

HOUSE BILL REPORT

2SHB 1841

As Passed Legislature

Title: An act relating to the funding of prevention and early intervention services.

Brief Description: Establishing funding criteria for prevention and early intervention services.

Sponsors: By House Committee on Appropriations (originally sponsored by Representatives Kagi, Boldt, O'Brien, McIntire, Hunt, Schual-Berke, Shabro, Cooper, Linville, Pettigrew, Upthegrove, Moeller, Darneille, Miloscia, Dickerson, Clements, Armstrong, Orcutt, Fromhold, Delvin, Roach, Kenney, Haigh, Lovick, Chase, Santos and Hudgins).

Brief History:

Committee Activity:

Children & Family Services: 2/17/03, 3/4/03 [DPS];
Appropriations: 3/8/03 [DP2S(w/o sub CFS)].

Floor Activity:

Passed House: 3/17/03, 98-0.
Senate Amended.
Passed Senate: 4/10/03, 45-0.
House Refused to Concur. Asks Senate to Recede.
Senate Amended.
Passed Senate: 4/25/03, 46-0
House Concurred.
Passed House: 4/25/03, 98-0.
Passed Legislature.

Brief Summary of Second Substitute Bill

- Requires the Department of Social and Health Services to: identify criteria for funding state-operated or contracted prevention and early intervention services and programs, in consultation with the Family Policy Council; and incorporate the funding criteria into contracts and operating procedures.
- Requires the Family Policy Council to: analyze program outcome and cost benefit data for funded services and programs; and identify and recommend other services, programs, and state agencies to which the funding criteria may apply.

HOUSE COMMITTEE ON CHILDREN & FAMILY SERVICES

Majority Report: The substitute bill be substituted therefor and the substitute bill do pass. Signed by 9 members: Representatives Kagi, Chair; Darneille, Vice Chair; Boldt, Ranking Minority Member; Roach, Assistant Ranking Minority Member; Bailey, Dickerson, Miloscia, Pettigrew and Shabro.

Staff: Cynthia Forland (786-7152).

HOUSE COMMITTEE ON APPROPRIATIONS

Majority Report: The second substitute bill be substituted therefor and the second substitute bill do pass and do not pass the substitute bill by Committee on Children & Family Services. Signed by 27 members: Representatives Sommers, Chair; Fromhold, Vice Chair; Sehlin, Ranking Minority Member; Pearson, Assistant Ranking Minority Member; Alexander, Boldt, Buck, Clements, Cody, Conway, Cox, DeBolt, Dunshee, Grant, Hunter, Kagi, Kenney, Kessler, Linville, McDonald, McIntire, Miloscia, Pflug, Ruderman, Schual-Berke, Sump and Talcott.

Staff: Heather Flodstrom (786-7391).

Background:

The Children's Administration (CA) in the Department of Social and Health Services (DSHS) administers the following prevention and early intervention programs focused on children and youth in the state:

- Alternate Response System, which provides services to low-risk families referred to Child Protective Services;
- Family Reconciliation Services, which provides voluntary services devoted to maintaining the family as a unit and preventing adolescents from being placed outside of the home;
- Family Preservation Services, which provides services to families whose children face substantial likelihood of being placed outside of the home or have already been placed outside of the home;
- Intensive Family Preservation Services, which provides in-home therapist time to families whose children are at imminent risk of being placed outside of the home;
- Continuum of Care, which provides early intervention services to low-risk families designed to be appropriate, accessible, and sensitive to the population served;
- Parent Trust Programs, which provides child abuse and neglect prevention services to families throughout the state; and
- Public Health Nurse Early Intervention Program, which provides trained public health nurses for voluntary in-home nursing services that can prevent the need for more intrusive Division of Children and Family Services interventions in at-risk families

with young children.

Summary of Second Substitute Bill:

The DSHS, in consultation with the Family Policy Council (Council), is required to identify, by March 1, 2004, criteria for funding prevention and early intervention services and programs in the CA that are either state-operated or contracted. The criteria must require that funded programs, at a minimum: define clear, measurable outcomes; identify research that may be applicable; identify anticipated cost benefits; describe broad community involvement, support, and partnerships; and provide data related to program outcomes and cost benefits. The DSHS is required to incorporate the funding criteria into contracts and operating procedures beginning January 1, 2005, within existing resources. The DSHS is also required to begin providing the program outcome data to the Council not later than June 1, 2005. The Council is required to begin analyzing the program outcome and cost benefit data July 1, 2005.

