SENATE FILE 2299 BY COMMITTEE ON APPROPRIATIONS

(SUCCESSOR TO SSB 3128)

(As Amended and Passed by the Senate April 13, 2016)

A BILL FOR

An Act relating to the early childhood Iowa initiative.
 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

1 Section 1. Section 135.106, subsection 4, Code 2016, is 2 amended to read as follows: 4. It is the intent of the general assembly that priority 3 4 for home visitation family support funding be given to 5 approaches using evidence-based or promising models for home 6 visitation family support. Sec. 2. Section 2561.4, subsection 7, paragraph a, Code 7 8 2016, is amended to read as follows: 9 a. Waiver of existing rules, federal regulation, or 10 amendment of state law, or removal of other barriers. The 11 state board shall consider a community's current coverage of 12 family support programs and services when responding to an area 13 board's request for a waiver from the requirement in section 14 256I.9, subsection 3, paragraph "b". Sec. 3. Section 256I.4, subsection 8, Code 2016, is amended 15 16 to read as follows: 8. Develop and implement a levels of excellence rating 17 18 system for use with the state board's designation process for 19 area boards. Allow for flexibility and creativity of area 20 boards in implementing area board responsibilities and provide 21 authority for the area boards to support the communities in the 22 areas served. The levels of excellence rating system shall 23 utilize a tiered approach for recognizing the performance of 24 an area board. The system shall provide for action to address 25 poor performing areas as well as higher performing areas. 26 Subject to the funding requirements and other requirements 27 established in law, if an area board achieves the highest 28 rating level, the state board may allow special flexibility 29 provisions in regard to the funding appropriated or allocated 30 for that area board. The state board shall determine how often 31 area boards are reviewed under the system. 32 Sec. 4. Section 2561.7, subsection 1, paragraph a, Code 33 2016, is amended to read as follows: The early childhood Iowa functions for an area shall be 34 a.

35 performed under the authority of an early childhood Iowa area

-1-

1 board. The members of an area board shall be elected officials 2 or members of the public who are not employed by a provider of 3 services to or for the area board. In addition, the membership 4 of an area board shall include representation from early 5 care, education, health, human services, business, and faith 6 interests, and at least one parent, grandparent, or guardian of 7 a child from zero through age five. However, not more than one 8 member shall represent the same entity or interest. 9 Sec. 5. Section 256I.8, subsection 1, paragraph c, Code 10 2016, is amended to read as follows: Develop a comprehensive community plan for providing 11 C. 12 services for children from zero through age five. At a 13 minimum, the plan shall do all of the following: (1) Describe community and area needs for children from zero 14 15 through age five as identified through ongoing assessments. 16 (2) Describe the current and desired levels of community 17 and area coordination of services for children from zero 18 through age five, including the involvement and specific 19 responsibilities of all related organizations and entities 20 relationships and services between community providers.

21 (3) Identify all federal, state, local, and private funding 22 sources including funding estimates available in the early 23 childhood Iowa area that will be used to provide services to 24 children from zero through age five.

(4) Describe how funding sources will be used
collaboratively and the degree to which the sources can
be combined to provide necessary services to support young
children and their families.

(5) Identify the desired results and the community-wide indicators the area board expects to address through implementation of the comprehensive community plan. The plan shall identify community-specific, quantifiable performance measures to be reported in the area board's annual report and integration with the strategic plan adopted by the state board. (6) Describe the current status of support services to

-2-

1 prevent the spread of infectious diseases, prevent child 2 injuries, develop health emergency protocols, help with 3 medication, and care for children with special health needs 4 that are being provided to child care facilities registered or 5 licensed under chapter 237A within the early childhood Iowa 6 area.

7 Sec. 6. Section 256I.9, subsection 3, paragraphs b and d,
8 Code 2016, are amended to read as follows:

9 b. (1) Family support services and parent education 10 programs promoted to parents of children from zero through 11 age five. Family support services shall include but are not 12 limited to home visitation and parent education. Of the state 13 funding that an area board designates for family support 14 programs, at least sixty percent shall be committed to programs 15 with a home visitation component.

16 (2) It is the intent of the general assembly that priority 17 for home visitation <u>family support</u> program funding be given 18 to programs using evidence-based or promising models for home 19 visitation family support.

20 d. Services to improve the quality and availability of 21 all types of child care. The services may include but are 22 not limited to making nurse consultants available to support 23 quality improvement.

Sec. 7. Section 256I.9, subsection 4, paragraphs a, b, and c, Code 2016, are amended to read as follows:

a. A school ready children grant shall be awarded to an
area board annually, as funding is available. Receipt of
continued funding is subject to submission of the required
annual report <u>data</u> and the state board's determination that
the area board is <u>measuring making progress</u>, through the use
of <u>specific, quantifiable</u> performance measures and <u>locally</u>
<u>identified</u> community-wide indicators, <u>developed by the state</u>
board with input from area boards, progress toward and is
achieving the desired results and other results identified
in the community plan. Each area board shall participate in

-3-

S.F. 2299

1 the levels of excellence rating system designation process to 2 measure the area's success. If the use of performance measures 3 and community-wide indicators does not show that an area board 4 has made progress toward achieving the results identified in 5 the community plan, the state board shall require a plan of 6 corrective action, provide technical assistance, withhold any 7 increase in funding, or withdraw grant funding.

8 *b*. The state board shall distribute school ready children 9 grant moneys to area boards with approved comprehensive 10 community plans based upon a determination of an early 11 childhood Iowa area's readiness to effectively utilize the 12 grant moneys designation. The grant moneys shall be adjusted 13 for other federal and state grant moneys to be received by the 14 area for services to children from zero through age five. An area board's readiness designation shall be determined 15 с. 16 by evidence of successful collaboration among public and 17 private early care, education, health, and human services 18 interests in the area or a documented program design that 19 supports a strong likelihood of a successful collaboration 20 between these interests. Other criteria which may be used by 21 the state board to determine readiness and funding amounts for 22 an area include one or more of the following:

23 (1) The levels of excellence rating received by the area.

