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## A BILL FOR AN ACT

RELATING TO HEALTHY START.

**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 and proactive  
4 legislation to ensure the safety and well-being of infants,  
5 toddlers, and pre-schoolers. As a result, over the past twenty-  
6 five years, many early childhood programs, services, and  
7 concepts have been developed and expanded, including the healthy  
8 start program, the zero to three program, the early learning  
9 council, good beginnings alliance, the concept of universal pre-  
10 school for four year olds, baby safe, keiki play mornings, the  
11 parenting hotline, and the family center.

12           A recent renaissance in research and national-level policy  
13 on early childhood underscores the foresight of these actions.  
14 For example, the National Scientific Council on the Developing  
15 Child published *The Science of Early Childhood Development:  
16 Closing the Gap Between What We Know and What We Do* (Harvard  
17 University, 2007). Comprised of leading neuroscientists,



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

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

11           (2)    Brain architecture is built from the bottom up, with  
12                    simple circuits and skills providing the scaffolding  
13                    for more advanced circuits and skill over time;

14           (3)    Toxic stress in early childhood is associated with  
15                    persistent effects on the nervous system and stress  
16                    hormonal systems that can damage developing brain  
17                    architecture and lead to lifelong problems in  
18                    learning, behavior, and mental and physical health;

19           (4)    Policy initiatives that promote supportive  
20                    relationships and rich learning opportunities for  
21                    children create a strong foundation for high  
22                    achievement in school followed by greater productivity



1           in the workplace and solid citizenship in the  
2           community;

3           (5) Substantial progress in proper child development can  
4           be achieved by assuring growth-promoting experiences  
5           through a range of parent education, family support,  
6           early childhood education, and early intervention  
7           programs;

8           (6) Later remediation for highly vulnerable children will  
9           produce less favorable outcomes and cost more than  
10          appropriate early interventions, beginning in the  
11          earliest year of life; and

12          (7) Responsible investment is needed to produce results;  
13          it is not profitable to utilize intervention that may  
14          be less costly but fails to produce needed results.

15          Given the foregoing realities, the legislature finds it  
16          prudent to move as soon as possible to reinstate early childhood  
17          services and continue the work of the early learning council to  
18          develop a comprehensive continuum of services, with emphasis and  
19          priority given to the most vulnerable children. Abuse and  
20          neglect often start early in a child's life. Perinatal child  
21          abuse prevention and home visiting services with high-risk  
22          families should be re-established on a permanent basis, as it is



1 critical to avert or minimize toxic stresses that cause long-  
2 term damage to children.

3 As recent events exemplify, in tight economic times, the  
4 safety net for vulnerable families is the first to be  
5 dismantled. In the longer term, this will increase the cost of  
6 services which already are very costly, such as special  
7 education, mental health services, drug treatment services, and  
8 prison construction. The State will also lose the potential  
9 productivity which these affected children should have as  
10 adults.

11 The strategy of establishing permanent services to ensure  
12 the safety and optimal development of our children in their  
13 earliest years is humane and economically strategic.

14 The purpose of this Act is to exempt the healthy start  
15 program from the state budget allotment system and to establish  
16 the healthy start program in statute.

17 SECTION 2. Chapter 37, Hawaii Revised Statutes, is amended  
18 by adding a new section to be appropriately designated and to  
19 read as follows:

20 "§37-A Programs exempt from allotment system. The healthy  
21 start program of the department of health under section 321-A  
22 shall be exempt from sections 37-32, 37-34, and 37-37, to the



1 extent that services provided by or contracted by the department  
2 of health for the healthy start program shall not be diminished  
3 or eliminated due to budgetary shortfalls. This exemption shall  
4 apply to personnel positions for the healthy start program  
5 within the department of health."

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

9 "§321-A Healthy start program; established. (a) There is  
10 established the healthy start program, to be placed under the  
11 department of health for administrative purposes. The healthy  
12 start program shall provide support services within a family's  
13 natural environment to reduce the likelihood of child  
14 maltreatment by reducing parental or environmental stressors;  
15 provide linkages with community resources including health and  
16 mental health services, early childhood education, childcare,  
17 family literacy, employment, social services, developmental  
18 screening and appropriate child development education and  
19 interventions, service coordination, and advocacy for families;  
20 and provide parents with knowledge of child development, child  
21 health, and positive parenting skills and problem-solving  
22 techniques.



1       The healthy start program shall include a home visitation  
2 program to foster family functioning, promote child health  
3 development, and enhance positive parenting skills for families  
4 in order to reduce the risk of child maltreatment by addressing  
5 malleable environmental risk factors via information, support,  
6 and linkages to needed community resources. The home visitation  
7 program shall:

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

11       (2) Make home visit services available for families  
12       assessed to be at-risk, with the highest priority  
13       given to those with scores of forty and above on the  
14       family stress checklist or parent survey;

15       (3) Maintain critical elements, especially related to  
16       caseloads, staff ratios, and training, developed by  
17       the Healthy Families America Program;

18       (4) Focus on a relational approach with families, mother-  
19       infant dyads, and supervisor and family support worker  
20       relationships;

21       (5) Focus strongly on caregiver and infant attachment and  
22       social and emotional development;



- 1        (6) Conduct interventions to strengthen protective factors
- 2            and reduce risk;
- 3        (7) Integrate emerging evidence-based practice, as
- 4            feasible and appropriate;
- 5        (8) Ensure continuous quality improvement by engaging
- 6            program staff; and
- 7        (9) Evaluate outcomes related to child development, risk
- 8            reduction, and confirmed cases of abuse, neglect, and
- 9            family resilience.

10        Acceptance of services by the family shall be voluntary.  
11 Services shall continue until the child reaches three years of  
12 age, or until the child reaches five years of age if there is a  
13 younger sibling.

14        (b) In addition to public moneys from appropriations, the  
15 department of health may receive federal grants and accept  
16 private donations for purposes of funding the healthy start  
17 program.

18        (c) As provided in section 37-A, the healthy start program  
19 shall not be subject to budget reductions made under the  
20 allotment system."

21        SECTION 4. In codifying the new sections added by sections  
22 2 and 3 of this Act, the revisor of statutes shall substitute

# H.B. NO. 2130

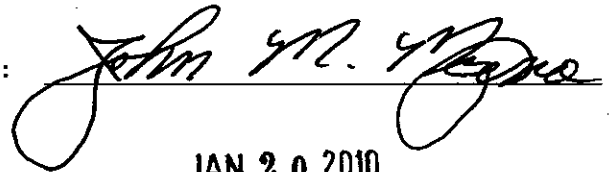
1 appropriate section numbers for the letters used in designating  
2 the new sections in this Act.

3 SECTION 5. New statutory material is underscored.

4 SECTION 6. This Act, upon its approval, shall take effect  
5 retroactive to

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INTRODUCED BY:



JAN 20 2010





**Report Title:**

Healthy Start Program; Established; Budget Exemption

**Description:**

Creates the healthy start program; exempts healthy start program from the budget allotment system. Clarifies purpose of healthy start program.

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

