

SENATE BILL NO. 230—SENATORS DONDERO LOOP; AND SPEARMAN

MARCH 15, 2021

Referred to Committee on Education

SUMMARY—Enacts provisions relating to mental health.
(BDR 34-82)

FISCAL NOTE: Effect on Local Government: May have Fiscal Impact.
Effect on the State: Yes.

CONTAINS UNFUNDED MANDATE (§ 2)
(NOT REQUESTED BY AFFECTED LOCAL GOVERNMENT)

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EXPLANATION – Matter in *bolded italics* is new; matter between brackets [omitted material] is material to be omitted.

AN ACT relating to mental health; providing for the reporting of information relating to distance education and the effects of distance education on the mental health of pupils and teachers; requiring the board of trustees of each school district to ensure that all school employees receive certain training relating to trauma; requiring the State Board of Education to adopt certain regulations; providing for the establishment of a program to provide training concerning the identification and assistance of persons who have certain behavioral health conditions; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Existing law requires the Department of Education to establish a statewide framework for providing and coordinating integrated student supports for pupils enrolled in public schools and the families of such pupils. (NRS 388.885) **Section 1** of this bill requires school districts and charter schools to report information relating to distance education and the effects of distance education on the mental health of pupils and teachers as part of the statewide framework. **Section 1** also requires the State Board of Education to adopt regulations prescribing the information to be included in the report.

Existing law requires certain employees of school districts to complete training on certain topics. (NRS 391A.250-391A.385) **Section 2** of this bill requires the board of trustees of each school district to ensure that all school employees receive training on social and emotional trauma. **Section 2** also requires the State Board of Education to adopt any regulations necessary to carry out the provisions of this bill,



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including, without limitation, regulations determining the content and approving providers of the training on social and emotional trauma.

Existing law requires the Division of Public and Behavioral Health of the Department of Health and Human Services to operate certain facilities and programs for the provision of mental health services. (NRS 433.233-433.374) **Section 3** of this bill requires the Division to establish a program to provide training on identifying and assisting a person who has a mental illness or substance use disorder or who may be experiencing a mental health or substance use crisis and requires a person who provides such training to have successfully completed a training program for mental health first aid instructors. **Section 3** additionally requires the Division to collaborate with interested persons and groups when developing the program and inform interested persons and groups concerning the availability and benefits of training under the program. **Section 3** also requires the Division to submit to the Governor and the Legislature annually a report containing certain information about the program.

THE PEOPLE OF THE STATE OF NEVADA, REPRESENTED IN
SENATE AND ASSEMBLY, DO ENACT AS FOLLOWS:

Section 1. NRS 388.885 is hereby amended to read as follows:

388.885 1. The Department shall, to the extent money is available, establish a statewide framework for providing and coordinating integrated student supports for pupils enrolled in public schools and the families of such pupils. The statewide framework must:

(a) Establish minimum standards for the provision of integrated student supports by school districts and charter schools. Such standards must be designed to allow a school district or charter school the flexibility to address the unique needs of the pupils enrolled in the school district or charter school.

(b) Establish a protocol for providing and coordinating integrated student supports. Such a protocol must be designed to:

(1) Support a school-based approach to promoting the success of all pupils by establishing a means to identify barriers to academic achievement and educational attainment of all pupils and methods for intervening and providing integrated student supports which are coordinated to reduce those barriers, including, without limitation, methods for:

(I) Engaging the parents and guardians of pupils;

(II) Assessing the social, emotional and academic development of pupils;

(III) Attaining appropriate behavior from pupils; and

(IV) Screening, intervening and monitoring the social, emotional and academic progress of pupils;

(2) Encourage the provision of education in a manner that is centered around pupils and their families and is culturally and linguistically appropriate;



(3) Encourage providers of integrated student supports to collaborate to improve academic achievement and educational attainment, including, without limitation, by:

(I) Engaging in shared decision-making;

(II) Establishing a referral process that reduces duplication of services and increases efficiencies in the manner in which barriers to academic achievement and educational attainment are addressed by such providers; and

(III) Establishing productive working relationships between such providers;

(4) Encourage collaboration between the Department and local educational agencies to develop training regarding:

(I) Best practices for providing integrated student supports;

(II) Establishing effective integrated student support teams comprised of persons or governmental entities providing integrated student supports;

(III) Effective communication between providers of integrated student supports; and

(IV) Compliance with applicable state and federal law; and

(5) Support statewide and local organizations in their efforts to provide leadership, coordination, technical assistance, professional development and advocacy to improve access to integrated student supports and expand upon existing integrated student supports that address the physical, emotional and educational needs of pupils.

(c) Include integration and coordination across school- and community-based providers of integrated student support services through the establishment of partnerships and systems that support this framework.

(d) Establish accountability standards for each administrator of a school to ensure the provision and coordination of integrated student supports.

(e) Require school districts and charter schools to report information relating to distance education and the effects of distance education on the mental health of pupils and teachers. The State Board, in consultation with the committee on statewide school safety appointed pursuant to NRS 388.1324, shall adopt:

(1) Regulations that prescribe the information that must be included in the report; and

(2) Any other regulations necessary to carry out the provisions of this paragraph.

2. The board of trustees of each school district and the governing body of each charter school shall:



(a) Annually conduct a needs assessment for pupils enrolled in the school district or charter school, as applicable, to identify the academic and nonacademic supports needed within the district or charter school. The board of trustees of a school district or the governing body of a charter school shall be deemed to have satisfied this requirement if the board of trustees or the governing body has conducted such a needs assessment for the purpose of complying with any provision of federal law or any other provision of state law that requires the board of trustees or governing body to conduct such a needs assessment.

