

**From:** [Linda Hardy](#)  
**To:** [House Education](#)  
**Subject:** HR 2420  
**Date:** Tuesday, January 20, 2026 5:37:15 AM

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Dear Members of the Kansas House Committee on Education,

I am writing to express my strong opposition to HB 2420, which would require parental consent before school counselors can provide Tier 2 or Tier 3 mental health support to students.

At its core, this legislation creates barriers to timely, appropriate care for students who are asking for help. Under HB 2420, a student who reaches out to a school counselor may be told to wait while paperwork is completed, consent is obtained, or contact is made with a parent or guardian. For a child in distress, waiting is not a neutral act — it can mean escalation, withdrawal, or harm.

This concern is especially urgent in Kansas. Our state consistently ranks high for teen suicide compared to national averages. That reality alone should compel us to reduce barriers to mental health support, not add new ones. When a student reaches out to a trusted adult at school, access to a trained mental health professional can be life-saving. Delays matter. Access matters.

School counseling works because it allows for early intervention. When students are able to access support as concerns emerge, counselors can prevent crises before they occur. HB 2420 shifts this model from preventative to reactive, delaying care until problems are more severe and more difficult to address.

This legislation does not impact all students equally. Students who are already at higher risk — those experiencing trauma, family instability, mental health stigma, abuse, neglect, or fear of punishment at home — are the very students most likely to lose access to support under this bill. Many of these students do not feel safe disclosing mental health struggles to a parent or guardian. If seeking help at school automatically triggers required parental consent, these students may stop asking altogether.

That outcome does not protect children. It creates blind spots.

When access to counseling is restricted, problems do not disappear. They escalate. Anxiety turns into crisis. Stress becomes school avoidance. Depression deepens. Warning signs are missed — not because counselors are unwilling to help, but because they are legally prevented from doing so.

HB 2420 sends a dangerous message to students: that help comes with conditions, and that asking for support may come with consequences outside of their control. This undermines trust in schools as safe spaces and discourages students from speaking up when they need help most.

Kansas students deserve access to school-based mental health support that is timely, equitable, and responsive. School counselors are trained professionals who already operate under ethical

standards, confidentiality guidelines, and existing reporting requirements to ensure student safety. Adding unnecessary consent barriers does not improve outcomes — it increases risk.

I urge you to oppose HB 2420 and to protect students' ability to access counseling support without delay or fear. Our children's lives and well-being depend on it.

Respectfully,

Linda Hardy

13849 Pembroke Drive

Overland Park, KS 66224

Phone: 816-457-4507

Chelcie Heitman  
1506 SW Medford Ave  
Topeka, KS 66604

[chelcieheitman@gmail.com](mailto:chelcieheitman@gmail.com)

Bill Number: HB 2420- Parental Consent School Based Mental Health

View: Opponent

Testimony: Written only

Date of Hearing: 1/22/26 at 1:30 PM

Dear House Committee on Education,

My name is Chelcie Heitman and I'm a 7-12 school counselor. I've been employed as a school counselor for 14 years. My role is to ensure that students have timely, equitable access to academic, social, emotional, and mental health support so they can learn, grow, and stay safe.

Kansas House Bill 2420 undermines that mission by requiring parental consent before school counselors can provide Tier 2 or Tier 3 mental health support. While framed as a measure to increase parental involvement, this legislation would have serious, harmful consequences for students, especially those most at risk.

What HB 2420 means for Kansas students:

Under this bill...

- Students who ask for help may be told to wait.
- Early intervention is delayed by paperwork and procedural barriers.
- Students who do not feel safe disclosing concerns at home may stop asking for help altogether.
- School mental health support becomes reactive instead of preventative.

In practice, this means a student experiencing anxiety, depression, grief, bullying, or trauma could be denied timely support, not because the need isn't real, but because consent has not yet been obtained.

The students who rely most on school counselors are the very ones who would be most harmed by HB 2420. Students who are already high-risk; those experiencing trauma, family instability, mental health stigma, abuse, neglect, or fear of punishment at home are often the least able to seek or obtain parental consent. For these students, school may be the only safe place to ask for help.

By placing additional barriers in front of support, this bill creates blind spots where student distress can go unseen and unaddressed. When access to help is restricted, problems do not disappear, they escalate. What could have been addressed early through brief, targeted intervention may grow into crisis situations that affect learning, behavior, and safety.

School counselors are ethically bound, professionally trained, and already operate within clear legal and ethical guidelines that prioritize student safety and parental involvement whenever appropriate and safe. **We**

**collaborate with families, not work against them.** HB 2420 assumes harm where there is none and replaces professional judgment with a one-size-fits-all mandate that ignores the complex realities students face.

HB 2420 sends a dangerous message to children and adolescents: ***Help comes with conditions.*** It tells students that reaching out may result in delay, exposure, or consequences beyond their control. That message discourages help-seeking behavior at the exact moment we should be encouraging it. Protecting students means ensuring timely access to qualified support, trusting trained professionals, and removing barriers to care—not adding new ones.

For the safety, well-being, and future of Kansas students, HB 2420 should be opposed.

Thank you for your time, consideration and service to our state.

Chelcie Heitman

Emily Hopkins  
Logan Elementary School  
1124 NW Lyman  
Topeka, KS 66608  
[ehopkins@usd345.com](mailto:ehopkins@usd345.com)

HB 2420 Requiring Parental Consent for School Based Mental Health Services  
Opponent-Written Only  
1/22/2026

To Whom it May Concern,

During my first year as a mental health care provider in a public school, an 11 year old girl confided in me that her father had been sexually assaulting her on a regular basis since she was 7. What started as uncomfortable touching quickly escalated to rape, all while the student's father warned her that telling anyone would only result in punishment for her. Because of my position at the time, I was able to build rapport and create an environment where she felt safe enough to disclose years of sexual abuse for the first time in her life. After doing my due diligence as a mandated reporter, DCF immediately removed the student from the home, the father was arrested, and my student was finally able to escape the looming threat of her father and start to heal from years of trauma.

As uncomfortable as that story was to read, it is in no way unique to what I and every other school counselor in Kansas experience throughout our careers. Working at a high risk school, I can generally count on submitting at least two reports of abuse or neglect to DCF every month. Of those reports, I can only recall one that wasn't picked up for further investigation. Many of those students told me they had been coached by their abusers (usually parents) not to speak to other adults about these incidents.

To put it as bluntly as possible, if this legislation passes, children are going to die. Every year, school counselors literally save countless lives by providing students with a safe space to share their thoughts, feelings, and experiences. When a student voices thoughts of suicide or self harm at school, counselors are the first responders who conduct risk assessments, contact parents, and refer to outside supports for students AND their families. When a student chronically complains of hunger, we connect families to valuable resources that help put food on their tables. When children are in danger, we protect them. And when parents disallow their students to communicate with school based mental health supports, that life-saving connection is brutally severed.

