

Regarding Bill HB2420:

My name is Theresa M Anderson, LMLP

Contact information: andersont@usd376.com

Bill HB2420

I am an opponent of the bill.

I have 30 years' experience as a mental health professional and I am currently employed by USD 376 as their mental health interventionalist. I am also a licensed mental health professional employed by the Center for Counseling based in Great Bend Kansas. There is a big difference between the two, one requires parental consent and the other, to be effective, should not.

Requiring verbal and written permission before the early tier 2 level work of school and guidance counselors would significantly and negatively impact the willingness of teens and youth to reach out for help when they need it. It would also potentially escalate students who may have been helped with earlier intervention alone, if they could receive it in a timely, when-they- need-it, manner. I simply cannot imagine what my day would look like if, when a student reaches out to me, I have to send them away until I have contacted their parents and gotten written consent to have a conversation about what is going on. Often, just a listening ear and some simple reminders of coping skills or problem-solving strategies are all they need to go back to class and be successful.

A bill like this undermines those at the state who want to make help for students more available. Those early conversations and time spent building trust, without requiring parent permission, often lead to either resolving the problem or involving the parent in a way the child/ teen feels safe and comfortable. Often students are afraid to share their concerns with their parents for fear of upsetting them or appearing weak and talking to a "more objective" party (like a counselor) first seems less threatening. Sometimes the issue actually involves family and they need help knowing how to address that with family.

If early interventions do not work or if screening reveals a greater mental health concern, parents are notified at that point before any ongoing interventions or referrals are made.

I strongly urge you to oppose this bill as it is currently written.

Date of hearing: Jan. 22 at 1:30pm

**From:** [Miranda Bargdill](#)  
**To:** [House Education](#)  
**Subject:** HB 2420  
**Date:** Friday, January 16, 2026 7:58:26 PM

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To whom it may concern:

My name is Miranda Bargdill and I received my school counseling degree from Emporia State University in 2018.

From my personal experience, the school counselor is an enigma. It needs regulation like this bill. It is too new of a position and too unclear of their duties to have the ability to pull kids whenever about whatever without their parents knowing.

The school counselor is not a replacement for parents. School counselors are not therapists. If a minor is going to be having ongoing conversations with an adult during their school day by participating in group or individual counseling, that minor's parents need to be informed and consented to it.

The burden is on the school counselor to work with parents and families, it is not something they should just be able to circumvent.

It really is that simple. Schools need to work with parents and families, and this bill would guarantee it.  
Please pass HB 2420.

Sincerely,  
Miranda Bargdill

Thomas Barker, Ph.D.  
Educator/Public School Parent  
House Bill 2420 Opposition - Written Testimony Only  
House Committee on Education  
Email: tomwbarker@gmail.com

January 19th, 2026

Chair Estes and House Committee on Education Members:

My name is Thomas Barker and I am writing as an public school educator and parent of a public school student in opposition to House Bill 2420 (HB2420). I have had the privilege to be a public school teacher for the past thirteen years. Having completed my Ph.D. in Curriculum and Instruction at the University of Kansas, I choose to work in the K-12 setting instead of further working in higher education. I could rave on for hours about the trials and challenges of being a public school teacher, while also noting many of the successes I have seen. Simply put - I love my job and glad that I have found my calling.

One of the reasons for my opposition to HB2420 is how it defines school-based mental health service. In the bill, school-based mental health service is defined as:

*any program, intervention or strategy applied in a school setting that is specifically designed to influence a student's emotional, behavioral or social functioning.*

This overly broad and vague definition includes many strategies that I use on any given day that I would no longer be able to utilize. An example would be if I told two students, who do not sit next to each other in my classroom, that they could move and sit next to each other for the last 10 minutes of the day if they completed the assignment and did it well. Another example would be if a student was not able to focus and work on the assignment and I have to sit next to them to make sure they do focus and complete the task for that day. These are just two examples of strategies that I could no longer utilize among many others that I have to implement with a single or group of students to modify their behavior that are not universally applied to the whole group of students as in a tier one level of support.

Another reason I stand opposed to this bill is that it limits the services and support students may need throughout the day. Many times at school when there is a conflict between students a mental health support staff may meet with the students to help them work through the issues. When this is done the mental health support staff contacts the students guardians to let them know of the situations and how they worked through to resolve it. Based on this bill the mental health support staff would need to contact the guardians first both in written and direct verbal communication and then obtain a signature allowing them to meet with the students to resolve this conflict. By doing this it puts an unrealistic timeline and burden upon mental health support staff by requiring them to do more paperwork instead of providing services that help students.

