

THE GENERAL ASSEMBLY OF PENNSYLVANIA

HOUSE BILL

No. 200 Session of  
2005

INTRODUCED BY MUNDY, BROWNE, BEBKO-JONES, BELARDI, BELFANTI, BISHOP, BLACKWELL, BLAUM, BUNT, CALTAGIRONE, CAWLEY, CORRIGAN, CRAHALLA, CURRY, DALEY, DALLY, DeWEESE, FABRIZIO, FLICK, FRANKEL, FREEMAN, GERGELY, GOODMAN, GRUCELA, GRUITZA, HARHAI, HERMAN, JAMES, JOSEPHS, W. KELLER, LaGROTTA, LEACH, MACKERETH, MANDERINO, MANN, MARKOSEK, McCALL, NAILOR, PALLONE, PETRARCA, PISTELLA, READSHAW, REICHLEY, ROEBUCK, ROSS, SAINATO, SAMUELSON, SANTONI, SEMMEL, SHANER, SOLOBAY, STABACK, STAIRS, STETLER, STURLA, SURRA, THOMAS, TIGUE, WALKO, WANSACZ, WHEATLEY, YOUNGBLOOD, YUDICHAK, TRUE, VEON, GERBER, SHAPIRO, D. EVANS, BIANCUCCI, DERMODY AND RAMALEY, FEBRUARY 16, 2005

REFERRED TO COMMITTEE ON HEALTH AND HUMAN SERVICES,  
FEBRUARY 16, 2005

AN ACT

1 Providing for the strengthening and enrichment of children and  
2 families by promoting safe, healthy and nurturing home  
3 environments, for the educational and supportive services of  
4 home visiting programs in this Commonwealth, for the Ounce of  
5 Prevention Program and for integrated community-based  
6 delivery of services; specifying program requirements;  
7 designating an oversight board; providing for  
8 responsibilities of the board and the Department of Public  
9 Welfare; specifying criteria for community program grant  
10 funding; requiring training and an independent evaluation  
11 process; and providing for quality assurance.

12 The General Assembly of the Commonwealth of Pennsylvania  
13 hereby enacts as follows:

14 Section 1. Short title.

15 This act shall be known and may be cited as the Ounce of  
16 Prevention Act.

17 Section 2. Legislative intent.

1 (a) Funding.--

2 (1) The General Assembly finds that family well-being is  
3 critical to a child's health and development, that parenting  
4 is a difficult responsibility and that most of the assistance  
5 available to Pennsylvania families occurs after there is a  
6 problem and often provides too little, too late. Research  
7 shows that comprehensive early home visitation programs  
8 prevent child abuse, help develop positive parent-child  
9 interactions, help brain development of the child, have a  
10 long-term savings in both public and private health care  
11 costs and help avoid future social problems. In addition to  
12 addressing child abuse, such programs help to ensure that  
13 families' social and medical needs are met and that children  
14 are ready for success in school.

15 (2) The General Assembly finds that Pennsylvania needs  
16 broad implementation of a program to provide support for  
17 families which need and desire assistance in establishing  
18 healthy relationships and environments for their children.

19 (3) The General Assembly intends to appropriate funds to  
20 the board to carry out the program.

21 (b) Intent.--It is the intent of the General Assembly to  
22 establish the Ounce of Prevention Program as a collaborative  
23 effort that builds on existing community-based home visiting and  
24 family support resources and will not duplicate the existing  
25 services. It is further the intent of the General Assembly to  
26 provide the needed intensity and duration of services extending  
27 beyond those available through Head Start and Early Head Start  
28 programs, thus filling a major gap in the existing continuum of  
29 early childhood prevention and assistance services.

30 Section 3. Definitions.

1 The following words and phrases when used in this act shall  
2 have the meanings given to them in this section unless the  
3 context clearly indicates otherwise:

4 "Board." The Children's Trust Fund Board.

5 "Department." The Department of Public Welfare of the  
6 Commonwealth.

7 "Program." The Ounce of Prevention Program established in  
8 section 4 (relating to Ounce of Prevention Program).

9 Section 4. Ounce of Prevention Program.

10 (a) Establishment.--The Ounce of Prevention Program is  
11 established as a voluntary home visiting grant program for  
12 expectant mothers and newborn children and their families.