When I think about the kind of parent who would deny their child the opportunity to speak to a school counselor, the alarm bells in my brain that have been informed by years of experience, research, and training immediately start ringing. This proposed legislation begs the question: what are the adults who wrote this bill trying to hide? What secrets are they trying to protect? Why do they value their own privacy above the safety of children?

I'm not going to waste your time with statistics. I don't need numbers to show me the importance of the work I do as a school counselor, and grown adults who claim to have the best interests of the children of Kansas in mind shouldn't either. I guarantee that, if you were to cold call any public school counselor in ANY state and ask for an example of a time a student who had been coached by their parents not to talk to them had disclosed abuse or suicidal ideation, they would struggle to choose just one. This is the job, and it has to be done regardless of parents' feelings.

I would be doing a disservice to myself and every other school counselor in the state of Kansas if I didn't tell you now, in plain language, that there will be blood on the hands of every single legislator who votes in favor of this bill. As much as I hate to beg, I am pleading here and now for the safety of my

students and every other child in this great state. I am begging you, with everything I have in me, to do right by these children.

Sincerely,

Emily Hopkins, LSC

Logan Elementary School, Topeka, KS

**January 22, 2026**

**House Education Committee**

**NAME:** Alyx Hubler, Kansas Citizen

**EMAIL ADDRESS:** alyx.hubler@gmail.com

**BILL NUMBER:** HB 2420

**OPPONENT**

**WRITTEN ONLY**

Chair and members of the committee,

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

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 no on bill number HB 2420.

Alyx Hubler

Shawnee, KS

**January 22, 2026**

**House Education Committee**

**NAME:** Thomas Hubler, Kansas Citizen

**EMAIL ADDRESS:** thad.hubler@gmail.com

**BILL NUMBER:** HB 2420

**OPPONENT**

**WRITTEN ONLY**

Chair and members of the committee,

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

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 no on bill number HB 2420.

Thomas Hubler

Shawnee, KS

**Brianna Jackson, LMSW**

Educator

House Bill 2420 – Written Testimony Only

House Committee on Education

briannagenae@gmail.com

January 20, 2026

Chair Estes and Committee Members,

Thank you for the opportunity to submit my perspective on HB 2420. I am an elementary school counselor in Kansas and have been in this field for almost five years. My role consists of supporting students through individual and group counseling, classroom lessons, and crisis intervention, while also collaborating with teachers, families, and other support staff to create positive environments, identify needs, and guide students to become responsible and functional citizens.

In my role, most of how I serve students falls within Tier II and Tier III categories. A significant part of my work is identifying needs and helping address those needs to better support my students. I oppose this bill because it would severely inhibit my ability to directly serve students. As written, the phrase “any program, intervention, or strategy applied in a school setting that is specifically designed to influence a student’s emotional, behavioral, or social functioning” is too vague. This language would not only hinder my role as a school counselor but also impact the countless accommodations and interventions that teachers and other support staff provide every single day.

If this bill were to pass, I would spend more time reaching out to obtain consent from families to speak with their students instead of actually working with the students themselves. Most Tier II and Tier III interventions are small but meaningful and impactful. By creating this barrier to serving students, the bill would diminish the level of care students receive and could, in turn, increase behavioral needs in schools, placing an even greater strain on support staff.

I also oppose this bill because it places an unrealistic timeline on students, families, and mental health support staff when attempting to meet identified needs. For example, a student may come to me expressing concern that their dog is sick and may not live through the week. Under this bill, I would need to contact the family to ask permission to speak with their child about the situation. If it takes several days for the family to respond—perhaps because the dog has already passed and they are processing their grief together—the opportunity for timely support is lost. Without this barrier, I could help

the student learn coping skills, read a story about grief, and support them before the loss occurred.

Instead, I would be required to ask permission every time I see a student in distress. Each time the student is crying, I would need to contact the family again—who may also be grieving—to ask for consent. Grief, and many other emotional challenges, do not follow a timeline. Quality mental health care should not be limited or forced into a rigid structure. One of the most effective aspects of mental health support is its flexibility and ability to adapt to students' needs as we better understand how they respond to various interventions.

I do not believe the intent of this bill is to obstruct the important work of mental health professionals and school staff. However, I fear that, as written, the goals of this bill are not aligned with the realities faced by those working directly with students. I respectfully urge you to vote in opposition to HB 2420 and avoid creating additional barriers for professionals who already work tirelessly to meet the needs of students every day.

Sincerely,

Brianna Jackson, LMSW

**From:** [Andrea Wonka-Jasper](#)  
**To:** [House Education](#)  
**Subject:** HB 2420  
**Date:** Monday, January 19, 2026 11:00:43 AM

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You don't often get email from [ajwonkajasper@olatheschools.org](mailto:ajwonkajasper@olatheschools.org). [Learn why this is important](#)

As a 5th grade teacher in Olathe, KS, please vote against HB 2420. Our students are facing huge mental health challenges and need immediate access to support.

Thank you,  
Andrea Wonka-Jasper  
913-269-6700

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**From:** [Kaley Jones](#)  
**To:** [House Education](#)  
**Subject:** HB 2420  
**Date:** Tuesday, January 20, 2026 9:46:50 PM

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You don't often get email from [kaley.jones0518@gmail.com](mailto:kaley.jones0518@gmail.com). [Learn why this is important](#)

To whom it may concern,

I am writing this as a daughter whose dad died by suicide, so having resources available to the youth is CRUCIAL!!

School counselors are not a nice extra. For many kids, they are the first safe adult. Sometimes they are the only one.

When a student works up the courage to ask for help, timing matters. That moment is fragile. It is often the difference between speaking up and shutting down. Proposed legislation in Kansas, HB 2420, would require parental consent before school counselors can provide Tier 2 or Tier 3 mental health support. In practice, that means kids who ask for help may be told to wait. Early warning signs get buried under paperwork. Students who do not feel safe disclosing at home may stop asking altogether. Support becomes reactive instead of preventative.

I think about this through the lens of my own life. Suicide is rarely sudden. It is often the result of pain that went unseen or unaddressed for too long. Delays matter. Missed opportunities matter. When help is restricted, problems do not disappear. They grow quietly until they explode.

This policy does not affect all students equally. The kids who rely most on school counselors are often the ones living with trauma, instability, stigma around mental health, or fear of punishment at home. These are the same students least likely to get parental consent and most likely to fall through the cracks. A requirement meant to protect ends up creating barriers, blind spots, and dangerous delays.

This does not protect students. It increases risk and sends a message no child should hear. Help comes with conditions.

If we truly care about student safety, we need to protect access to early, trusted, in school mental health support. We need to listen to the real world consequences of policies like this, especially from those who have lived with loss.

Please don't approve HB 2420.

