
OLR Bill Analysis

SB 2 (File 77, as amended by Senate "A")*

AN ACT CONCERNING THE MENTAL, PHYSICAL AND EMOTIONAL WELLNESS OF CHILDREN.

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§§ 10-11 & 21 — OFFICE OF THE BEHAVIORAL HEALTH ADVOCATE AND ADVISORY COMMITTEE

Establishes the Office of the Behavioral Health Advocate to advocate for and assist behavioral and mental health care providers and (2) Behavioral Health Advocate Advisory Committee to review and assess the office's performance

§ 15 — TASK FORCE TO STUDY CHILDREN'S NEEDS

Expands the duties of the Task Force to Study Children's Needs to include (1) reviewing and analyzing certain programs that received pandemic-related federal funding, (2) making recommendations on which programs should receive a more permanent funding structure and (3) conducting a needs assessment focused on children and individuals who were enrolled in a Connecticut high school and a member of the classes graduating from 2020-2023

§ 16 — DEPARTMENT OF SOCIAL SERVICES (DSS) HUSKY HEALTH CHILD ENROLLMENT

Requires DSS, for FY 24, to hire temporary and part-time employees to collaborate with nonprofit organizations to identify and enroll eligible children in the HUSKY Health program

§ 17 — SERVICES FOR AT-RISK TEENAGE STUDENTS

Requires the State Department of Education (SDE), for FY 24, to award a grant to, and collaborate with, a nonprofit organization specializing in identifying and providing services to certain at-risk teenage students allows SDE, within available appropriations, to hire one full-time employee to implement the bill's provisions

§ 18 — LEGAL REPRESENTATION FOR CHILDREN IN CERTAIN SUPERIOR COURT PROCEEDINGS

Requires counsel assigned or appointed by the chief public defender's office or the court to represent a child in a child abuse or neglect case in Superior Court to continue to represent the child for the duration of the court proceedings

§ 19 — STUDY OF COMMUNITY-BASED BEREAVEMENT AND GRIEF COUNSELOR ORGANIZATIONS FOR CHILDREN AND FAMILIES

Requires CWCSEO, in collaboration with the Social and Emotional Learning and School Climate Advisory Collaborative and at least one community-based bereavement and grief counseling resource center serving children and families, to conduct a study of community-based bereavement and counseling resource centers serving children and families.

§ 20 — PLAY-BASED LEARNING

Requires schools to provide play-based learning for kindergarten and preschool students; requires school boards to permit a teacher to utilize play-based learning for grades one to five; adds it to educator professional development

§ 22 — AUTISM SPECTRUM DISORDER ADVISORY COUNCIL

Expands the Autism Spectrum Disorder Advisory Council's duties to include (1) identifying strategies and methods of outreach and coordination of services for racial minority groups and (2) identifying and recommending updates to existing state guidelines for early screening and intervention

§ 23 — SOCIAL AND EMOTIONAL LEARNING AND SCHOOL CLIMATE ADVISORY COLLABORATIVE

Requires the Social and Emotional Learning and School Climate Advisory Collaborative to include in their annual report to the Children's and Education Committee recommendations concerning ways to promote the social and emotional development of young children

*Senate Amendment "A" strikes the underlying bill and replaces it with provisions that make several changes to the underlying bill. It eliminates the provision that would have allowed a municipality to designate a municipal public library a "sanctuary library" and instead prohibits any principal public library from receiving state grants if it fails to maintain and adhere to certain collection policies approved by its governing body.

It also makes changes that address (1) licensure of social workers and other professionals, (2) translation services for Birth-to-Three individualized family service plans, (3) paid sick leave related to certain family violence and sexual assault victims, (4) a pandemic-related study by the Task Force to Study Children's Needs, (5) Department of Social Services (DSS) funding related to HUSKY Health program eligibility and enrollment, and (6) State Department of Education (SDE) services for at-risk teenage students.

The amendment also adds provisions that (1) establish the Behavioral Health Advocate Advisory Committee; (2) require appointed or assigned counsel representing children in abuse or neglect cases to continue for the duration of the court proceedings; (3) require the Commission on Women, Children, Seniors, Equity, and Opportunity (CWCSEO) to study community-based bereavement and counseling resource centers; (4) allow play-based learning; (5) expand the Autism Spectrum Disorder Advisory Council's duties; and (6) require the Social and Emotional Learning and School Climate Advisory Collaborative to make recommendations on ways to promote the social and emotional

development of young children.

