1	SENATE BILL 365
2	51st legislature - STATE OF NEW MEXICO - FIRST SESSION, 2013
3	INTRODUCED BY
4	John M. Sapien
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10	AN ACT
11	RELATING TO HUMAN SERVICES; REQUIRING THE CHILDREN, YOUTH AND
12	FAMILIES DEPARTMENT TO ESTABLISH A HOME VISITING PROGRAM;
13	PROVIDING FOR RULEMAKING.
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15	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:
16	SECTION 1. SHORT TITLEThis act may be cited as the
17	"Home Visiting Accountability Act".
18	SECTION 2. DEFINITIONSAs used in the Home Visiting
19	Accountability Act:
20	A. "culturally and linguistically appropriate"
21	means taking into consideration the culture, customs and
22	language of an eligible family's home;
23	B. "department" means the children, youth and
24	families department;
25	C. "eligible family" means a family that elects to
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1 receive home visiting and includes:

2 a child, from birth until kindergarten (1) 3 entry; or a pregnant woman, an expectant father, a 4 (2) 5 parent or a primary caregiver; "home visiting" means a program strategy that: 6 D. 7 (1)delivers a variety of informational, educational, developmental, referral and other support services 8 9 for eligible families who are expecting or who have children who have not yet entered kindergarten and that is designed to 10 promote child well-being and prevent adverse childhood 11 12 experiences; provides a comprehensive array of services (2) 13 that promote parental competence and successful early childhood 14 health and development by building long-term relationships with 15 families and optimizing the relationships between parents and 16 children in their home environments; and 17 does not include: (3) 18 (a) provision of case management or a 19 20 one-time home visit or infrequent home visits, such as a home visit for a newborn child or a child in preschool; 21 (b) home visiting that is provided as a 22 supplement to other services; or 23 (c) services delivered through an 24 individualized family service plan or an individualized 25

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1 education program under Part B or Part C of the federal 2 Individuals with Disabilities Education Act; "home visiting program" means a program that: 3 Ε. (1) uses home visiting as a primary service 4 delivery strategy; and 5 (2) offers services on a voluntary basis to 6 7 pregnant women, expectant fathers and parents and primary caregivers of children from birth to kindergarten entry; 8 "home visiting system" means the infrastructure 9 F. and programs that support and provide home visiting. A "home 10 visiting system": 11 12 (1) provides universal, voluntary access; provides a common framework for service (2) 13 delivery and accountability across all home visiting programs; 14 establishes a consistent statewide system 15 (3) of home visiting; and 16 (4) allows for the collection, aggregation and 17 analysis of common data; and 18 "standards-based program" means a home visiting 19 G. 20 program that: is research-based and grounded in (1) 21 relevant, empirically based best practices and knowledge that: 22 is linked to and measures the (a) 23 1) babies that are born healthy; 2) following outcomes: 24 children that are nurtured by their parents and caregivers; 3) 25 .191149.2 - 3 -

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1 children that are physically and mentally healthy; 4) children 2 that are ready for school; 5) children and families that are safe; and 6) families that are connected to formal and informal 3 supports in their communities; 4 5 (b) has comprehensive home visiting standards that ensure high-quality service delivery and 6 7 continuous quality improvement; and 8 (c) has demonstrated significant, 9 sustained positive outcomes; follows program standards that specify the 10 (2) purpose, outcomes, duration and frequency of services that 11 12 constitute the program; follows a research-based curriculum or (3) 13 14 combinations of research-based curricula, or follows the curriculum of an evidence-based home visiting model or 15 promising approach that the home visiting program has adopted 16 pursuant to department rules defining "evidence-based model" 17 and "promising approach"; 18 employs well-trained and competent staff 19 (4) 20 and provides continual professional supervision and development relevant to the specific program or model being delivered; 21 (5) demonstrates strong links to other 22 community-based services; 23 operates within an organization that (6) 24 ensures compliance with home visiting standards; 25 .191149.2 - 4 -