Thank you,

Kaley Jones

Cheri Koochel, MSW  
[16cheri831@gmail.com](mailto:16cheri831@gmail.com)

**HB 2420 - Requiring school districts to obtain parental consent prior to providing certain school-based mental health services to a student**  
Opponent - written only  
Thursday, January 22, 2026

**Chairman Estes and Members of the Education Committee:**

Greetings, I am Cheri Koochel, retired social worker, currently living in Salina. I was a social worker for 34 years, 26 years as a school social worker in Manhattan, KS.

I am opposed to HB 2420 for many reasons. First, the words "any", "initiate", "provide" are vague. With the threat of a \$5,000 penalty for every violation the bill needs to further explain those terms.

Secondly, I am grateful for the exception of risk of suicide but what about conversations regarding abuse and/or neglect of a child? Disclosure of CAN often occurs at school and if the alleged perpetrator is a parent/guardian it would not be advisable to contact a parent first.

Is this bill a part of the parent rights agenda? Parents have always had and always will have rights in their child's education. It does take time and effort, for example, attending P/T conferences, being on the Site Council, PTA, volunteering in the classroom, having a conversation with your child about their day, looking in their backpack, contacting school staff with questions and concerns. What about children's rights? Their right to feel safe and heard!

I have several real-life examples where this bill would be putting children at risk for further abuse/neglect, would take unnecessary time out of the classroom, would cause the child to experience embarrassment or shame, and would cause professionals, such as school social workers to abandon their Code of Ethics.

Disclosure of sexual/physical abuse when the perpetrator was the father/stepfather/boyfriend.

In class upset/crying and the teacher sends the student to the social worker. Family member/pet died, no food/water/heat at home, no lunch money,

bullying behavior, peer/teacher conflicts, drug/alcohol abuse, domestic violence. In just these few examples, would I need to stop and obtain parental permission? Allow the student to sit where – in their classroom, in the hallway, in the office to continue to cry or tantrum?

What about the many times I would have 5 to 6, usually girls, show up at my office? Contact every parent to get permission? I could spend 10 seconds with some of them and send them back to class but with this bill I could not “initiate” and service.

The attack on the professionalism of school mental health providers needs to stop. Do you lay awake at night and wonder if a student is hungry, safe, provided for? I still do! Once a social worker you are a social worker for life.

I would be happy to discuss this bill or the work of social workers with anyone.

Cheri L. Koochel

Jina Kugler  
Graduate Coach, Greenbush Virtual Academy #609  
Address: 15105 Prairie View Cir Wamego KS 66547  
kuglerjina@gmail.com  
785-458-9304

HB 2420 – Requiring parental consent for all school-based mental health services  
Opponent- Written only  
Thursday, Jan. 22, 2026

**To:** Chair Estes and Members of the House Education Committee

Thank you for the opportunity to submit testimony in opposition to HB 2420. My name is Jina Kugler, a licensed school counselor and Graduate Coach with Greenbush Virtual Academy #609, serving students in more than 60 districts across Kansas. This is my 30th year in education. I am deeply concerned that HB 2420 would unintentionally limit students' access to timely, preventive mental health support.

School counselors are often the first adults to recognize when a student is struggling. Much of our work involves meeting with students multiple times to build trust, establish rapport, and teach coping and problem-solving skills. These brief, preventive interactions, not clinical therapy, help students manage stress, regulate emotions, and stay engaged in learning. Effective early intervention depends on students feeling safe enough to return, which requires flexibility and responsiveness in the moment.

In my current virtual role, most of my interaction with students is in a one-on-one setting, which could be considered Tier 2 support. If a student discloses stress, family or peer conflict, or other concerns during a call or zoom meeting, immediate support is needed. Waiting for consent, especially when a student may not stay on the line, could have serious consequences and prevent a student from reaching out in the future.

Requiring written parental consent before any mental-health-related support, even a simple check-in or de-escalation, creates delays that can put students at risk. Many families face barriers such as demanding work schedules, limited communication access, or language differences. A large portion of my students are in the KCK district and speak Spanish. They are often the translators for their parents or we have to connect with an outside translation service, causing more delays as well as violating student privacy.

This bill could also prevent services for students in unsafe homes, for whom parental consent is a barrier, not a protection. Throughout my career, I have found that despite student concerns about sharing their personal struggles with parents, most parents are very supportive. However, that is not always the case. One specific student comes to mind. Her mother consistently verbally and emotionally abused her and was also of the mindset that you do not share anything outside of the family. When the student was hospitalized with suicidal ideation I was in the room and witnessed the parent's arrival and her first statement was "Well, you are not bleeding to

death so what are we doing here?” I continued to provide support for this student until her graduation. If parental consent had been required, I would not have been able to support this student despite her willingness to seek me out.

This bill may also perpetuate mental health stigma by signaling that seeking help requires permission or risks exposing private struggles. Students who fear this will simply stop reaching out. It takes a great amount of courage for a student to ask an adult for help. The last thing we want to do is shut them down. Over the past several years, schools across Kansas have worked intentionally to reduce the stigma around seeking mental health support. Counselors have invested time in normalizing help-seeking behaviors, teaching students that reaching out is a sign of strength, not weakness. Policies that create new barriers risk undoing this progress by making students feel that asking for help is something that requires permission or could get an adult in trouble. When students sense hesitation from counselors, because of fear of fines or procedural delays, they may interpret that as a sign that their struggles are not appropriate to talk about, reinforcing the very stigma we have worked so hard to dismantle.

Kansas school counselors already follow strict ethical standards requiring parental involvement when appropriate. What we need is the ability to respond when a student asks for help, not policies that delay support or jeopardize safety. Often, the mental health support counselors provide is simply helping students navigate developmentally appropriate struggles—managing friendships, handling academic stress, or learning basic emotional regulation. Under HB 2420, counselors may hesitate to offer even these brief, everyday interventions for fear of being fined, despite their importance in keeping students grounded and ready to learn. Requiring a phone call to obtain permission for each interaction also removes valuable time from an already overextended day; many school counselors carry caseloads of 350–500 students, making these added steps unrealistic and detrimental to timely support.

I respectfully urge the committee to reject HB 2420 in its current form and collaborate with school mental health professionals to craft policy that supports both parental involvement and timely access to care.

Thank you for your time and your commitment to Kansas students.

Sincerely,  
Jina Kugler  
Graduate Coach & School Counselor  
Greenbush Virtual Academy #609

kuglerjina@gmail.com | 785-458-9304

Lisa Last  
509 Lane  
Clay Center, KS 67432  
(785) 447-2133  
[lastlisa848@gmail.com](mailto:lastlisa848@gmail.com)

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.

Opponent – Written Only

January 22nd, 2026

Chairperson and Members of the Committee,

Thank you for the opportunity to provide testimony. My name is Lisa Last, and I serve as the School, Family & Community Connections Counselor for USD 379, Clay County, a small rural district 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.