EFFECTIVE DATE: July 1, 2023, unless stated otherwise below.

§§ 1 & 12-14 — LICENSURE OF SOCIAL WORKERS AND OTHER PROFESSIONALS

Requires the Department of Public Health to hire a full-time employee, by January 1, 2024, to assist in licensing clinical and master social workers; generally reduces initial and renewal license fees for social workers, marital and family therapists, and professional counselors

Initial and Renewal License Fees (§§ 12-14)

The bill reduces the initial licensing fees for social workers, marital and family therapists, and professional counselors as follows:

1. from \$315 to \$200 for clinical social workers,
2. from \$220 to \$125 for master social workers,
3. from \$315 to \$200 for marital and family therapists and professional counselors, and
4. from \$220 to \$125 for professional counselor associates.

The bill also changes the renewal fees for these licenses as follows:

1. increases, from \$195 to \$200, renewal fees for clinical social workers and professional counselors and
2. reduces, from \$195 to \$125, renewal fees for master social workers and professional counselor associates.

License Renewal Frequency for Marital and Family Therapist Associates (§ 13)

Under current law, a license issued to a marital and family therapist associate is valid for two years and may be renewed once for an additional two years. The bill changes the renewal frequency of such licenses as follows:

1. a license issued before July 1, 2023, must expire on or before 24 months after the issue date and may not be renewed more than two times and

2. a license issued after July 1, 2023, may not be renewed more than three times for an additional year.

Department of Public Health (DPH) Staffing (§ 1)

For FY 24, the bill requires DPH, by January 1, 2024, to hire a full-time employee to assist in licensing social workers.

§ 2 — PRINCIPAL PUBLIC LIBRARY GRANTS

Prohibits any principal public library from receiving state grants if it does not maintain and adhere to certain collection policies approved by the library's governing body; requires a principal public library's collection reconsideration policy to offer residents a clear process to request a reconsideration of library materials; specifies that the reconsideration policy governs if there is a book challenge

The bill prohibits any principal public library from receiving a state grant unless it maintains and adheres to collection development, collection management, and collection reconsideration policies that have been approved by the library's governing body. The collection reconsideration policy must offer residents a clear process to request a reconsideration of library materials. The bill specifies that if there is a book challenge, these policies must govern.

§§ 3-4 — PAYMENT TO BIRTH-TO-THREE PROGRAM EARLY INTERVENTION SERVICE PROVIDERS

Makes permanent the \$200 general administrative payment the Office of Early Childhood commissioner must make to Birth-to-Three program early intervention service providers for each child with an individualized family service plan that accounts for less than nine service hours during the billing month

The bill makes permanent the \$200 general administrative payment the Office of Early Childhood commissioner must make to certain Birth-to-Three early intervention service providers. Under current law, this payment requirement will sunset on June 30, 2024.

By law and unchanged by the bill, the commissioner must make these payments to providers for each child (1) with an individualized family service plan on the first day of the billing month and (2) whose plan accounts for less than nine service hours during the billing month, so long as the provider delivers at least one service during the month.

§§ 5-6 — INDIVIDUALIZED FAMILY SERVICE PLANS

Requires individualized family service plans to be translated into and provided in Spanish; requires an eligible child whose primary language is Spanish to receive early intervention services from Spanish-speaking personnel and coordinators; allows the services of Spanish-speaking interpreters or translators to be used under certain circumstances

The bill requires Birth-to-Three program individualized family service plans to be translated into and provided in Spanish for any family whose primary language is Spanish.

By law, eligible children in the program (see *Background*) and their families must generally receive within set timeframes a (1) multidisciplinary assessment, (2) written individualized family service plan, and (3) review of the plan.

Additionally, the bill requires an eligible child whose primary language is Spanish to receive early intervention services from Spanish-speaking personnel and a Spanish-speaking service coordinator.

Under the bill, if there is no Spanish-speaking qualified personnel or Spanish-speaking coordinator available within the statewide Birth-to-Three system to provide early intervention services, then a Spanish-speaking interpreter or translator must be used to provide such services to the eligible child. These interpreters or translators must be reimbursed at the same rate as judicial branch court-appointed interpreters and translators.

