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## A BILL FOR AN ACT

RELATING TO CHILDREN.

**BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:**

1           SECTION 1. Hawaii has long been a leader in early  
2 childhood services, reflecting an understanding of the  
3 importance of early childhood development. This has resulted in  
4 proactive legislation to ensure the safety and well-being of  
5 infants, toddlers, and pre-schoolers. Unfortunately, many of  
6 these services have been eliminated or drastically cut over the  
7 past two years. Hawaii's healthy start program is one of the  
8 services that has been affected.

9           The healthy start program was designed to prevent child  
10 abuse and neglect and promote child development among high-risk  
11 infants and toddlers. Although healthy start was deployed  
12 statewide in 2001, cuts to the program have resulted in  
13 elimination of assessment capacity and home visiting services  
14 for most of the State. Restoration of these critical services  
15 is the first step towards establishment of an effective,  
16 coordinated continuum of early childhood services.

17           Research has shown that a combination of factors, such as  
18 abuse of the parent in childhood, social isolation, lack of



1 social supports and life skills, substance abuse, domestic  
2 violence, and mental health problems place parents at risk for  
3 abuse and neglect of their children. Poverty and unemployment  
4 can also be major contributing factors. The healthy start  
5 approach uses research-based interview procedures to reach out  
6 to parents who may be at risk. Intensive home visits, which  
7 seek to strengthen protective factors and reduce risk, promote  
8 child and family development, and avert abuse and neglect, are  
9 also provided. Restoration of universal screening and home  
10 visitation services is a vital step in offering culturally  
11 responsive, evidence-based services to address different levels  
12 of family needs and risks.

13 A recent renaissance in research and national-level policy  
14 on early childhood underscores the foresight of the legislature  
15 in focusing on early childhood issues. For example, the  
16 National Scientific Council on the Developing Child published  
17 *The Science of Early Childhood Development: Closing the Gap*  
18 *Between What We Know and What We Do* (Harvard University, 2007).  
19 Composed of leading neuroscientists, pediatricians,  
20 developmental psychologists, and economists, the National  
21 Scientific Council on the Developing Child reviewed all current  
22 research and literature on early childhood development. Based



1 on this research, the publication presents the following core  
2 concepts of development and considers their implications for  
3 policy and practice:

- 4 (1) Brain architecture is built from the bottom up, with  
5 simple circuits and skills providing the scaffolding  
6 for more advanced circuits and skill over time;
- 7 (2) Toxic stress in early childhood is associated with  
8 persistent effects on the nervous system and stress  
9 hormonal systems that can damage developing brain  
10 architecture and lead to lifelong problems in  
11 learning, behavior, and mental and physical health;
- 12 (3) Policy initiatives that promote safe, supportive  
13 relationships and rich learning opportunities for  
14 children create a strong foundation for later  
15 learning, followed by greater productivity in the  
16 workplace, and solid citizenship in the community;
- 17 (4) Substantial progress in proper child development can  
18 be achieved through growth-promoting experiences,  
19 provided by a range of parent education, family  
20 support, early intervention services, and early  
21 childhood education;



1 (5) Later remediation for highly vulnerable children will  
2 produce less favorable outcomes and cost more than  
3 appropriate early intervention, beginning in the  
4 earliest year of life;

5 (6) Responsible investment is needed to produce results;  
6 it is not profitable to utilize interventions that may  
7 be less costly but fail to produce needed results; and

8 (7) Child development is the foundation for community and  
9 economic development; capable children become the  
10 foundation for a prosperous, sustainable society.

11 Given the foregoing realities, the legislature finds it  
12 prudent to reinstate hospital-based assessments and intensive  
13 home visiting for families at highest risk, along with referrals  
14 of other families to existing home visiting services.

15 The purpose of this Act is to reinstate hospital-based  
16 assessments and to target improved intensive home visiting  
17 services to the highest risk families of newborns in communities  
18 across the State of Hawaii, while offering other families a  
19 range of evidence-based home visiting services based on their  
20 identified needs.



1 SECTION 2. Chapter 321, Hawaii Revised Statutes, is  
2 amended by adding a new section to be appropriately designated  
3 and to read as follows:

4 "§321- Assessment and home visitation program;  
5 established. (a) There is established within the department of  
6 health, a hospital-based screening and assessment and intensive  
7 home visitation program. This program shall follow the  
8 guidelines of the improved healthy start and Healthy Families  
9 America programs.