In my current role, I have seen first-hand the rise in anxiety, depression, and suicidal/self-harm ideation in students in recent years. School is often the first place these concerns are identified and addressed, and school counselors and social workers are often first responders for students in crisis. Requiring parental consent for Tier 2 and Tier 3 school-based mental health services is redundant and unnecessary. School mental health professionals already routinely work with parents, obtaining consent for Tier 2 small groups, touching base about Tier 3 interventions, and in many other situations as outlined in district policy and in the American School Counselor Association (ASCA) Ethical Standards.

Requiring consent before ANY Tier 2 and Tier 3 intervention begins is not practical and will delay response time, putting the wellbeing of students at risk. Counselors are highly trained professionals with an ethical code who need the flexibility to exercise professional judgement in response to students in crisis.

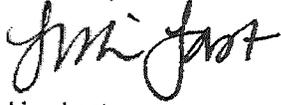
Many rural communities also lack community-based mental health services. In many cases, school is the only place students can receive mental health support due to transportation barriers, lack of insurance, or long waitlists for care.

I worry that requiring consent for Tier 2 and Tier 3 interventions will also disproportionately impact students experiencing abuse or neglect. Research tells us that children who are the victims of abuse or neglect are more likely to share mental health concerns with school personnel than to caregivers. If students know that school mental health professionals must

contact their parent(s), students may be less likely to talk to anyone and may not seek the help they need.

For these reasons, I respectfully urge the committee to oppose this legislation.

Sincerely,

A handwritten signature in black ink, appearing to read "Lisa Last". The signature is written in a cursive, flowing style with some loops and flourishes.

Lisa Last

**Mary Lee**

**Speech Paraeducator**

**House Bill 2420 Opposition – Written Testimony Only**

**House Committee on Education**

**Email: Email: nehe1349@gmail.com**

**January 19, 2026**

**Chair Estes and House Education Committee Members:**

**Thank you for the opportunity to submit testimony about House Bill 2420.**

**I am an educator of more than fifty years working in a variety of positions from lead teacher for students coming directly from home or institutions, a pre-school teacher, a paraeducator in an autism classroom, and a speech paraeducator. I retired for a year and came back to the schools because I missed the daily interactions with students.**

**Providing an education to students is one of the most important needs for the future.**

**I have experienced the need for student access to counselors, social workers, and reinforcement for positive behavior support. Limiting the availability of these supports to students who only have parental written permission will create more trauma for students. It means they may not get the behavioral support they need, and delaying access to it may cause more harm than good. Access to mental support staff helps preserve instruction in classrooms, and a positive environment in school. We need to support the mental health of all children at all levels of education.**

**Please recognize the mental health needs of our students and not increase the workload of teachers and mental health support staff and oppose House Bill 2420.**

**Sincerely,**

**Mary Lee**

Shawna Peters-Maldonado

Wichita Public Schools

903 S Edgemoor St.

Wichita, KS 67218

speters2@usd259.net

HB2024

Position on Bill: opponent

Written only

Hearing date: January 22, 2026

HB2420 Requiring school districts to obtain parental consent prior to providing certain school-based mental health services to a student.

January 20, 2026

Thank you, Committee on Education. HB 2024's vague language would prevent school staff from creating the safe, supportive learning environments students need. In schools, distress can appear suddenly—a child crying inconsolably, hiding under furniture, refusing to enter the classroom, or escalating into behaviors that disrupt learning for everyone. Educators can't always provide the immediate, specialized support required, and delaying assistance while waiting for parental consent (both verbal and written, as outlined in the bill) could worsen the situation.

School mental health professionals are trained to deescalate these moments quickly, yet the bill's penalties would make staff hesitant to even check on a struggling student for fear it might be considered "providing mental health services." This hesitation threatens students' emotional safety and their ability to engage in learning.

Please consider how HB 2024's broad language and harsh penalties would limit schools' ability to respond to students' urgent needs and divert already-limited resources away from classrooms and into state funds unrelated to education. Our students deserve the safe, responsive school environments that are necessary for learning.

Thank you for your consideration,

Shawna Peters-Maldonado

**From:** Christopher McKinney  
**To:** House Education  
**Subject:** HB2420  
**Date:** Saturday, January 17, 2026 1:24:04 PM  
**Attachments:** ATT00001.png

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You don't often get email from cmckinney@usd266.com. [Learn why this is important](#)

To Whom It May Concern,

I am writing to formally oppose HB2420, a piece of legislation that I believe is not only absurd in its scope but deeply unhealthy and potentially dangerous for students who rely on school-based support systems.

As a mental health professional with over twelve years of experience working directly with youth and adolescents, I have witnessed firsthand how critical access to trusted school staff is for students navigating emotional distress, mental health challenges, and crisis situations. HB2420 threatens student safety by placing unnecessary barriers between young people and the very supports that often prevent harm and save lives.

This legislation compromises schools' ability to provide prevention and early intervention. Educating students on how to care for their mental health, recognize warning signs, and seek help from trusted adults is a foundational element of student wellness. Many students only feel safe discussing deeply personal and sensitive matters with school counselors, social workers, psychologists, or other trusted staff members they interact with daily. Requiring parental signatures or immediate parental involvement in order for these conversations to occur is not only unrealistic but harmful.

Parent signatures are not always accessible, and more importantly, they can deter students from seeking help at all. Many young people I have worked with are struggling precisely because of circumstances at home, including parental behaviors, instability, or trauma. For these students, mandated parental involvement does not create safety—it creates fear, silence, and isolation. Forcing disclosure or halting supportive conversations strips students of autonomy and trust at moments when they are most vulnerable.

Supporting HB2420 will undoubtedly discourage students from seeking help due to fear of repercussions at home. This fear can lead to worsening mental health outcomes, increased risk-taking behaviors, and, in some cases, life-threatening consequences. Schools must retain the ability to act as safe spaces where students can seek guidance, prevention, and support without unnecessary legislative interference.

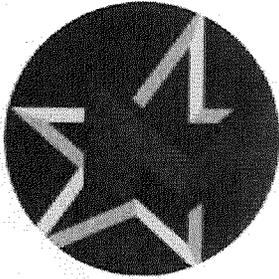
Opposing this bill allows school staff to continue doing what they are trained to do: support students in moments of need, provide life-saving interventions, and foster environments where young people feel heard, valued, and protected. HB2420 undermines these efforts and places children at risk.

For the wellbeing, safety, and lives of our students, I strongly urge you to oppose HB2420.

Sincerely,  
Chris McKinney, LSCSW

KS license #11320  
Mental Health Professional

Maize USD266



Chris McKinney, LSCSW

LICENSED SCHOOL THERAPIST

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📞 785-342-2691

🌐 [www.usd266.com](http://www.usd266.com)

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Stephanie Mettlen

School Counselor

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2420 – School-based mental health services

Opponent

Written Only

January 22, 2026

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Chair and Members of the Committee,

Thank you for the opportunity to submit written testimony in opposition to the above-referenced bill. I am a practicing school counselor in Kansas, and I appreciate the Committee's focus on student well-being and parental involvement. I respectfully submit this testimony to share how this legislation would affect students in real school settings and why it would unintentionally undermine access to support, prevention efforts, and student safety.

