

MAINE STATE LEGISLATURE

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130th MAINE LEGISLATURE

FIRST SPECIAL SESSION-2021

Legislative Document

No. 1712

S.P. 533

In Senate, May 19, 2021

An Act To Support Children's Healthy Development and School Success

Received by the Secretary of the Senate on May 17, 2021. Referred to the Committee on Health and Human Services pursuant to Joint Rule 308.2 and ordered printed.

A handwritten signature in black ink, appearing to read 'D M Grant'.

DAREK M. GRANT
Secretary of the Senate

Presented by President JACKSON of Aroostook.
Cosponsored by Speaker FECTEAU of Biddeford and
Senators: BREEN of Cumberland, CLAXTON of Androscoggin, MOORE of Washington,
Representatives: CRAVEN of Lewiston, McCREIGHT of Harpswell, MEYER of Eliot,
MILLETT of Cape Elizabeth, WHITE of Waterville.

1 **Be it enacted by the People of the State of Maine as follows:**

2 **Sec. 1. 22 MRSA c. 1064** is enacted to read:

3 **CHAPTER 1064**

4 **HELP MAINE GROW SYSTEM**

5 **§3921. Help Maine Grow System established**

6 **1. Help Maine Grow System established.** The Help Maine Grow System, referred
7 to in this chapter as "the system," is established in the department as a comprehensive,
8 statewide, coordinated system of early identification, referral and follow-up for all children
9 from prenatal care up to 8 years of age and their families. The system must emphasize:

10 A. Increasing access to the early periodic screening, diagnosis and treatment services
11 required by Medicaid on a schedule recommended by the American Academy of
12 Pediatrics or its successor organization; and

13 B. In support of the Department of Education's child find efforts, increasing access
14 and referrals to early intervention services as established and required pursuant to Title
15 20-A, sections 7209 and 7252-A.

16 In developing and administering the system, the department shall maintain affiliate status
17 with a national center that offers a system that includes technical assistance and develop a
18 cross system model for strengthening early childhood systems and services to meet the
19 needs of children and families and meet any requirements necessary to maintain fidelity to
20 the system offered by the national center.

21 **2. Staffing; coordination.** The department shall provide staffing services necessary
22 to meet the needs of children and families and to work collaboratively across offices within
23 the department, the Children's Cabinet established in Title 5, section 19131, the Department
24 of Education and other applicable departments.

25 **§3922. Duties of system**

26 The system shall:

27 **1. Expansion of services.** Increase the percentage of children screened for
28 developmental, social or emotional issues at all appropriate locations, including, but not
29 limited to, early childhood education facilities, child care facilities, Head Start facilities,
30 Early Head Start facilities, regional sites of the Child Development Services System under
31 Title 20-A, section 7209, subsection 3 and health care providers to ensure access to early
32 periodic screening, diagnosis and treatment and other related services to promote children's
33 healthy development. For purposes of this section, "Head Start" means a program operated
34 under 42 United States Code, Sections 9831 to 9852c and "Early Head Start" means a
35 program under 42 United States Code, Section 9840a;

36 **2. Coordinated system.** Develop a coordinated system of early identification, referral
37 and follow-up services across early childhood education, child care facilities, home visitor
38 services as defined in section 3931, subsection 2, paragraph P, Head Start, Early Head Start,
39 the Child Development Services System under Title 20-A, section 7209, subsection 3,
40 health care providers and family supports;

1 **3. Delivery of services.** Improve the delivery of services covered by early periodic
2 screening, diagnosis and treatment required by Medicaid and other related services to
3 promote children's healthy development;

4 **4. Centralized access point.** Develop a centralized access point for families,
5 caregivers and professionals to obtain information about early periodic screening, diagnosis
6 and treatment services. The centralized access point must be available by telephone, the
7 Internet and other communication platforms;

8 **5. Electronic directory.** Compile and maintain an electronic directory of resources
9 with respect to service providers and use appropriate methods of communication to assist
10 families and caregivers and connect them with early intervention services, primary care
11 and appropriate early periodic screening, diagnosis and treatment services to children at
12 risk; and

13 **6. Data collection.** Collect data necessary to align the system with evaluation
14 requirements from the national center under section 3921, subsection 1 as well as identify
15 gaps in services by type and region and barriers to obtaining appropriate services.