While the intent of the HB2420 might not be to hinder these types of strategies within the classroom and the services provided by school mental health support and school staff, the vagueness in how it defines school-based mental health means that it can cover a variety of strategies and process that are utilized to work with a student to help them. These definitions would confuse school staff and not allow us to fully help our students, especially when one considers the monetary penalty for a school staff member who may accidentally violate this.

I hope that you will vote in opposition to this bill.

Thomas Barker, Ph.D.

Carol Beaver

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*HB 2420 Requiring parental consent prior to providing any school-based mental health service to student, exceptions to such requirement; authorizing the imposition of a civil penalty for each violation thereof.*

*I have been a Kansas public school teacher for 41 years and had numerous students that were not only on Tier 1, but 2 and 3. First of all, when a student had an emotional crisis, I am so very thankful we had a counselor's assistance working with our students.*

*Secondly, I was in a Title One building most of my career and parents worked in many places they could not receive phone call interruptions, the counselor could not make immediate contact with parent.*

*Thirdly, please realize that time is crucial in such situations, therefore I am in opposition to this bill. Thank you for recognizing and considering these reasons to vote against acceptance of this bill handicapping students in need even more.*

**From:** [Tonya Bell](#)  
**To:** [House Education](#)  
**Subject:** House Bill 2420 - Please Do Not Pass!  
**Date:** Saturday, January 17, 2026 11:15:57 PM

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You don't often get email from [tonyacheriebell@gmail.com](mailto:tonyacheriebell@gmail.com). [Learn why this is important](#)

Chairperson and Members of the Committee,  
My name is Tonya Bell, and I am a school counselor in a rural Kansas community.

I am writing to urge you, as strongly as I can, **not** to pass House Bill 2420.

On paper, this bill is framed as a parental rights measure.  
In practice, it creates **dangerous delays and barriers** to mental health support for the very students who need it most.

Under this bill, students seeking Tier 2 or Tier 3 mental health support would be required to wait for parental consent before help can begin. That means:

- Students who finally work up the courage to ask for help may be told to wait.
- Early intervention is delayed by paperwork.
- Students who do not feel safe disclosing mental health struggles at home may stop asking altogether.
- Support becomes reactive instead of preventative.

In my role as a counselor, I see firsthand what happens when help is delayed.  
When access to support is restricted, **problems do not disappear — they escalate.**

And I want to be very clear:  
**This legislation does not affect students equally.**

In rural communities like mine, we already face limited access to mental health care. Long waitlists. Few providers. Transportation barriers. For many students, the school counselor is the **only** mental health professional they will ever see.

The students most harmed by this bill are those who are already high-risk:

- Students experiencing trauma or abuse
- Students living with family instability
- Students whose families carry mental health stigma
- Students who fear punishment, rejection, or harm if they disclose struggles at home

These are the students who rely on school counselors as a **safe, trusted first point of contact.**

HB 2420 creates blind spots where students fall through the cracks.  
It creates delays at moments when timing matters.  
And it sends a dangerous message to children:  
**“Help comes with conditions.”**

That message does not protect students.  
It increases risk.

School counselors are not trying to replace parents. We are not trying to hide information. We are trained professionals, bound by ethical standards, whose role is to support students, involve families when appropriate, and intervene early to prevent crises.

This bill undermines that work.

If your goal is truly student safety, then we must prioritize **access, trust, and early intervention** — not barriers and delays.

Please listen to the counselors who work with these children every day.  
Please listen to the realities of rural schools.  
And please, do not pass HB 2420.

Our students' lives and well-being depend on it.

Thank you for your time.

**Date of Committee Hearing: January 22, 2026**  
**Testimony to the House Education Committee**

**NAME:** Rana Bentley, Kansas citizen, Parent

**EMAIL ADDRESS:** ranabently24@gmail.com

**BILL NUMBER:** HB 2420

**OPPONENT**

**WRITTEN ONLY TESTIMONY**

Chair and members of the committee,

Thank you for the opportunity to voice my opposition to bill HB 2420.

