

AN ACT concerning education.

**Be it enacted by the People of the State of Illinois,  
represented in the General Assembly:**

Section 5. The Mental Health Early Action on Campus Act is amended by changing Sections 30 and 40 as follows:

(110 ILCS 58/30)

Sec. 30. Training.

(a) The board of trustees of each public college or university must designate an expert panel to develop and implement policies and procedures that (i) advise students, faculty, and staff on the proper procedures for identifying and addressing the needs of students exhibiting symptoms of mental health conditions, (ii) promote understanding of the rules of Section 504 of the federal Rehabilitation Act of 1973 and the federal Americans with Disabilities Act of 1990 to increase knowledge and understanding of student protections under the law, and (iii) provide training if appropriate.

The expert panel shall be comprised of at least 2 administrators, 2 members of faculty, and one mental health professional.

(b) The Technical Assistance Center under Section 45 shall set initial standards for policies and procedures referenced in subsection (a) to ensure statewide consistency.

(c) All resident assistants in a student housing facility, advisors, and campus security of a public college or university must participate in a national Mental Health First Aid training course or a similar program prior to the commencement of their duties. Training must include the policies and procedures developed by the public college or university referenced under subsection (a).

(Source: P.A. 101-251, eff. 7-1-20.)

(110 ILCS 58/40)

Sec. 40. Local partnerships.

(a) Each public college or university must form strategic partnerships with local mental health service providers to improve overall campus mental wellness and augment on-campus capacity. The strategic partnerships must include linkage agreements with off-campus mental health service providers that establish a foundation for referrals for students when needs cannot be met on campus due to capacity or preference of the student. The strategic partnerships must also include (i) avenues for on-campus and off-campus mental health service providers to increase visibility to students via marketing and outreach, (ii) opportunities to engage the student body through student outreach initiatives like mindfulness workshops or campus-wide wellness fairs, and (iii) opportunities to support awareness and training requirements under this Act.

(b) Through a combination of on-campus capacity, off-campus linkage agreements with mental health service providers, and contracted telehealth therapy services, each public college or university shall attempt to meet a benchmark ratio of one clinical, non-student staff member to 1,250 students. Each public college or university shall provide at least 3 licensed mental health professionals or, if the benchmark ratio falls under 3, at least the number of licensed mental health professionals required by the benchmark ratio. The mental health professional may be provided either in (i) a part-time, on-campus capacity or (ii) a full-time, on- or off-campus capacity. Service hours for the mental health professionals should be informed by campus utilization data and may include in-person and telehealth modalities to ensure access to the mental health professionals. If linkage agreements are used, the agreements must include the capacity of students providers are expected to serve within the agency. Two years after the effective date of this Act, and once every 5 years thereafter, the Technical Assistance Center developed under Section 45 must propose to the General Assembly an updated ratio based on actual ratios in this State and any new information related to appropriate benchmarks for clinician-to-student ratios. The updated benchmark must represent a ratio of no less than one clinical, non-student staff member to 1,250 students.

(c) Each public college or university must work with local

resources, such as on-campus mental health counseling centers or wellness centers, local mental health service providers, or non-providers, such as affiliates of the National Alliance on Mental Illness, and any other resources to meet the awareness and training requirements under Sections 25 and 30 of this Act.

(Source: P.A. 101-251, eff. 7-1-20.)