

An Act establishing a child and adolescent behavioral health implementation coordinating council
[H.1979](#) (Representative Decker)

What problem
does this bill
address?

The youth behavioral health crisis threatens the immediate and long-term well-being of students, families, and school communities. Today, significant disparities in access, quality, and delivery of school-based behavioral health services exist throughout the state. Schools lack the guidance and resources necessary to address the behavioral health challenges facing their school communities.

What
difference will
this bill make?

This bill addresses root causes of inequitable access to **Comprehensive School Behavioral Health (CSBH)** by establishing systems and protocols for ensuring the behavioral health needs of all students, their families, and school staff are supported. This bill has two key elements:

1. **Establishment of a school based behavioral health implementation coordinating council.** Chaired by the Department of Mental Health, the Department of Elementary and Secondary Education, and the Behavioral Health for Integrated Resources for Children Project at UMass, *the council is responsible for developing a 3-year plan for the statewide implementation of CSBH.* This State-level planning effort must include guidance and support to districts, as well as clear goals and benchmarks for monitoring and evaluating key elements of CSBH implementation.
2. **Implementation of CSBH in each school district within three years.** The bill requires each school district to implement a CSBH system using a multi-tiered system of supports (MTSS) framework within three years. MTSS is an evidence-based, systemic practice that supports a rapid response to students' needs.

Why is this bill
needed now?

The school setting provides an unparalleled opportunity to support the development and well-being of all students. The Commonwealth must ensure that all schools have the resources to support our children to succeed academically, socially and emotionally. There is clear evidence that CSBH models can reduce emergency room visits, hospitalizations, special education referrals, school disciplinary actions, and can increase school attendance rates.