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1 (7) continually evaluates performance to 2 ensure fidelity to the program standards; (8) collects data on program activities and 3 program outcomes; and 4 is culturally and linguistically 5 (9) appropriate. 6 7 SECTION 3. HOME VISITING PROGRAMS--ACCOUNTABILITY--8 EXCLUSIONS -- CONTRACTING -- REPORTING .--9 Α. The department shall provide statewide home visiting services using a standards-based program. 10 11 The department shall fund only standards-based Β. 12 home visiting programs that include periodic home visits to improve the health, well-being and self-sufficiency of eligible 13 families. 14 A home visiting program shall provide culturally C. 15 and linguistically appropriate, face-to-face visits by nurses, 16 social workers and other early childhood and health 17 professionals or by trained and supervised lay workers. 18 19 D. A home visiting program shall do two or more of 20 the following: improve prenatal, maternal, infant or (1)21 child health outcomes, including reducing preterm births; 22 promote positive parenting practices; 23 (2) (3) build healthy parent and child 24 25 relationships; .191149.2 - 5 -

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1 (4) enhance children's social-emotional and 2 language development; 3 support children's cognitive and physical (5) 4 development; improve the health of eligible families; 5 (6) provide resources and supports that may 6 (7) 7 help to reduce child maltreatment and injury; increase children's readiness to succeed 8 (8) 9 in school; and improve coordination of referrals for, and 10 (9) the provision of, other community resources and supports for 11 12 eligible families. The department shall work with the early Ε. 13 learning advisory council and develop internal processes that 14 provide for a greater ability to collaborate with other state 15 agencies, local governments and private entities and share 16 relevant home visiting data and information. The processes may 17 include a uniform format for the collection of data relevant to 18 19 each home visiting program. 20 F. A state agency that authorizes funds through payments, contracts or grants that are used for home visiting 21 programs shall include language regarding home visiting in its 22 funding agreement contract or grant that is consistent with the 23 provisions of the Home Visiting Accountability Act. 24 The department and the providers of home G. 25 .191149.2

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1	visiting services, in consultation with one or more experts in
2	home visiting program evaluation, shall:
3	(1) jointly develop an outcomes measurement
4	plan to monitor outcomes for children and families receiving
5	services through home visiting programs;
6	(2) develop indicators that measure each
7	objective established pursuant to Subsection D of this section;
8	and
9	(3) complete and submit the outcomes
10	measurement plan by November 1, 2013 to the legislature, the
11	governor and the early learning advisory council.
12	H. Beginning January 1, 2014 and annually
13	thereafter, the department shall produce an annual outcomes
14	report to the governor, the legislature and the early learning
15	advisory council.
16	I. The annual outcomes report shall include:
17	(1) the goals and achieved outcomes of the
18	home visiting system implemented pursuant to the Home Visiting
19	Accountability Act;
20	(2) data regarding:
21	(a) the cost per eligible family served;
22	(b) the number of eligible families
23	served;
24	(c) demographic data on eligible
25	families served;
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1 (d) the duration of participation by 2 eligible families in the program; (e) the number and type of programs that 3 the department has funded; 4 5 any increases in school readiness, (f) child development and literacy; 6 7 (g) decreases in child maltreatment or child abuse; 8 9 (h) any reductions in risky parental 10 behavior; the percentage of children receiving (i) 11 12 regular well-child exams, as recommended by the American academy of pediatrics; 13 14 (i) the percentage of infants on schedule to be fully immunized by age two; 15 (k) the number of children that received 16 the ages and stages questionnaire published by the Paul H. 17 Brookes publishing company, incorporated, and what percent 18 scored age appropriately in all developmental domains; 19 20 (1)the number of children identified with potential developmental delay and, of those, how many 21 began services within two months of the screening; and 22 the percentage of children receiving (m) 23 home visiting services who are enrolled in high-quality 24 licensed child care programs; and 25 .191149.2 - 8 -

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	1	(3) descriptions of the home visiting models
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