16 **§3923. Annual reports**

17 The department shall submit any annual and evaluation reports provided by the
18 department to the national center under section 3921, subsection 1 to the joint standing
19 committees of the Legislature having jurisdiction over health and human services matters
20 and education matters, no later than December 15th of each year, beginning in 2022. The
21 joint standing committees are authorized to report out legislation in any legislative session.

22 **Sec. 2. 22 MRSA c. 1065** is enacted to read:

23 **CHAPTER 1065**

24 **FIRST 4 ME EARLY CARE AND EDUCATION PROGRAM**

25 **§3931. First 4 ME Early Care and Education Program**

26 **1. Program established.** The First 4 ME Early Care and Education Program is
27 established under the department to provide funding to projects in order to achieve
28 efficiencies, create opportunities and improve social, emotional, educational and health
29 outcomes for children under 6 years of age and the children's families through the provision
30 of comprehensive, high-quality early child care and education by funding a holistic, whole
31 family approach that integrates comprehensive resources and services into traditional child
32 care center and family child care settings that improve outcomes for children, families and
33 early childhood educators.

34 **2. Definitions.** As used in this chapter, unless the context otherwise indicates, the
35 following terms have the following meanings.

36 A. "At risk" means, with regard to a person, that the person is a member of an
37 economically disadvantaged family, a recipient or former recipient of services under
38 the child protection or child welfare system of the State, in foster care, homeless, a
39 member of a family exposed to substance use disorder, identified as having special

- 1 needs, identified as having a physical or mental disability or identified as having
2 limited English proficiency.
- 3 B. "Child" means a person under 6 years of age who has not entered kindergarten.
- 4 C. "Child care center" has the same meaning as in section 8301-A, subsection 1-A,
5 paragraph A.
- 6 D. "Community" means a geographical area represented by a community coalition and
7 served or to be served by a project.
- 8 E. "Community coach" means an employee of or contractor with a community
9 contractor who is trained under subsection 11 and performs administrative functions in
10 carrying out the duties of a project.
- 11 F. "Community coalition" means a group of stakeholders, service providers or other
12 members within a community under subsection 7 that sponsors and collaborates in the
13 implementation and administration of a project.
- 14 G. "Community contractor" means a nonprofit organization that is the applicant and
15 responsible lead member of a community coalition for a project.
- 16 H. "Community provider" means a child care center, family child care provider or
17 other service provider that has entered into a contract with a community contractor to
18 provide services as part of a project.
- 19 I. "Comprehensive, high-quality early child care and education" means supportive,
20 intergenerational, age-appropriate, research-based interaction and teaching practices
21 provided by a licensed provider of child care under section 8301-A that focus on all
22 domains of learning, and includes embedded professional development, family
23 engagement in a child's learning and progress toward family goals, using data to inform
24 teaching practices and a holistic approach to a child's physical, mental and dental
25 health.
- 26 J. "Economically disadvantaged" means having a family income not exceeding 185%
27 of the federal poverty level as defined in section 3762, subsection 1, paragraph C.
- 28 K. "Embedded professional development" means an activity performed by a
29 community coach to encourage rule-specific knowledge, skills and dispositions to
30 support responsive caregiving and developmentally appropriate teaching practices
31 implemented for learning that is integrated into the work day, consists of assessing and
32 finding solutions for authentic and immediate problems of practice as part of a cycle
33 of continuous improvement and is grounded in day-to-day teaching practice designed
34 to enhance a teacher's or caregiver's practices with the intent of improving children's
35 social, emotional and cognitive development.
- 36 L. "Family" means a child, the child's parent and all people living in the household of
37 the child who are supported by the income of the child's parent and related to the child
38 or child's parent by blood, marriage or adoption.
- 39 M. "Family child care provider" has the same meaning as in section 8301-A,
40 subsection 1-A, paragraph C.
- 41 N. "Homeless" has the same meaning as in the federal McKinney-Vento Homeless
42 Assistance Act, 42 United States Code, Section 11302.