The proposed law is redundant and not clear. We already have a law in Kansas (K.S.A. 72-6287) requiring parental consent for ongoing behavioral health treatment. The current law provides clear guidance while also allowing staff to support immediate needs of students.

I am extremely concerned about the unintended consequences such as unnecessary delays in essential care to keep students safe. In particular, adolescence is a unique period in development when young people make decisions and initiate behaviors that may have lifelong consequences for their health and safety. Limited access to and uptake of health services in adolescence remains a global challenge. Confidentiality concerns can be a critical barrier for young patients in seeking and receiving appropriate medical services, and confidentiality protection represents an important evidence-based practice in adolescent health care.\*

\*Source: English A, Morreale M. A legal and policy framework for adolescent health care: past, present, and future. *Houst J Health Law Policy.*

In these challenging times, we should be focused on making mental health care more accessible rather than creating barriers and delays that could have tragic consequences.

Thank you for listening to your constituents. Please vote "No" on HB 2420.

Rana Bentley

Olathe, KS

Nick Brummet

USD 379 Clay County Schools

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Testimony in Opposition to HB 2420: Requiring school districts to obtain parental consent prior to providing certain school-based mental health services to a student.

January 22nd, 2026

Chairperson and Members of the Committee,

Thank you for the opportunity to provide testimony. My name is Nick Brummet, and I serve as a middle school counselor in Clay Center, Kansas, a small rural community in North Central Kansas. I respectfully oppose the proposed legislation requiring mandatory parental consent for Tier 2 and Tier 3 school-based mental health services.

Middle school students are navigating one of the most developmentally vulnerable periods of their lives. National trends show increasing rates of anxiety, depression, self-harm ideation, and trauma-related behaviors beginning in early adolescence. Schools, particularly middle schools, are often the first place these concerns are identified and addressed.

Through a Multi-Tiered System of Supports (MTSS), schools provide layered interventions to meet student needs. Tier 2 and Tier 3 supports are targeted, short-term, and educationally focused services designed to remove barriers to learning, stabilize students, and prevent escalation. These supports are not a replacement for long-term clinical therapy; they are early interventions that reduce crisis incidents and the need for more intensive services later.

The ASCA National Model (Fourth Edition) emphasizes equitable access, early identification, and responsive services for all students. A mandatory consent requirement for all Tier 2 and Tier 3 services would create delays in care and disproportionately impact students in rural school districts, where access to community-based mental health resources is limited or nonexistent.

In many rural communities, schools are the primary, and sometimes only, mental health access point for students. Families may face significant barriers, including long travel distances to providers, extended waitlists, lack of insurance coverage, transportation challenges, and shortages of licensed mental health professionals. When school-based supports are delayed or restricted, there may be no alternative services available. For rural students, school counselors are often the first line of support and the critical bridge to care.

These barriers are especially concerning for students experiencing abuse or neglect. National data indicate that children who experience maltreatment are more likely to disclose to trusted school personnel than to caregivers or community providers. In rural settings, where anonymity is limited and resources are scarce, students may be even more reluctant to seek help outside of school. Requiring parental consent before providing targeted school-based support may unintentionally place students at greater risk or silence disclosures altogether.

The ASCA Ethical Standards for School Counselors (2022) guide counselors to act in the best interest of students while exercising professional judgment:

- A.1.a: School counselors prioritize student welfare and best interests.
- A.4.a: School counselors balance student confidentiality with parental involvement when it is safe and appropriate.
- A.12: School counselors are mandated reporters and must take immediate action when abuse or neglect is suspected.

A blanket consent requirement removes the flexibility counselors need to meet these ethical obligations, particularly in rural districts where alternative supports are not readily available.

It is important to clarify that school counselors already work collaboratively with families. In practice, counselors routinely:

- Obtain parental consent for Tier 2 small-group counseling services
- Communicate with families when providing Tier 3 individual supports.
- Partner with parents, administrators, educators, and outside agencies when available to support students holistically

This work is conducted within established ethical frameworks, district policies, and MTSS teams. The proposed legislation is therefore unnecessary and risks creating barriers where safeguards already exist.

In a rural middle school setting, Tier 2 and Tier 3 services may include crisis response following a disclosure of self-harm, ongoing check-ins for a student experiencing neglect or family instability, or targeted support for students exhibiting trauma-related behaviors. These interventions are often time-sensitive. Delays caused by consent requirements may escalate situations that could otherwise be stabilized through immediate school-based support.

