

HOUSE BILL REPORT

2SHB 1841

As Amended by the Senate

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.

Brief Summary of Second Substitute Bill

- Requires the Children's Administration in the Department of Social and Health Services to identify and implement criteria for funding state-operated or contracted prevention and early intervention services and programs.

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;
- Community Public Health and Safety Networks, which provides community-based services for reducing child abuse and neglect, youth violence, youth substance abuse, teen pregnancy, domestic violence, school dropout, and teen suicide;
- 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 CA is required to identify and implement criteria for funding prevention and early intervention services and programs that are either state-operated or contracted, and incorporate the funding criteria into contracts and operating policies within existing resources. The criteria must require that funded programs, at a minimum: define clear,

measurable outcomes; identify research that may be applicable; identify anticipated cost-effectiveness; describe broad community involvement, support, and partnerships; and provide data related to program outcomes. The CA is required to collect and analyze the program data and make the data and the analysis available for public review.

"Prevention and early intervention services and programs" include, but are not limited to, the following or their successors: Alternate Response System, Family Reconciliation Services, Family Preservation Services, Intensive Family Preservation Services, Continuum of Care, Community Public Health and Safety Networks, Parent Trust Programs, and the Public Health Nurse Early Intervention Program.

Nothing in the act may be construed to create: 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.

The Legislature encourages other administrations within the DSHS and other state agencies funding prevention and early intervention services to identify and implement the funding criteria.

EFFECT OF SENATE AMENDMENT(S):

The sections of the bill are added to chapter 70.190 RCW relating to the Family Policy Council (Council), rather than chapter 74.13 RCW relating to child welfare and related services and activities provided through the CA.

The CA is no longer required to identify and implement criteria for funding prevention and early intervention services and programs that are either state-operated or contracted. Rather, the Council is required to identify and recommend, by June 30, 2004, criteria for funding those services and programs in the CA. It is provided that the CA must incorporate the funding criteria beginning January 1, 2005. Of the minimum requirements provided for the funding criteria, it is provided that the criteria must require that funded programs identify anticipated cost benefits, rather than cost-effectiveness, and provide data related to program outcomes and cost benefits. The CA is no longer required to collect and analyze the program data and make the data and the analysis available for public review. Rather, on July 1, 2005, the Council is required to begin collecting and analyzing the program outcome and cost benefit data.

It is provided that the "prevention and early intervention services and programs" may, rather than shall, include, but not be limited to, the identified programs and services. In addition, Community Public Health and Safety Networks are eliminated from the list of identified programs and services, and it is specified that other unidentified state-operated or contracted prevention and early intervention services and programs are included in the list.

It is specified that the provision stating that nothing in the act creates a private right of action or claim on the part of any individual, entity, or agency applies to a right of action or claim against the Council, any state agency, or contractor.

It is no longer provided that the Legislature encourages other administrations within the DSHS and other state agencies funding prevention and early intervention services to identify and implement the provided funding criteria. Rather, the Council is required, by itself or by contract, to identify and recommend the described funding criteria. Beginning with its 2005 annual report and each subsequent report, the Council is required to list the prevention and early intervention services to which the funding criteria are applied. Beginning with its 2006 annual report and each subsequent report, the Council is required to include the outcome and cost benefit data collected and provide an analysis of the success and cost benefit program outcomes.

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.