



BILL: House Bill 657

TITLE: Public Schools - Standardized Behavioral Health Questionnaire for Students -

Development and Implementation

POSITION: SUPPORT WITH AMENDMENTS

DATE: April 5, 2022

COMMITTEE: Education, Health, and Environmental Affairs

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The Maryland Association of Boards of Education (MABE) supports House Bill 657 with amendments to streamline the development of the behavioral health screenings intended to be developed and administered in accordance with the Blueprint for Maryland's Future Act.

MABE recognizes that this bill is a well-intended effort to assist local school systems in meeting the behavioral health needs of students through the use of screening tools required to be developed under the Blueprint for Maryland's Future Act. "Behavioral health services" are defined as trauma-informed prevention, intervention, and treatment services for the social-emotional, psychological, and behavioral health of students, including mental health and substance use disorders." MABE firmly believes that identifying and connecting students with behavioral health needs with appropriate services must be of the highest priority for local school systems. Importantly, the Blueprint law includes this responsibility as one of many assigned to local behavioral health coordinators, who are to be supported in their work at the local level by both the Maryland State Department of Education (MSDE) and Maryland Department of Health (MDH).

In this light, MABE requests an amendment to have the standardized screening tool, or questionnaire, intended in the bill to be developed by a stakeholder group, to be developed instead by the local coordinators with the assistance of MSDE and MDH. Under current law, but not clearly indicated in the bill itself as drafted, Section 7-447 already specifies roles for each of these departments to assist the local behavioral health service coordinators. Assisting school systems in crafting the standardized questionnaire envisioned by this bill would be aligned with the current law, and be much less labor intensive than the stakeholder group proposed by this bill.

To be clear, Section 7-447(d) specifically requires MSDE to "dedicate staff to coordinate with behavioral health services coordinators and staff in local education agencies" to work with school—based behavioral health providers and to assist in expanding services through coordinated community supports partnerships. Similarly, MDH must also designate an employee to be the primary contact for school behavioral health services to work with school—based behavioral health providers and to assist in expanding services through coordinated community supports partnerships. The Blueprint law even requires MSDE staff to "be responsible for close collaboration with other youth—serving agencies, the Maryland Consortium of Coordinated Community Supports, and the Maryland Longitudinal Data System Center to establish: (i) Shared goals; (ii) Processes to collect and share data; and (iii) Ways to leverage and blend funding to support behavioral health in schools and community—based settings."

In these ways, MABE believes that the Blueprint already contains the process for State agency collaboration in supporting local behavioral health services coordinators in all of their responsibilities, including the development of the screening tool to identify students with behavioral health services needs.

For these reasons, MABE requests a favorable report on House Bill 657 with the amendment described above.