
SUBSTITUTE SENATE BILL 5903

State of Washington

66th Legislature

2019 Regular Session

By Senate Behavioral Health Subcommittee to Health & Long Term Care (originally sponsored by Senators Darneille, Warnick, Das, Nguyen, and O'Ban)

READ FIRST TIME 02/22/19.

1 AN ACT Relating to implementing policies related to children's
2 mental health as reviewed and recommended by the children's mental
3 health work group; amending RCW 28B.20.445, 28B.30.357, and
4 43.216.745; adding a new section to chapter 28A.310 RCW; adding a new
5 section to chapter 28A.415 RCW; adding a new section to chapter
6 28A.300 RCW; adding a new section to chapter 28B.20 RCW; adding a new
7 section to chapter 74.09 RCW; adding new sections to chapter 71.34
8 RCW; creating new sections; repealing 2018 c 175 s 12 (uncodified);
9 providing a contingent effective date; and providing expiration
10 dates.

11 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

12 NEW SECTION. **Sec. 1.** (1) The legislature finds that the
13 children's mental health work group established in chapter 96, Laws
14 of 2016 reported recommendations related to increasing access to
15 mental health services for children and youth and that many of those
16 recommendations were adopted by the 2017 and 2018 legislatures. The
17 legislature further finds that additional work is needed to improve
18 mental health support for children and families and that the
19 children's mental health work group was reestablished for this
20 purpose in chapter 175, Laws of 2018.

1 (2) The legislature finds that there is a workforce shortage of
2 behavioral health professionals and that increasing medicaid rates to
3 a level that is equal to medicare rates will increase the number of
4 providers who will serve children and families on medicaid. Further,
5 the legislature finds that there is a need to increase the cultural
6 and linguistic diversity among children's behavioral health
7 professionals and that hiring practices, professional training, and
8 high-quality translations of accreditation and licensing exams should
9 be implemented to incentivize this diversity in the workforce.

10 (3) Therefore, the legislature intends to implement the
11 recommendations adopted by the children's mental health work group in
12 January 2019, in order to improve mental health care access for
13 children and their families.

14 NEW SECTION. **Sec. 2.** A new section is added to chapter 28A.310
15 RCW to read as follows:

16 (1) Each educational service district must provide to the school
17 districts in its region behavioral health coordination that, at a
18 minimum, includes:

19 (a) Providing support for school district development and
20 implementation of plans for recognition, initial screening, and
21 response to emotional or behavioral distress in students as required
22 under RCW 28A.320.127;

23 (b) Facilitating partnerships and coordination between school
24 districts, public schools, and existing regional and local systems of
25 behavioral health care services and supports in order to increase
26 student and family access to these services and supports;

27 (c) Assisting school districts and public schools in building
28 capacity to identify and support students in need of behavioral
29 health care services and to link students and families with
30 community-based behavioral health care services;

31 (d) Identifying, sharing, and integrating, to the extent
32 practicable, behavioral and physical health care service delivery
33 models;

34 (e) Providing medicaid billing related training, technical
35 assistance, and coordination between school districts;

36 (f) Guidance in implementing best practices in response to, and
37 to recover from, the suicide or attempted suicide of a student; and

1 (g) Providing technical assistance to schools and school
2 districts in implementing or expanding social emotional learning
3 programs.

4 (2) Funds appropriated pursuant to this section must be used
5 solely for the purposes outlined in this section.

6 NEW SECTION. **Sec. 3.** (1) Subject to the availability of amounts
7 appropriated for this specific purpose, beginning July 1, 2019, the
8 health care authority shall collaborate with the University of
9 Washington department of psychiatry and behavioral sciences, Seattle
10 children's hospital, and the office of the superintendent of public
11 instruction, to develop a plan to implement a two-year pilot program
12 called the partnership access line for schools.

13 (2) The pilot program must be implemented by January 1, 2020, and
14 shall support two educational service districts selected by the
15 office of the superintendent of public instruction.

