An Act

HOUSE BILL 19-1017

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CONCERNING INCREASING ACCESS TO SCHOOL SOCIAL WORKERS IN PUBLIC ELEMENTARY SCHOOLS, AND, IN CONNECTION THEREWITH, MAKING AN APPROPRIATION.

Be it enacted by the General Assembly of the State of Colorado:

SECTION 1. In Colorado Revised Statutes, add article 102 to title 22 as follows:

ARTICLE 102
Colorado K-5 Social and Emotional Health Act

22-102-101. Short title. The short title of this article 102 is
THE "COLORADO K-5 SOCIAL AND EMOTIONAL HEALTH ACT".

22-102-102. Legislative declaration. (1) The general assembly finds that:

(a) School mental health professionals, including school social workers, positively impact the school environment by working with young students and their families to identify safety net insecurities, social and emotional skills deficits, instances of abuse and neglect, and mental health challenges;

(b) Identifying these student issues as early as possible increases the likelihood that problems can be resolved successfully and in a manner that decreases long-term problems with learning and other barriers to student success in the future;

(c) A pilot program that places a team of school mental health professionals in every pilot program school will allow the team, in partnership with classroom teachers, to provide needed support for young students and their families at a critical time in their education;

(d) A significant goal of the pilot program is to ensure that students of elementary age receive the right level of necessary services, in the right place, and at the right time;

(e) Receiving the right level of services, in the right place, and at the right time helps remove the burden placed on teachers to be everything to a student, from therapist to family counselor, and instead allows teachers to return to their primary task: teaching; and

(f) The pilot program will enable parents, students, teachers, administrators, and school mental health professionals to create a safe, positive, and successful school learning environment.

(2) Therefore, the general assembly declares that the creation and successful implementation of a Colorado K-5 Social and Emotional Health Pilot Program could have a profound impact
ON THE EARLY EDUCATIONAL AND SOCIAL EXPERIENCES OF KINDERGARTEN THROUGH FIFTH-GRADE STUDENTS, RESULTING IN THOSE STUDENTS GRADUATING TO MIDDLE AND HIGH SCHOOL PROGRAMS WITH FEWER SOCIAL, EMOTIONAL, AND BEHAVIORAL ISSUES; ADVERSE CHILDHOOD EXPERIENCES; DISCIPLINARY REFERRALS AND DELINQUENT CONDUCT; SCHOOL ABSENCES AND TRUANCY; AND INCIDENCES OF SELF-HARM.

22-102-103. Definitions. As used in this Article 102, unless the context otherwise requires:

(1) "Department" means the Department of Education created and existing pursuant to Section 24-1-115.

(2) "Pilot Program" means the K-5 Social and Emotional Health Pilot Program, created in Section 22-102-104.

(3) "Pilot School" means a school selected by the Department to participate in the Pilot Program created in Section 22-102-104 for students in kindergarten through fifth grade.

(4) "School Counselor" means a counselor holding a master's degree in educational counseling and a professional special services license in Colorado with an endorsement in school counseling, including but not limited to the completion of course work in the areas of academic and social emotional development; assessment for social and emotional concerns, including suicide prevention and intervention; crisis intervention; social emotional prevention programs, including character education and violence prevention; mental health, protective factors for at-risk students, and career awareness, exploration, and planning.

(5) "School District" means a school district organized and existing pursuant to law but does not include a local college district. "School District" includes the state charter school institute and a board of cooperative services that operates a school.

(6) "School Mental Health Professional" means a school counselor, a school psychologist, or a school social worker.
(7) "School psychologist" means a school psychologist holding a master's degree and a professional special services license in Colorado with a school psychologist endorsement.

(8) "School social worker" means a social worker holding a master's degree and a professional special services license in Colorado with an endorsement in school social work, including but not limited to the completion of course work in the areas of school and special education law, including content covering functional behavior assessment and the development of behavior intervention plans.

22-102-104. K-5 social and emotional health pilot program - creation - selection of pilot schools - rules. (1) There is created the K-5 social and emotional health pilot program in the department to determine the impact of dedicated school mental health professionals in kindergarten through fifth grade in elementary schools that have high-poverty, high-need students. The pilot program is implemented within the selected pilot schools and administered by the department. Operation of the pilot program begins in the 2020-21 school year and continues through the conclusion of the 2022-23 school year, unless the repeal of the pilot program is extended by the general assembly. Pursuant to section 22-102-106, the department shall employ or contract with a pilot program coordinator and contract for preliminary and final program evaluations of the pilot program. The department shall promulgate any rules necessary for the administration of the pilot program.

