101ST GENERAL ASSEMBLY

State of Illinois

2019 and 2020

HB2152

by Rep. Emanuel Chris Welch

SYNOPSIS AS INTRODUCED:

New Act

Creates the Mental Health Early Action on Campus Act. Provides for intent, legislative findings, purposes of the Act, and definitions. Provides that to raise mental health awareness on college campuses, each public college or university in this State must complete specified tasks. Provides that the board of trustees of each public college or university must designate an expert panel to develop and implement policies and procedures that (i) advise students, faculty, and staff on the proper procedures for identifying and addressing the needs of students exhibiting symptoms of mental health conditions, (ii) promote understanding of the rules of Section 504 of the federal Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1990 to increase knowledge and understanding of student protections under the law, and (iii) provide training if appropriate. Provides that because peer support programs may be beneficial in improving the emotional well-being of the student population, each public college or university must develop and implement a peer support program utilizing student peers to support individuals living with mental health conditions on campus; specifies best practices for the peer support programs. Provides that each public college or university must form strategic partnerships with local mental health service providers to improve overall campus mental wellness and augment on-campus capacity; specifies what the partnerships must include. Requires the Board of Higher Education to develop a Technical Assistance Center; specifies the duties of the Center. Requires each public college or university to evaluate the required programs under the Act using specified criteria. Effective July 1, 2020.

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FISCAL NOTE ACT MAY APPLY STATE MANDATES ACT MAY REQUIRE REIMBURSEMENT

AN ACT concerning education.

Be it enacted by the People of the State of Illinois, 2 represented in the General Assembly: 3

4 Section 1. Short title. This Act may be cited as the Mental Health Early Action on Campus Act. 5

6 Section 5. Intent. This Act is intended to address gaps in 7 mental health services on college campuses across Illinois, 8 including both 2-year and 4-year institutions, through 9 training, peer support, and community-campus partnerships.

10 Section 10. Findings. The General Assembly finds all of the following: 11

(1) Mental health is a pressing and growing issue on 12 13 college campuses across this State and the country. A recent national survey found that one in 4 college students 14 15 are treated for or diagnosed with a mental health condition and one in 5 has considered suicide. 16

(2) About 75% of all mental health conditions start by 17 18 age 24, with higher rates of diagnosed disorders in college-aged students. College counseling center directors 19 20 believe mental health conditions among students on their 21 campuses are increasing, signaling a growing issue that must be addressed. 22

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(3) Students who come from low-income households are 1 2 more likely to have a mental health condition.

(4) Between 2007 and 2017, the diagnosis rate of 3 college students increased from 22% to 36%, indicating a 4 5 higher need for services. Treatment rates over the same 6 period increased by 15%.

7 (5) Young adults are less likely to receive mental 8 health support than any other age group. College campuses 9 can play a big role in addressing this challenge. Over 70% 10 of Illinois high school graduates enroll in a postsecondary 11 program shortly after graduation.

12 (6) College-aged students are more accepting of mental 13 health services than the general population, but most 14 struggle accessing them. An overwhelming 96% of college 15 students reported they would provide support to peers whom they knew were thinking about suicide. 16

17 (7) Many students lack knowledge of mental health signs and symptoms and do not know how to help or where to refer 18 their friends for services. 19

20 (8) Services offered by most college campuses are limited in scope and capacity, with 67% of 21 campus 22 counseling center directors saying that their campus 23 psychiatric service capacity is inadequate or does not meet 24 student demand.

25 (9) Combined with a dearth of available services, the 26 vast majority of students do not seek out services, and 1 many students who complete a suicide never received 2 on-campus services. Paying for community-based services is 3 an issue for about half of students. Combining insufficient 4 on-campus services with unaffordable community resources 5 leaves students on their own.

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6 Section 15. Purpose. The purpose of this Act is to 7 accomplish all of the following:

8 (1) Further identify students with mental health needs
9 and connect them to services.

10 (2) Increase access to support services on college11 campuses.

(3) Increase access to clinical mental health services
on college campuses and in the surrounding communities for
college students.

15 (4) Empower students through peer-to-peer support and16 training on identifying mental health needs and resources.

17 (5) Reduce administrative policies that put an undue
18 burden on students seeking leave for their mental health
19 conditions through technical assistance and training.

20 Section 20. Definitions. As used in this Act:

21 "Advisor" means a staff member who provides academic,22 professional, and personal support to students.

23 "Campus security" means a law enforcement officer who has 24 completed his or her probationary period and is employed as a security officer or campus police officer by a public college
 or university.

3 "Linkage agreement" means a formal agreement between a 4 public college or university and an off-campus mental health 5 provider or agency.

"Mental health condition" means a symptom consistent with a
mental illness, as defined under Section 1-129 of the Mental
Health and Developmental Disabilities Code, or a diagnosed
mental illness.