The KSDE Comprehensive School Counseling Program underscores the importance of delivering timely, developmentally appropriate, and equitable services. Policies that restrict school counselors' ability to respond promptly, particularly in rural communities, undermine student safety, increase inequities, and place additional strain on already limited systems.

In closing, while family engagement is essential and already embedded in school counseling practice, this bill would create unintended consequences for rural schools, vulnerable students, and communities with limited access to mental health resources. It conflicts with the ASCA National Model, ethical standards, and best practices for protecting students experiencing abuse,

neglect, and mental health crises. For these reasons, I respectfully urge the committee to oppose this legislation.

Thank you for your time and consideration.

Nick Brummet

A handwritten signature in black ink, appearing to read 'Nick Brummet', with a stylized flourish at the end.

*USD 379 Middle School Counselor*

*President-Elect: Kansas School Counselor Association*

*2026 Kansas School Counselor of the Year*

**Cynthia Coufal**  
**Cynthia Coufal Coaching**  
**ccoufal@cynthiacoufalcoaching.com**

**HB 2420** Requiring school districts to obtain parental consent prior to providing certain school-based mental health services to a student.

**Opponent**

**Written**

**Thursday, January 22, 2026, 1:30 PM Room 218-N**

Dear Chair and members of the House Education Committee

I am writing in opposition to House Bill 2420.

I have spent my career working with young people in schools. As a former school counselor with over 25 years of experience, I have sat with students in moments of fear, shame, confusion, grief, and crisis. I have also watched what happens when students do *not* have a safe adult they can turn to.

Sometimes, counselors and trusted school staff are the **only safe adults** a young person feels able to talk to.

HB 2420 would require parental consent before school staff can provide any individual mental health support outside of a suicide risk assessment. While I understand the intent to involve parents, the real-world impact of this bill would be devastating.

If students know that **any private conversation will automatically trigger contact with their parents**, many will simply stop talking.

They will:

- Stop asking for help
- Stop disclosing anxiety, depression, or distress
- Stop telling adults when they are overwhelmed or afraid

This does not protect students—it **isolates them**.

Many young people avoid talking to parents for very real reasons: fear of punishment, shame, cultural expectations, family stress, lack of understanding, or unsafe home dynamics. School counselors and trusted staff provide a critical bridge—someone who can listen, validate, and help students stabilize enough to take next steps.

Peers cannot replace that role.

Peers may listen, but they **do not have the power, training, or authority** to intervene, connect resources, or ensure safety.

Removing access to trusted adults will not reduce anxiety or suicide risk.  
It will **increase it**.

We are already in the midst of a youth mental health crisis. Rates of anxiety, depression, and suicidal ideation among young people are at historic highs. This bill would create additional barriers at the very moment when connection is most needed.

I can say without hesitation:

**I have saved countless lives because I was allowed to talk to students when they needed it most.**

Not after paperwork.

Not after permissions.

In the moment when they finally found the courage to speak.

HB 2420 would make those moments far rarer—and far more dangerous.

Parents are essential partners, and schools already work diligently to involve them when safety is at risk. That system is working. This bill would replace professional judgment with fear, liability, and silence.

Please do not take away one of the last safe spaces many students have.

For the sake of Kansas youth, I urge you to oppose House Bill 2420 and **leave these protections exactly as they are.**

Respectfully,

**Cynthia Coufal**

Kansas School Counselor

Cynthia Coufal Coaching

**Date of Committee Hearing:** January 22, 2026  
**Testimony to the House Education Committee**

**NAME:** Colleen Cunningham, Kansas Parent, School Board Advisory Committee member

**EMAIL ADDRESS:** colleen@demod.com

**BILL NUMBER:** HB2420

**PROPONENT, OPPONENT, or NEUTRAL:** Opponent

**ORAL or WRITTEN ONLY TESTIMONY:** Written Only

Chair Estes and members of the committee,

Thank you for the opportunity to voice my opposition to HB 2420.

I am the parent of a school-aged child who has a diagnosed anxiety disorder. I also serve on my local school board's advisory committee which focuses on student health and well-being. While I appreciate that this bill carves out the ability for school employees to provide a screening if there are immediate concerns of suicide, this is not the only mental health emergency that students may face at school. Children like my own may suddenly have their first panic attack while at school, and this bill would make it impossible for school staff to assist such a student in a timely manner, when a quick and knowledgeable response is paramount, without facing the threat of a large fine. If my kid—or any kid—is in need of mental health supports at school, I don't want available staff checking the files to see whether or not they have parental consent, or whether the fine is worth the cost of assisting a student under their care, and so on.