1 O. "Home visitor" means a person who provides services to a participant in the
2 participant's home.

3 P. "Home visitor services" means interactions between a home visitor and a parent that
4 on the part of the home visitor are nurturing, responsive and intentional and that support
5 the parent in the parent's role as the primary teacher of the parent's child and assist the
6 parent in using the parent's home and the community as the child's learning
7 environment.

8 Q. "Parent" means the parent or parents of a child or the child's legal guardian, primary
9 or authorized caregiver or foster parent or a person with whom the child has been
10 placed for purposes of adoption pending a final adoption decree.

11 R. "Participant" means an eligible child under subsection 5 who has been accepted to
12 participate in a project.

13 S. "Program" means the First 4 ME Early Care and Education Program established
14 under subsection 1.

15 T. "Project" means the program as implemented in a community by a community
16 contractor.

17 **3. Application requirements.** A community contactor shall submit an application for
18 approval by the department to establish a project. An application for a project must include:

19 A. Sponsorship by a community coalition under subsection 7;

20 B. A provision for enrollment of an eligible person under subsection 5 who resides
21 within the community of the community coalition under paragraph A;

22 C. An assessment evaluating data on and the demographics of the community of the
23 community coalition under paragraph A to determine the needs of the population of
24 eligible persons in the community regarding care, health care and education, the
25 resources available in the community to address those needs and the ability of the
26 project to address those needs using the project components under subsection 4;

27 D. An action plan based upon the assessment in paragraph C that states objectives,
28 goals and intended outcomes and responds to the needs of the community using the
29 available resources and incorporating the project components under subsection 4; and

30 E. A proposed 3-year budget to implement the action plan under paragraph D and
31 operate the project.

32 **4. Project components.** Project components must include the following:

33 A. Service delivery as provided by:

34 (1) A child care center or family child care provider, for at least 48 weeks per year,
35 5 days per week excluding state holidays, available 10 hours per day and with up
36 to 10 days of staff training; or

37 (2) Home visitor services, including group socialization activities that include a
38 child and the child's parent, for at least 48 weeks per year. Services must focus on
39 the parent-child relationship and be culturally and linguistically responsive.

40 A participant may receive service delivery under subparagraph (1) or (2) or both.

1 B. Screening and ongoing child assessments conducted in a manner that is responsive
2 to a child's home language and culture. Screening must include an initial assessment
3 of developmental, behavioral, motor, language, cognitive and social and emotional
4 skills to identify a delay in development in a child's skills or identify a disability that
5 may require further evaluation. Ongoing assessment must monitor a child's
6 development and progress toward individual goals with input from the child's family
7 to determine a child's strengths and needs and possible adjustment of child care center
8 and family child care provider teaching practices and home visit strategies and to
9 support a referral to the Child Development Services System under Title 20-A, section
10 7209, subsection 3 when necessary;

11 C. Specialized support for participants, including for cultural and linguistic needs and
12 for children with diagnosed or who have physical or mental disabilities or
13 developmental delays. Support may include access to and participation in learning and
14 social experiences and activities;

15 D. Family engagement practiced at all levels of the project, focusing on culturally and
16 linguistically responsive relationship building within the family, including:

- 17 (1) Communicating effectively with members of a family;
- 18 (2) Forming positive goal-focused relationships with members of a family;
- 19 (3) Involving a parent in decision making, teaching practices, including screening,
20 assessment and planning for interactions and learning environments, and
21 implementing project services;
- 22 (4) Ensuring consistency between a child's home and comprehensive, high-quality
23 early child care and education; and
- 24 (5) Ensuring project practices are responsive to a family's needs, including
25 providing connections to employment and education supports;

26 E. Support for a child's immunization and preventive health and dental care by
27 providing encouragement for a parent to comply with the department's early periodic
28 screening, diagnosis and treatment program under section 3173; and

29 F. Transportation options to assist a family to travel to or from health care, child care
30 or education services.

31 **5. Participant eligibility.** A participant in a project must be a child who is at risk and:

- 32 A. Who is receiving care in a facility licensed under section 8301-A; or
- 33 B. Whose parent requests home visitor services.

34 **6. Suspension; expulsion.** In accordance with rules issued by the department, if a
35 child's behavior threatens the health or safety of a participant, project staff member or other
36 person, a project must follow the suspension and expulsion procedures under 45 Code of
37 Federal Regulations, Section 1302.17.