Background — Birth-to-Three Program Eligibility

By law, an “eligible child” for the Birth-to-Three program is a child up to age 36 months who is not eligible for special education and related services and needs early intervention services because he or she is (1) experiencing a significant developmental delay as measured by standardized diagnostic instruments and procedures or (2) diagnosed as having a physical or mental condition that has a high probability of resulting in a developmental delay (CGS § 17a-248(4)).

§§ 7-8 — MENTAL HEALTH WELLNESS DAY

Requires employers to permit service workers to use accrued paid sick leave to take a mental health wellness day to attend to their emotional or psychological well-being

The bill requires employers to allow service workers to use accrued

paid sick leave for a “mental health wellness day” to attend to their emotional or psychological well-being.

Existing law already allows service workers to use paid sick leave for their, or their spouse’s or child’s, (1) illness, injury, or health condition; (2) medical diagnosis, care, or treatment of a physical or mental illness, injury, or health condition; or (3) preventive care.

The bill applies to specified service worker occupations covered by existing law (e.g., certain food, health care, hospitality, retail, and sanitation industry workers).

EFFECTIVE DATE: October 1, 2023

§ 8 — ELIGIBILITY FOR PAID SICK LEAVE

Extends eligibility for paid sick leave to a service worker who is the parent or guardian of a child who is a victim of family violence or sexual assault, provided the worker is not the perpetrator or alleged perpetrator of the violence or assault

Current law requires employers to provide paid sick leave to a service worker who is a family violence or sexual assault victim to:

1. obtain medical care or psychological or other counseling for physical or psychological injury or disability,
2. obtain services from a victim services organization,
3. relocate due to the violence or assault, or
4. participate in a related civil or criminal legal proceeding.

The bill extends eligibility for paid sick leave by requiring employers to also provide it to any service worker who is the parent or guardian of a child who is a victim of family violence or sexual assault, provided the service worker is not the perpetrator or alleged perpetrator of the violence or assault

EFFECTIVE DATE: October 1, 2023

§ 9 — MEDICAID REIMBURSEMENT FOR SCHOOL-BASED MENTAL HEALTH ASSESSMENTS

Requires the DSS commissioner to (1) provide Medicaid reimbursement for certain mental health evaluations and services at school-based health centers or public schools, to the extent federal law allows; (2) if necessary, amend the Medicaid state plan to do so; and (3) set the reimbursement at a level to ensure adequate providers for these evaluations and services

The bill requires the DSS commissioner, to the extent allowed under federal law, to provide Medicaid reimbursement for suicide risk assessments and other mental health evaluations and services provided at a school-based health center or public school.

Under the bill, the commissioner must also (1) amend the Medicaid state plan if necessary to provide the reimbursement and (2) set the reimbursement at a level that ensures an adequate pool of providers to provide the assessments, evaluations, and services.

§§ 10-11 & 21 — OFFICE OF THE BEHAVIORAL HEALTH ADVOCATE AND ADVISORY COMMITTEE

Establishes the Office of the Behavioral Health Advocate to advocate for and assist behavioral and mental health care providers and (2) Behavioral Health Advocate Advisory Committee to review and assess the office's performance

Office Purpose and Staffing

The bill establishes the Office of the Behavioral Health Advocate to advocate for and assist behavioral health providers. The advocate must be a Connecticut elector who is appointed by the governor and approved by the General Assembly. The advocate must have expertise and experience in mental or behavioral health care, health insurance, and advocacy for parity in mental and behavioral health access and outcomes. The office is within the Insurance Department for administrative purposes only and under the direction of the Behavioral Health Advocate.

The office must be staffed sufficiently as its resources and requirements allow, including at least one attorney and one patient caregiver.

The bill also establishes the Behavioral Health Advocate Advisory Committee and requires it to meet four times a year with the Office of the Behavioral Health Advocate (i.e., the advocate and staff) to review and assess the office's performance.

Behavioral Health Advocate Appointment and Confirmation

The bill requires the governor to make the initial appointment of the Behavioral Health Advocate from a list of candidates prepared and submitted to him by the Behavioral Health Advocate Advisory Committee by February 1, 2024. (The bill establishes the advisory committee. See below for its membership and appointments.) The governor must notify the advisory committee (1) within 90 days before the incumbent Behavioral Health Advocate's term expires or (2) immediately if a vacancy occurs.

The advisory committee must meet to consider qualified candidates and, within 60 days of receiving the notice from the governor, submit a list of no more than five candidates, ranked in order of preference, to be considered for the position.