I want to be clear that I strongly value parental rights and believe parents are essential partners in their child's education and well-being. School counselors are not seeking to replace parents or exclude them from important decisions. Our role is to support students in ways that strengthen families, promote safety, and facilitate appropriate parent involvement when it matters most.

### The Role of a School Counselor in Kansas

School counselors in Kansas are licensed educators with graduate-level training in child and adolescent development, academic planning, crisis response, and school-based mental health support. We are not therapists diagnosing students or providing clinical treatment without consent. School counselors do not replace community mental health providers.

Instead, we provide short-term, educationally focused support that helps students regulate emotions, resolve peer conflict, cope with stress, and remain engaged in learning. When concerns rise to the level of safety or require clinical care, we follow mandated reporting laws and collaborate with families and outside providers.

Much of our work is preventative. We help students before concerns escalate into crises, disciplinary incidents, or academic failure.

### Tier 1 Ambiguity and "In-the-Moment" Support

A significant concern with this bill is the lack of clarity around what constitutes a Tier 1 intervention. While the bill excludes Tier 1 supports from the definition of school-based mental

health services, it does not define Tier 1 or address how school counselors' real-time, responsive interactions with students should be classified.

In daily practice, students often seek out school counselors for brief, in-the-moment support—such as help calming down after peer conflict, managing anxiety before a test, or problem-solving a stressful situation so they can return to class. These interactions are not formal counseling programs, are not Tier 2 or Tier 3 interventions, and are not clinical in nature. They are a normal and essential part of maintaining a safe and functional school environment.

Because these supports are individualized and responsive, they could reasonably be interpreted as Tier 2 under this bill, despite functioning as preventative, Tier 1 support in practice. This ambiguity places school counselors in the untenable position of having to decide, often within minutes, whether a brief supportive conversation could later be viewed as requiring prior written parental consent.

The result would be hesitation, delayed support, or refusal to engage with students in moments when immediate, preventative intervention is most effective.

## Trust, Confidentiality, and Prevention

I am deeply concerned that this bill would make it significantly more difficult to develop trusting relationships with students if confidentiality is broadly restricted. Confidentiality in school counseling is not secrecy; it is a professional and ethical framework that allows students to seek help while still requiring parent notification and involvement when safety concerns arise.

Students often initiate conversations with school counselors that are low-stakes, peer conflict, stress, pressure to perform, or uncertainty about the future. Through these conversations, students develop relationships with trusted adults in their school. This judgment-free relationship allows students to gradually speak more openly about their feelings, which enables school counselors to connect them and their families with appropriate resources.

Introducing students and families to available supports often serves as prevention. Without early, trusted support, students may hold concerns internally until they escalate into crises, shifting schools from proactive prevention to reactive response.

## Parental Consent as a Barrier in Practice

While parental consent is important, requiring it for all school-based support conversations risks delaying or preventing early intervention—particularly when concerns are emerging and not yet at the level of crisis or clinical treatment. In practice, consent requirements can disproportionately impact:

- Low-income students
- Multilanguage learners

- Students with disabilities or trauma histories
- Students whose caregivers work multiple jobs or have limited access to school communication systems

For these students, school-based mental health support is often the most accessible—and sometimes the only—support available.

## Real-World School-Based Examples

I am also concerned about situations in which a student's concern involves a parent, whether intentionally or unintentionally. One student I worked with was experiencing significant pressure to succeed in football. Initially, this pressure appeared positive—wanting to work harder and not disappoint teammates, coaches, or parents. Over time, the pressure intensified.

The student was afraid to talk to their parents because their father had played college football, and the student believed they would lose their father's respect or deeply disappoint him. When the student had previously tried to share these concerns, they were brushed off as something "everyone feels."

Because a trusting relationship had already been established, the student eventually disclosed that the pressure had become so overwhelming that they were wondering if it would be better to end their life. At that point, I followed mandated reporting procedures, contacted the parents, and ensured the student's safety. The parents responded appropriately and took steps to support their child.

If parental consent had been required when the student first spoke to me about pressure, it is likely that the student would not have trusted me when the concern escalated to suicidal ideation. The issue is not parent involvement, parents were appropriately involved, but the loss of early, trust-building conversations that made later disclosure possible.

## Fear of Penalties and Chilling Effects

I am concerned that this bill would cause school counselors to constantly question whether a conversation requires parental consent and fear a \$5,000 penalty for misinterpretation. This uncertainty would have a chilling effect on student support.

Students often begin conversations that are not explicitly about mental health but naturally evolve into deeper concerns. Recently, a student came to talk about plans after high school. That conversation led to the student sharing that they were considering becoming a monk or priest but had not yet told their parents, who expected them to attend college and become an engineer.

The student was experiencing significant anxiety and was seeking coping strategies while they gathered information and worked toward a decision. The student fully intended to talk with their

parents once they had clarity. Supporting this student helped them manage anxiety, develop coping skills, and prepare for an uncomfortable but necessary conversation.

Under this bill, providing short-term, preventative support could expose a school counselor to financial penalty. The alternative, contacting parents prematurely, would remove the student's ability to process independently, develop lifelong coping strategies, and learn how to navigate difficult conversations within their family.

## Impact on Bullying Response

Effective responses to bullying often include mediation, skill-building, and teaching replacement behaviors—not solely punitive consequences. While parent notification is appropriate, requiring parental consent to engage in skills-based interventions could allow a parent to deny the school's ability to address harmful behavior constructively.

If consent cannot be obtained, due to time constraints, communication barriers, or other factors, schools may be forced to rely solely on traditional discipline. These consequences often remove students from instruction and have limited evidence of changing behavior, allowing bullying to continue and harming all students involved.

## In Conclusion

I respectfully oppose this bill not because parental involvement is unimportant, but because this legislation would unintentionally reduce access to support, weaken prevention efforts, and place students at greater risk by limiting when and how they can seek help at school.

School counselors are not asking to work without accountability. We are asking to continue providing ethical, professional, and preventative support, including brief, in-the-moment interventions, that keep students safe and connected to their families and schools.

Thank you for your time, your service, and your thoughtful consideration of this testimony. I would be grateful for a response indicating you received this testimony.

Respectfully submitted,  
Stephanie Mettlen  
School Counselor

Hanna Mick

Practicing School Counselor

[hannamickedu@gmail.com](mailto:hannamickedu@gmail.com)

785-366-0943

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

Opponent

Written Only

January 22, 2026

**Chair and Members of the Committee:**

Thank you for the opportunity to submit written testimony in opposition to House Bill 2420. My name is Hanna Mick, and I am a practicing school counselor in Kansas. I work directly with students and families every day, and I write to share concerns grounded in real school practice. While I understand the intent of this bill may be to increase transparency and parental involvement, the impact of HB 2420, as written, would significantly limit student access to timely support and disproportionately harm the students who need school-based support the most.

