

AMENDED IN ASSEMBLY APRIL 15, 2015

AMENDED IN ASSEMBLY MARCH 26, 2015

CALIFORNIA LEGISLATURE—2015–16 REGULAR SESSION

## **ASSEMBLY BILL**

**No. 1133**

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**Introduced by Assembly Member Achadjian**

February 27, 2015

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An act to amend Section 4372 of, and to add and repeal Chapter 4 (commencing with Section 4391) of Part 4 of Division 4 of, the Welfare and Institutions Code, relating to mental health.

### LEGISLATIVE COUNSEL'S DIGEST

AB 1133, as amended, Achadjian. School-based early mental health intervention and prevention services support program.

Existing law, the School-based Early Mental Health Intervention and Prevention Services for Children Act of 1991, authorizes the Director of Health Care Services, in consultation with the Superintendent of Public Instruction, to provide matching grants to local educational agencies to pay the state share of the costs of providing school-based early mental health intervention and prevention services to eligible pupils at schoolsites of eligible pupils, subject to the availability of funding each year. Existing law defines “eligible pupil” for this purpose as a pupil who attends a publicly funded elementary school and who is in kindergarten or grades 1 to 3, inclusive. Existing law also defines “local educational agency” as a school district or county office of education or a state special school.

This bill would expand the definition of an eligible pupil to include a pupil who attends a state preschool program at a publicly funded elementary school and a pupil who is in transitional kindergarten,

thereby extending the application of the act to those persons. The bill would also include charter schools in the definition of local educational agency, thereby extending the application of the act to those entities. The bill would require the State Public Health Officer, in consultation with the Superintendent of Public Schools and the Director of Health Care Services, to establish a 4-year pilot program, the School-Based Early Mental Health Intervention and Prevention Services Support Program, to provide outreach, free regional training, and technical assistance for local educational agencies in providing mental health services at schoolsites. The bill would require the State Department of Public Health to submit specified reports after 2 and 4 years. The bill would repeal these provisions as of January 1, 2021.

Vote: majority. Appropriation: no. Fiscal committee: yes.  
State-mandated local program: no.

*The people of the State of California do enact as follows:*

1 SECTION 1. The Legislature finds and declares all of the  
2 following:

3 (a) The State of California has long recognized the mental health  
4 needs of California's children and the value of addressing these  
5 needs by supporting the provision of evidence-based mental health  
6 services in publicly funded preschools and elementary schools, as  
7 evidenced by the creation in 1981 of the Primary Prevention  
8 Project, now named the Primary Intervention Program, and the  
9 creation in 1991 of the School-based Early Mental Health  
10 Intervention and Prevention Services for Children Program, known  
11 as the Early Mental Health Initiative (EMHI).

12 (b) From the 1992–93 fiscal year to the 2011–12 fiscal year,  
13 the State Department of Mental Health awarded funds each year  
14 in matching grants to local education agencies to fund prevention  
15 and early intervention programs, including the Primary Intervention  
16 Program, for students experiencing mild to moderate school  
17 adjustment difficulty through the EMHI. In the 2011–12 fiscal  
18 year, the EMHI received \$15 million in state funds.

19 (c) Authorizing legislation specified that the EMHI would be  
20 deemed successful if at least 75 percent of the children who  
21 complete the program show an improvement in at least one of the  
22 following four areas: learning behaviors, attendance, school  
23 adjustment, and school-related competencies.

(d) The EMHI succeeded in meeting these legislative requirements. According to the 2010/2011 Early Mental Health Initiative Statewide Evaluation Report, of the 15,823 students located in 424 elementary schools across 66 school districts participating in EMHI-funded services during the 2010–11 school year, 79 percent exhibited positive social competence and school adjustment behaviors more frequently after completing services. Furthermore, the magnitude of the improvements was exceptional in comparison to evaluations of other programs, especially given the short-term and cost-effective nature of the intervention.

(e) The 2010/2011 Early Mental Health Initiative Statewide Evaluation Report described an unmet demand for EMHI-funded services at participating schoolsites, as only 37 percent of the students that scored in the mild to moderate school adjustment difficulty range were served with EMHI-funded services due to program capacity and funding constraints. Based on demographic considerations, similar demand would be expected at schools that did not receive EMHI grants.

(f) The Governor’s realignment for the 2011–12 fiscal year renamed the State Department of Mental Health as the State Department of State Hospitals and limited that department’s mission.

(g) The Budget Act of 2012 disbursed Proposition 98 funds, which had been used to fund the EMHI, directly to local education agencies in order to provide local schools with enhanced flexibility to manage their finances and give greater control of local decisions.

(h) It is in the interest of California’s children, families, schools, and communities that the State of California support local decisions to provide funding for evidence-based services to address the mental health needs of children in publicly funded preschools and elementary schools.

*(i) Multitiered systems and supports have been developed as model framework within which to implement these services. Pilot programs in the Counties of San Bernardino and Alameda are demonstrating that implementing these services as part of a multitiered system is cost effective, because the cost of the services is more than fully offset by the reduction in the need for high-cost nonpublic school placements.*

SEC. 2. Section 4372 of the Welfare and Institutions Code is amended to read:

1     4372. For the purposes of this part, the following definitions  
2 shall apply:

3     (a) “Cooperating entity” means any federal, state, or local, public  
4 or private nonprofit agency providing school-based early mental  
5 health intervention and prevention services that agrees to offer  
6 services at a schoolsite through a program assisted under this part.

7     (b) “Eligible pupil” means a pupil who attends a preschool  
8 program at a publicly funded elementary school, or who attends  
9 a publicly funded elementary school and who is in kindergarten,  
10 transitional kindergarten, or grades 1 to 3, inclusive.

