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HOUSE OF REPRESENTATIVES
150th GENERAL ASSEMBLY

HOUSE BILL NO. 100

AN ACT TO AMEND TITLE 14 OF THE DELAWARE CODE RELATING TO FREE PUBLIC SCHOOLS.

- 1 WHEREAS, 1 in 5 school students suffer from a mental health disorder; and
- 2 WHEREAS, 11% of youth have a mood disorder, 10% of youth have a behavior or conduct disorder, and 8% of
- 3 youth have an anxiety disorder; and
- 4 WHEREAS, 45% of children have had a potentially traumatic experience; and
- 5 WHEREAS, children who are identified as hard to manage at ages 3-4 have a high probability of continued
- 6 behavioral difficulties in adolescence, and when aggressive or antisocial behavior has persisted until age 9, further
- 7 intervention has a poor chance of success; and
- 8 WHEREAS, of young children who show early signs of challenging behavior, fewer than 10% receive mental
- 9 health services, resulting in less than 1/3 of the children and adolescents with a diagnosable mental health condition
- 10 receiving any type of treatment; and
- 11 WHEREAS, 50% of all lifelong cases of mental illness begin by age 14, and 37% of students with a mental health
- 12 condition at age 14 and older, drop out of school which is the highest school dropout rate of any group of students with a
- 13 disability; and
- 14 WHEREAS, 70% of youth in state juvenile systems have a mental illness; and
- 15 WHEREAS, youth with access to mental health services in school-based health centers are 10 times more likely to
- 16 seek care for mental health or substance abuse than youth without access; and
- 17 WHEREAS, early intervention is critical to building life skills, resilience, and mental wellness; and
- 18 WHEREAS, leading counseling and mental health organizations, including the American School Counselor
- 19 Association, the National Association of School Psychologists, and the School Social Worker Association of America
- 20 recommend that schools maintain all of the following:

(a) A maximum student to school counselor ratio of 250 to 1.

(b) A maximum student to school social worker ratio of 250 to 1.

(c) A student to school psychologist ratio of 500-700 to 1; and

WHEREAS, Delaware elementary schools currently maintain an average ratio of 580 students to each school counselor; and

WHEREAS, the American School Counselor Association National Model includes a strong foundation in social and emotional learning, direct and indirect counseling, and establishing positive mindsets and behaviors; and

WHEREAS, school counselors are prepared to address barriers and assess ways to maximize students' success in schools, communities, and their family structure by offering education, prevention, and crisis and short-term intervention until the student is connected to available community resources; and

WHEREAS, 86% of Delaware elementary schools do not employ a school social worker; and

WHEREAS, school social workers create and implement school-based programs to promote a positive school environment for all students, work with the entire student body to identify students in need of more intensive interventions, and connect these students to additional services in the community where needed; and

WHEREAS, school social workers serve as a resource to the principal and other educators by providing training on identifying students with mental health needs and providing a referral process when services are sought; and

WHEREAS, by working more closely with individual students and their families, school social workers also create a bridge between the school and the community by coordinating students with resources in the community. This coordination is critical to a school's success and by partnering with services in the community, social workers maximize limited resources, facilitate better delivery of services, and maintain communication between partners; and

WHEREAS, school psychologists provide services that promote a child's communication and social skills, problem solving, anger management, conflict resolution, self-regulation, self-determination, resilience, and optimism. Additionally, they consult with teachers and administrators on, classroom management strategies, promotion of promoting positive peer relationships and social problem solving, school-wide positive behavior interventions and supports, the use of effective discipline policies and practices, and programs to promote student wellness and reduce risk-taking; and

WHEREAS, School psychologists provide mental health services, including wellness and prevention programming, risk assessment and interventions, and counseling, which are proven to reduce discipline referrals and increase attendance and academic performance; and

WHEREAS, Delaware educators report that students come to school with significant unmet needs that impact the students' ability to learn in school, such as hunger, homelessness, trauma, mental health issues; and

WHEREAS, without adequate resources to support our students, these challenges manifest as frequent and at times, severe disruptions in school that take impact learning and affect all our students.

