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1 AMENDMENT TO HOUSE BILL 2152

2 AMENDMENT NO. _____. Amend House Bill 2152 by replacing
3 everything after the enacting clause with the following:

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

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
11 following:

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

1 and one in 5 has considered suicide.

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

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

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

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

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

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

1 (8) Services offered by most college campuses are
2 limited in scope and capacity, with 67% of campus
3 counseling center directors saying that their campus
4 psychiatric service capacity is inadequate or does not meet
5 student demand.

6 (9) Combined with a dearth of available services, the
7 vast majority of students do not seek out services, and
8 many students who complete a suicide never received
9 on-campus services. Paying for community-based services is
10 an issue for about half of students. Combining insufficient
11 on-campus services with unaffordable community resources
12 leaves students on their own.

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

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

17 (2) Increase access to support services on college
18 campuses.

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

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

24 (5) Reduce administrative policies that put an undue
25 burden on students seeking leave for their mental health

1 conditions through technical assistance and training.

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

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

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

9 "Linkage agreement" means a formal agreement between a
10 public college or university and an off-campus mental health
11 provider or agency.

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

16 "Public college or university" means any public community
17 college subject to the Public Community College Act, the
18 University of Illinois, Southern Illinois University, Chicago
19 State University, Eastern Illinois University, Governors State
20 University, Illinois State University, Northeastern Illinois
21 University, Northern Illinois University, Western Illinois
22 University, and any other public university, college, or
23 community college now or hereafter established or authorized by
24 the General Assembly.

25 "Recovery model" means the model developed by the federal

1 Substance Abuse and Mental Health Services Administration that
2 defines the process of recovery and includes the 4 major
3 dimensions that support a life in recovery, which are health,
4 home, purpose, and community.

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

8 "Telehealth" means the evaluation, diagnosis, or
9 interpretation of electronically transmitted patient-specific
10 data between a remote location and a licensed health care
11 professional that generates interaction or treatment
12 recommendations. "Telehealth" includes telemedicine and the
13 delivery of health care services provided by an interactive
14 telecommunications system, as defined in subsection (a) of
15 Section 356z.22 of the Illinois Insurance Code.

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

19 (1) Develop and implement an annual student
20 orientation session aimed at raising awareness about
21 mental health conditions.

22 (2) Assess courses and seminars available to students
23 through their regular academic experiences and implement
24 mental health awareness curricula if opportunities for
25 integration exist.

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

5 (4) Distribute messages related to mental health
6 resources that encourage help-seeking behavior through the
7 online learning platform of the public college or
8 university during high stress periods of the academic year,
9 including, but not limited to, midterm or final
10 examinations. These stigma-reducing strategies must be
11 based on documented best practices.

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

26 (6) At least once per term and at times of high

1 academic stress, including midterm or final examinations,
2 provide students information regarding online screenings
3 and resources.

4 Section 30. Training.

5 (a) The board of trustees of each public college or
6 university must designate an expert panel to develop and
7 implement policies and procedures that (i) advise students,
8 faculty, and staff on the proper procedures for identifying and
9 addressing the needs of students exhibiting symptoms of mental
10 health conditions, (ii) promote understanding of the rules of
11 Section 504 of the federal Rehabilitation Act of 1973 and the
12 federal Americans with Disabilities Act of 1990 to increase
13 knowledge and understanding of student protections under the
14 law, and (iii) provide training if appropriate.

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

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

1 Section 35. Peer support.

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

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

1 Section 40. Local partnerships.

2 (a) Each public college or university must form strategic
3 partnerships with local mental health service providers to
4 improve overall campus mental wellness and augment on-campus
5 capacity. The strategic partnerships must include linkage
6 agreements with off-campus mental health service providers
7 that establish a foundation for referrals for students when
8 needs cannot be met on campus due to capacity or preference of
9 the student. The strategic partnerships must also include (i)
10 avenues for on-campus and off-campus mental health service
11 providers to increase visibility to students via marketing and
12 outreach, (ii) opportunities to engage the student body through
13 student outreach initiatives like mindfulness workshops or
14 campus-wide wellness fairs, and (iii) opportunities to support
15 awareness and training requirements under this Act.