I have never met a parent who wanted their child to struggle alone. Unfortunately, this bill unintentionally creates exactly that outcome.

**The Role of the School Counselor**

School counselors are trained, licensed professionals who support students' academic success, social-emotional development, and behavioral growth within the school setting. We do not provide long-term clinical therapy or diagnoses. Instead, we offer brief, responsive support when students experience peer conflict, anxiety, emotional dysregulation, or other barriers to learning during the school day.

School counseling is preventative and timely by design. Students do not schedule emotional needs weeks in advance. Early, brief intervention is what prevents small issues from escalating into crises, discipline referrals, or academic disruption.

Confidentiality, within ethical and legal limits, is foundational to this work. Students are far less likely to seek help if they believe every conversation requires parental permission before support can occur.

**Family Involvement Already Happens**

It is important to clarify that school counselors already involve families appropriately and consistently. Parental consent is routinely obtained for small group counseling, ongoing skill-building, and targeted supports. When students work with counselors over time to build social skills, emotional regulation strategies, or coping skills, families are contacted and included.

In Kansas schools, this work often occurs through a Student Intervention Team (SIT) or similar process, where families are involved every step of the way. HB 2420 does not strengthen family involvement. It replaces existing, thoughtful systems with a rigid requirement that removes professional judgment and delays support in the moment.

### **Overly Broad Definition Creates Barriers**

HB 2420 defines a school-based mental health service as any program, intervention, or strategy designed to influence a student's emotional, behavioral, or social functioning, including Tier 2 and Tier 3 supports. This definition is extremely broad and captures routine school counseling practices.

For example, if a fourth-grade student comes to my office upset about a conflict with a peer and asks for help processing what happened, that interaction could be considered a Tier 2 intervention under this bill. If I meet with both students to help them communicate and repair the relationship, I may be required to obtain written parental consent before offering support.

Similarly, if a high school student approaches a counselor visibly anxious before a test and asks for help calming down, would the counselor need signed permission before teaching a five-minute breathing exercise? If a middle schooler discloses being bullied and needs immediate problem-solving support, must the counselor send home a form and wait for a signature before responding?

This bill does not require notification after support. It requires permission *before support can occur*, even for brief, preventative interactions. As a result, many students will stop seeking help altogether.

### **Prevention Happens Before Crisis**

Most school counseling interactions fall into a gray zone. They are not emergencies, but they are not insignificant. Anxiety, emotional dysregulation, peer conflict, bullying disclosures, trauma triggers, and early self-harm ideation often appear first in these moments.

While the bill includes an exception for suicide risk, waiting until a student meets that threshold is not prevention. It is reaction. Early access to support is what keeps students safe, engaged, and learning.

### **Disproportionate Impact on Vulnerable Students**

Although parental consent requirements may appear neutral, in practice, they create barriers for students whose families face real access challenges. Students from low-income households, multilingual learners, students with disabilities, neurodivergent students, and students with trauma histories are most affected.

Many caregivers work multiple jobs, overnight shifts, or lack reliable access to email or transportation. Some have limited English proficiency or negative past experiences with school systems. Under HB 2420, if consent cannot be obtained quickly, services cannot be provided. Support becomes delayed or denied.

Parental consent requirements favor families who have time, access, and familiarity with school systems. The result is that support becomes privilege-based instead of need-based.

### **Impact on Schools**

HB 2420 also introduces significant civil penalties, creating a chilling effect on school staff. When definitions are unclear and consequences are severe, educators will err on the side of doing less, not more. Counselors may avoid conversations, teachers may hesitate to refer students, and administrators may default to discipline instead of support.<sup>a</sup>

This undermines years of investment in prevention and early intervention through multi-tiered systems of support.

The intent of HB 2420 may be transparency and parental partnership. The impact, however, is reduced access, delayed support, increased inequity, and unintended harm to students.

True partnership with families requires access, trust, and professional judgment. This bill removes all three.

I respectfully urge the Committee to oppose HB 2420 as written and instead work collaboratively with practicing educators and mental health professionals to strengthen family engagement without restricting access to timely, preventative support.

Thank you for your time and consideration.

Respectfully submitted,

Hanna Mick

Practicing School Counselor

House Bill 2420

Christa Moore  
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House Bill 2420 - Requiring parental consent prior to providing any school-based mental health service to a student; establishing exceptions to such requirement; authorizing the imposition of a civil penalty for each violation thereof.

Position - Opponent

Written Only

January 22, 2026 1:30 PM

Thank you education committee. My name is Christa Moore and I have worked in education for 20 years. This is my 14th year as a school counselor in Kansas public schools. I began my career in the Olathe School District and now work for Kansas Connections Academy, a virtual public school in Kansas. The work that school counselors and other mental health professionals in the schools do is vital toward our students' overall wellbeing. Many times students will come to their school counselor or other staff member in need of help and the ability to work with them immediately is of utmost importance. Requiring verbal and written communication under the vague terms of Tier 2 or Tier 3 interventions could negatively impact many of our students.

School counselors provide many lessons and activities on skills such as kindness, respect, problem solving, growth mindset, and responsibility in large group, small group, and individual settings. These are life skills needed for students to be successful as they grow. If students are not able to take part in these lessons and activities they are missing out on learning vital skills that they will need throughout school and adulthood. These activities allow us to have a proactive approach to students' social and emotional learning. By requiring written and verbal permission for us to work with students in these ways we become reactive in our approach and find students struggling with concepts or interactions that they could have already learned and processed.

If you have been in education very long, you know that there are many parents and caretakers who do not regularly check for notes or permission slips and getting in touch with someone to get verbal permission on top of that can be very difficult due to many different factors such as work, availability, or even phone access. Waiting on these could cause a delay in our ability to work with students in need which could cause frustration, an increase in students' negative thoughts, behaviors, or attitudes, and a hesitation to reach out to a school official for help when it is needed. We also have to think of the students that are in situations of abuse and neglect.

Many times it is a family member who is the perpetrator in these situations. Students could easily fear asking permission from the ones abusing them or the perpetrator could refuse to give permission so that the abuse is not found out or reported. When school officials are able to use their professional judgement and intervene quickly, students are able to have a more positive outcome than those who are made to wait or are unable to access the services they need.

I oppose House Bill 2420 as it could greatly affect students' ability to get the help and care they need from the school officials that see and work with them on a regular basis and I urge you to do the same.

Thank you for your time and consideration.

Solomon Moore  
Licensed School Counselor, Licensed Professional Counselor  
Wichita, Kansas

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(620) 240-0924

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

Hearing: 1/22/26

Subject: 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.