16 (3) Elements of the pilot program must include:

17 (a) Developing a general behavioral health support curriculum
18 appropriate for the roles of school staff;

19 (b) Delivering behavioral health trainings for school counselors,
20 social workers, psychologists, nurses, teachers, and administrators
21 with content designed specifically for these roles;

22 (c) Providing school staff who have participated in training
23 under this section access to telephone consultation with
24 psychologists and psychiatrists to support school staff in managing
25 children with challenging behaviors; and

26 (d) Providing timely crisis management appointments, delivered in
27 person or through interactive audio and video technology, between
28 partnership access line clinical staff and school staff when assessed
29 as clinically appropriate by the partnership access line and when
30 similar support is not immediately available in the local community.

31 (4) By December 1, 2022, the health care authority shall submit a
32 report to the governor and the legislature describing the services
33 delivered through the pilot program and recommending whether the
34 pilot program should continue or be made permanent.

35 (5) This section expires December 30, 2022.

36 NEW SECTION. **Sec. 4.** A new section is added to chapter 28A.415
37 RCW to read as follows:

1 (1) Beginning in the 2019-20 school year, school districts must
2 use one of the professional learning days funded under RCW
3 28A.150.415 to train school district staff in mental health first
4 aid, suicide prevention, social-emotional learning, trauma-informed
5 care, and antibullying strategies.

6 (2) Funds appropriated pursuant to this section must be used
7 solely for the purposes outlined in this section.

8 NEW SECTION. **Sec. 5.** A new section is added to chapter 28A.300
9 RCW to read as follows:

10 (1) Subject to the availability of amounts appropriated for this
11 specific purpose, the office of the superintendent of public
12 instruction shall identify and make available to school districts
13 mental health literacy and healthy relationships instructional
14 materials that are consistent with Washington's health and physical
15 education K-12 learning standards.

16 (2) The office of the superintendent of public instruction shall
17 include in health and physical education graduation requirements all
18 social-emotional health, substance use and abuse, and healthy
19 relationship standards adopted in rule by the superintendent.

20 NEW SECTION. **Sec. 6.** A new section is added to chapter 28B.20
21 RCW to read as follows:

22 Subject to availability of amounts appropriated for this specific
23 purpose, the University of Washington shall establish certificate
24 programs in evidence-based practices for behavioral health care
25 professionals as follows:

26 (1)(a) The University of Washington school of social work, in
27 collaboration with the University of Washington department of
28 psychiatry and behavioral sciences, schools of social work programs
29 across the state, and community behavioral health agencies, shall
30 establish a certificate program in evidence-based practices that have
31 been shown to be effective in treating adolescents and young adults
32 with mental health disorders and suicidal behavior, including:

- 33 (i) Dialectical behavior therapy; and
- 34 (ii) Wraparound.

35 (b) The certificate program must be designed:

36 (i) For graduate students pursuing a master of social work
37 degree; and

1 (ii) To offer stipends, scholarships, and loans to students and
2 to employees of participating public behavioral health agencies that
3 participate in order to retain a trained workforce.

4 (2)(a) The University of Washington department of psychology, in
5 collaboration with the department of psychiatry and behavioral
6 sciences, school of social work, and continuum college, shall
7 establish a certificate program in evidence-based practices that have
8 been shown to be effective in treating adolescents and young adults
9 with mental health disorders, including:

10 (i) Evidence-based parenting interventions;

11 (ii) Evidence-based treatments for anxiety and mood disorders;

12 and

13 (iii) Trauma-focused cognitive behavior therapy.

14 (b) The certificate program must be designed for licensed
15 behavioral health care professionals, and mental health professionals
16 as defined in RCW 71.05.020, who wish to receive additional education
17 in evidence-based practices.

18 (3) Participants in the certificate programs under this section
19 are eligible to apply for the health professional loan repayment and
20 scholarship program under chapter 28B.115 RCW.

21 **Sec. 7.** RCW 28B.20.445 and 2018 c 175 s 11 are each amended to
22 read as follows:

23 Subject to the availability of amounts appropriated for this
24 specific purpose, the child and adolescent psychiatry residency
25 program at the University of Washington shall offer ~~((one))~~ two
26 additional twenty-four month residency positions that ~~((is))~~ are
27 approved by the accreditation council for graduate medical education
28 to ~~((one))~~ two residents specializing in child and adolescent
29 psychiatry. The ~~((residency))~~ positions must each include a minimum
30 of ~~((twelve))~~ eighteen months of training in settings where
31 children's mental health services are provided under the supervision
32 of experienced psychiatric consultants and must be located west of
33 the crest of the Cascade mountains.