11     (c) “Local educational agency” means any school district or  
12 county office of education, state special school, or charter school.

13     (d) “Department” means the State Department of Public Health.

14     (e) “Director” means the State Director of Mental Health.

15     (f) “Supportive service” means a service that will enhance the  
16 mental health and social development of children.

17     SEC. 3. Chapter 4 (commencing with Section 4391) is added  
18 to Part 4 of Division 4 of the Welfare and Institutions Code, to  
19 read:

20  
21             CHAPTER 4. SCHOOL-BASED EARLY MENTAL HEALTH  
22     INTERVENTION AND PREVENTION SERVICES SUPPORT PROGRAM  
23

24     4391. (a) The State Public Health Officer shall establish a  
25 four-year pilot program, in consultation with the Superintendent  
26 of Public Instruction and the Director of Health Care Services, to  
27 encourage and support local decisions to provide funding for the  
28 eligible support services as provided in this section.

29     (b) The department shall provide outreach to local education  
30 agencies and county mental health agencies to inform individuals  
31 responsible for local funding decisions of the program established  
32 pursuant to this section.

33     (c) The department shall provide free regional training on all  
34 of the following:

35     (1) Eligible support services, which may include any or all of  
36 the following:

37         (A) Individual and group intervention and prevention services.

38         (B) Parent involvement through conference or training, or both.

39         (C) Teacher and staff conferences and training related to meeting  
40 project goals.

1 (D) Referral to outside resources when eligible pupils require  
2 additional services.

3 (E) Use of paraprofessional staff, who are trained and supervised  
4 by credentialed school psychologists, school counselors, or school  
5 social workers, to meet with pupils on a short-term weekly basis,  
6 in a one-on-one setting as in the primary intervention program  
7 established pursuant to Chapter 4 (commencing with Section 4343)  
8 of Part 3.

9 (F) Any other service or activity that will improve the mental  
10 health of eligible pupils.

11 (2) The potential for the eligible support services defined in this  
12 section to help fulfill state priorities described by the local control  
13 funding formula and local goals described by local control and  
14 accountability plans.

15 (3) How educational, mental health, and other funds subject to  
16 local control can be used to finance the eligible support services  
17 defined in this section.

18 (4) External resources available to support the eligible support  
19 services defined in this section, which may include workshops,  
20 training, conferences, and peer learning networks.

21 (5) State resources available to support student mental health  
22 and positive learning environments, which may include any of the  
23 following:

24 (A) Foundational aspects of learning, mental health, toxic stress,  
25 childhood trauma, and adverse childhood experiences.

26 (B) Inclusive multitiered systems of behavioral and academic  
27 supports, Schoolwide Positive Behavior Interventions and Supports,  
28 restorative justice or restorative practices, trauma-informed  
29 practices, social and emotional learning, and bullying prevention.

30 (d) The department shall provide technical assistance to local  
31 education agencies that provide or seek to provide eligible services  
32 defined in this section. Technical assistance shall include assistance  
33 in any of the following:

34 (1) Designing programs.

35 (2) Training program staff in intervention skills.

36 (3) Conducting local evaluations.

37 (4) Leveraging educational, mental health, and other funds that  
38 are subject to local control and assisting in budget development.

39 (e) In providing outreach pursuant to subdivision (b), training  
40 pursuant to subdivision (c), and technical assistance pursuant to

1 subdivision (d), the department shall select and support schoolsites  
2 as follows:

3 (1) During the first 18 months of the program, the department  
4 shall support, strengthen, and expand the provision of eligible  
5 services at 30 schoolsites that previously received funding pursuant  
6 to the School-Based Early Mental Health Intervention and  
7 Prevention Services Matching Grant Program (Chapter 2  
8 (commencing with Section 4380)) and have continued to provide  
9 eligible support services. In working with these selected  
10 schoolsites, the department shall develop methods and standards  
11 for providing services and practices to new schoolsites.

12 (2) During the subsequent 18 months of the program, the  
13 department shall select 30 new schoolsites that are not providing  
14 eligible support services but that demonstrate the willingness and  
15 capacity to participate in the program. The department shall work  
16 with these schoolsites to deliver eligible support services.

17 (3) In selecting schoolsites and providing support, the  
18 department shall prioritize geographic diversity, program  
19 effectiveness, program efficiency, and long-term program  
20 sustainability.

21 (f) The department shall submit, in compliance with Section  
22 9795 of the Government Code, an interim report to the Legislature  
23 at the end of the second year of the pilot program that details the  
24 department's work to support the schoolsites selected pursuant to  
25 paragraph (1) of subdivision (e) and includes an assessment of the  
26 demand and impact of funding for the School-Based Early Mental  
27 Health Intervention and Prevention Services Matching Grant  
28 Program established pursuant to Chapter 3 (commencing with  
29 Section 4390). The department shall make the report available to  
30 the public and shall post it on the department's Internet Web site.

31 (g) The department shall develop an evaluation plan to assess  
32 the impact of the pilot program. The department, in compliance  
33 with Section 9795 of the Government Code, shall submit a report  
34 to the Legislature at the end of the four-year period evaluating the  
35 impact of the pilot program and providing recommendations for  
36 further implementation. The department shall make the report  
37 available to the public and shall post it on the department's Internet  
38 Web site.

1       4392. This chapter shall remain in effect only until January 1,  
2       2021, and as of that date is repealed, unless a later enacted statute,  
3       that is enacted before January 1, 2021, deletes or extends that date.

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