Experts who do this work in schools (e.g. counselors, nurses, etc.) have also raised concerns that HB 2420 is redundant and also clarity. A law requiring parent/guardian consent for ongoing behavioral health treatment already exists in Kansas. The existing law provides clear guidance AND allows staff to support the immediate needs of students. This is the balance that we should have in our schools.

I appreciate your time and consideration and would again ask that you vote NO on HB 2420.

Colleen Cunningham  
Overland Park

Misti Czarnowsky  
Licensed School Counselor, and a parent of two (both students at a Kansas public elementary school)  
Erie, Kansas  
[misti.sayge@gmail.com](mailto:misti.sayge@gmail.com)  
(620)382-6211

**Opponent of HB 2420-*Requiring school districts to obtain parental consent prior to providing certain school-based mental health services to a student.***

**Opponent-Written only**

Chairperson and Members of the House Committee on Education:

I am writing today to formally oppose HB 2420. While the intent to involve parents in their children's lives is a goal shared by all educators, the specific mandates within this Bill create significant barriers to student safety, undermine professional ethical standards, and jeopardize the mental well-being of Kansas students. I am deeply concerned that this legislation, while likely well-intentioned, would create significant barriers to timely and effective mental health care for students who need it most. Tier 2 and Tier 3 supports are provided to students who are experiencing elevated emotional distress, behavioral challenges, or emerging mental health concerns. Delaying or preventing access to these services can exacerbate problems, increase risk, and ultimately lead to more severe crises.

School counselors and other qualified school mental health professionals are trained to assess student needs, maintain ethical standards, and involve families when it is safe and appropriate to do so. As an elementary school counselor, parent communication is one of my top priorities. Mandating parental consent in all cases fails to account for situations in which students may be reluctant or unable to seek parental involvement due to fear, family conflict, abuse, neglect, or stigma surrounding mental health. For some students, school-based support may be the only safe and trusted access point for help.

As a school counselor, I have personally been in the position of supporting a student who disclosed that they were being abused by a parent or caregiver. In situations like this, a student may finally find the courage to reach out to a trusted adult at school as their first step toward safety. Under this bill, I would be required to tell that student that I cannot speak with them or provide support until I first contact their parents and obtain consent. If the parent responsible for the abuse refuses consent—or if contacting them places the child at further risk—the student is effectively denied help at the moment they most need it. This could be a life threatening turning point in a student's life.

This bill may also have unintended consequences, including discouraging students from seeking help altogether, increasing absenteeism and disciplinary issues, and placing additional strain on already overburdened school systems. Schools should be empowered to respond proactively to student mental health needs, not restricted by policies that prioritize procedural compliance over student well-being.

I strongly support parental involvement in education and mental health whenever possible. However, a blanket requirement for parental consent before providing Tier 2 or Tier 3 support removes professional discretion and undermines evidence-based, multi-tiered systems of support that schools across our state rely on to keep students safe and learning.

I urge you to consider the potential harm this bill could cause to vulnerable students and to oppose its passage. Thank you for your time, your service, and your commitment to the well-being of children and families in our state.

Sincerely,  
Misti Czarnowsky, M.S.

Caitlin DeFilippo

Public School Educator/Public School Parent

House Bill 2420 - Written-Only Testimony in Opposition

Date of Committee Hearing: January 22, 2026

Dear Chairperson Estes and members of the Committee, thank you for the opportunity to provide testimony in **opposition to House Bill 2420**.

As a public school teacher and advocate for student well-being, as well as a parent of elementary students in Kansas Public School, I believe HB 2420—while framed around parental rights—actually creates a dangerous environment for Kansas students. This bill is redundant to existing law, creates unnecessary administrative barriers to care, and threatens the livelihoods of dedicated school professionals through punitive fines.

### **1. HB 2420 is Redundant to Existing Kansas Law**

Kansas already has clear, established protections for parental rights regarding health services. **K.S.A. 72-6287** currently requires parental consent for "ongoing behavioral health treatment." This statute already ensures that parents are the primary decision-makers for their child's long-term mental health care. HB 2420 adds a layer of confusing bureaucracy over a system that is already functioning and governed by state law.