(2) (a) No later than January 15, 2020, the department shall select up to ten pilot schools to participate in the pilot program. If available appropriations and gifts, grants, or donations are insufficient to fully fund the pilot program, the department may select fewer than ten pilot schools to participate in the pilot program. The department shall select pilot schools that exhibit the characteristics set forth in subsection (2)(b) of this section and that are appropriate test schools to evaluate the impact and effectiveness of the pilot program. The pilot schools must demonstrate a willingness to participate in the pilot program and to collect the data and information necessary for the evaluation.
OF THE PILOT PROGRAM.

(b) The department shall select pilot schools, including rural, small, and geographically diverse schools, which schools shall be located in a school district that has a high rate of youth suicide, attempted suicide, or suicidal ideation; have a high-poverty student population and a high percentage of students who experience or may experience food insecurity, as evidenced by the number or percentage of students in the school who are eligible for free and reduced-priced meals; and may include schools:

(I) in large, metropolitan school districts;

(II) that have significant ethnic, cultural, and language diversity within their student populations, which may include students from refugee populations;

(III) that have a high number or density of youth who are students in out-of-home placement, as defined in section 22-32-138;

(IV) that are in a school district that has a high percentage of students who are adjudicated delinquent; and

(V) that are in a school district that has a plan in place to recruit, hire, and retain a diverse workforce that reflects the race, ethnicity, and other characteristics of the student body.

(c) Prior to a selected school implementing the pilot program pursuant to this article 102, the school must notify all parents or legal guardians of students at the school of the school’s selection as a pilot school.

22-102-105. Implementation of pilot program. (1) In the first and subsequent years of operation of the pilot program, each pilot school shall employ or contract with additional school mental health professionals so that each of grades one through five and the kindergarten program in each pilot school has a school mental health professional dedicated to each grade and the kindergarten program. If a single grade or the kindergarten
Program has more than two hundred fifty students, additional school mental health professionals must be added to the grade or kindergarten program to maintain a ratio of approximately one school mental health professional per two hundred fifty students, as determined by the pilot school. A small pilot school shall maintain a ratio of approximately one school mental health professional per two hundred fifty students, as determined by the pilot school. At least one of the school mental health professionals at each pilot school must be a school social worker.

(2) The goal of the pilot program is for a school mental health professional to develop an ongoing relationship with pilot school students and to follow those students, to the extent possible, as the students advance through the grades at the pilot school. This will allow the school mental health professional to understand the needs of the students and their families over time and to help address those needs over time, if necessary. To achieve this goal, school mental health professionals may be assigned to a cohort of students by grade or, in a smaller school, by multiple grades. School mental health professionals in each pilot school shall work as a team to address the academic and social emotional needs of the pilot school’s students and to create a safe and positive school learning environment through additional behavioral health supports.

(3) For purposes of implementing this pilot program, the General Assembly shall appropriate to the Department for distribution to the pilot schools, or to the governing body for the pilot school, the amount of money necessary for the pilot schools to employ or contract with the number of additional school mental health professionals necessary to implement the pilot program, as described in subsection (1) of this section. Throughout the duration of the pilot program, the pilot school must employ or contract with, at the pilot school’s expense, the same number of school mental health professionals employed by or contracted with the pilot school during the 2019-20 school year, so that the appropriation to the pilot school for the pilot program supplements, but does not supplant, the pilot school’s existing expenditures for school mental health professional positions prior to the operation of the pilot program.

Page 6-House Bill 19-1017
(4) (a) In implementing the pilot program, the school mental health professionals shall work as a team, with each professional providing services to students and offering training and resources to school faculty and administrators that are authorized under the school mental health professional's special services license and endorsement.

(b) In addition, school mental health professionals shall, consistent with the school mental health professional's job duties and licensure:

(I) provide the school with resources to develop and improve the social and emotional health of students, including resources translated into the primary languages of the student population to the extent possible, and create a safe and positive learning environment through additional behavioral health supports; and

(II) provide social and emotional skill building in the school and with students in the classroom.

(c) School mental health professionals may, consistent with the school mental health professional's job duties and licensure:

(I) assist students and their families with applying for and obtaining necessary public benefits for which each student and the student's family is eligible;

(II) provide services and supports to students who have an individualized education program, as provided in section 22-20-108;

(III) consult and coordinate with other school professionals on behalf of students and support families accessing community-based resources as needed and appropriate; and

(IV) identify food insecurity, homelessness, and other issues affecting students and make referrals to services within the community, bringing those services into the school setting where possible.
(d) As appropriate, and to the extent possible, the school mental health professional must provide services or arrange for services to be provided for students at the school and during school hours or when student busing is available.