"Prevention and early intervention services and programs" consist of the following state-operated or contracted programs or their successors: Alternate Response System, Family Reconciliation Services, Family Preservation Services, Intensive Family Preservation Services, Continuum of Care, Parent Trust Programs, the Public Health Nurse Early Intervention Program, and other prevention and early intervention services and programs in the CA, as identified by the Secretary of the DSHS.

Nothing in this act creates: an entitlement to services; judicial authority to order the provision of services to any person or family if the services are unavailable or unsuitable, or the child or family is not eligible for such services; or a private right of action or claim on the part of any individual, entity, or agency against any state agency or contractor.

The Council is required to:

- Beginning with its 2005 annual report and each subsequent report, list the prevention and early intervention services to which the established funding criteria are applied;
- Beginning with its 2006 annual report and in each subsequent annual report, include the collected outcome and cost benefit data and provide an analysis of the success and cost benefit program outcomes; and
- Beginning with its 2006 annual report and in each subsequent annual report, identify and recommend other services, programs, and state agencies to which the funding criteria may apply.

Appropriation: None.

Fiscal Note: Available.

Effective Date: The bill takes effect 90 days after adjournment of session in which bill

is passed.

Testimony For: (Children & Family Services) (In support) (Original bill) This process began with the Prevention Pays work group. Many sources of private funding already require programs to define and measure outcomes. This is good public policy and a good investment strategy. This bill will assure the means to support prevention programs. This approach is complimentary to the work of the Community Networks, which already operates with these criteria. This approach coincides with the priorities of the Washington State PTA. Innovation should be evidence-based. Programs cannot improve without evaluating their outcomes. This approach provides accountability. This bill builds on work already being undertaken in the DSHS and the DOH. Children and families throughout the state will benefit.

(With comments) Uniformity both within and across departments must be ensured. The WSIPP could serve as an objective party to ensure uniformity. The WCPCAN is a good example of the approach promoted in this bill. The requirement that programs be research-based may be interpreted as requiring programs to be research-proven. There is no room for innovation. The timeline provided in the bill is too short. The bill should not be limited to the identified programs. All reporting should be included in the WSIPP report in order to cut costs associated with the bill.

Testimony For: (Appropriations) The Children's Administration is monitoring some of their current contracts for outcomes and they believe they can do this for the rest of their contractors. The language in the bill allows flexibility to move slowly in defining new outcomes, and the Children's Administration is committed to identifying those outcomes for all of their programs eventually.

This bill will help prevention and early intervention funding to be spent effectively. Investing in healthy families saves money and saves lives. Prevention programs have been proven effective and this bill will help prevention and early intervention programs to be accountable and cost-effective.

Testimony Against: (Children & Family Services) None.

Testimony Against: (Appropriations) None.

Testified: (Children & Family Services) Representative Kagi, prime sponsor; Cathy Garland, Children's Home Society of Washington; Norma Turner; Denese Bohanna, Community Network Coalition; Tim Gahm, Washington Council for Prevention of Child Abuse and Neglect; Mary Kenfield, Washington State PTA; Ken Stark, Division of Alcohol and Substance Abuse, Department of Social and Health Services; Victor Colman, Department of Health; Therese Grant, Nancy Whitney, and Deanna E. Romero, Parent-Child Assistance Program; Linda McDaniels, Parent Trust; and Delight Roberts, Children's Alliance.

(With comments) Charles Shelan, Washington Council for Prevention of Child Abuse and Neglect; Linda Thompson, Washington Association for Substance Abuse and Violence Prevention; and LaVerne Lamoureux, Department of Social and Health Services.

Testified: (Appropriations) Seth Dawson, Deaconess Childrens Services; Laurie Lippold, Childrens Home Society; and LaVerne Lamoureux, Department of Social and Health Services.