10 "Public college or university" means any public community 11 college subject to the Public Community College Act, the 12 University of Illinois, Southern Illinois University, Chicago 13 State University, Eastern Illinois University, Governors State University, Illinois State University, Northeastern Illinois 14 University, Northern Illinois University, Western Illinois 15 16 University, and any other public university, college, or 17 community college now or hereafter established or authorized by the General Assembly. 18

19 "Recovery model" means the model developed by the federal 20 Substance Abuse and Mental Health Services Administration that 21 defines the process of recovery and includes the 4 major 22 dimensions that support a life in recovery, which are health, 23 home, purpose, and community.

24 "Resident assistant" means a student who is responsible for 25 supervising and assisting other, typically younger, students 26 who live in the same student housing facility.

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1 "Telehealth" means the evaluation, diagnosis, or 2 interpretation of electronically transmitted patient-specific data between a remote location and a licensed health care 3 professional that generates interaction or 4 treatment 5 recommendations. "Telehealth" includes telemedicine and the delivery of health care services provided by an interactive 6 telecommunications system, as defined in subsection (a) of 7 Section 356z.22 of the Illinois Insurance Code. 8

9 Section 25. Awareness. To raise mental health awareness on
10 college campuses, each public college or university must do all
11 of the following:

12 (1) Develop and implement an annual student
13 orientation session aimed at raising awareness about
14 mental health conditions.

15 (2) Assess courses and seminars available to students 16 through their regular academic experiences and implement 17 mental health awareness curricula if opportunities for 18 integration exist.

19 (3) Create and feature a page on its website or mobile 20 application with information dedicated solely to the 21 mental health resources available to students at the public 22 college or university and in the surrounding community.

(4) Distribute messages related to mental health
 resources that encourage help-seeking behavior through the
 online learning platform of the public college or

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university during high stress periods of the academic year,
 including, but not limited to, midterm or final
 examinations. These stigma-reducing strategies must be
 based on documented best practices.

5 (5) Three years after the effective date of this Act, 6 implement an online screening tool to raise awareness and 7 establish a mechanism to link or refer students of the 8 public college or university to services. Screenings and 9 resources must be available year round for students and, at 10 a minimum, must (i) include validated screening tools for 11 depression, an anxiety disorder, an eating disorder, 12 substance use, alcohol-use disorder, post-traumatic stress disorder, and bipolar disorder, (ii) provide resources for 13 14 immediate connection to services, if indicated, including 15 emergency resources, (iii) provide general information 16 about all mental health-related resources available to 17 students of the public college or university, and (iv) 18 function anonymously.

19 (6) At least once per term and at times of high 20 academic stress, including midterm or final examinations, 21 provide students information regarding online screenings 22 and resources.

23 Section 30. Training.

(a) The board of trustees of each public college oruniversity must designate an expert panel to develop and

implement policies and procedures that (i) advise students, 1 2 faculty, and staff on the proper procedures for identifying and 3 addressing the needs of students exhibiting symptoms of mental health conditions, (ii) promote understanding of the rules of 4 5 Section 504 of the federal Rehabilitation Act of 1973 and the federal Americans with Disabilities Act of 1990 to increase 6 7 knowledge and understanding of student protections under the 8 law, and (iii) provide training if appropriate.

9 (b) The Technical Assistance Center under Section 45 shall 10 set initial standards for policies and procedures referenced in 11 subsection (a) to ensure statewide consistency.

(c) All resident assistants in a student housing facility, advisors, and campus security of a public college or university must participate in a national Mental Health First Aid training course or a similar program prior to the commencement of their duties. Training must include the policies and procedures developed by the public college or university referenced under subsection (a).

19 Section 35. Peer support.

(a) Because peer support programs may be beneficial in
improving the emotional well-being of the student population,
each public college or university must develop and implement a
peer support program utilizing student peers to support
individuals living with mental health conditions on campus.
Peer support programs may be housed within resident assistant

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programs, counseling centers, or wellness centers on campus.

2 (b) Peer support programs must utilize best practices for peer support, including, but not limited to, (i) utilizing the 3 tenets of the recovery model for mental health, (ii) adequate 4 5 planning and preparation, including standardizing guidance and practices, identifying needs of the target population, and 6 aligning program goals to meet those needs, (iii) clearly 7 articulating policies, especially around role boundaries and 8 9 confidentiality, (iv) systematic screening with defined 10 selection criteria for peer supporters, such as communication 11 skills, leadership ability, character, previous experience or 12 training, and ability to serve as a positive role model, (v) 13 identifying benefits from peer status, such as experiential 14 learning, social support, leadership, and improved 15 self-confidence, (vi) continuing education for peer supporters 16 to support each other and improve peer support skills, and 17 (vii) flexibility in availability by offering services through drop-in immediate support and the ability to book appointments. 18

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Section 40. Local partnerships.