24 (2) Evidence of the area's capacity to successfully

25 implement the services in the area's community plan.

26 (3) Local public and private funding and other resources
27 committed to implementation of the community plan.

28 (4) The adequacy of plans for commitment of local funding
29 and other resources for implementation of the community plan.
30 Sec. 8. Section 256I.10, subsection 3, Code 2016, is amended

31 by striking the subsection.

32 Sec. 9. Section 256I.11, subsection 4, paragraph b, Code 33 2016, is amended by striking the paragraph.

34 Sec. 10. Section 256I.13, Code 2016, is amended to read as 35 follows:

-4-

1 256I.13 Home visitation Family support program — funding 2 intent.

1. In order to implement the legislative intent stated in sections 135.106 and 256I.9, that priority for home visitation <u>family support</u> program funding be given to programs using evidence-based or promising models for home visitation <u>family</u> <u>support</u>, it is the intent of the general assembly to phase in the funding priority as follows:

9 a. By July 1, 2013, twenty-five percent of state funds 10 expended for home visiting programs are for evidence-based or 11 promising program models.

12 b. By July 1, 2014, fifty percent of state funds expended 13 for home visiting programs are for evidence-based or promising 14 program models.

15 c. By July 1, 2015, seventy-five percent of state funds 16 expended for home visiting programs are for evidence-based or 17 promising program models.

18 d. By that by July 1, 2016, ninety percent of state
19 funds expended for home visiting family support programs
20 are shall be used for evidence-based or promising program
21 models. The remaining ten percent of funds may be used for
22 innovative program models that do not yet meet the definition
23 of evidence-based or promising programs.

24 2. For the purposes of this section, unless the context 25 otherwise requires or unless otherwise provided under federal 26 law:

27 a. "Evidence-based program" means a program that is based 28 on scientific evidence demonstrating that the program model 29 is effective. An evidence-based program shall be reviewed 30 on site and compared to program model standards by the model 31 developer or the developer's designee at least every five years 32 to ensure that the program continues to maintain fidelity 33 with the program model. The program model shall have had 34 demonstrated significant and sustained positive outcomes in an 35 evaluation utilizing a well-designed and rigorous randomized

-5-

SF 2299 (4) 86 rh/nh/jh

5/8

1 controlled research design or a quasi-experimental research 2 design, and the evaluation results shall have been published in 3 a peer-reviewed journal.

"Family support programs" includes group-based parent 4 b. 5 education or home visiting programs that are designed to 6 strengthen protective factors, including parenting skills, 7 increasing parental knowledge of child development, and 8 increasing family functioning and problem solving skills. A 9 family support program may be used as an early intervention 10 strategy to improve birth outcomes, parental knowledge, family 11 economic success, the home learning environment, family and 12 child involvement with others, and coordination with other 13 community resources. A family support program may have a 14 specific focus on preventing child maltreatment or ensuring 15 children are safe, healthy, and ready to succeed in school. 16 C. "Promising program" means a program that meets all of the

17 following requirements:

18 (1) The program conforms to a clear, consistent family 19 support model that has been in existence for at least three 20 years.

21 (2) The program is grounded in relevant empirically based 22 knowledge.

(3) The program is linked to program-determined outcomes.
(4) The program is associated with a national or state
organization that either has comprehensive program standards
that ensure high-quality service delivery and continuous
program quality improvement or the program model has
demonstrated through the program's benchmark outcomes that the
program has achieved significant positive outcomes equivalent
to those achieved by program models with published significant
and sustained results in a peer-reviewed journal.

32 (5) The program has been awarded the Iowa family support 33 credential and has been reviewed on site at least every five 34 years to ensure the program's adherence to the Iowa family 35 support standards approved by the state board or a comparable

-6-

1 set of standards. The on-site review is completed by an 2 independent review team that is not associated with the program 3 or the organization administering the program.

3. a. The data reporting requirements adopted by the 5 state board pursuant to section 2561.4 for the family support 6 programs targeted to families expecting a child or with newborn 7 and infant children through age five and funded through the 8 state board shall require the programs to participate in a 9 state-administered internet-based data collection system. The 10 data reporting requirements shall be developed in a manner to 11 provide for compatibility with local data collection systems. 12 The state board's annual report submitted each January to 13 the governor and general assembly under section 2561.4 shall 14 include family support program outcomes beginning with the 15 January 2015 report.

16 b. The data on families served that is collected by the 17 family support programs funded through the early childhood 18 Iowa initiative shall include but is not limited to basic 19 demographic information, services received, funding utilized, 20 and program outcomes for the children and families served. The 21 state board shall adopt performance benchmarks for the family 22 support programs and shall revise the Iowa family support 23 credential to incorporate the performance benchmarks on or 24 before January 1, 2014.

25 c. The state board shall identify minimum competency 26 standards for the employees and supervisors of family support 27 programs funded through the early childhood Iowa initiative. 28 The state board shall submit recommendations concerning the 29 standards to the governor and general assembly on or before 30 January 1, 2014.

31 *d.* The state board shall adopt criminal and child abuse 32 record check requirements for the employees and supervisors of 33 family support programs funded through the early childhood Iowa 34 initiative.

35 e. The state board shall develop a plan to implement a

-7-

1 coordinated intake and referral process for publicly funded

2 family support programs in order to engage the families

3 expecting a child or with newborn and infant children through

4 age five in all communities in the state by July 1, 2015.

-8-