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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 and ensuring the State meets its  
13 public health responsibility of surveillance for needs  
14 assessment.

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



1 Scientific Council on the Developing Child reviewed all current  
2 research and literature on early childhood development. Based  
3 on this research, the publication presents the following core  
4 concepts of development and considers their implications for  
5 policy and practice:

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



- 1 support, early intervention services, and early  
2 childhood education;
- 3 (5) Later remediation for highly vulnerable children will  
4 produce less favorable outcomes and cost more than  
5 appropriate early intervention, beginning in the  
6 earliest year of life;
- 7 (6) Responsible investment is needed to produce results;  
8 it is not profitable to utilize interventions that may  
9 be less costly but fail to produce needed results; and
- 10 (7) Child development is the foundation for community and  
11 economic development; capable children become the  
12 foundation for a prosperous, sustainable society.

13 Given the foregoing findings, the legislature finds it  
14 prudent to reinstate hospital-based assessments and intensive  
15 home visiting for families at highest risk, along with referrals  
16 of other families to existing home visiting services. The  
17 legislature further finds that utilizing moneys from the Hawaii  
18 tobacco settlement special fund and temporary assistance for  
19 needy families funds is appropriate and necessary to ensure that  
20 the public health interests of the health and safety of at-risk  
21 children in Hawaii are met.



1           The purpose of this Act is to reinstate hospital-based  
 2 assessments and to target improved intensive home visiting  
 3 services to the highest risk families of newborns in communities  
 4 across the State of Hawaii. An additional purpose of this Act  
 5 is to appropriate moneys from the Hawaii tobacco settlement  
 6 special fund and temporary assistance for needy families funds  
 7 and to increase the appropriations ceiling of the Hawaii tobacco  
 8 settlement special fund to allow expenditures from that fund for  
 9 the purposes of this Act.

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

13           "§321-           Assessment and home visitation program;  
 14 established. (a) There is established within the department of  
 15 health a hospital-based screening and assessment and intensive  
 16 home visitation program. This program shall follow the  
 17 guidelines of the department's improved healthy start program.

18           (b) Hospital-based screening and assessment pursuant to  
 19 this section shall:

20           (1) Include proactive universal screening and assessment  
 21 to enroll families prenatally or at birth before any  
 22 child welfare reports are made;



- 1        (2) Make intensive home visits available on a voluntary  
2        basis for families assessed to be at the highest risk;  
3        and
- 4        (3) Make referrals for families with lower or no-risk  
5        scores, based on the needs of the family, to a range  
6        of evidence-based home visiting services.
- 7        (c) Intensive home visiting services shall:
- 8        (1) Maintain critical elements developed by the improved  
9        healthy start program, especially related to  
10       caseloads, staff ratios, training, and the multi-  
11       disciplined team approach;
- 12       (2) Utilize a relationship-based approach with families,  
13       mother-infant dyads, and supervisor and family support  
14       worker relationships;
- 15       (3) Focus strongly on caregiver and infant attachment and  
16       social and emotional development, following principles  
17       of infant mental health;
- 18       (4) Conduct interventions to strengthen protective factors  
19       and reduce risk;
- 20       (5) Integrate model enhancements established and proven  
21       throughout the federally funded Hawaii evidence based  
22       home visitation project, such as:



- 1           (A) Initiatives developed for supervision and  
2           training;
- 3           (B) Initiatives developed for identifying families  
4           for services; and
- 5           (C) The development of sound infrastructure to  
6           support home visitation, which includes data  
7           management support, continuous quality  
8           improvement, and evaluation,  
9           to ensure that outcomes can be tracked, measured, and  
10           yield optimal results for families before taking home  
11           visitation to scale;
- 12           (6) Ensure continuous quality improvement by engaging  
13           program staff; and
- 14           (7) Evaluate outcomes such as risk reduction, child  
15           development, family resilience, and confirmed cases of  
16           abuse and neglect.
- 17           Services may continue until the child reaches three years of  
18           age, or until the child reaches five years of age if the child  
19           has a younger sibling. Services shall be initiated on an  
20           incremental basis, with geographic priority to be determined by  
21           the department's needs assessment and to be implemented as  
22           funding becomes available."



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

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

10 SECTION 4. The Hawaii tobacco settlement special fund  
11 appropriation ceiling shall be increased to \$53,154,866 for  
12 fiscal year 2011-2012 and \$53,154,866 for fiscal year 2012-2013.

13 SECTION 5. Of the federal fund appropriation for the  
14 department of human services, there is appropriated temporary  
15 assistance for needy families funds in the sum of \$ or  
16 so much thereof as may be necessary for fiscal year 2011-2012  
17 and the same sum or so much thereof as may be necessary for  
18 fiscal year 2012-2013 for intensive home visiting services.

19 The sums appropriated shall be transferred from the  
20 department of human services by interdepartmental transfer (U  
21 fund) to the department of health, to be expended by the  
22 department of health for the purposes of this Act.





- 1 SECTION 6. New statutory material is underscored.
- 2 SECTION 7. This Act shall take effect on July 1, 2050.



**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 from the federal appropriation of temporary assistance for needy families funds. Increases the appropriation ceiling for the tobacco settlement special fund. Effective 07/01/2050. (SD2)

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