16 (b) Through a combination of on-campus capacity,
17 off-campus linkage agreements with mental health service
18 providers, and contracted telehealth therapy services, each
19 public college or university shall attempt to meet a benchmark
20 ratio of one clinical, non-student staff member to 1,250
21 students. If linkage agreements are used, the agreements must
22 include the capacity of students providers are expected to
23 serve within the agency. Two years after the effective date of
24 this Act, and once every 5 years thereafter, the Technical
25 Assistance Center developed under Section 45 must propose to
26 the General Assembly an updated ratio based on actual ratios in

1 this State and any new information related to appropriate
2 benchmarks for clinician-to-student ratios. The updated
3 benchmark must represent a ratio of no less than one clinical,
4 non-student staff member to 1,250 students.

5 (c) Each public college or university must work with local
6 resources, such as on-campus mental health counseling centers
7 or wellness centers, local mental health service providers, or
8 non-providers, such as affiliates of the National Alliance on
9 Mental Illness, and any other resources to meet the awareness
10 and training requirements under Sections 25 and 30 of this Act.

11 Section 45. Technical Assistance Center. The Board of
12 Higher Education must develop a Technical Assistance Center
13 that is responsible for all of the following:

14 (1) Developing standardized policies for medical leave
15 related to mental health conditions for students of a
16 public college or university, which may be adopted by the
17 public college or university.

18 (2) Providing tailored support to public colleges or
19 universities in reviewing policies related to students
20 living with mental health conditions and their academic
21 standing.

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

24 (4) Disseminating best practices around peer support
25 programs, including widely accepted selection criteria for

1 individuals serving in a peer support role.

2 (5) Developing statewide standards and best practices
3 for partnerships between local mental health agencies and
4 college campuses across this State.

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

8 (7) Housing data collected by each public college or
9 university related to Section 50 and analyzing and
10 disseminating best practices to each public college or
11 university and the public based on that data.

12 (8) Monitoring and evaluating linkage agreements under
13 Section 40 to ensure capacity is met by each public college
14 or university.

15 (9) Facilitating a learning community across all
16 public colleges or universities to support capacity
17 building and learning across those institutions.

18 Section 50. Evaluation. Each public college or university
19 must evaluate the following programs under this Act in the
20 following manner:

21 (1) Awareness and training programs under Sections 25
22 and 30 must be monitored for effectiveness and quality by
23 the public college or university. Monitoring measures
24 shall include, but are not limited to: (i) increased
25 understanding of mental health conditions, (ii) reduced

1 stigma toward mental health conditions, (iii) increased
2 understanding of mental health resources available to
3 students, (iv) increased understanding of resources for
4 mental health emergencies available to students, and (v)
5 viewing each mental health resource website or mobile
6 application of the public college or university.

7 (2) Peer support programs under Section 35 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) improved symptomatology, (ii)
11 if needed, connection to additional services, (iii)
12 student satisfaction, (iv) wait time for drop-in
13 appointments, (v) wait time for scheduled appointments,
14 and (vi) satisfaction with the training curriculum for peer
15 supporters.

16 (3) Local partnership programs under Section 40 must be
17 monitored for effectiveness and quality by the public
18 college or university. Monitoring measures shall include,
19 but are not limited to: (i) wait time for drop-in
20 appointments for on-campus or off-campus telehealth
21 therapy providers, (ii) wait time for scheduled
22 appointments for on-campus or off-campus telehealth
23 therapy providers, (iii) the ratio of clinical,
24 non-student staff to student population and the number of
25 linkage agreements and contracts in place based on student
26 population, (iv) student satisfaction with on-campus or

1 off-campus telehealth therapy providers, (v) range of
2 treatment models offered to students, (vi) average length
3 of stay in treatment, (vii) number and range of student
4 outreach initiatives, such as telehealth mindfulness
5 workshops or campus-wide wellness fairs, and (viii) number
6 of students being served annually.

7 Section 55. Funding. This Act is subject to appropriation
8 in an amount that is no less than that which is estimated by
9 the Commission on Government Forecasting and Accountability,
10 in conjunction with the Illinois Community College Board and
11 the Board of Higher Education, to be necessary to implement
12 this Act. The initial estimation amount must be provided by the
13 Commission no later than December 31, 2019. Any appropriation
14 provided in advance of this initial estimation may be used for
15 planning purposes. No Section of this Act may be funded by
16 student fees created on or after July 1, 2020. Public colleges
17 or universities may seek federal funding or private grants, if
18 available, to support the provisions of this Act.

19 Section 99. Effective date. This Act takes effect July 1,
20 2020, except that Section 55 and this Section take effect upon
21 becoming law.".