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State of Minnesota

HOUSE OF REPRESENTATIVES

EIGHTY-EIGHTH SESSION

H. F. No. 2136

02/25/2014 Authored by Moran

The bill was read for the first time and referred to the Committee on Early Childhood and Youth Development Policy

1.1 A bill for an act
1.2 relating to human services; creating the MFIP child well-being pilot project;
1.3 appropriating money.

1.4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:

1.5 Section 1. **MFIP CHILD WELL-BEING PILOT PROJECT.**

1.6 Subdivision 1. **Establishment.** The commissioner of human services, in
1.7 consultation with the commissioners of education and health, shall establish and
1.8 implement a pilot project in up to three counties to determine effective strategies to
1.9 increase MFIP child well-being, especially to improve the school readiness of young
1.10 children in families receiving MFIP by increasing parental knowledge of and access to
1.11 information and opportunities for early childhood care and education.

1.12 Subd. 2. **Pilot project goals.** The goals of the pilot project are to:

1.13 (1) provide early childhood development information and resources to MFIP
1.14 parents, including tools parents can use to track their child's development, resources used
1.15 by other families in their communities to support their child's growth, and where to go if
1.16 parents have questions about their child's development;

1.17 (2) determine effective strategies to help parents:

1.18 (i) identify when they or their child may benefit from mental health or early
1.19 childhood services;

1.20 (ii) understand the importance of obtaining services for themselves and their child;
1.21 and

1.22 (iii) know where to go for services;

1.23 (3) determine the best strategies to ensure that MFIP parents can attend to their
1.24 child's development and potential need for additional services, if indicated;

(4) consider county staff training issues related to early childhood development and child well-being;

(5) test various methods of providing information about child development, including the impact of trauma and poverty in early childhood, to county staff, community provider staff, and MFIP parents; and

(6) maximize the use of existing resources.

Subd. 3. **County application; participation.** Counties may apply to the commissioner of human services to participate in the pilot project on the forms and according to the timelines established by the commissioner. The commissioner shall determine the county or counties that will participate in the pilot project based on the applications received by the commissioner. Of the counties selected, at least one county must be a county that is not a metropolitan county, as defined in Minnesota Statutes, section 473.121, subdivision 4. The commissioner shall provide technical assistance to participating counties, including advice regarding medical assistance reimbursement for certain screening and assessment activities under the child and teen checkup program.

Subd. 4. **Services.** (a) Services provided under the pilot project shall include, but are not limited to, providing parents access to:

(1) information regarding healthy child development;

(2) resources to support parenting; and

(3) specialized resources to prevent or mitigate developmental delays, including family home visiting, Part C Early Intervention, mental health services provided by a professional with training in children's mental health, child care, and Early Head Start or Head Start.

(b) Families must begin receiving services under the pilot project no later than July 1, 2015.

Subd. 5. **Parental participation.** The project must allow parents to count participation in approved early childhood programs as an approved MFIP work activity, if included in the caregiver's employment plan.

Subd. 6. **Report and recommendations.** The commissioner of human services shall report to the legislative committees with jurisdiction over health and human services policy and finance by January 15, 2017, information on pilot project participants, including information on child outcomes, children's school readiness, parent satisfaction, and parental ability to receive services or other information through the referrals provided by the county or other staff. The commissioner shall also provide recommendations to the legislative committees with jurisdiction over health and human services policy and finance to improve MFIP child well-being outcomes and to expand the project statewide

3.1 if the results of the project indicate project participants achieved better outcomes. Child
3.2 outcomes must be the primary factor for determining project effectiveness.

3.3 Subd. 7. **Expiration.** This section expires June 30, 2017.

3.4 Sec. 2. **APPROPRIATION.**

3.5 \$..... is appropriated for the biennium ending June 30, 2015, from the general
3.6 fund to the commissioner of human services for the MFIP child well-being pilot project
3.7 under section 1.