

129th MAINE LEGISLATURE

FIRST REGULAR SESSION-2019

Legislative Document

No. 1778

S.P. 602

In Senate, May 23, 2019

An Act To Amend the Laws Concerning the Children's Cabinet and Its Advisory Councils

Reference to the Committee on Education and Cultural Affairs suggested and ordered printed.

DAREK M. GRANT Secretary of the Senate

Presented by Senator MILLETT of Cumberland. (GOVERNOR'S BILL) Cosponsored by Representative FARNSWORTH of Portland and Senators: CARSON of Cumberland, POULIOT of Kennebec, Representative: BRENNAN of Portland.

1	Be it enacted by the People of the State of Maine as follows:
2 3	Sec. 1. 5 MRSA §12004-I, sub-§35-B, as enacted by PL 1993, c. 158, §1, is repealed.
4 5	Sec. 2. 5 MRSA §12004-J, sub-§16, as enacted by PL 2007, c. 683, Pt. A, §1, is repealed.
6	Sec. 3. 5 MRSA §12004-J, sub-§18 is enacted to read:
7	<u>18.</u>
8 9 10 11	ChildrenMaine Children's Cabinet Early Childhood AdvisoryLegislative Per Diem and Expenses for Legislators5 MRSA §24051 5 MRSA §24051
12 13	Sec. 4. 5 MRSA §19131, sub-§1, as enacted by PL 1999, c. 785, §3, is amended to read:
14 15 16 17 18 19 20	1. Establishment. The Children's Cabinet, referred to in this chapter as the "cabinet," is established to promote <u>and support active, vigorous and frequent</u> interdepartmental collaboration on <u>children's children and youth</u> policy development and program implementation <u>and to support supporting</u> the provision of services for Maine families <u>and</u> , children <u>and youth</u> that are planned, managed and delivered in <u>a holistic and an</u> integrated manner to <u>improve their support and enhance educational opportunities</u> self-sufficiency, safety, economic stability, health and <u>quality of life well-being</u> .
21 22	Sec. 5. 5 MRSA §19131, sub-§3, as enacted by PL 1999, c. 785, §3, is amended to read:
23 24 25	3. Chair. The Governor shall appoint one of the members <u>serving pursuant to subsection 2</u> , <u>paragraphs A to F</u> to serve as chair of the cabinet. The term of the chair is 2 <u>years one year</u> .
26	Sec. 6. 5 MRSA §19131, sub-§4 is enacted to read:
27	4. Meetings. The cabinet shall meet at least 4 times per year.
28	Sec. 7. 5 MRSA §19132, as enacted by PL 1999, c. 785, §3, is amended to read:
29	§19132. Duties of the cabinet
30 31 32 33	The cabinet shall collaborate to create, manage and promote coordinated policies finances, programs and service delivery systems that to support children, youth and families and communities consistent with the purposes of this chapter. To accomplish these purposes, the cabinet shall carry out the following duties:

1. Regional children's cabinets. Appoint regional children's cabinets to ensure that the purposes of this chapter are implemented at the regional and local levels;

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- 2. Subcommittees. Appoint subcommittees, which may include members from any public or private agency, advisory committee or any citizen, who has appropriate interest and expertise, as may be necessary to carry out the work of the cabinet;
- **3. Coordinated funding; collaboration.** Coordinate funding, <u>grants</u> and budgets among the departments of the cabinet related to child, <u>youth</u> and family services in order to carry out the purpose of this chapter, collaborate to share resources, remove barriers and support <u>innovative</u> initiatives, <u>prevention and best practices</u> that <u>prevent</u> <u>address</u> health and behavioral problems in children <u>and youth</u>;
- **4.** Data collection, planning and policy development. Conduct Determine effective data sources to allow analysis leading to integrated and innovative approaches to identified priority areas of need of the cabinet and conduct long-range planning and policy development leading to a more effective public and private service delivery system;
- **5.** Coordinated service delivery. Coordinate the delivery of residential and community-based children's services among the departments;
 - **6.** Assessment. Assess resource capacity and allocations;
- 7. Policy and program review. Improve Update policies, statutes, rules and programs through the review of specific case examples to ensure consistency across all departments in addressing the cabinet's priority areas; and
- **8. Communication.** Broadly <u>and transparently</u> communicate the work of the cabinet- through a variety of mechanisms;
- 9. Program implementation and oversight. Initiate, implement and oversee programs, policies and services consistent with the purposes of this chapter; and
- 10. Maine Children's Cabinet Early Childhood Advisory Council. Oversee the Maine Children's Cabinet Early Childhood Advisory Council, established under section 24051, and direct a representative of the cabinet to meet at least once yearly with the Maine Children's Cabinet Early Childhood Advisory Council and consult with one or more state-designated groups representing youth issues regarding goals selected by the Maine Children's Cabinet Early Childhood Advisory Council.
- **Sec. 8. 5 MRSA §19133,** as enacted by PL 1999, c. 785, §3, is amended to read:
- §19133. Program implementation and oversight
- The cabinet shall initiate, implement and oversee programs, policies and services consistent with the purposes of this chapter, which may include but are not limited to:
 - 1. Communities for Children. Supporting a collaborative effort between communities and State Government, known as Communities for Children, to effectively