(b) Ensure that mechanisms for data-driven decision-making are in place and the academic progress of pupils for whom integrated student supports have been provided is tracked.

(c) Ensure integration and coordination between providers of integrated student supports.

(d) To the extent money is available, ensure that pupils have access to social workers, mental health workers, counselors, psychologists, nurses, speech-language pathologists, audiologists and other school-based specialized instructional support personnel or community-based medical or behavioral providers of health care.

3. Any request for proposals issued by a local educational agency for integrated student supports must include provisions requiring a provider of integrated student supports to comply with the protocol established by the Department pursuant to subsection 1.

4. As used in this section ~~[, “integrated”]~~:

(a) *“Distance education” means instruction which is delivered by means of video, computer, television or the Internet or other electronic means of communication, or any combination thereof, in such a manner that the person supervising or providing the instruction and the pupil receiving the instruction are physically separated for a majority of the time during which the instruction is delivered.*

(b) *“Integrated student support” means any measure designed to assist a pupil in:*

~~[(a)]~~ (1) Improving his or her academic achievement and educational attainment and maintaining stability and positivity in his or her life; and

~~[(b)]~~ (2) His or her social, emotional and academic development.

Sec. 2. Chapter 391A of NRS is hereby amended by adding thereto a new section to read as follows:

1. The board of trustees of each school district shall ensure that all school employees receive training on social and emotional trauma.



1 2. *The State Board shall adopt any regulations necessary to*
2 *carry out the provisions of this section, including, without*
3 *limitation, regulations:*

4 (a) *Determining the content; and*

5 (b) *Approving providers,*

6 *↳ of the training on social and emotional trauma required by*
7 *subsection 1.*

8 **Sec. 3.** Chapter 433 of NRS is hereby amended by adding
9 thereto a new section to read as follows:

10 1. *To the extent that money is available for the purpose, the*
11 *Division shall establish a program to provide training on*
12 *identifying and assisting a person who has a mental illness or*
13 *substance use disorder or who may be experiencing a mental*
14 *health or substance use crisis. The training must include, without*
15 *limitation, instruction on:*

16 (a) *Recognizing the symptoms of a mental illness or substance*
17 *use disorder;*

18 (b) *Providing initial assistance to a person experiencing a*
19 *mental health or substance use crisis;*

20 (c) *Guiding a person requiring assistance with a mental health*
21 *issue, including, without limitation, a person experiencing a*
22 *mental health or substance use crisis, to professionals qualified to*
23 *provide such assistance;*

24 (d) *Comforting a person experiencing a mental health or*
25 *substance use crisis;*

26 (e) *Helping a person with a mental illness or substance use*
27 *disorder avoid a mental health or substance use crisis; and*

28 (f) *Promoting healing, recovery and good mental health.*

29 2. *A person who provides training through the program must*
30 *have successfully completed a training program for mental health*
31 *first aid instructors offered by Mental Health First Aid USA, or its*
32 *successor organization, or a similar program offered or approved*
33 *by the Division.*

34 3. *The Division shall:*

35 (a) *Consult with interested persons and groups, including,*
36 *without limitation, legislators, representatives of governmental*
37 *and private entities that provide or arrange for the provision of*
38 *mental health services, public safety agencies, the Department of*
39 *Education, school districts, charter schools, school employees,*
40 *community-based organizations and members of the public, when*
41 *developing the program;*

42 (b) *Inform the public and interested groups, including, without*
43 *limitation, providers of emergency medical services, law*
44 *enforcement officers, teachers, school administrators and*



providers of primary health care services, concerning the availability and benefits of training through the program;

(c) Employ persons who meet the requirements of subsection 2 to provide training through the program; and

(d) On or before January 1 of each year:

(1) Compile a report that includes, without limitation, the number of persons who provided training through the program, the number of training sessions provided by such persons, the groups of persons to whom such training was provided and any other information determined by the Division to be relevant to evaluating the effectiveness of the program; and

(2) Submit the report to the Governor and the Director of the Legislative Counsel Bureau for transmittal to:

(I) In even-numbered years, the Legislative Committee on Health Care; and

(II) In odd-numbered years, the next regular session of the Legislature.

4. The Division may apply for and accept gifts, grants and donations to carry out the provisions of this section.

5. As used in this section, “public safety agency” means:

(a) A fire-fighting agency; or

(b) A law enforcement agency as defined in NRS 277.035.

Sec. 4. The provisions of subsection 1 of NRS 218D.380 do not apply to any provision of this act which adds or revises a requirement to submit a report to the Legislature.

Sec. 5. The provisions of NRS 354.599 do not apply to any additional expenses of a local government that are related to the provisions of this act.

Sec. 6. 1. This section and section 4 of this act become effective upon passage and approval.

2. Section 1 of this act becomes effective upon passage and approval for the purpose of adopting any regulations and performing any other preparatory administrative tasks that are necessary to carry out the provisions of this act and on January 1, 2022, for all other purposes.

3. Sections 2 and 5 of this act become effective upon passage and approval for the purpose of adopting any regulations and performing any other preparatory administrative tasks that are necessary to carry out the provisions of this act and on July 1, 2022, for all other purposes.

4. Section 3 of this act becomes effective on July 1, 2021.