13 (b) Purpose.--The purpose of the program is to strengthen  
14 families; promote early childhood growth and development;  
15 improve childhood immunization rates and well-child care;  
16 improve child health outcomes; improve school readiness;  
17 increase family self-sufficiency; increase the involvement of  
18 both parents with their children; and reduce the incidence of  
19 child abuse and neglect through a primary prevention approach  
20 that offers home visits and linkages to family supports for  
21 families and their newborn children and continues until the  
22 children reach five years of age or begin the Head Start  
23 Program.

24 Section 5. Delivery of services.

25 Service delivery under this act shall be community-based and  
26 collaborative. Services shall be integrated and coordinated with  
27 other services provided under Head Start and Early Head Start  
28 programs and by local school districts, as well as with other  
29 home visiting and family support service delivery systems  
30 currently in place in communities throughout this Commonwealth.

1 Services shall be offered with the intensity and duration  
2 required to prevent child abuse and neglect, improve child  
3 development and child health outcomes and to promote child  
4 school-readiness and educational development.

5 Section 6. Program requirements.

6 The program established under this act shall provide for  
7 intensive home visits and include the following critical home  
8 visiting elements:

9 (1) Initiation of services. This element provides for:

10 (i) Initiation of services prenatally or at the  
11 birth of the first child.

12 (ii) Use of a standardized assessment tool to  
13 systematically identify those at-risk families most in  
14 need of services. The home visitor shall inform any  
15 potential participant that the assessment or  
16 participation in the program is purely voluntary.

17 (iii) Offering services on a purely voluntary basis  
18 and use of positive, persistent outreach efforts to build  
19 family trust.

20 (iv) Working with family members to identify  
21 strengths and resources that can be mobilized to help  
22 resolve identified family concerns.

23 (2) Service content. This element provides for:

24 (i) Offering services over the long term and  
25 intensively, with well-defined criteria for increasing or  
26 decreasing the intensity of the service.

27 (ii) Providing services that focus on supporting  
28 first-time at-risk expectant parents and families,  
29 encouraging the interaction of both parents with their  
30 child, and enhancing the development of the child,

1 including school readiness and educational development.

2 (iii) Linking at-risk families to medical providers  
3 to ensure optimal health and development of the child,  
4 timely childhood immunizations, well-child care that  
5 provides for developmental assessment and is consistent  
6 with the standards and periodicity schedules of Medicaid  
7 and the American Academy of Pediatrics and additional  
8 services, as needed.

9 (iv) Ensuring confidentiality and privacy for  
10 families.

11 (v) Having periodic evaluations of program  
12 effectiveness.

13 (vi) Having established mechanisms in place to refer  
14 first-time at-risk expectant parents and families for  
15 other intervention services available in the community.

16 (3) Qualifications and training of home visitors. This  
17 element provides for:

18 (i) Ensuring that home visitors have basic training  
19 in areas, including substance abuse, child abuse,  
20 domestic violence, drug-exposed infants and parents,  
21 child development, services available in the community,  
22 infant care and early childhood development, school  
23 readiness and parenting.

24 (ii) Ensuring that home visitors conducting home  
25 visits are certified registered nurses or are qualified  
26 home visitors under 45 CFR § 1304.52(e) (relating to  
27 human resources management).

28 (iii) Ensuring that home visitors have preservice  
29 and ongoing training that is specific to their job  
30 requirements.

1 (iv) Ensuring that home visit providers receive  
2 ongoing reviews and direct and intensive supervision.

3 (v) Ensuring that home visitors are qualified  
4 community-based private, not-for-profit or public  
5 organizations that have strong community support and the  
6 social and fiscal capacity to provide the service.

7 Section 7. Children's Trust Fund Board.

8 (a) Designation.--The board is designated as an oversight  
9 board.

10 (b) Powers and duties.--The board has the following powers  
11 and duties:

12 (1) To develop measurable outcomes consistent with  
13 established home visiting programs operating in this  
14 Commonwealth.

15 (2) To establish assessment and credentialing standards  
16 for home visitation programs receiving grant funding under  
17 this act.