10 (b) Hospital-based screening and assessment pursuant to  
11 this section shall:

12 (1) Include proactive universal screening and assessment  
13 to enroll families prenatally or at birth, before any  
14 child welfare reports are made;

15 (2) Make intensive home visits available on a voluntary  
16 basis for families assessed to be at the highest risk,  
17 with the highest priority given to those with scores  
18 of forty and above on the family stress checklist or  
19 parent survey; and

20 (3) Make referrals for families with lower or no-risk  
21 scores, based on the needs of the family, to a range  
22 of evidence-based home visiting services.



1        (c) Intensive home visiting services, based on guidelines  
2 of the healthy start program, shall:

3        (1) Maintain critical elements developed by the Healthy  
4 Families America program, especially related to  
5 caseloads, staff ratios, and training;

6        (2) Utilize a relationship-based approach with families,  
7 mother-infant dyads, and supervisor and family support  
8 worker relationships;

9        (3) Focus strongly on caregiver and infant attachment and  
10 social and emotional development, following principles  
11 of infant mental health;

12        (4) Utilize the clinical specialist approaches of enhanced  
13 healthy start in working with very high-risk families;

14        (5) Conduct interventions to strengthen protective factors  
15 and reduce risk;

16        (6) Integrate emerging evidence-based practice, as  
17 feasible and appropriate;

18        (7) Ensure continuous quality improvement by engaging  
19 program staff;

20        (8) Evaluate outcomes related to risk reduction, child  
21 development, family resilience, and confirmed cases of  
22 abuse and neglect; and



1       (9) Continue to evaluate the impact of intensive home  
2           visitation services and make program improvements as  
3           needed.

4       Services shall continue until the child reaches three years of  
5       age, or until the child reaches five years of age if the child  
6       has a younger sibling."

7           SECTION 3. There is appropriated out of the Hawaii tobacco  
8 settlement special fund, established pursuant to section 328L-2,  
9 Hawaii Revised Statutes, the sum of \$3,000,000 or so much  
10 thereof as may be necessary for fiscal year 2011-2012 and the  
11 same sum or so much thereof as may be necessary for fiscal year  
12 2012-2013 for hospital-based assessment and screening and  
13 intensive home visiting services.

14           The sums appropriated shall be expended by the department  
15 of health for the purposes of this Act.

16           SECTION 4. There is appropriated out of the temporary  
17 assistance for needy families fund the sum of \$3,000,000 or so  
18 much thereof as may be necessary for fiscal year 2011-2012 and  
19 the same sum or so much thereof as may be necessary for fiscal  
20 year 2012-2013 for intensive home visiting services.

21           The sums appropriated shall be transferred by the  
22 department of human services by interdepartmental transfer (U



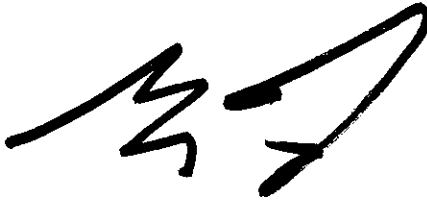
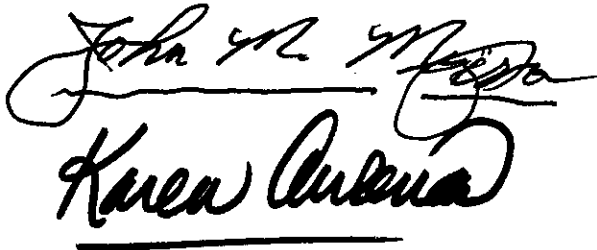
1 fund), to the department of health, to be expended by the  
2 department of health for the purposes of this Act.

3 SECTION 5. New statutory material is underscored.

4 SECTION 6. This Act shall take effect on July 1, 2011.

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INTRODUCED BY:

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JAN 21 2011





**Report Title:**

Healthy Start; Home Visitation; Department of Health;  
Appropriation

**Description:**

Establishes a hospital-based screening and assessment and intensive home visitation program under the department of health; appropriates funds from the tobacco settlement special fund and the temporary assistance to needy families fund.

*The summary description of legislation appearing on this page is for informational purposes only and is not legislation or evidence of legislative intent.*