Within 60 days of receiving the list of candidates from the advisory committee, the governor must designate one candidate from the list for the position of Behavioral Health Advocate. If a candidate withdraws from consideration after the list is submitted to the governor, the governor must designate a candidate from those remaining on the list. If the governor fails to designate a candidate within 60 days of receiving the list from the advisory committee, the advisory committee must refer the candidate on the list with the highest ranking to the General Assembly for confirmation.

If the General Assembly is not in session when the governor designates a candidate to serve as advocate, the candidate serves as the acting advocate until the General Assembly meets and confirms the person. The acting advocate is entitled to compensation and has all the powers, duties, and privileges of the advocate.

Under the bill, the advocate serves a four-year term that excludes any time he or she served as acting advocate. The governor may reappoint the advocate, or the advocate must remain in the position until a successor is confirmed.

In the case of a vacancy, the office's most senior attorney serves as the

acting advocate until the vacancy is filled.

Office Powers

Under the bill, the office may do the following:

1. assist state-licensed, -certified, or -registered mental and behavioral health care providers with receiving payments for claims submitted to health carriers (i.e., insurers and HMOs) for services provided to covered patients;
2. assist state residents with accessing mental and behavioral health care and related resources;
3. provide information to the public, agencies, legislators, and others on mental and behavioral health care providers' and patients' problems and concerns and make recommendations to resolve them;
4. analyze and monitor the development and implementation of federal, state, and local laws, regulations, and policies relating to mental and behavioral health care providers and recommend changes as necessary;
5. facilitate public comment by mental and behavioral health care providers and patients on laws, regulations, and policies, including health carrier policies and actions;
6. coordinate services with the Office of the Healthcare Advocate (OHA) to help people obtain access to, and coverage for, mental and behavioral health care services to fulfill OHA's duties;
7. ensure that mental and behavioral health care providers and patients have timely access to the office's services;
8. establish a toll-free number, or other free calling option, that allows access to the office's services;
9. pursue administrative remedies on behalf of, and with the consent of, mental and behavioral health care providers and

patients;

10. adopt regulations to implement the bill's provisions; and
11. take any other actions necessary to fulfill the office's purposes.

Referrals to the Insurance Department

The bill requires the office to make a referral to the insurance commissioner if it finds that a health carrier may have engaged in a pattern or practice that violates the following insurance laws:

1. compliance with federal Health Insurance Portability and Accountability Act provisions on guaranteed renewability and certification of insurance coverage and
2. state coverage requirements for individual policies on autism spectrum disorder therapies, diagnosing and treating mental or nervous conditions, court-ordered substance abuse services, mental health and substance use disorder benefits, mental health wellness examinations, Collaborative Care Model services, acute inpatient psychiatric services, and continued coverage for children with a mental or physical handicap.

Requests for Information

The bill requires all state agencies to comply with the office's reasonable requests for information and help in performing its duties.

Reporting Requirements

The bill requires the Behavioral Health Advocate to report annually, starting by January 1, 2024, to the Children's, Insurance, Public Health, and Real Estate committees on the office's activities, including the following:

1. the subject matter, disposition, and number of claims the advocate processed on behalf of mental and behavioral health care providers and patients;
2. common problems and concerns the advocate discerned from mental and behavioral health care providers, patients, or other

relevant sources; and

3. the need, if any, for administrative, legislative, or executive remedies to assist mental and behavioral health care providers or patients.

Behavioral Health Advocate Advisory Committee (§ 21)

The Behavioral Health Advocate Advisory Committee the bill establishes must meet four times a year with the Office of the Behavioral Health Advocate to review and assess the office's performance.

The advisory committee members must be appointed one each by the governor and the six leaders of the General Assembly by October 1, 2023. Each advisory committee member serves a five-year term and may be reappointed.

Starting by January 1, 2025, the advisory committee must annually (1) evaluate the office's effectiveness and (2) submit the evaluation to the governor and the Insurance and Public Health committees.

§ 15 — TASK FORCE TO STUDY CHILDREN'S NEEDS

Expands the duties of the Task Force to Study Children's Needs to include (1) reviewing and analyzing certain programs that received pandemic-related federal funding, (2) making recommendations on which programs should receive a more permanent funding structure and (3) conducting a needs assessment focused on children and individuals who were enrolled in a Connecticut high school and a member of the classes graduating from 2020-2023

The bill expands the duties of the Task Force to Study Children's Needs (see *Background*) to include reviewing and analyzing the efficacy of programs designed to assist and support the needs of children and families that have spent funds they received pursuant to the following federal laws:

1. Coronavirus Aid, Relief, and Economic Security Act (P.L. 116-136);
2. Coronavirus Response and Relief Supplemental Appropriations Act (P.L. 116-260); and
3. American Rescue Plan Act of 2021 (P.L. 117-2).