1 2	address problems facing the State's children and families by mobilizing the resources of State Government with resources and leadership at the community level;
3 4	2. Effectiveness indicators. Identifying indicators to measure child well-being to be used by Maine policy makers;
5	3. Safe homes. Working to ensure that all children have a safe and permanent home;
6	4. Civil and caring school environments. Providing civil and caring school
7	environments in which violence is eliminated and the health needs of students are
8	provided for;
9 10	5. Supportive communities. Focusing community members and resources to support goal-setting, counseling and mentoring for every child;
11 12	6. Reducing suicide. Reducing the incidence of suicide among Maine youth and improving access to appropriate prevention and intervention services;
13	7. Access to information and referral. Ensuring easy access to information and
14	referral services regarding child and family services;
15	8. Service coordination. Coordinating social services to children and their families
16	as an integrated whole and facilitating access to all services needed by family members;
17	9. Ensuring services. Ensuring coordination of services to parents of children birth
18	to 5 years of age; and
19	10. Local case review and resolution; pooled funds. Providing services to children
20	with multiple needs within the child's community by supporting case review and
21	resolution at the local level using appropriate funds pooled from each department of the
22	cabinet.
23	Sec. 9. 5 MRSA §19134, as enacted by PL 1999, c. 785, §3, is amended to read:
24	§19134. Funds
25	The cabinet is authorized to solicit request, receive and pool funds from the Federal
26	Government, any department, office or political subdivision of the State or any
27	individual, foundation or corporation and may expend those funds for purposes that are
28	consistent with this chapter.
29	Sec. 10. 5 MRSA c. 621, as amended, is repealed.
30	Sec. 11. 5 MRSA c. 623 is enacted to read:
31	CHAPTER 623
32	MAINE CHILDREN'S CABINET EARLY CHILDHOOD ADVISORY COUNCIL

1 §24051. Maine Children's Cabinet Early Childhood Advisory Council

- 1. **Definitions.** As used in this chapter, unless the context otherwise indicates, the 2 following terms have the following meanings. 3
 - A. "Cabinet" means the Children's Cabinet established in section 19131.
- "Council" means the Maine Children's Cabinet Early Childhood Advisory 5 Council established in subsection 2. 6
 - C. "Young children" means children from birth until they complete grade 3.
- 2. Establishment. The Maine Children's Cabinet Early Childhood Advisory 8 9 Council, as established in section 12004-J, subsection 18, is created to develop, maintain and evaluate under the direction of the cabinet a plan for sustainable social and financial 10 investment in healthy development of the State's young children and their families. 11
- 12 3. Membership. The council consists of the members listed in this subsection, who must have a strong interest in early childhood and early care and education and must be 13 influential in their communities: 14
- A. One member of the Senate, appointed by the President of the Senate; 15
- B. One member of the House of Representatives, appointed by the Speaker of the 16 17 House;
- C. The Governor or the Governor's designee; 18