34 **Sec. 8.** RCW 28B.30.357 and 2017 c 202 s 9 are each amended to
35 read as follows:

36 Subject to the availability of amounts appropriated for this
37 specific purpose, Washington State University shall offer ~~((one))~~ two
38 twenty-four month residency positions that ~~((is))~~ are approved by the

1 accreditation council for graduate medical education to (~~one~~) two
2 residents specializing in child and adolescent psychiatry. The
3 (~~residency~~) positions must each include a minimum of (~~twelve~~)
4 eighteen months of training in settings where children's mental
5 health services are provided under the supervision of experienced
6 psychiatric consultants and must be located east of the crest of the
7 Cascade mountains.

8 NEW SECTION. Sec. 9. A new section is added to chapter 74.09
9 RCW to read as follows:

10 (1) Subject to the availability of amounts appropriated for this
11 specific purpose, the authority shall collaborate with the University
12 of Washington and a professional association of licensed community
13 behavioral health agencies to develop a statewide plan to implement
14 evidence-based coordinated specialty care programs that provide early
15 identification and intervention for psychosis in licensed and
16 certified community behavioral health agencies. The authority must
17 submit the statewide plan to the governor and the legislature by
18 March 1, 2020. The statewide plan must include:

19 (a) Analysis of existing benefit packages, payment rates, and
20 resource gaps, including needs for nonmedicaid resources;

21 (b) Development of a discrete benefit package and case rate for
22 coordinated specialty care;

23 (c) Identification of costs for statewide start-up, training, and
24 community outreach;

25 (d) Determination of the number of coordinated specialty care
26 teams needed in each regional service area; and

27 (e) A timeline for statewide implementation.

28 (2) The authority shall ensure that:

29 (a) At least one coordinated specialty care team is starting up
30 or in operation in each regional service area by October 1, 2020; and

31 (b) Each regional service area has an adequate number of
32 coordinated specialty care teams based on incidence and population
33 across the state by December 31, 2023.

34 (3) This section expires June 30, 2024.

35 NEW SECTION. Sec. 10. (1) Subject to amounts appropriated for
36 this specific purpose, the office of the superintendent of public
37 instruction and the University of Washington school mental health
38 assessment, research, and training center shall jointly convene a

1 work group of educators and researchers to develop a statewide
2 multitiered system of school supports that includes academic, social-
3 emotional, and behavioral supports. The work group must include
4 representatives of: Public K-12 schools; school districts;
5 educational service districts; the office of the superintendent of
6 public instruction; families of K-12 students; the department of
7 children, youth, and families; and public universities. The office of
8 the superintendent of public instruction and the University of
9 Washington school mental health assessment, research, and training
10 center must submit the findings and recommendations of the work group
11 to the governor and the legislature by November 1, 2020.

12 (2) This section expires December 31, 2020.

13 **Sec. 11.** RCW 43.216.745 and 2017 c 202 s 5 are each amended to
14 read as follows:

15 (1)~~(a)~~ Subject to the availability of amounts appropriated for
16 this specific purpose, the department shall establish ~~((a—child~~
17 ~~care))~~ an infant and early childhood mental health consultation
18 program linking ~~((child—care))~~ early learning providers with
19 evidence-based, trauma-informed, and best practice resources
20 regarding caring for infants and young children who present
21 behavioral concerns or symptoms of trauma. The department may
22 contract with an entity with expertise in child development and early
23 learning programs in order to operate the ~~((child—care))~~ consultation
24 program.

25 ~~((2))~~ (b) In establishing and operating the program, the
26 department or contracted entity shall: ~~((a))~~ (i) Assist ~~((child~~
27 ~~care))~~ early learning providers in recognizing the signs and symptoms
28 of trauma in children; ~~((b))~~ (ii) provide support and guidance to
29 ~~((child—care))~~ early learning staff; ~~((c))~~ (iii) consult and
30 coordinate with parents, other caregivers, and experts or
31 practitioners involved with the care and well-being of the young
32 children; and ~~((d))~~ (iv) provide referrals for children who need
33 additional services.