38 **7. Community coalition; membership.** A community coalition shall assist and
39 support a community contractor in sponsoring, developing and submitting a project
40 application under subsection 3, including a community assessment and supporting
41 comprehensive, high-quality early child care and education in the community.

1 Membership of a community coalition must include the community contractor, who is the
2 lead member of the community coalition, and at least one:

3 A. Representative of the local business community;

4 B. Child care center;

5 C. Family child care provider;

6 D. Parent of a child using early childhood services;

7 E. Home visitor;

8 F. Mental health care provider;

9 G. Public school administrator;

10 H. Health care provider;

11 I. Representative of an organization that supports workforce development;

12 J. Provider of services under the federal Individuals with Disabilities Education Act,
13 Part B or Part C;

14 K. Provider of professional development to early child care and education
15 professionals; and

16 L. If available in the community, a faculty member of a career and technical center or
17 higher education institution specializing in early childhood.

18 A member of a community coalition must be located or operate within the community
19 represented by the community coalition. A community coalition may include a local
20 government staff member or a representative of an agency that provides services to or a
21 local judicial staff member who has engaged with an at-risk population, a library or local
22 literacy program staff member, an elementary school teacher, a representative of adult
23 education or other similar member of the community.

24 **8. Community contractor.** A community contractor shall have adequate
25 infrastructure and qualified and credentialed staff to carry out the duties under this
26 subsection. Duties of a community contractor include:

27 A. Representing and being the responsible member for the community coalition;

28 B. Submitting an application under subsection 3;

29 C. Being the lead member and coordinator of a community coalition and the coalition's
30 activities;

31 D. Contracting for and ensuring implementation of high-quality services with
32 community providers;

33 E. Employing or contracting for all required services;

34 F. Implementing and maintaining a data system to collect and report aggregate data
35 regarding child, family and provider information, activities and outcomes; and

36 G. Participating in a collective, Internet-based system that captures data from all
37 project locations in a manner that protects the confidentiality of information of
38 participants.

1 **9. Community contractor staff requirements.** Community contractor staff
2 requirements include:

3 A. For education services supporting a child care center or family child care provider,
4 a bachelor's degree or advanced degree in early childhood education or a related field
5 with equivalent course work and experience in early childhood development;

6 B. For health-related services supporting a child care center or family child care
7 provider, training and experience in public health, nursing, health education, maternal
8 and child health or health administration and:

9 (1) If the staff member performs a health care procedure or provides health care
10 services, licensure or certification authorizing the member to perform the
11 procedure or provide the service;

12 (2) If the staff member provides nutrition services, licensure, registration or
13 certification as a dietitian or nutritionist; and

14 (3) If the staff member provides mental health services, licensure or certification
15 as a mental health professional and experience in serving young children and
16 families;

17 C. For family and community partnership services, training and experience in a field
18 related to social, human or family services;

19 D. For disability services, a bachelor's degree and training and experience in securing
20 and individualizing services for children with physical and mental disabilities; and

21 E. For home visitors, a bachelor's degree in human services or a related field and
22 experience in the provision of home visitor services and knowledge of infant and child
23 development.

24 A staff member, including a community coach under subsection 11, may be an employee
25 of the community contractor or another person who contracts with the community
26 contractor to provide services under this subsection.

27 **10. Community provider.** A community provider:

28 A. Shall enter into a contract with a community contractor to provide services to a
29 project;

30 B. Must be in good standing with the department's division of licensing and
31 certification;

32 C. Shall agree to meet the highest level of requirements for the department's quality
33 rating system established pursuant to section 3737, subsection 3; and

34 D. Shall agree to provide the community contractor with data on a participant or
35 provider consented to under subsection 12 as requested by the contractor.

36 **11. Community coach.** The community contractor shall employ or contract with a
37 community coach to provide information and training to a community provider. A
38 community coach must receive training from a research-based early childhood program
39 with experience in a comprehensive, high-quality early child care and education program.

40 **12. Consent to data.** A community provider or community contractor may not use
41 personally identifying data derived from services provided to a participant without the

1 consent of a participant's parent. A community provider or community contractor may not
2 use the personally identifying data derived from services provided to the family of a
3 participant without the consent of the parent.

