

[Second Reprint]

**SENATE, No. 2835**

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**STATE OF NEW JERSEY**  
**218th LEGISLATURE**

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INTRODUCED JULY 23, 2018

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**SYNOPSIS**

Requires public schools to administer written screenings for depression for students in certain grades.

**CURRENT VERSION OF TEXT**

As reported by the Senate Budget and Appropriations Committee on January 9, 2020, with amendments.

(Sponsorship Updated As Of: 1/14/2020)

1 AN ACT concerning student mental health and supplementing  
2 chapter 40 of Title 18A of the New Jersey Statutes.

3

4 **BE IT ENACTED** by the Senate and General Assembly of the State  
5 of New Jersey:

6

7 <sup>1</sup>1. The Legislature finds and declares that:

8 a. Depression is the most common mental health disorder  
9 among American teens and adults, with over 2.8 million young  
10 people between the ages of 12 and 17 experiencing at least one  
11 major depressive episode each year, approximately 10 to 15 percent  
12 of teenagers exhibiting at least one symptom of depression at any  
13 time, and roughly five percent of teenagers suffering from major  
14 depression at any time. Teenage depression is two to three times  
15 more common in females than in males.

16 b. Various biological, psychological, and environmental risk  
17 factors may contribute to teenage depression, which can lead to  
18 substance and alcohol abuse, social isolation, poor academic and  
19 workplace performance, unnecessary risk taking, early pregnancy,  
20 and suicide, which is the third leading cause of death among  
21 teenagers. Approximately 20 percent of teens with depression  
22 seriously consider suicide and one in 12 attempt suicide. Untreated  
23 teenage depression can also result in adverse consequences  
24 throughout adulthood.

25 c. Most teens who experience depression suffer from more than  
26 one episode. It is estimated that, although teenage depression is  
27 highly treatable through combinations of therapy, individual and  
28 group counseling, and certain medications, fewer than one-third of  
29 teenagers experiencing depression seek help or treatment.

30 d. The proper detection and diagnosis of depression is a key  
31 element in reducing the risk of teenage suicide and improving  
32 physical and mental health outcomes for young people. It is  
33 therefore fitting and appropriate to establish school-based  
34 depression screenings to help identify the symptoms of depression  
35 and facilitate access to appropriate treatment.<sup>1</sup>

36

37 <sup>1</sup>[1.] 2.<sup>1</sup> a. A board of education shall ensure that each  
38 student in grades seven through 12 annually receives a health  
39 screening for depression. The screening shall be <sup>2</sup>[administered by  
40 a] proctored and conducted electronically via a computer<sup>2</sup> <sup>1</sup>[school  
41 physician or school nurse] <sup>2</sup>[qualified professional<sup>1</sup>]<sup>2</sup> and shall  
42 <sup>2</sup>[consist of]<sup>2</sup> <sup>1</sup>[a written self-report tool containing a range of  
43 questions for students to complete] <sup>2</sup>[the Patient Health

EXPLANATION – Matter enclosed in bold-faced brackets **[thus]** in the above bill is not enacted and is intended to be omitted in the law.

Matter underlined thus is new matter.

Matter enclosed in superscript numerals has been adopted as follows:

<sup>1</sup>Senate SED committee amendments adopted October 18, 2018.

<sup>2</sup>Senate SBA committee amendments adopted January 9, 2020.

1 Questionnaire-2 or an equivalent depression screening tool utilize  
2 a screening tool that has been validated to screen depression in  
3 adolscents<sup>2</sup> , as determined by the <sup>2</sup>【Commissioner】  
4 Commissioners<sup>2</sup> of Education and <sup>2</sup>【the Commissioner of】<sup>2</sup>  
5 Children and Families<sup>1</sup>. <sup>1</sup>【The Commissioner of Health shall select  
6 the screening tool to be utilized by each school district.】<sup>1</sup> <sup>2</sup>The  
7 Commissioner of Children and Families shall select one electronic  
8 screening tool to be utilized by all school districts.<sup>2</sup> The  
9 screenings shall be conducted in a manner that <sup>2</sup>accommodates  
10 students with developmental disabilities, intellectual disabilities, or  
11 low reading proficiency, and that<sup>2</sup> ensures the privacy of the student  
12 during the screening process and the confidentiality of the results  
13 <sup>1</sup>consistent with State and federal laws applicable to the  
14 confidentiality of student records<sup>1</sup>. The Department of Education  
15 and the <sup>1</sup>【Department of Health】 <sup>2</sup>【Division of Children’s System  
16 of Care in the】<sup>2</sup> Department of Children and Families<sup>1</sup> shall jointly  
17 establish standards on the procedures to be implemented to conduct  
18 the screenings <sup>2</sup>for depression and may provide for other screening  
19 tools, including, but not limited to, screening tools for anxiety,  
20 substance use disorder, and suicidal ideation and behavior, as  
21 determined by the Commissioners of Education and Children and  
22 Families. The Commissioners of Education and Children and  
23 Families shall make recommendations for conducting screenings in  
24 a manner that accommodates students with developmental  
25 disabilities, intellectual disabilities, or low reading proficiency<sup>2</sup>.