The American School Counselor Association (ASCA) Ethical Standards recognizes the legal rights of parents, while also protecting the student's right to a safe, confidential space for growth. HB 2420 disrupts this balance by requiring written consent prior to providing Tier 2 or Tier 3 interventions. This mandate can inadvertently force a breach of trust before a therapeutic relationship is even established, making students less likely to seek help for sensitive issues. Schools are often the first and only place where students feel safe to vocalize internal struggles. Research indicates that in states with rigid mandatory parental consent laws, there is a measurable decrease in students receiving help for mental health services. By adding a bureaucratic layer of verbal and written notification (and consent) for any intervention "designed to influence emotional, behavioral, and social functioning," we risk turning away students during the critical window when an issue is emerging but before it reaches a crisis threshold. Licensed school mental health professionals in Kansas—including school counselors, social workers, school nurses, and school psychologists—are not casual observers. They are highly trained specialists who hold advanced degrees and have completed hundreds of hours of supervised clinical internships. Their training specifically covers:

- Crisis intervention and risk assessment
- Ethical decision-making and legal boundaries
- Recognizing signs of abuse, neglect, and trauma

Strict adherence to HB 2420 would prove detrimental in several common scenarios:

- Initial Disclosures of Abuse: A student may come to a counselor to test the waters regarding trauma at home. If the counselor must contact the parent for consent before the student feels safe to disclose, the student may remain in a dangerous environment

out of fear.

- Stigma and Privacy: Students struggling with distress often fear their parents' immediate reaction. Without the ability to have an initial conversation with a professional, these students frequently retreat, allowing their conditions to worsen.
- The Gray Area of Distress: Not every mental health struggle is a suicide risk, but many can rapidly escalate. Delaying a conversation to wait for a response leaves a student in acute distress, unsupported during their most vulnerable time.

The Kansas State Department of Education's (KSDE) Comprehensive School Counseling Program underscores the importance of delivering timely, developmentally appropriate, and equitable services to all students. Policies that restrict school counselors' ability to respond promptly undermine student safety and add to the stressors already overwhelming our school system.

I want to state clearly that educators and school mental health professionals want to partner with families. We believe in transparency and the vital role of the parent as the primary guide in a child's life. However, an effective partnership is built on trust, not on mandates that treat a supportive conversation like a legal liability. I urge the Committee to consider the unintended consequences of HB 2420 and to trust the highly trained, licensed professionals and educators already serving our Kansas children. Please do not move this Bill forward.

Respectfully,

Solomon Moore, Ph.D., LSC, LPC, NCC

Mindy Nickles  
Educator  
House Bill 2420 Opposition - Written Testimony Only  
House Committee on Education  
Email: mindynickles@gmail.com

January 20, 2026

Chair Estes and House Committee on Education Members:

My name is Mindy Nickles and I teach in a Kansas public school. I am asking you to vote no on HB 2420.

Students today carry more stress and complexity in their lives than previous generations. Families are stretched thin, mental health needs are higher, and students are experiencing an increasingly divided world around them. Both parents and schools know this. When students need a moment to collect themselves, talk through a situation, or reset before returning to class, schools have adults who can support them. This helps students stay in school and engaged in learning.

HB 2420 puts new barriers between students and those supports. The bill would require written parental consent for many of the basic, preventative interventions that help children regulate and stay on track academically. These are not therapy sessions. They are not long-term treatment plans. They are short check-ins, skill building, and de-escalation strategies that keep kids in classrooms rather than sending them home or letting challenges escalate.

The bill's definitions are also vague. When laws are unclear about what counts as a "mental health service," school staff become hesitant to act. Hesitation does not help kids. It turns small, manageable moments into bigger problems. It also adds confusion for families who are already trying to navigate school systems and competing responsibilities. The end result is fewer students getting timely support and more students falling through gaps that could have been closed.

Parents and schools are on the same team. We want children who feel safe, confident, and capable of learning. Families regularly ask schools for help with behavior plans, executive functioning, peer conflict, and coping strategies. HB 2420 slows that process down and creates new wait times, especially for students whose parents cannot easily respond in the middle of the workday or who share custody arrangements.

If the goal of the Legislature is to support student mental health, the most effective approach is to increase access to counselors, social workers, psychologists, and

behavior support teams. Those investments improve outcomes without creating penalties or unnecessary red tape.

Kansas students deserve timely support. HB 2420 moves us in the opposite direction. I urge you to vote no.

**From:** [Emily Noll](#)  
**To:** [House Education](#)  
**Subject:** HB 2420  
**Date:** Friday, January 16, 2026 9:14:40 PM

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You don't often get email from [emilynoll02@gmail.com](mailto:emilynoll02@gmail.com). [Learn why this is important](#)

To whom it may concern,

HB 2420 should not be passed. Counselors are a vital part of student life. Students need someone that they are comfortable to talk with and for some students all they have is their counselor. They should not be prohibited from providing preventative mental health care. A student may not want to tell their parents/guardian everything as they might feel unsafe. A child needs to be able to talk to their counselor without parent intervention. A counselor already knows when it is time for parent involvement. They are professionals that should be trusted to their jobs just as you trust any other professional.

Thank you for your time,

**Emily Noll**  
Email: [emilynoll02@gmail.com](mailto:emilynoll02@gmail.com)



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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**  
**Thursday, January 22, 2026**

**Chairman Estes and Members of the Education Committee:**

On behalf of the Kansas School Social Workers Association (KSSWA), thank you for the opportunity to provide testimony in opposition to House Bill 2420.

As Licensed Master Social Workers and Qualified Mental Health Providers within the school setting, we work daily with students experiencing anxiety, depression, trauma, grief, bullying, family instability, and crisis situations. School-based mental health services are often the first—and sometimes only—point of access for students who need support. HB 2420 would create barriers to timely care for students, increasing the risk of harm rather than strengthening family engagement.

School social workers are trained, licensed professionals bound by ethical standards, state licensure requirements, and district policies. Parents receive appropriate informed consent, and school social workers obtain that consent in alignment with district policies when involvement is appropriate, safe, and beneficial to the student. **Kansas law already provides parental protections** related to student counseling and mental health services.

Under **K.S.A. 72-6287**, schools are required to notify parents and obtain consent for certain non-academic surveys, screenings, and interventions related to mental health and behavior. This statute already strikes a balance between parental rights and student safety by ensuring transparency while allowing schools to respond appropriately to student needs. As a result, **HB 2420 is largely redundant**, duplicating existing law rather than addressing a gap in protections.

In practice, the adoption of this bill in tandem with **K.S.A. 72-6287** is redundant, causes confusion, and increases the risks of students not receiving mental health services through the school setting. A blanket parental consent requirement—without distinction between routine check-ins, crisis de-escalation, or short-term support—undermines professional judgment and may delay critical interventions. For students in crisis, even short delays can have serious consequences for the student, educators, and allies involved, risking the student's physical and psychological safety.