Based on the task force’s analysis, the bill requires it to make recommendations on which programs should receive a more permanent funding structure from the state.

The bill also requires the task force to conduct a needs assessment for children that identifies (1) gaps between existing conditions and desired outcomes and (2) the extent to which gaps are attributable to the COVID-19 pandemic. This assessment must be focused on children and individuals who were enrolled in Connecticut high schools and were members of the graduating classes of 2020 to 2023, inclusive.

Under existing law, unchanged by the bill, the task force must also, among other things, (1) recommend new programs or changes to programs run by educators or local or state agencies to better address children’s needs; (2) identify and advocate for funds and other resources to meet children’s needs in the state; and (3) study the feasibility of adjusting school start times to improve students’ mental and physical well-being.

EFFECTIVE DATE: Upon passage

Background — Task Force to Study Children’s Needs

PA 21-46 established a task force to study the comprehensive needs of children in the state and the extent to which these needs are being met by educators, community, members, and local and state agencies. The task force originally terminated on January 1, 2022, but was reconvened by PA 22-81. It must submit its findings and recommendations to the Children’s Committee by January 1, 2024, and it terminates on that date or on the date it submits the report, whichever is later.

§ 16 — DEPARTMENT OF SOCIAL SERVICES (DSS) HUSKY HEALTH CHILD ENROLLMENT

Requires DSS, for FY 24, to hire temporary and part-time employees to collaborate with nonprofit organizations to identify and enroll eligible children in the HUSKY Health program

The bill requires DSS, for FY 24, to hire temporary and part-time employees responsible for collaborating with nonprofit organizations to identify and enroll eligible children in the HUSKY Health program.

§ 17 — SERVICES FOR AT-RISK TEENAGE STUDENTS

Requires SDE, for FY 24, to award a grant to, and collaborate with, a nonprofit organization specializing in identifying and providing services to certain at-risk teenage students; allows SDE, within available appropriations, to hire one full-time employee to implement the bill's provisions

For FY 24, the bill requires the State Department of Education (SDE) to award a grant to, and collaborate with, a nonprofit organization specializing in identifying and providing services for at-risk teenage students with depression, anxiety, substance abuse struggles, and trauma and conflict-related stresses. The organization must use the grant to train school behavioral health providers to provide them services.

The bill allows SDE, within available appropriations, to hire one full-time employee who is responsible for implementing the bill's provisions.

§ 18 — LEGAL REPRESENTATION FOR CHILDREN IN CERTAIN SUPERIOR COURT PROCEEDINGS

Requires counsel assigned or appointed by the chief public defender's office or the court to represent a child in a child abuse or neglect case in Superior Court to continue to represent the child for the duration of the court proceedings

In child abuse or neglect cases in Superior Court, existing law requires the chief public defender's office to assign counsel to represent the child and act solely as the child's attorney. If there is an immediate need for the appointment during a court proceeding, the court must appoint such counsel.

The bill requires the child's appointed or assigned counsel, whichever the case may be, to continue representing the child for the duration of the court proceedings.

EFFECTIVE DATE: October 1, 2023

Background — Related Bill

SB 1008 (File 662), favorably reported by the Children's Committee, contains identical provisions.

§ 19 — STUDY OF COMMUNITY-BASED BEREAVEMENT AND GRIEF COUNSELOR ORGANIZATIONS FOR CHILDREN AND FAMILIES

Requires CWCSEO, in collaboration with the Social and Emotional Learning and School Climate Advisory Collaborative and at least one community-based bereavement and grief counseling resource center serving children and families, to conduct a study of community-based bereavement and counseling resource centers serving children and families

The bill requires the Commission on Women, Children, Seniors, Equity, and Opportunity (CWCSEO) to conduct a study of community-based bereavement and grief counseling organizations and services for children and families to determine the following:

1. the extent and availability of community-based bereavement and grief counseling organizations and services statewide and
2. the feasibility of and recommendations for implementation of a statewide program for the delivery of these services at no cost to participants.

The commission must do so in collaboration with the Social and Emotional Learning and School Climate Advisory Collaborative and one or more community-based bereavement and grief counseling resource centers serving children and families.