(a) Each public college or university must form strategic
partnerships with local mental health service providers to
improve overall campus mental wellness and augment on-campus
capacity. The strategic partnerships must include linkage
agreements with off-campus mental health service providers
that establish a foundation for referrals for students when

needs cannot be met on campus due to capacity or preference of 1 2 the student. The strategic partnerships must also include (i) 3 avenues for on-campus and off-campus mental health service providers to increase visibility to students via marketing and 4 5 outreach, (ii) opportunities to engage the student body through student outreach initiatives like mindfulness workshops or 6 campus-wide wellness fairs, and (iii) opportunities to support 7 8 awareness and training requirements under this Act.

9 Through combination of on-campus (b) a capacity, off-campus linkage agreements with mental health service 10 11 providers, and contracted telehealth therapy services, each 12 public college or university must maintain a ratio of one 13 clinical, non-student staff member to 1,250 students. If 14 linkage agreements are used, the agreements must include the 15 capacity of students providers are expected to serve within the 16 agency. Five years after the effective date of this Act, each 17 public college or university must maintain a ratio of one clinical, non-student staff member to 1,000 students. Funding 18 made available through this Act must be used by a public 19 20 college or university to build on-campus clinical capacities under this subsection. 21

(c) Each public college or university must work with local resources, such as on-campus mental health counseling centers or wellness centers, local mental health service providers, or non-providers, such as affiliates of the National Alliance on Mental Illness, and any other resources to meet the awareness

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and training requirements under Sections 25 and 30 of this Act.

2 Section 45. Technical Assistance Center. The Board of 3 Higher Education must develop a Technical Assistance Center 4 that is responsible for all of the following:

5 (1) Developing standardized policies for medical leave 6 related to mental health conditions for students of a 7 public college or university, which may be adopted by the 8 public college or university.

9 (2) Providing tailored support to public colleges or 10 universities in reviewing policies related to students 11 living with mental health conditions and their academic 12 standing.

(3) Establishing initial standards for policies and
 procedures under subsection (a) of Section 30.

(4) Disseminating best practices around peer support
 programs, including widely accepted selection criteria for
 individuals serving in a peer support role.

18 (5) Developing statewide standards and best practices
19 for partnerships between local mental health agencies and
20 college campuses across this State.

(6) Collecting, analyzing, and disseminating data
 related to mental health needs and academic engagement
 across this State.

(7) Housing data collected by each public college or
 university related to Section 50 and analyzing and

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disseminating best practices to each public college or
 university based on that data.

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3 (8) Monitoring and evaluating linkage agreements
4 required under Section 40 to ensure required capacity is
5 met by each public college or university.

6 (9) Facilitating a learning community across all 7 public colleges or universities to support capacity 8 building and learning across those institutions.

9 Section 50. Evaluation. Each public college or university 10 must evaluate the following programs under this Act in the 11 following manner:

12 (1) Awareness and training programs under Sections 25 and 30 must be monitored for effectiveness and quality by 13 14 the public college or university. Monitoring measures 15 shall include, but are not limited to, (i) increased 16 understanding of mental health conditions, (ii) reduced stigma toward mental health conditions, (iii) increased 17 18 understanding of mental health resources available to 19 students, (iv) increased understanding of resources for mental health emergencies available to students, and (v) 20 21 viewing each mental health resource website or mobile 22 application of the public college or university.

(2) Peer support programs under Section 35 must be
 monitored for effectiveness and quality by the public
 college or university. Monitoring measures shall include,

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but are not limited to, (i) improved symptomatology, (ii) 1 2 needed, connection to additional services, if (iii) 3 student satisfaction, (iv) wait time for drop-in appointments, (v) wait time for scheduled appointments, 4 5 and (vi) satisfaction with the training curriculum for peer 6 supporters.

7 (3) Local partnership programs under Section 40 must be 8 monitored for effectiveness and quality by the public 9 college or university. Monitoring measures shall include, 10 but are not limited to, (i) wait time for drop-in 11 appointments for on-campus or off-campus telehealth 12 therapy providers, (ii) wait time for scheduled 13 off-campus appointments for on-campus or telehealth 14 therapy providers, (iii) the number of linkage agreements 15 and contracts in place based on student population, (iv) 16 student satisfaction with on-campus or off-campus 17 telehealth therapy providers, (v) range of treatment models offered to students, (vi) average length of stay in 18 19 treatment, (vii) number and range of student outreach initiatives, such as telehealth mindfulness workshops or 20 campus-wide wellness fairs, and (viii) number of students 21 22 being served annually.

23 Section 55. Funding. This Act is subject to appropriation, 24 and no Section of this Act may be funded by new student fees. 25 Public colleges or universities may seek federal funding or HB2152 - 13 - LRB101 08528 AXK 53606 b
private grants, if available, to support the provisions of this
Act.

3 Section 99. Effective date. This Act takes effect July 1,
4 2020.