Many students turn to schools for help because they are **accessible, familiar, and trusted spaces**. If students believe that seeking support will automatically require parental consent before services can begin, many will avoid asking for help altogether. This is particularly concerning for students who already lack access to community-based resources such as therapy, case management, or other therapeutic supports. Passage of this bill would further marginalize these students by limiting their access to school-based mental health services. Students living in unsafe, unstable, or unsupportive home environments—precisely those school social workers are trained to protect—would be disproportionately harmed.

Additionally, the introduction of rigid informed consent requirements and punitive fines for mental health professionals will inevitably reduce students' access to critical supports. When mental health services are restricted, schools often see an increase in behavioral challenges and disciplinary referrals—outcomes that run directly counter to student well-being and academic success. Rather than improving transparency, this bill risks adding administrative strain to schools already operating at capacity.

School social workers and mental health professionals are essential to fostering safe, supportive school environments by addressing students' emotional, behavioral, and social needs. Requiring extensive consent procedures—even when parents comply—diverts scarce time and resources away from direct student care. At a time when schools are facing unprecedented mental health demands and severe staffing shortages, this bill would undermine the very supports students need most and weaken schools' ability to respond effectively.

As a School Social Worker, my primary responsibility is to support student well-being, safety, and academic success while partnering with families whenever possible. The framework of existing Kansas law. **K.S.A. 72-6287 already provides appropriate parental safeguards**, and HB 2420 would unnecessarily restrict access to care while offering no clear additional benefit. HB 2420, though likely well-intentioned, would have the unintended consequence of reducing access to care for the students who need it most.

For these reasons, our association respectfully urges the committee to **vote no on House Bill 2420** and **instead** pursue policies that strengthen collaboration between families and schools without creating barriers to student mental health support.

Thank you for your time and consideration.

**Respectfully Submitted,**

**Sara Nowak, LMSW**, Acting Legislative Chair/Membership Chair, Kansas School Social Worker Association.

Regarding Bill HB2420:

My name is Heather Oden.

Contact information: [vision.lightupthedark@gmail.com](mailto:vision.lightupthedark@gmail.com)

Bill HB2420

I am an opponent of the bill.

I previously worked as part of a therapeutic team in education. I am currently the Executive Director of a non-profit that offers wraparound care for those seeking a new beginning. Therefore, I understand the need for solid therapeutic practice and a secure, safe relationship between a client and the practitioner. Having worked with college students for several years, and volunteering with high school students in faith-based organizations prior to that, I have witnessed first-hand the need for students to be able to confidentially approach trusted, vetted adults. If school employees, specifically Guidance Counselors and School Counselors, have to refrain from offering services to a student until written and verbal consent is obtained from a parent, students will be at great risk of increased self-harm and suicidality. Adolescence is a time of emotional volatility. Forcing school employees that have been specially trained to de-escalate these situations will come at a great cost to the students. This bill endangers students' mental health and ties the hands of the individuals hired to provide appropriate care and comfort, keeping students safe and healthy. I strongly urge you to oppose this bill as it is currently written.

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

Jon Oden

Kansas School Counselor Association, American School Counselor Association, and USD  
475 Geary County Schools

[jonoden@usd475.org](mailto:jonoden@usd475.org)

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

Opponent – Written only

January 22, 2026

Thank you, committee, for allowing me to share my testimony. My name is Jon Oden, and I represent KSCA, ASCA, and USD 475 with my testimony. As a school counselor in a public school, obtaining parental consent for every mental health related service would be a nightmare, particularly since the bill requires both verbal communication with the parent as well as written, signed consent. When students are in crisis, when they need help, and when they are looking for someone to turn to, the time it would require to gain the consent of the parent would cause a disservice to the student. Many students don't schedule an appointment to meet with their counselor ahead of time but simply walk in because they need someone to talk to. Rather than the fluid assistance that the student needs in those moments, there would be disjointed moments where the student would need to wait for help until their parent had been contacted.

In my time as a school counselor, there have been dozens of parents that don't answer their phone when I call, either because they are working, sleeping, or something else entirely. As a school counselor, what am I meant to do in those moments when a parent doesn't answer or when a parent can't immediately sign documentation to prove that they consent to me helping their child? Send the child back to class and tell them that I can't help them today because their parent couldn't be bothered to answer the phone? How do you think that would make a child feel? What good would come of that interaction for the student?

Additionally, there are times that a student doesn't want their parent to know of the mental health services they receive. Forcing school counselors to acquire consent before meeting with the student breaches the understanding of confidentiality and goes against the ethics of mental health providers across the nation. There are times when confidentiality must be breached, particularly when a student is expressing something that could result in harm to themselves or others, but in no other instance is it justifiable to breach that confidentiality.

Part of the reason students feel comfortable speaking with mental health providers is precisely because they feel they can express their thoughts without fear of judgement. A parent needing to give consent prior to the services would result in the student no longer feeling safe in speaking to their counselor. This would lead to more internalizing behaviors from students as they avoided even asking for help. They wouldn't receive the help they need, which would worsen whatever mental health situation they are experiencing. In the worst cases, this could result in future suicidal attempts; attempts that could have been prevented if the student had felt comfortable talking about their negative emotions months before.

In conclusion, I vehemently oppose the passage of HB 2420. It slows the process of helping students, adding more unnecessary red tape before they are able to get the help that they need. It does a disservice to students, setting aside their rights and needs for the sake of more control on the part of parents. It goes against the code of ethics of school counselors and mental health providers. It devalues the struggles of children with mental health concerns. And, perhaps most importantly, it increases the risks of suicidality down the road, as students become less comfortable coming to the people with training that could help them and instead turn to their friends or AI Chat bots for assistance, or speak with no one at all.

If you have questions about my testimony, please feel free to contact me at the email address I provided.

**Date of Committee Hearing: January 21, 2026**  
**Testimony to the House Education Committee**

**NAME:** Nancy Oglesby, 2901 W 47<sup>th</sup> Ter., Westwood, KS 66205  
**EMAIL ADDRESS:** [Oglesby.nancy@gmail.com](mailto:Oglesby.nancy@gmail.com)

**BILL NUMBER:** HB 2420  
**OPPONENT**  
**WRITTEN ONLY TESTIMONY**

Chair Estes and members of the committee,

As a parent and grandmother, I respectfully oppose HB 2420 because it risks causing real harm to vulnerable children. In some situations, a student may seek school-based mental health support precisely because a parent is reactive, unsafe, or part of the problem the child is facing.

Requiring parental consent in all cases could deter children from seeking help and may expose them to further emotional or physical abuse. Kansas already has laws in place to address the most serious circumstances involving child welfare, making this bill an unnecessary and potentially dangerous overreach.

Our responsibility as legislators should be to protect children first. I urge you to consider those who would be harmed by this bill.

For these reasons, I urge the committee to vote against HB 2024.

Thank you,  
Nancy Oglesby, 2901 W 47<sup>th</sup> Ter., Westwood, KS 66205