principal's designee reasonably believes that such delay is necessary to avoid jeopardizing the health and safety of the student.

Each charter school governing board shall develop a policy and procedures for notification under this paragraph.

Section 6. Subsection (10) is added to section 1006.07, Florida Statutes, 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

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attendance and control of students at school, and for proper attention to health, safety, and other matters relating to the welfare of students, including:

(10) REPORTING OF INVOLUNTARY EXAMINATIONS.—Each district school board shall adopt a policy to require the district superintendent to annually report to the department the number of involuntary examinations, as defined in s. 394.463, which are initiated at a school, on school transportation, or at a school-sponsored activity.

Section 7. Present paragraph (c) of subsection (2) of section 1006.12, Florida Statutes, is redesignated as paragraph (d), and a new paragraph (c) is added to that subsection, to read:

1006.12 Safe-school officers at each public school.—For the protection and safety of school personnel, property, students, and visitors, each district school board and school district superintendent shall partner with law enforcement agencies or security agencies to establish or assign one or more safe-school officers at each school facility within the district, including charter schools. A district school board must collaborate with charter school governing boards to facilitate charter school access to all safe-school officer options available under this section. The school district may implement any combination of the options in subsections (1)-(4) to best meet the needs of the school district and charter schools.

(2) SCHOOL SAFETY OFFICER.—A school district may commission one or more school safety officers for the protection and safety of school personnel, property, and students within the school district. The district school superintendent may recommend, and

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the district school board may appoint, one or more school safety officers.

(c) School safety officers must complete mental health crisis intervention training using a curriculum developed by a national organization with expertise in mental health crisis intervention. The training shall improve officers' knowledge and skills as first responders to incidents involving students with emotional disturbance or mental illness, including de-escalation skills to ensure student and officer safety.

If a district school board, through its adopted policies, procedures, or actions, denies a charter school access to any safe-school officer options pursuant to this section, the school district must assign a school resource officer or school safety officer to the charter school. Under such circumstances, the charter school's share of the costs of the school resource officer or school safety officer may not exceed the safe school allocation funds provided to the charter school pursuant to s. 1011.62(15) and shall be retained by the school district.

Section 8. Paragraph (b) of subsection (16) of section 1011.62, Florida Statutes, is amended to read:

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

(16) MENTAL HEALTH ASSISTANCE ALLOCATION.—The mental health assistance allocation is created to provide funding to assist

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school districts in establishing or expanding school-based mental health care; train educators and other school staff in detecting and responding to mental health issues; and connect children, youth, and families who may experience behavioral health issues with appropriate services. These funds shall be allocated annually in the General Appropriations Act or other law to each eligible school district. Each school district shall receive a minimum of \$100,000, with the remaining balance allocated based on each school district's proportionate share of the state's total unweighted full-time equivalent student enrollment. Charter schools that submit a plan separate from the school district are entitled to a proportionate share of district funding. The allocated funds may not supplant funds that are provided for this purpose from other operating funds and may not be used to increase salaries or provide bonuses. School districts are encouraged to maximize third-party health insurance benefits and Medicaid claiming for services, where 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 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:
 - 1. Direct employment of school-based mental health services

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

- 2. Contracts or interagency agreements with one or more local community behavioral health providers or providers of Community Action Team services to provide a behavioral health staff presence and services at district schools. Services may include, but are not limited to, mental health screenings and assessments, individual counseling, family counseling, group counseling, psychiatric or psychological services, traumainformed care, mobile crisis services, and behavior modification. These behavioral health services may be provided on or off the school campus and may be supplemented by telehealth.
- 3. Policies and procedures, including contracts with service providers, which will ensure that students who are referred to a school-based or community-based mental health service provider for mental health screening for the identification of mental health concerns and ensure that the assessment of students at risk for mental health disorders occurs within 15 days of referral. School-based mental health

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services must be initiated within 15 days after identification and assessment, and support by community-based mental health service providers for students who are referred for community-based mental health services must be initiated within 30 days after the school or district makes a 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.
- 6. Procedures to assist a mental health services provider or a behavioral health provider as described in subparagraph 1. or subparagraph 2., respectively, or a school resource officer or school safety officer who has completed mental health crisis intervention training in attempting to verbally de-escalate a student's crisis situation before initiating an involuntary examination pursuant to s. 394.463. Such procedures must include strategies to de-escalate a crisis situation for a student with a developmental disability as that term is defined in s. 393.063.
- 7. A memorandum of understanding with a local mobile crisis response service. Policies of the school district and the terms of the memorandum of understanding must require that, in a student crisis situation, school or law enforcement personnel must contact the local mobile crisis response service before

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320	initiating an involuntary examination pursuant to s. 394.463.
321	Such contact may be in person or by using telehealth as defined
322	in s. 456.47. School districts shall provide all school resource
323	officers and school safety officers with training on protocols
324	established under the memorandum of understanding developed
325	pursuant to this subparagraph.

Section 9. This act shall take effect July 1, 2020.