(e) Services provided by the school mental health professional to the student must include the student's family and household, where appropriate. The school mental health professional is specifically authorized to make home visits when appropriate under the circumstances and consistent with licensure.

(5) Each pilot school's team of school mental health professionals shall participate in the school's or school district's multi-tiered systems of support process to assist in developing appropriate plans for the mental health and behavioral needs of individual students.

(6) Each pilot school, or each pilot school's governing body, where appropriate, shall collect, transmit, and retain any data and information necessary for the evaluation of the pilot program pursuant to section 22-102-106. Each pilot school shall record the unique student identifier, as defined in section 22-16-103, for all students enrolled in the pilot school.

(7) A student who is home schooled but who participates in extracurricular activities or athletic programs at a school that is selected as a pilot school is excluded from any data collection or reporting requirements pursuant to this article 102.

22-102-106. Pilot program coordinator - evaluation of pilot program - student impacts and outcomes. (1) The department shall employ or contract with a pilot program coordinator to oversee the implementation of the pilot program across the pilot schools. The pilot program coordinator must be a school social worker who shall work with each pilot school's team of school mental health professionals. The duties of the pilot program coordinator include, at a minimum:

(a) Coordinating data collection and program evaluation
REQUIREMENTS WITH THE PROFESSIONAL PROGRAM EVALUATOR RETAINED PURSUANT TO SUBSECTION (2) OF THIS SECTION;

(b) SERVING AS A CONTACT PERSON AND RESOURCE FOR TEAMS OF SCHOOL MENTAL HEALTH PROFESSIONALS IN THE PILOT SCHOOLS;

(c) HELPING PILOT SCHOOLS IDENTIFY SUCCESSFUL PRACTICES FOR RECRUITING AND RETAINING MENTAL HEALTH PROFESSIONALS;

(d) SHARING BEST PRACTICES RELATING TO THE PILOT PROGRAM AND ITS IMPLEMENTATION AT THE PILOT SCHOOLS; AND

(e) ENSURING FIDELITY TO THE GOALS OF THE PILOT PROGRAM ACROSS THE PILOT SCHOOLS.

(2) (a) THE DEPARTMENT SHALL SELECT A PROFESSIONAL PROGRAM EVALUATOR TO COMPLETE A PRELIMINARY EVALUATION OF THE PILOT PROGRAM ON OR BEFORE SEPTEMBER 1, 2022, AND A FINAL EVALUATION OF THE PILOT PROGRAM TO BE COMPLETED ON OR BEFORE SEPTEMBER 1, 2023. THE DEPARTMENT SHALL CONTRACT WITH THE EVALUATOR PRIOR TO THE IMPLEMENTATION OF THE PILOT PROGRAM IN THE PILOT SCHOOLS DURING THE 2020-21 SCHOOL YEAR TO CREATE A PROCESS FOR THE COLLECTION AND TRANSMISSION OF DATA AND INFORMATION TO THE EVALUATOR TO ENSURE THAT THE EVALUATOR HAS THE DATA AND INFORMATION NECESSARY TO COMPLETE THE PRELIMINARY AND FINAL REPORTS CONCERNING THE IMPACT AND OUTCOMES OF THE PILOT PROGRAM. THE PILOT PROGRAM EVALUATOR, IN CONJUNCTION WITH THE DEPARTMENT, SHALL SELECT A GROUP OF CONTROL SCHOOLS THAT HAVE SCHOOL CHARACTERISTICS AND STUDENT DEMOGRAPHICS SIMILAR TO THOSE OF THE PILOT SCHOOLS, TO SERVE AS A CONTROL GROUP FOR PURPOSES OF EVALUATING THE IMPACTS AND OUTCOMES OF THE PILOT PROGRAM ON PARTICIPATING STUDENTS AND PILOT SCHOOLS. DATA COLLECTED FOR PILOT SCHOOLS AND CONTROL GROUP SCHOOLS MUST INCLUDE DATA FROM SCHOOL CLIMATE AND HEALTHY SCHOOLS SURVEYS FOR ANY GRADE IN WHICH SUCH SURVEYS HAVE BEEN CREATED.