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- 19 D. One person who is the parent of a young child, appointed by the Governor;
- E. Two persons with experience in public funding and philanthropy, appointed by 20 21 the Governor;
- F. One person representing child abuse and neglect prevention, appointed by the 22 23 Governor;
 - G. One person representing postsecondary education, appointed by the Governor;
- H. Three persons representing statewide, membership or constituent organizations 25 that advance the well-being of young children and their families, including early care 26 and education programs, child care centers, Head Start programs, family child care 27 providers, resource development centers, programs for school-age children, child 28 29 development services, physicians and child advocates, nominated by their 30 organizations and appointed by the cabinet;
- I. One person representing a business roundtable on early childhood investment, 31 32 appointed by the Governor;
- 33 J. One person with expertise in children's health or public health, appointed by the 34 Governor:
- 35 K. Two ex officio nonvoting members who are employees of the Department of Education and direct or work in programming that affects young children, appointed 36
- by the Commissioner of Education; and 37

1 2 3	L. Two ex officio nonvoting members who are employees of the Department of Health and Human Services and direct or work in programming that affects young children, appointed by the Commissioner of Health and Human Services.
4 5 6 7	4. Terms of appointment. Except for ex officio members, members of the council are appointed for terms of 3 years. Members who are Legislators are appointed for the duration of the legislative terms in which they were appointed. Members who are not Legislators may serve beyond their designated terms until their successors are appointed.
8	5. Chair. The Governor shall appoint a chair for the council.
9 10 11 12	6. Staffing; funding. The council may hire staff as necessary for its work and as resources permit. The council may accept grant funding and other funding as may be available for the work of the council from the Federal Government, any department, office or political subdivision of the State or any individual, foundation or corporation.
13	§24052. Duties
14	1. Duties. The duties of the council include, but are not limited to:
15 16	A. Reviewing and addressing recommendations of the cabinet regarding young children in the following areas:
17 18 19	(1) Early childhood policy implementation to ensure an effective public and private service delivery system and reporting recommendations based upon the review to the cabinet; and
20 21 22	(2) The delivery of early childhood services by the departments of the cabinet and recommending improvements to increase efficiencies in the delivery of services;
23	B. Advising the Department of Health and Human Services regarding:
24	(1) The coordination of child care services in the State; and
252627	(2) The preparation of any application, amendment, waiver request, plan or other document submitted by the department to the Federal Government regarding child care funding or other early childhood services grants;
28 29	C. Reviewing and commenting on initiatives and plans of the cabinet related to early childhood;
30 31 32 33 34	D. Submitting annually to the cabinet recommendations for changes to laws and rules to reduce barriers to collaboration and coordination among federally funded and state-funded programs and services for young children and the children's families and to improve the quality of programs and services for young children statewide. Recommendations must include, but are not limited to, methods to:
35 36	(1) Promote the availability of services and programs for young children and the children's families across the State;
37 38 39	(2) Promote innovative programs for young children and the children's families including funding models for early childhood and education programs and services; and

1 2 3	(3) Enhance and improve quality and outcomes of early childhood and education programs and services, including child development services, home visitation, child care, education services, supervision services, health services and social
4 5 6	E. Developing and periodically updating a process for evaluating the council's effectiveness in performing the council's duties, including advising the cabinet.
7 8	Sec. 12. 20-A MRSA §10, sub-§2, ¶G, as amended by PL 2009, c. 540, §2, is further amended to read:
9	G. The Maine Municipal Association; and
10 11	Sec. 13. 20-A MRSA §10, sub-§2, ¶H, as amended by PL 2009, c. 540, §3, is further amended to read:
12	H. The Maine Principals Association; and.
13 14	Sec. 14. 20-A MRSA §10, sub-§2, ¶I, as enacted by PL 2009, c. 540, §4, is repealed.
15 16	Sec. 15. 22 MRSA §3731, sub-§2, as enacted by PL 1993, c. 158, §2, is amended to read:
17 18 19	2. Council. "Council" means the <u>Child Care Maine Children's Cabinet Early Childhood</u> Advisory Council established pursuant to Title 5, section <u>12004-I 12004-J</u> , subsection <u>35-B 18</u> .
20	Sec. 16. 22 MRSA §3739, as amended by PL 2017, c. 407, Pt. A, §79, is repealed.
21	SUMMARY
22	This bill:
23	1. Amends certain provisions governing the Children's Cabinet;
24	2. Eliminates the Maine Children's Growth Council;
25	3. Eliminates the Child Care Advisory Council; and
26 27 28	4. Establishes the Maine Children's Cabinet Early Childhood Advisory Council to develop and evaluate under the direction of the Children's Cabinet a plan for the healthy development of the State's young children and their families.