The recommendations must include (1) the types of services the program should provide; (2) eligibility criteria for children and families to access these services; (3) the optimal geographic distribution of such services; and (4) opportunities to utilize gifts, grants, or donations from private services and any available federal funding to fund these programs in whole or in part.

The bill requires the commission, by January 1, 2024, to submit a report to the Children’s Committee that includes study findings and any legislative recommendations for the implementation of a statewide program for the delivery of bereavement and grief counseling services for children and families.

EFFECTIVE DATE: Upon passage

§ 20 — PLAY-BASED LEARNING

Requires schools to provide play-based learning for kindergarten and preschool students; requires school boards to permit a teacher to utilize play-based learning for grades one to five; adds it to educator professional development

The bill requires each school board to provide play-based learning during the instructional time of each regular school day for students in kindergarten and preschool. The play-based learning must (1) be incorporated and integrated into daily practice; (2) allow for the students' needs to be met through free play, guided play, and games; and (3) predominantly not involve using mobile electronic devices.

Additionally, the bill requires each school board to permit a teacher to use play-based learning during the instructional time of a regular school day for students in grades one to five, inclusive. The play-based learning may be incorporated and integrated into daily practice, and, as with kindergarten and preschool, must (1) allow for the students' needs to be met through free play, guided play, and games and (2) predominantly not involve using mobile electronic devices.

Under the bill "play-based learning" means a pedagogical approach that emphasizes play in promoting learning and includes developmentally appropriate strategies that can be integrated with existing learning standards. It does not mean time spent in recess or as part of a physical education course or instruction.

The bill requires that any play-based learning comply with a student's individualized education program under special education law or an accommodation plan under Section 504 of the federal Rehabilitation Act of 1973.

Under the bill, a school employee may only prevent or otherwise restrict a student's participation in play-based learning if it is in accord with the school board's policy addressing recess restrictions as a form of discipline.

EFFECTIVE DATE: July 1, 2024

Background — Related Bill

HB 6880 (File 757), favorably reported by the Education Committee, contains identical provisions on play-based learning.

§ 22 — AUTISM SPECTRUM DISORDER ADVISORY COUNCIL

Expands the Autism Spectrum Disorder Advisory Council’s duties to include (1) identifying strategies and methods of outreach and coordination of services for racial minority groups and (2) identifying and recommending updates to existing state guidelines for early screening and intervention

Under current law, the Autism Spectrum Disorder Advisory Council must advise the DSS commissioner on all matters relating to autism and may also recommend policy and program changes to the commissioner to improve support services for people with autism spectrum disorder.

The bill expands the council’s duties and requires it to also do the following:

1. identify strategies and methods of improving outreach and coordination of services associated with autism spectrum disorders for racial minority group members and
2. identify and recommend updates to existing state guidelines for early screening and intervention for autism spectrum disorders, including but not limited to revisions to best practice protocols to include developmental screening for children under age three.

§ 23 — SOCIAL AND EMOTIONAL LEARNING AND SCHOOL CLIMATE ADVISORY COLLABORATIVE

Requires the Social and Emotional Learning and School Climate Advisory Collaborative to include in its annual report to the Children’s and Education committees recommendations about ways to promote the social and emotional development of young children

The Social and Emotional Learning and School Climate Advisory Collaborative is comprised of 33 members tasked with, among other things, (1) collecting information on school climate improvement efforts of local and regional boards of education and (2) identifying best practices to promote positive school climates.

Current law requires the Social and Emotional Learning and School Climate Advisory Collaborative to annually report to the Children’s and Education committees any recommendations and its efforts to:

1. monitor the school climate improvement efforts of the boards of education,
2. document needs for technical assistance and training to foster positive school climates,
3. identify best practices for promoting positive school climates, and
4. direct resources to support statewide and local initiatives on fostering and improving positive school climates and improving access to social and emotional learning.

The bill requires the collaborative to also include in its report to the Children's and Education committees any recommendations, including those about ways to promote the social and emotional development of young children, ages birth to five, covered under the state Medicaid program by identifying age-appropriate methods of screening, assessment, diagnosis, treatment, and more.

COMMITTEE ACTION

Committee on Children

Joint Favorable

Yea 13 Nay 6 (02/28/2023)

Appropriations Committee

Joint Favorable

Yea 42 Nay 11 (05/08/2023)