CHAPTER 68

AN ACT HB 4002

Relating to chronic absences; and declaring an emergency.

Be It Enacted by the People of the State of Oregon:

SECTION 1. (1) The Department of Education and the Chief Education Office shall jointly develop a statewide education plan to address chronic absences of students in the public schools of this state.

(2) The department and the office shall collaborate with representatives of the Department of Human Services, the Oregon Health Authority, the Early Learning Division and community and education stakeholders to develop the plan.

(3) The plan shall include:
   (a) A process for publicly disclosing annual information on chronic absence rates for each school.
   (b) Guidance and best practices for all schools and school districts to use to track, monitor and address chronic absences and improve attendance.
   (c) A process for identifying schools in need of support to reduce chronic absences and improve attendance.
   (d) A description of technical assistance available to schools identified as being in need of support, including technical assistance that will be provided by the department or the office.
   (e) The estimated costs associated with implementing the plan.

SECTION 2. No later than December 1, 2016, the Department of Education and the Chief Education Office shall submit a report to the interim legislative committees related to education. The report shall summarize the statewide education plan developed by the department and the office under section 1 of this 2016 Act.

SECTION 3. Sections 1 and 2 of this 2016 Act are repealed on January 2, 2017.

SECTION 4. Notwithstanding any other provision of law, the General Fund appropriation made to the Department of Education by section 1 (1), chapter 759, Oregon Laws 2015, for the biennium beginning July 1, 2015, for operations, is increased by $25,500 for the purposes of sections 1 and 2 of this 2016 Act.

SECTION 5. (1) As used in this section, “trauma-informed approach” means an approach that recognizes the signs and symptoms of trauma in students, families and staff and responds by fully integrating knowledge about trauma into policies, procedures and practices for the purposes of resisting the reoccurrence of trauma and promoting resiliency.

(2) The Chief Education Office, in coordination with the Oregon Health Authority and the Department of Education, shall distribute moneys as provided in this section to school districts and education service districts for the purpose of decreasing rates of school absenteeism.

(3)(a) A school district or an education service district may apply to receive moneys under this section:
   (A) By submitting an application that includes a proposal consistent with subsection (4) of this section; and
   (B) If the district has at least one school in the district with:
      (i) A school-based health center; or
      (ii) A school-based system for providing behavioral health services and care coordination that may include a school nurse, a school counselor, a school psychologist or a clinical psychologist.
   (b) A school district or an education service district may submit an application jointly with one or more community partners that will participate with the district in the pilot program described in subsection (4) of this section.

(4) The office shall distribute moneys to an applicant based on the applicant’s proposal to design and implement a pilot program to decrease rates of school absenteeism by using trauma-informed approaches to education, health services and intervention strategies that are based in schools and take advantage of community resources. The proposal must include a plan that:
   (a) Coordinates the services provided by:
      (A) The school;
      (B) The school-based health center or the administrator of the school-based system described in subsection (3)(a)(B)(ii) of this section; and
   (C) Coordinated care organizations, public health entities, nonprofit youth service providers, community-based organizations, social justice groups and similar groups that are located in the community;
   (b) Requires professional development and support for school staff, including educators, school district or education service district professionals, counselors, nurses, classified staff and other staff of the school district or education service district, to create a culture in the district and community that is informed about how to understand, recognize and respond to trauma;
   (c) Provides for at least one trauma specialist who:
      (A) Is permanently assigned at the school-based health center or at the location where the school-based system described in subsection (3)(a)(B)(ii) of this section is provided; and
(B) Oversees the implementation of the plan, including coordinating the services described in paragraph (a) of this subsection and coordinating the professional development and support described in paragraph (b) of this subsection;

(d) Indicates how services coordinated under paragraph (a) of this subsection are provided based on a trauma-informed approach and with an understanding, recognition and responsiveness to the effects of trauma on education, absenteeism and school completion;

(e) Uses evidence-based and evidence-informed approaches, culturally specific approaches when appropriate and national models that are tailored to the community to ensure that data are collected and the effectiveness of the pilot program is determined;

(f) Provides matching community funding, or resources that are the monetary equivalent of matching funding, in a ratio determined by the office by rule; and

(g) Pursues additional funding opportunities, including funding under the federal Every Student Succeeds Act (P.L. 114-95).

(5) The office shall prescribe the timelines by which an applicant may submit an application for moneys under this section and the form of the application.

(6) The office shall evaluate and rank applications based on the proposals submitted in the applications.

(7) The office shall distribute moneys to applicants based on:

(a) The evaluations and rankings described in subsection (6) of this section;

(b) The moneys appropriated to the office for the purpose of this section;

(c) The amount of matching community funding available to the applicant; and

(d) Any available federal grants.

(8)(a) The office, in collaboration with the Oregon Health Authority and the Department of Education, shall provide coordination among school districts and education service districts receiving moneys under this section.

(b) The office may coordinate with a statewide nonprofit organization that has experience in supporting school-based health centers and student health organizations for the organization to provide technical assistance to school districts and education service districts receiving moneys under this section.

(9) Each participating school district and education service district shall provide regular reports on the progress of the district’s pilot program to the office to enable the office to:

(a) Determine the effectiveness of the pilot program; and

(b) Submit a report and recommendations for legislation to the interim committees of the Legislative Assembly related to education as required under subsection (10) of this section.

(10) No later than October 15, 2019, the Chief Education Office, the Oregon Health Authority and the Department of Education, in collaboration with the statewide nonprofit organization described in subsection (8) of this section, shall submit a report to the interim committees of the Legislative Assembly related to education. The report must provide individual and comprehensive evaluations on the outcomes of the pilot programs and include any recommendations for legislation based on the results of the pilot programs.


SECTION 7. In addition to and not in lieu of any other appropriation, there is appropriated to the Chief Education Office, for the biennium beginning July 1, 2015, out of the General Fund, the amount of $500,000, which may be expended for the purposes of section 5 of this 2016 Act.

SECTION 8. This 2016 Act being necessary for the immediate preservation of the public peace, health and safety, an emergency is declared to exist, and this 2016 Act takes effect on its passage.

Approved by the Governor March 29, 2016
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