26 b. A <sup>1</sup>【board of education】 superintendent<sup>1</sup> shall notify the  
27 parent or guardian of a student whose screening for depression  
28 detects <sup>2</sup>【a suspected deviation from the recommended standard.  
29 The <sup>1</sup>【board】 superintendent<sup>1</sup> shall inform the parent or guardian  
30 that the screening is not a diagnosis and shall encourage the parent  
31 or guardian to share the results of the screening with the student’s  
32 primary care physician】 an abnormality and advise the parent or  
33 guardian to seek the care of a health care professional in order to  
34 obtain further evaluation and diagnosis<sup>2</sup>.

35 c. <sup>1</sup>【A student shall be exempt from the depression screening

36 upon the written request of his parent or guardian.】 <sup>2</sup>【Boards】 As

37 determined by the Department of Education and the Department of

38 Children and Families, boards<sup>2</sup> of education shall forward data

39 collected from screenings administered pursuant to this section to

40 the Department of Education and the Department of <sup>2</sup>【Health】

41 Children and Families<sup>2</sup>, provided that any data forwarded shall be

42 aggregated and shall not contain any identifying or confidential

43 information with regard to any individual. Data collected by the

44 departments pursuant to this subsection shall be used by the

45 departments to identify <sup>2</sup>【Statewide】<sup>2</sup> trends concerning teenage

1 depression and to develop school and community based initiatives  
2 to address teenage depression. <sup>2</sup>The Department of Education and  
3 the Department of Children and Families shall annually publish on  
4 their Internet websites findings and recommendations that are based  
5 on collected data as to additional resources that may be necessary to  
6 screen adolescents for depression and further evaluate adolescents  
7 who have exhibited abnormalities in depression screenings.<sup>2</sup>

8 d. <sup>2</sup>[The Department of Education and the Division of  
9 Children’s System of Care shall jointly develop and make available  
10 to school districts and families a list of current local resources that  
11 may be of assistance for students whose results on the depression  
12 screening tool may indicate a need for behavioral or mental health  
13 care services.

14 e. The Commissioner of Education and the Commissioner of  
15 Children and Families shall periodically consider whether it would  
16 be advisable for public schools to administer additional screening  
17 tools related to student mental health including, but not limited to, a  
18 screening tool for anxiety, such as the General Anxiety Disorder-7  
19 or an equivalent anxiety screening tool.] A school district shall  
20 obtain written consent from a student’s parent or guardian, upon  
21 enrollment or at the beginning of each school year, prior to  
22 screening the student for depression pursuant to this section.<sup>2</sup>

23 <sup>2</sup>[f. As used in this section, “qualified professional” means a  
24 school psychologist, school nurse, school counselor, student  
25 assistance coordinator, school social worker, or physician.]<sup>1</sup><sup>2</sup>

26  
27 <sup>1</sup>[2.] 3.<sup>1</sup> The State Board of Education, in consultation with  
28 the Commissioner of <sup>1</sup>[Health] Children and Families<sup>1</sup>, shall  
29 promulgate regulations pursuant to the “Administrative Procedure  
30 Act,” P.L.1968, c.410 (C.52:14B-1 et seq.), necessary to effectuate  
31 the provisions of this act.

32  
33 <sup>1</sup>[3.] 4.<sup>1</sup> This act shall take effect in the first full school year  
34 following the date of enactment.