18 (3) To review grant applications and award grants for  
19 home visiting programs. No nongovernmental member may:

20 (i) Review grant applications or vote to award  
21 grants to entities by which they are employed or with  
22 which they are directly affiliated.

23 (ii) Be a lobbyist as defined under 65 Pa.C.S. Ch.  
24 13 (relating to lobby regulation and disclosure).

25 (4) Grants for home visiting programs shall be awarded  
26 on a three-year basis. The board may rescind a portion of the  
27 grant not yet allocated if it determines through outcome,  
28 expenditure and performance data submitted by the grantees  
29 under section 8 (relating to implementation) that the funds  
30 are not being properly utilized.

1 (5) Develop an assessment tool to identify at-risk  
2 families who are eligible for home visiting grants under this  
3 act. The assessment tool shall be a mechanism to identify  
4 risk factors that may lead to child abuse or neglect or other  
5 poor childhood outcomes.

6 (6) Establish policies for the development,  
7 implementation and administration of the program.

8 Section 8. Implementation.

9 The board shall do all of the following:

10 (1) Implement a community-based home visiting program  
11 for first-time at-risk expectant parents and families in this  
12 Commonwealth using the criteria set forth in this section.

13 (2) Develop a grant application and award grants under  
14 this program in accordance with the following requirements:

15 (i) Grants shall be awarded in accordance with  
16 weighted criteria based on population demographics,  
17 factors associated with child abuse and neglect and other  
18 appropriate criteria developed by the board.

19 (ii) Cash or in-kind matching funds in the amount of  
20 25% of the total program cost shall be required.

21 (iii) If a program is not able to meet the 25% match  
22 requirement, justification must be included in the grant  
23 application providing a detailed explanation of the  
24 reasons why this match cannot be met and the percentage  
25 of the match that can be met. A determination will be  
26 made by the board as to the merit of the justification.

27 (3) Develop a plan of implementation to equitably  
28 distribute funds throughout this Commonwealth.

29 (4) Require that, in addition to the program  
30 requirements outlined in section 6 (relating to program

1 requirements), the following criteria be used in selecting  
2 recipients of grant funds:

3 (i) Preference for grant awards shall be given to  
4 community-based entities that have broad representation  
5 and have the fiscal and administrative capacity to  
6 successfully implement the program.

7 (ii) Home visiting programs that receive grants  
8 should collaborate with other home visiting and family  
9 support programs in the community to avoid duplication  
10 and complement and integrate with existing services.

11 (iii) Each applicant shall use the standardized  
12 assessment tool developed by the board under section 7  
13 (relating to Children's Trust Fund Board).

14 (iv) Each applicant must provide outcome,  
15 expenditure and performance data in the format and the  
16 frequency specified by the board.

17 (v) Each applicant must identify local resources  
18 available for implementation.

19 (vi) Implementation design must include service  
20 delivery strategies which, when appropriate, involve both  
21 parents if they have shared parental responsibility,  
22 regardless of residential custody arrangements.

23 (5) Evaluate and approve grant applications and local  
24 implementation plans for service delivery.

25 (6) Encourage applicants to coordinate service delivery  
26 with Head Start, Early Head Start, Parents as Teachers,  
27 family centers, school districts and other existing home  
28 visiting programs operating in communities in the various  
29 regions of this Commonwealth.

30 (7) Identify qualified trainers and training



1 opportunities which will assure adequate opportunities for  
2 grantees and their communities to provide preservice and in-  
3 service training. Funds for training may be incorporated into  
4 the grants.

5 (8) Develop and implement a quality assurance and  
6 improvement process for the program.

7 (9) Identify and seek Federal matching funding for the  
8 program.

9 (10) Identify existing State funding streams that could  
10 be used to fund home visiting programs in this Commonwealth.

11 (11) Provide for an annual independent review which  
12 evaluates both the progress and effectiveness of community  
13 programs receiving grants and the overall progress and  
14 achievement of the designated outcomes of the programs. The  
15 board shall provide the review to the Governor, the Senate  
16 and the House of Representatives on an annual basis.

17 Section 9. Responsibilities of Department of Public Welfare.

18 The department shall allocate the staff and financial  
19 resources necessary to assist the board in the implementation  
20 and administration of the program.

21 Section 20. Effective date.

22 This act shall take effect immediately.