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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', written in a cursive style.

*USD 379 Middle School Counselor*

*President-Elect: Kansas School Counselor Association*

*2026 Kansas School Counselor of the Year*

