

SENATE BILL REPORT

SB 5683

As of February 7, 2019

Title: An act relating to establishing the welcome to Washington baby act to create family supports through universal home visiting programs and a statewide family linkage program for resources and referrals.

Brief Description: Establishing the welcome to Washington baby act to create family supports through universal home visiting programs and a statewide family linkage program for resources and referrals.

Sponsors: Senators Wellman, Hasegawa, Keiser, Wilson, C., Darneille, Hunt, Salomon, Das, Conway, Kuderer, Nguyen and Saldaña; by request of Office of the Governor.

Brief History:

Committee Activity: Early Learning & K-12 Education: 2/04/19.

Brief Summary of Bill

- Requires the Department of Children, Youth, and Families (DCYF) to phase-in a universal home visiting program for newborns and their families to assess their healthy, safety, and immediate needs and to connect them with resources.
- Establishes a statewide entitlement to this program by July 1, 2027, which includes up to three home visits.
- Directs DCYF to develop a statewide family linkage program that provides resources and referrals to all families.

SENATE COMMITTEE ON EARLY LEARNING & K-12 EDUCATION

Staff: Ailey Kato (786-7434)

Background: Home Visiting. Current law directs DCYF to fund evidence-based and research-based home visitation programs for improving parenting skills and outcomes for children within available funds. Home visitation programs must be voluntary and must address the needs of families to alleviate the effect on child development of factors such as

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poverty, single parenthood, parental unemployment or underemployment, parental disability, or parental lack of high school diploma.

In order to maximize opportunities to obtain private matching funds, general funds intended to support home visiting must be appropriated to the Home Visiting Services Account (HVSA). DCYF must expend monies from the HVSA to provide state matching funds for partnership activities to implement home visiting services and administer the infrastructure necessary to develop, support, and evaluate evidence-based, research-based, and promising programs.

"Evidence-based" means a program or practice that has had multiple site, random controlled trials across heterogeneous populations demonstrating the program or practice is effective for the population. "Research-based" means a program or practice having some research demonstrating effectiveness, but does not yet meet the standard of evidence-based practices. Promising practice is not defined for the purposes of the HVSA. Other areas of the law define this term as a practice that presents, based upon preliminary information, potential for becoming a research-based or consensus-based practice.

Summary of Bill: Universal Home Visiting Program. Subject to appropriations, DCYF must implement a voluntary universal home visiting program for newborns, birth to nine months old, and their families. Each family of any newborn must receive information about the program.

Future Entitlement. By July 1, 2027, this program must be a statewide entitlement that includes up to three home visits. Any additional referred services are not part of the entitlement.

Phased-In Approach. DCYF must implement the program starting in at least two communities with the highest need as determined by community risk factors. The first selected communities must be clear on how the program is designed with diversity in mind. By October 1, 2020, DCYF must submit an implementation plan with certain components including recruitment, outreach, and workforce. By November 1, 2026, DCYF must conduct an independent evaluation to measure family and child outcomes after the first communities have implemented the program to scale.

Program Components. To implement the program, DCYF must:

- adopt an evidence-based or promising practice model and changes to the model must be in agreement with the model developer;
- work with the Department of Health, Department of Social and Health Services, and the Health Care Authority;
- attempt to meet the language needs of all families;
- require the home visitor to be a registered nurse or an allied professional approved by the model;
- ensure at least 10 percent of visits are provided outside of traditional work hours; and
- offer up to three home visits.

Visit Components. The first home visit must build trust and a strengths-based connection with the family as well as assess the health, safety, and immediate needs of the child and

family. The first visit must occur within thirty days after birth and include resources to connect the family with various services if needed. DCYF may partner with private businesses to offer free resources. Families must receive a document to assist the family with tracking the progress, health, and education benchmarks for the newborn.

A second and third visit may be scheduled depending on the needs of the child and family. The home visitor may refer the family to long-term intensive home visiting services or health care, mental health, or public assistance programs or services. Between thirty and forty-five days after the last visit, the family must be contacted to follow-up on referrals and whether there are any additional needs.

Funding. The universal home visiting program may be funded through the HVSA or a budget proviso. The public-private partnership match in the HVSA does not apply to the universal home visiting program.

Statewide Family Linkage Program. Subject to appropriations, DCYF must develop a statewide program that provides resources and referrals to all families residing in Washington. DCYF must coordinate with linkage resources already active in communities. DCYF must submit an implementation by October 1, 2020, and the program must be operational statewide by July 1, 2027.

Rule-Making Authority. DCYF may adopt rules to administer both programs.

Appropriation: The bill contains a section or sections to limit implementation to the availability of amounts appropriated for that specific purpose.

Fiscal Note: Requested on January 27, 2019.

Creates Committee/Commission/Task Force that includes Legislative members: No.

Effective Date: The bill contains an emergency clause and takes effect immediately.

Staff Summary of Public Testimony: PRO: Intensive home visiting has been around for many years. The universal home visiting program would offer light-touch home visiting to all newborns and their families by welcoming the infant and connecting the family to resources. The first months are important for an infants' brain development, and this program would help close the opportunity gap. This voluntary program would help reduce parents' stress and support them in the early days of caring for an infant, which can be difficult. The first home visit should occur two to three days after returning home. Allied professionals to nurses should be better defined. The linkage program is a resource for families and those who work with families. It will help families navigate systems, access resources, and provide follow-up support. DCYF must have adequate time to partner with communities and local organizations to implement these programs.

CON: It is not clear who will control all of the records that will be kept for this program. This bill implies that the state knows how to take care of children better than their parents. Information about resources can be delivered without a home visit.

Persons Testifying: PRO: Senator Lisa Wellman, Prime Sponsor; Laurie Lippold, Partners for our Children; Carrie Glover, WithinReach; Erica Hallock, Fight Crime: Invest in Kids; Susan Barbeau, Washington Communities for Children; Kate Ginn, First 5 FUNDamentals; Emilia Santiago, citizen; Batsheva Stein, citizen; RaShelle Davis, Governor's Office; Judy King, DCYF.

CON: Ken Springer.

Persons Signed In To Testify But Not Testifying: No one.