4 **13. Funding.** The department shall seek and apply for available federal funds or funds
5 from any other sources to pay the costs of projects. To the maximum extent possible, the
6 department shall use state funds received for the projects to maximize its receipt of federal
7 funds to be used for the projects. A community coalition may accept grant funding or
8 other funding as appropriate from the Federal Government, a department, agency or office
9 of State Government or a political subdivision of State Government or a private entity such
10 as an individual, foundation or business.

11 **14. Administration.** The department may design program implementation in
12 consultation with an independent evaluator that has experience or expertise in early care
13 and education. In determining program outcomes and measures, the department shall craft
14 guidelines to ensure the development of a common set of measures of core elements of
15 evidence-based practices. Outcome data must include reports on specific subpopulations
16 of children, including by gender, race, disability and dual language learners. The
17 department and the Children's Cabinet established in Title 5, section 19131 shall facilitate
18 data linkages relating to outcome data with the Department of Education to measure
19 ongoing school outcome data.

20 **15. Rules.** The department shall adopt rules to carry out the purposes of this chapter.
21 Rules adopted pursuant to this subsection are routine technical rules as defined in Title 5,
22 chapter 375, subchapter 2-A.

23 **Sec. 3. Pilot projects.** Pursuant to the Maine Revised Statutes, Title 22, section
24 3931, subsection 3, the Department of Health and Human Services shall request
25 applications for a pilot project to commence June 1, 2022 to carry out the purposes of the
26 First 4 ME Early Care and Education Program established under Title 22, chapter 1065.
27 The department shall select up to 5 pilot projects from applications submitted. The
28 department shall prioritize funding to a project that serves a community with high numbers
29 or a high percentage of children who are economically disadvantaged or that effectively
30 involves a wide variety of providers or other entities in the community, including school
31 administrative units.

32 **Sec. 4. Report.** On or before October 2, 2024, a pilot project selected under section
33 3 shall report to the Department of Health and Human Services on the progress toward
34 objectives, goals and outcomes of the project detailed in the project's proposal. On or
35 before January 1, 2025, the department shall report to the joint standing committee of the
36 Legislature having jurisdiction over health and human services matters regarding the
37 project reports received under this section along with any recommended legislation. The
38 committee may report out legislation based upon the department's report to the First
39 Regular Session of the 132nd Legislature.

40 SUMMARY

41 This bill:

42 1. Establishes the Help Maine Grow System in the Department of Health and Human
43 Services. The system is a comprehensive, statewide, coordinated system of early
44 identification, referral and follow-up for children from prenatal care up to 8 years of age

1 and their families. The system ensures access to early periodic screening, diagnosis and
2 treatment services and related services to promote healthy development and develop a
3 coordinated system of screening, referral and services. The bill establishes the position of
4 coordinator of the system to work collaboratively across offices within the department, the
5 Children's Cabinet, the Department of Education and other applicable departments. The
6 department must submit annual reports to the joint standing committees of the Legislature
7 having jurisdiction over health and human services and education matters; and

8 2. Establishes the First 4 ME Early Care and Education Program under the Department
9 of Health and Human Services to provide comprehensive, high-quality early child care and
10 education services for at-risk children under 6 years of age who have not entered
11 kindergarten and the children's parents by funding projects that integrate comprehensive
12 resources and services with traditional child care center and family child care settings. The
13 projects are sponsored by coalitions of stakeholders, providers and other community
14 members within the communities that the projects serve. Each project is led and
15 coordinated by a community contractor who staffs the project's operations and contracts
16 with community providers to provide health care, education or parenting services, which
17 may include services provided in a licensed child care center or by a licensed family child
18 care provider, in a home visit or by an individual providing services to a family member
19 within the individual's or family member's residence. The community contractor employs
20 or contracts with community coaches who train and provide support to community
21 providers. The department is directed to seek and apply for available federal funds or funds
22 from any other sources to pay the costs of projects under the program and, to the maximum
23 extent possible, use state funds received for the projects to maximize receipt of federal
24 funds to be used for the projects. This bill directs the department to request proposals for
25 up to 5 pilot projects to implement the program and to report to the Legislature on the
26 progress of the pilot projects toward the objectives, goals and intended outcomes of the
27 projects in 2025.