### **2. Barriers to Immediate and Essential Care**

The language of HB 2420 requires *both* direct verbal and written communication before *any* mental health service can be initiated. In a school setting, "mental health services" can range from a student in a minor emotional crisis to a child needing immediate support after a traumatic event.

- **Unnecessary Delays:** Requiring a school nurse or counselor to pause and wait for a verbal confirmation and a returned written document before offering support could mean a student in distress is left without help during a critical window.
- **Ambiguity:** The bill lacks clarity on what constitutes "initiating a service." Does a check-in from a school counselor after a student is seen crying in the hall count? This ambiguity will lead to hesitation by staff when students need them most.

### **3. The "Chilling Effect" of Civil Penalties**

Perhaps the most concerning aspect of HB 2420 is the **\$5,000 fine** imposed on individual school employees for violations.

- **Fear-Based Environment:** When a school social worker or nurse faces a life-altering financial penalty for a subjective "violation" of this act, they will understandably be hesitant to act.
- **Erosion of Trust:** Successful student outcomes depend on a partnership between parents and school staff. By weaponizing the law with heavy fines, this bill creates an adversarial relationship that discourages the very collaboration it claims to promote.

#### **4. Alignment with Educational Experts**

Advocacy groups that work daily with our students—including the **Kansas School Nurses Association**, **Kansas PTA**, and the **Kansas Association of School Boards**—have raised alarms about the unintended consequences of this bill. These professionals understand that when a student's mental health is supported, they are better prepared to learn. HB 2420 undermines that readiness.

**Conclusion** We all agree that parents must be involved in their children's education and healthcare. However, HB 2420 does not improve parental involvement; it only creates legal traps for educators and barriers for children. We should trust our local school districts to follow the existing consent laws (K.S.A. 72-6287) that allow for both parental oversight and immediate student safety.

I respectfully ask the Committee to **not recommend HB 2420 for passage.**

**Respectfully submitted,**

Caitlin DeFilippo

Public School Teacher and Parent

Michael Frint

School Counselor/LPC

2433 Hobbs Drive

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785-770-2625

HB 2420 – School-based Mental Health Service to Student

Opponent – Written Only Statement

January 22, 2026

Hello. My name is Michael Frint and I am a licensed school counselor, my 15<sup>th</sup> year with a school counselor license, and a LPC, third year with a LPC license. I currently serve at a middle school as a school counselor in USD 475 – Geary County. I am here representing myself, and not the school district I work for.

I was recently made aware of HB 2420 presented by Representative Steele. While I can appreciate what Representative Steele and her supporters of the bill are trying to accomplish, the manner of helping students or better saying not helping students proposed in this bill is impractical and actually would hurt children. If this committee has reviewed the American School Counselor Association and Kansas Counselor Association standards, you would see school counselors are not here to influence emotions, behavior or social functioning. School counselors are meant to help manage, acquire knowledge, attitudes, and interpersonal skills to understand and respect self and others. (Straight from the Kansas school counseling standards.) The words of “influence” is a subjective term, and you would be opening Pandora’s Box with this current bill and tying all educators hands.

If I have an emotionally unregulated or crying child sent to my office and I am unable to reach parents prior to talking to them, the child will continue to be unregulated and unable to devote time to their academics which is their primary function at school. While communication with parents and families is vital, school counselors and educators have been trained with numerous amounts of professional development to assist with mental health needs. The solution based off my reading of this bill, the student will remain unable

to talk to anyone and be in a mental stage where learning will not occur if we are unable to reach parents/guardians. In my 15 years as a school counselor, a 5-10 minute conversation is often enough to regulate the child and return them to classroom. The number of 5-10 minute conversations such as these would go into the high thousands, possibly ten thousand. Assisting the child with getting regulated, thinking through a situation, and finding a way to cope are always my goal

By having an unregulated emotional child remain in class, they often act out and not only impede the learning of themselves but also impact the learning of those around them. I want you to imagine a crying child who cannot be allowed to talk because a parent will not answer the phone. Think of the unintended consequences you are placing on this crying child but also the impact of what is going on in that classroom.

