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(Original Signature of Member)

116TH CONGRESS
1ST SESSION

H. R. _____

To amend the Public Health Service Act to direct the Secretary of Health and Human Services to develop best practices for the establishment and use of behavioral intervention teams at schools, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

Mr. FERGUSON introduced the following bill; which was referred to the Committee on _____

A BILL

To amend the Public Health Service Act to direct the Secretary of Health and Human Services to develop best practices for the establishment and use of behavioral intervention teams at schools, and for other purposes.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Behavioral Interven-
5 tion Guidelines Act of 2019”.

1 **SEC. 2. BEST PRACTICES FOR BEHAVIORAL INTERVENTION**
2 **TEAMS.**

3 The Public Health Service Act is amended by insert-
4 ing after section 520G of such Act (42 U.S.C. 290bb–38)
5 the following new section:

6 **“SEC. 520H. BEST PRACTICES FOR BEHAVIORAL INTERVEN-**
7 **TION TEAMS.**

8 “(a) IN GENERAL.—The Secretary, acting through
9 the Assistant Secretary, shall develop and periodically up-
10 date—

11 “(1) best practices to assist elementary schools,
12 secondary schools, and institutions of higher edu-
13 cation in establishing and using behavioral interven-
14 tion teams; and

15 “(2) a list of evidence-based threat assessment
16 training providers to assist personnel in elementary
17 schools, secondary schools, and institutions of higher
18 education in implementing such best practices, in-
19 cluding with respect to training behavioral interven-
20 tion teams.

21 “(b) ELEMENTS.—The best practices under sub-
22 section (a)(1) shall include guidance on the following:

23 “(1) How behavioral intervention teams can op-
24 erate effectively from an evidence-based, objective
25 perspective while protecting the constitutional and

1 civil rights of individuals, including any individual of
2 concern.

3 “(2) The use of behavioral intervention teams
4 to identify individuals of concern, implement inter-
5 ventions, and manage risk through the framework of
6 the school’s or institution’s rules or code of conduct,
7 as applicable.

8 “(3) How behavioral intervention teams can,
9 when assessing an individual of concern—

10 “(A) seek training on evidence-based,
11 threat-assessment rubrics;

12 “(B) ensure that such teams—

13 “(i) have adequately trained, diverse
14 stakeholders with varied expertise; and

15 “(ii) use cross validation by a wide-
16 range of individual perspectives on the
17 team; and

18 “(C) use violence risk assessment.

19 “(4) How behavioral intervention teams can
20 avoid—

21 “(A) attempting to predict future behavior
22 by the concept of pre-crime;

23 “(B) inappropriately using a mental health
24 assessment;

1 “(C) inappropriately limiting or restricting
2 law enforcement’s jurisdiction over criminal
3 matters;

4 “(D) attempting to substitute the behav-
5 ioral intervention process in place of a criminal
6 process, or impede a criminal process, when an
7 individual of concern’s behavior has potential
8 criminal implications;

9 “(E) endangering an individual’s privacy
10 by failing to ensure that all applicable Federal
11 and State privacy laws are fully complied with;

12 or

13 “(F) creating school-to-prison pipelines.

14 “(c) CONSULTATION.—In carrying out subsection
15 (a)(1), the Secretary shall consult with—

16 “(1) the Secretary of Education;

17 “(2) the Director of the National Threat As-
18 sessment Center of the Department of Homeland
19 Security;

20 “(3) the Attorney General of the United States;

21 “(4) teachers and other educators, principals,
22 school administrators, school board members, school
23 psychologists, mental health professionals, and par-
24 ents of elementary school and secondary school stu-
25 dents;

1 “(5) local law enforcement agencies and campus
2 law enforcement administrators;

3 “(6) mental health mobile crisis providers;

4 “(7) child and adolescent psychiatrists; and

5 “(8) other education and mental health profes-
6 sionals as the Secretary deems appropriate.

7 “(d) PUBLICATION.—Not later than 1 year after the
8 date of enactment of this section, the Secretary shall pub-
9 lish the best practices under subsection (a)(1) and the list
10 under subsection (a)(2) on a publicly accessible website
11 of the Department of Health and Human Services.

12 “(e) TECHNICAL ASSISTANCE.—The Secretary shall
13 provide technical assistance to institutions of higher edu-
14 cation, elementary schools, and secondary schools to assist
15 such institutions and schools in implementing the best
16 practices under subsection (a).

17 “(f) DEFINITIONS.—In this section:

18 “(1) The term ‘behavioral intervention team’
19 means a team of qualified individuals who—

20 “(A) are responsible for identifying and as-
21 ssuming individuals of concern; and

22 “(B) develop and facilitate implementation
23 of evidence-based interventions to mitigate the
24 threat of harm to self or others posed by indi-
25 viduals of concern and address the mental and

1 behavioral health needs of individuals of con-
2 cern to reduce such threat.

3 “(2) The terms ‘elementary school’, ‘parent’,
4 and ‘secondary school’ have the meanings given to
5 such terms in section 8101 of the Elementary and
6 Secondary Education Act of 1965 (20 U.S.C. 7801).

7 “(3) The term ‘individual of concern’ means an
8 individual whose behavior indicates a potential
9 threat to self or others.

10 “(4) The term ‘institution of higher education’
11 has the meaning given to such term in section 102
12 of the Higher Education Act of 1965 (20 U.S.C.
13 1002).

14 “(5) The term ‘mental health assessment’
15 means an evaluation, primarily focused on diagnosis,
16 determining the need for involuntary commitment,
17 medication management, and on-going treatment
18 recommendations.

19 “(6) The term ‘pre-crime’ means law-enforce-
20 ment efforts and strategies to deter crime by pre-
21 dicting when and where criminal activity will occur.

22 “(7) The term ‘violence risk assessment’ refers
23 to a broad determination of the potential risk of vio-
24 lence based on evidence-based literature.”.