

March 2, 2019

Dear Committee Members:

NAMI Minnesota has reviewed the Governor's education policy bill. We have great concerns with the section on School Safety Assessment Teams. We raised similar concerns last session as well.

We don't feel that it is appropriate to lump violence to others and suicide together. The issues are very different and should be handled differently. Suicide is a health issue not a violence issue. A student who is suicidal needs to be brought to a mental health professional or the emergency department, not referred to a school safety assessment team who then reports to the superintendent, who reports to the parent. This is a very real health issue and needs to be addressed in a timely manner by mental health professionals. To obtain very accurate and evidence-based practices on how to deal with suicidal thoughts, schools should be consulting with the Department of Health, not the Department of Public Safety.

We would recommend that everywhere in this section of the bill that references "threat to the safety of the school, staff, or students, or self" that the "or self" be deleted. It appears in several places including lines 7.22, 8.13, 8.20, 8.28, and 8.31. The entire section on 8.28 – 8.32 should be deleted. While there is reference on line 8.29 about a district's suicide prevention policy or protocol, we believe that more work needs to be done with districts on this issue including postvention. If you want to include something on suicide, we would prefer the following language taken from the Suicide Prevention Resource Center recommendations:

School districts are encouraged to consult with the Minnesota Department of Health to develop comprehensive suicide prevention policies that include protocols for helping students who are at risk of suicide or who attempt suicide at school, teacher and staff training, student and parent education, and protocols for responding to the suicide of a student or other member of the school community.

On line 7.27 it's important to note that "mental health centers" have a specific meaning in statute that is different than a "mental health provider." You may want to change the language to "mental health provider" to be broader. Also, it's important to note that if families have insurance, they should first check their provider network so that they are not paying out of network co-payments, which are higher.

Throughout this section the word "counseling" is used. Often in the mental health world, especially as it relates to students, we use the word "therapy" instead to differentiate between therapeutic interventions and academic counseling. On line 8.30 there is no alternative to a





school-linked mental health provider or other support personnel if none are available. There is no mention of a mobile mental health crisis team.

NAMI Minnesota recommends simply deleting any reference to suicides in this section of the bill. It simply does not fit. If a student it homicidal and suicidal, their needs will be addressed under this bill. But if a student is only suicidal, they should not be included under the school safety assessment teams.

We do support the language regarding nonexclusionary disciplinary policies and practices. When students, particularly younger ones, are suspended they do not learn anything – and not just academics but how to address dysregulation, anger, impulsiveness and other behaviors. Ensuring that a student is connected with programs that could address underlying issues is key to creating changes in behaviors.

We would note on line 13.19 there is a reference to "school-based" when we call it "school-linked" mental health services. There is some confusion on line 13.23. The district won't know what is available to the family – because insurance networks may be narrow - especially for mental health. The district could post low-cost or sliding fee mental health resources instead. In districts where there are more providers, such as Minneapolis, would they be required to list all the mental health professionals in the district? It could be a very long list.

Thank you for taking our positions into consideration as you discuss the Governor's policy bill.

Sincerely,

Sue Abderholden, MPH

5 ASAM

Executive Director