NOW, THEREFORE:

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF DELAWARE:

Section 1. Amend § 1716E, Title 14 of the Delaware Code by making deletions as shown by strike through and insertions as shown by underline as follows:

§ 1716E Mental health services unit and funding.

(a) “Mental health services unit” for funding purposes means:

(1) 1 unit for each 250 full-time equivalent students in a school district or charter school, grades K through 5 for employment of a full-time school counselor or school social worker or a licensed clinical social worker who is certified by the Delaware Department of Education as a school social worker. Districts and charter schools shall qualify for funding for a fractional part of 250 full-time equivalent pupils enrolled in grades K through 5.

(2) 1 unit for each 700 full time equivalent students in a school district or charter school, grades K through 5 for employment of full-time school psychologists. Districts and charter schools shall qualify for funding for a fractional part of 700 full-time equivalent pupils enrolled in grades K through 5.

(b) Any full units must be used in the school that generated the unit. Any remaining fractional units must be combined into full units if possible, and used to further increase the amount of mental health services available. Any fractional units still remaining after that may be used at the discretion of the district or charter school for mental health services.

(c) Each pupil counted in establishing a unit for mental health services may be counted only once in a district or charter.

(d) For purposes of this section, “mental health services” means prevention, response, and coordination services delivered to students in elementary school.

(e) Funds appropriated by this unit shall be used for employment of full-time school counselors, school social workers, or school psychologists that hold the appropriate licensure and certifications under Chapter 12 of this title.

(1) School counselors shall be required to provide services that are aligned with the American School Counselor Association (ASCA) National Model, including the provisions related to indirect and direct services as those terms are defined by ASCA.

(2) School social workers shall be required to provide services aligned to the National Association of School Social Work school social work standards.

81 (3) School psychologists shall be required to provide services aligned with the National Association of School
82 Psychologists (NASP) Model for Comprehensive and Integrated School Psychological Services.

83 (f) Funds cannot be used to supplant a unit currently allocated under this section unless a district or charter school
84 has met or exceeded the ratios listed in § 1716E(a).

85 (g) Funds appropriated in support of this unit shall be applied to the employment of full-time certified school
86 counselors, school social worker, or school psychologists. Districts or charter schools must combine fractional units to fund
87 additional full time mental health services staff to the extent possible. Districts and charter schools may exercise a cash
88 option consistent with the provisions of §1716(g) of this title for any remaining fractional funding. Funds received under
89 this provision must be used for the purchase of materials or services from to be used in support of preventative and
90 responsive mental health services herein authorized, and for no other purpose.

91 (h) The Department of Education shall promulgate rules and regulations to implement and enforce this chapter.

SYNOPSIS

This Act establishes a mental health services unit for Delaware elementary schools. The unit is at a ratio of 250 full-time equivalent students grades K-5 for a full-time school counselor, school social worker, or licensed clinical social worker. Additionally a unit ratio of 700 full time equivalent students for grades K-5 for employment of a full-time school psychologist. This Act defines “mental health services” as prevention, response, and coordination services delivered to students in elementary schools.

Mental Health disorders are the most common health problem for school aged youth. According to the National Institute of Mental Health (NIMH), one in five youth are affected by a mental health disorder. Additionally, 50% of lifetime mental illnesses begin by age 14. Untreated mental illness leads to negative outcomes including increased risk of dropout, homelessness, substance abuse, other chronic illnesses, incarceration, and possibly suicide. According to the National Alliance on Mental Health, ninety percent of people who have taken their own life have had an underlying mental health condition, and suicides are on the rise. According to the Center for Disease Control and Prevention, suicides are now the second leading cause of death for youth ages 10-14.

Delaware schools need trained and experienced mental health professionals to provide prevention and support programs and services to students. Currently, as reported by Delaware school districts, 86% of elementary schools do not employ a school social worker, and ratios of students to school counselors and school psychologists far exceed national best practices. This bill will lower ratios and increase access to mental health services for elementary school students.