An element missing in this bill is how frequently parents/guardian are unavailable and/or do not answer phones. Some families are at work and have a policy of no phone usage while they are on the clock. Some families do not have voice mail set up, or it is full and you cannot leave messages. Some families flat out will not answer the phone because they do not want to talk to the school. Some families once they have enrolled their child, will not communicate with the school under any circumstance and we have to use law enforcement to get communication. While this example is extreme, children I am talking about attached to these family situations are often the most needy in regards to emotional regulation, behavioral and social functioning.

If you have mental health professionals who are trying to tell children what to do, yes there should be consequences for those individuals but let the school districts, KSDE and other ethical agencies punish them appropriately. HB 2420 ties our hands and will ultimately hurt the individuals this bill is aimed at helping the children. Thank you for your time and consideration of these words. If further testimony is needed, please contact me.

**From:** [Casey Frisby](#)  
**To:** [House Education](#)  
**Subject:** House Bill 2420  
**Date:** Monday, January 19, 2026 7:30:41 AM

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[You don't often get email from caseyfrisby@yahoo.com. Learn why this is important at <https://aka.ms/LearnAboutSenderIdentification> ]

I am deeply concerned about this bill. Our children need to have safe adults in their lives they can talk to when facing mental health issues. If we are requiring parental consent, kids that don't feel like they can talk to their parents will have no one to turn to. Our schools employ social workers and psychologist for this reason and they are trained to handle these situations. Our teachers work so hard to foster relationships with our kids, if this bill were to pass teachers are going to have to constantly be evaluating the conversations they are having with kids, is this too personal, does this qualify as mental health? Teachers want to help but you will essentially be tying their hands when it comes to kids. I'm afraid this bill could potentially risk the lives of our children and place more strain on teachers who are already underpaid and in short supply.

Thank you,  
Casey Frisby  
Topeka, KS  
Public School Parent

Brock Funke  
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HB 2420 - Requiring school districts to obtain parental consent prior to providing certain school-based mental health services to a student.

Opponent - Written only

1/22/26 - Hearing Date

I am writing to express my strong support for the essential role school counselors play in protecting and supporting Kansas students' mental health.

School counselors are often the first trusted adults students turn to when they are overwhelmed, struggling, or in crisis. They provide a caring, safe, immediate, and professional space for students to speak before problems escalate into harm or spiral into a more serious situation. Limiting a counselor's ability to have mental health conversations with students creates barriers for children who need help the most.

While parental involvement is important, HB 2420 fails to recognize the reality that not all students have safe, caring, responsive, or supportive homes. Some students experience neglect, abuse, or instability, and requiring parental permission before offering basic mental health support risks silencing vulnerable children and removing their most accessible support during the school day. In addition, many parents are difficult to reach due to work schedules, changing contact information, or other life circumstances. When permission becomes a prerequisite for care, students are left waiting while their emotional needs grow more urgent. Schools should remove barriers to support, not create them.

Students need someone to listen, guide, and protect them in moments of stress, fear, or confusion. HB 2420 would weaken that safety net and place unnecessary limits on professionals who are trained to help.

For the safety, well-being, and future of Kansas children, I stand in support of school counselors and urge lawmakers to reject House Bill 2420.

Thank you for your time and for considering the real impact this bill would have on students across our state.

Respectfully,  
Brock Funke, Building Principal

Date of Committee Hearing: January 22,  
2026

Committee Name: House Education  
Committee

Bill Number: HB 2420

**NAME:** Lynne Ganaden, Kansas citizen

**EMAIL**

**ADDRESS:** Lynne.ganaden@gmail.com

**BILL NUMBER:** HB 2420

**OPPONENT**

**WRITTEN ONLY TESTIMONY:**

Chair and members of the committee,  
Thank your for the opportunity to voice  
my opposition to bill HB 2420.

I am a recently retired nurse residing in  
Shawnee, Kansas, and I am concerned  
regarding the ramifications of this bill on

the children in our community that need behavioral health and their families.

We already have a law in Kansas (K.S.A. 72-6287) requiring parental consent for ongoing behavioral health treatment.

The current law provides clear guidance while also allowing staff to support immediate needs of students.

The proposed law is redundant and not clear. Advocates for students and staff are concerned of unintended consequences such as unnecessary delays in essential care and the chilling effect potential fines can have on the ability of parents and staff being able to work together to keep students safe.

Please vote against this bill: HB 2420.

Sincerely,  
Lynne Ganaden  
Shawnee, Kansas