
**Early Learning & Human Services
Committee**

HB 1965

Brief Description: Concerning adverse childhood experiences.

Sponsors: Representative Kagi.

Brief Summary of Bill

- Eliminates the Family Policy Council effective June 30, 2012.
- Eliminates the Council for Children and Families effective June 30, 2012.
- Creates a nongovernmental public-private partnership to reduce adverse childhood experiences.

Hearing Date: 2/15/11

Staff: Megan Palchak (786-7120).

Background:

Family Policy Council.

The Family Policy Council (FPC) was established to modify public policy and programs to empower communities to support and respond to the needs of individual families and children, and to improve the responsiveness of services for children and families at risk by facilitating greater coordination and flexibility in the use of funds by state and local service agencies.

Duties of the FPC. The FPC is required to:

- establish boundaries for community networks;
- develop technical assistance and training programs to assist communities in developing networks;
- approve the structure, purpose, goals, plan, and performance measures of each network;

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- identify prevention and early intervention programs and funds which could be transferred to a community network and report findings to the Governor and Legislature;
- reward exceptionally successful community networks;
- seek opportunities to maximize federal and other funding that is consistent with the plans approved by the FPC; and
- monitor the implementation of programs contracted by participating state agencies.

Community Networks. The FPC partners with approximately 42 community public health and safety networks. Networks are required to:

- review state and local public health data related to risk-factors, protective-factors, and at-risk children and youth;
- prioritize risk factors and protective factors to reduce the likelihood of children and youth becoming at-risk;
- develop long-term comprehensive plans to reduce the rate of at-risk children and youth;
- comply with the Department of Health and local boards of health to provide data and determine outcomes; and
- coordinate its efforts with anti-drug use efforts and organizations.

Readiness to Learn Grants. To the extent that funds are appropriated, the FPC awards grants to community-based consortiums that submit comprehensive plans which include strategies to improve readiness to learn.

Council for Children and Families.

The Council for Children and Families (CCF) was established to increase educational programs and services to prevent child abuse and neglect in partnership between communities, citizens, and the state.

The CCF is authorized to contract with public or private nonprofit organizations, agencies, schools, or with qualified individuals for the establishment of a range of community-based programs and services designed to reduce child abuse and neglect. The CCF is also charged with:

- facilitating the exchange of information between groups concerned with families and children;
- consulting with the applicable agencies, commissions, and boards to help determine the probable effectiveness, fiscal soundness, and need for proposed educational and service programs for the prevention of child abuse and neglect;
- establishing fee schedules to provide for the recipients of services to reimburse the State General Fund for the cost of services received; and
- accepting and dispersing funds from the Children's Trust Fund.

Adverse Childhood Experiences.

The Center for Disease Control and Prevention (CDC) has conducted a long-term, large-scale study, to examine the relationship between adverse childhood experiences (ACEs), and critical outcomes later in life. The ACEs study findings have indicated that particular experiences early in life are major risk factors for the leading causes of illness, death, and poor quality of life.

The CDC defines ACEs as any of the following conditions in a household of a child under age 18:

- recurrent physical abuse;
- recurrent emotional abuse;
- sexual abuse;
- an alcohol and/or drug abuser in the household;
- an incarcerated household member;
- someone who is chronically depressed, mentally ill, institutionalized, or suicidal;
- mother is treated violently;
- one or no parents; and
- emotional or physical neglect.

In 2010 the first Washington ACEs data became available through the Behavioral Risk Factor Surveillance System (BRFSS). According to the Department of Health, the BRFSS is the largest, continuously conducted, telephone health survey in the world. It enables the CDC, state health departments, and other health agencies to monitor modifiable risk factors for chronic diseases and other leading causes of death.

According to the 2010 FPC report, *Adverse Childhood Experiences and Population Health in Washington: the Face of a Chronic Public Health Disaster*, ACEs have been common in Washington. The data have indicated a need for "integrated approaches to prevent ACEs, and intervene early on [in the lives of] children... better identification and treatment of the effects of ACEs among persons and systems interacting with children...." The FPC concluded that "... development of more integrated approaches will likely contribute to improved treatment of affected persons, and better integration of research priorities, preventive social and educational services and legal venues."

Summary of Bill:

Family Policy Council.

The Family Policy Council (FPC) is eliminated effective June 30, 2012. Community networks are preserved. The authority to award readiness to learn grants is transferred to the Office of the Superintendent of Public Instruction.

Council for Children and Families.

The Council for Children and Families is eliminated effective June 30, 2012. Authority related to the Children's Trust Fund is transferred to the Department of Social and Health Services (DSHS). The duty to fund evidence and researched-based home visitation programs, and work with the DSHS and the Department of Health to develop a plan to coordinate or consolidate home visitation services, is transferred to the Department of Early Learning.

Adverse Childhood Experiences.

Public-Private Partnership. A nongovernmental public-private partnership (PPP) is created to reduce adverse childhood experiences (ACEs) using research and evidence-based approaches to prevent and intervene in ACEs of children during their first five years of life, by:

- aligning the interests of various community-based organizations around the goal of reducing ACEs; and
- developing a method to distribute funds based on data indicating areas of need and the use of evidence and research-based strategies to address those needs.

Department of Social and Health Services. The Secretary of the DSHS is authorized to:

- enter into contracts on behalf of the DSHS to reduce ACEs;
- provide funding to the PPP;
- accept gifts, grants, or other funds to reduce ACEs;
- disperse funds from the Children's Trust Fund; and
- establish blended funding projects without seeking input from community networks established under the FPC.

Appropriation: None.

Fiscal Note: Requested on February 14, 2011.

Effective Date: The bill takes effect 90 days after adjournment of the session in which the bill is passed.