34 (2)(a) Subject to the availability of amounts appropriated for
35 this specific purpose, the department shall develop an infant and
36 early childhood mental health consultation model for children ages
37 birth through five and provide the model to the governor and the
38 legislature by November 1, 2019.

1 (b) In the development of the model, the department must consult
2 with public and private partners, including tribal representatives,
3 to ensure the model meets community needs in a culturally responsive
4 manner.

5 (c) The model must include:

6 (i) A workforce development plan that addresses initial training
7 and ongoing professional development for infant and early childhood
8 mental health consultants in accordance with nationally recognized
9 competencies in the field;

10 (ii) Consultation standards that are informed by current evidence
11 in the field, trauma-informed, and culturally responsive;

12 (iii) A program evaluation protocol for outcome measurement; and

13 (iv) A plan for a data tracking system for consultation
14 activities.

15 (d) The department must phase in service delivery and begin
16 implementation in at least two regions by July 1, 2020, followed by
17 full statewide implementation by December 31, 2023.

18 NEW SECTION. Sec. 12. (1) Subject to the availability of
19 amounts appropriated for this specific purpose, the department of
20 children, youth, and families must implement a trauma-informed early
21 care and education pilot in at least two regions. The pilot must
22 begin by January 1, 2020, and conclude by December 1, 2021, and must:

23 (a) Implement a model for professional development in trauma-
24 informed care for child care and early learning providers;

25 (b) Provide additional targeted social and emotional supports
26 beyond what is typically provided in child care and early learning
27 settings, including health and infant and early childhood mental
28 health consultation;

29 (c) Establish communities of practice for family home child care
30 providers to receive trauma-informed training and coaching,
31 reflective supervision and consultation, and peer-to-peer mentoring
32 and support;

33 (d) Establish enhanced trauma-informed early care and education
34 sites that must receive increased subsidy rates and supports to
35 enable the provision of a more intensive level of care that includes
36 trauma-informed family engagement and smaller teacher-child ratios
37 than what is required in the department of children, youth, and
38 families' licensing rules;

1 (e) Implement trauma-informed practices in early achievers
2 coaching and data collection; and

3 (f) Establish a system for tracking expulsions from child care
4 and early learning settings.

5 (2) By December 1, 2021, the department of children, youth, and
6 families must submit a report to the governor and the appropriate
7 committees of the legislature describing the results of the pilot and
8 recommending whether to continue the pilot or make it permanent.

9 (3) This section expires December 31, 2021.

10 NEW SECTION. **Sec. 13.** A new section is added to chapter 71.34
11 RCW to read as follows:

12 Subject to the availability of amounts appropriated for this
13 specific purpose, the health care authority must provide an online
14 training for behavioral health providers regarding state law and best
15 practices when providing behavioral health services to children,
16 youth, and families. The training must be free for providers and must
17 include information related to parent-initiated treatment, minor-
18 initiated treatment, and other treatment services provided under this
19 chapter.

20 NEW SECTION. **Sec. 14.** A new section is added to chapter 71.34
21 RCW to read as follows:

22 (1) Subject to the availability of amounts appropriated for this
23 specific purpose, the authority must conduct an annual survey of a
24 sample group of parents, youth, and behavioral health providers to
25 measure the impacts of implementing policies resulting from the
26 enactment of chapter . . . (House Bill No. 1874), Laws of 2019
27 (including any later amendments or substitutes) during the first
28 three years of implementation. The first survey must be complete by
29 July 1, 2020, followed by subsequent annual surveys completed by July
30 1, 2021, and by July 1, 2022. The authority must report on the
31 results of the surveys annually to the governor and the legislature
32 beginning November 1, 2020. The final report is due November 1, 2022,
33 and must include any recommendations for statutory changes identified
34 as needed based on survey results.

35 (2) This section expires December 31, 2022.

36 NEW SECTION. **Sec. 15.** Section 14 of this act takes effect only
37 if chapter . . . (House Bill No. 1874), Laws of 2019 (including any

1 later amendments or substitutes) is enacted by the effective date of
2 this section.

3 NEW SECTION. **Sec. 16.** 2018 c 175 s 12 (uncodified) is repealed.

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