(b) THE DEPARTMENT SHALL SELECT A PROFESSIONAL PROGRAM EVALUATOR THAT HAS THE KNOWLEDGE AND SKILLS NECESSARY TO EVALUATE THE EFFECTIVENESS OF SERVICES PROVIDED BY THE PILOT PROGRAM AND THE RESULTING IMPACTS AND OUTCOMES OF THE PILOT PROGRAM.
program on the student cohorts participating in the pilot program. The department is encouraged, but is not required, to contract with a state institution of higher education to complete the evaluation of the pilot program.

(c) The department and the pilot schools shall cooperate fully with the pilot program evaluator's collection and analysis of data and information relating to the pilot program's impact and outcomes. The department, pilot schools, the pilot program coordinator, and the contracted evaluator shall comply with all state and federal laws relating to the confidentiality of academic and medical records of students and shall provide aggregated data where appropriate.

(d) The pilot program evaluator shall determine the impact of the pilot program on students' academic, mental, social emotional, and physical health and well-being. The evaluator shall collect and analyze data relating to student and school outcomes, which outcomes may include:

(I) The increase or decrease in students' disciplinary referrals, either within the pilot school, or pilot school's district, if relevant, or with law enforcement, and the increase or decrease in students adjudicated delinquent within the pilot school's district;

(II) The increase or decrease in students' lost instruction time due to disciplinary action or visits to the school nurse or school counselor;

(III) The increase or decrease in excused and unexcused absences and truancy;

(IV) The increase or decrease in overall student performance on statewide assessments, by grade;

(V) The increase or decrease in the student cohorts' grade point average, by grade;

(VI) The increase in access to supportive services for
STUDENTS AND THEIR FAMILIES, AS EVIDENCED BY:

(VII) An increase in the number or percentage of students identified as eligible for free or reduced-price meals, by grade;

(VIII) An increase in employment outcomes for students' families;

(IX) An increase or decrease in students' food security as demonstrated by an increase or decrease in the number or percentage of students participating in the Federal Supplemental Nutrition Assistance Program;

(X) An increase or decrease in the number or percentage of eligible students accessing public benefits;

(XI) An increase or decrease in the pilot schools' awareness of or involvement with domestic violence or child abuse issues affecting students;

(XII) Impact on the school's learning environment and changes to the school climate during the operation of the pilot program and evaluation of school climate;

(XIII) The reduction in adverse childhood experiences or the positive resolution of adverse childhood experiences, if available;

(XIV) The reduction in youth suicide and attempted suicide; and

(XV) Any other relevant data and information relating to pilot program outcomes and impacts as determined by the pilot program evaluator.

22-102-107. Appropriations for this article - gifts, grants, or donations. (1) For the 2019-20 and 2020-21 state fiscal years, the general assembly may appropriate money from the marijuana tax cash fund, created in section 39-28.8-501, to the department to be used for the pilot program established in this article 102; except that the appropriation from the marijuana tax cash fund for the
2020-21 state fiscal year shall not exceed two million five hundred thousand dollars, with the remaining pilot program funding from gifts, grants, or donations.

(2) The department may seek, accept, and expend gifts, grants, or donations from private or public sources for the purposes of this article 102.

22-102-108. Repeal of article. This article 102 is repealed, effective July 1, 2023.

SECTION 2. Appropriation. For the 2019-20 state fiscal year, $43,114 is appropriated to the department of education. This appropriation is from the marijuana tax cash fund created in section 39-28.8-501 (1), C.R.S., and is based on an assumption that the department will require an additional 0.4 FTE. To implement this act, the department may use this appropriation for the K-5 social and emotional health pilot program.

SECTION 3. Act subject to petition - effective date. This act takes effect at 12:01 a.m. on the day following the expiration of the ninety-day period after final adjournment of the general assembly (August 2, 2019, if adjournment sine die is on May 3, 2019); except that, if a referendum petition is filed pursuant to section 1 (3) of article V of the state constitution against this act or an item, section, or part of this act within such period, then the act, item, section, or part will not take effect unless
approved by the people at the general election to be held in November 2020 and, in such case, will take effect on the date of the official declaration of the vote thereon by the governor.

KC Becker
SPEAKER OF THE HOUSE
OF REPRESENTATIVES

Leroy M. Garcia
PRESIDENT OF
THE SENATE

Marilyn Eddins
CHIEF CLERK OF THE HOUSE
OF REPRESENTATIVES

Cindi L. Markwell
SECRETARY OF
THE SENATE

APPROVED May 10, 2019 at 3:30 p.m.
(Date and Time)

Jared S. Polis
GOVERNOR OF THE STATE OF COLORADO

PAGE 13- HOUSE BILL 19-1017