

Children and the 81st Texas Legislature

PUT KIDS 1ST

THIS SESSION, WHAT
DID TEXAS LEADERS
DO TO PUT KIDS 1ST?

- Child Poverty & Family Economic Security
- Infant, Child & Maternal Health
- Children's Mental Health
- Child Welfare
- Juvenile Justice
- Early Childhood



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81st Texas Legislative Session Summary

Texans care for children. They don't *always* vote, talk or buy with children utmost in mind, but I believe in the hearts of Texans there is a commitment to do right by people. I believe too that the majority of our legislators are in office with a desire to do right by our state.

So then why do we continue to trail the nation in so many key areas of societal well being? The will is there, but we are challenged by outdated approaches to societal problems and some fundamental misunderstandings of how we as a state can move forward. All the same, we are getting smarter about policy, and change is afoot. This session we saw leaders take courageous stands to advocate for the most pressing needs of our state and propose forward-thinking investments in best practices. We saw individuals flood offices with calls and visits, to ensure legislators knew what Texans wanted. Champions for children and change demanded improvements to existing services, more health coverage options for kids, a better educational start for learners, measures to curb our rising child obesity rate, protections for children in state care, better supports for foster youth, a focus on prevention, mental health supports and many other vital, vital reforms.

So was this the legislative session where Texas decided to Put Kids 1st? There were disappointing losses along with great wins. Still, in many areas, we came one step closer, and, with each advance, the lives of countless children and families improved, so we as a state move forward.

Thank you for all you did this session, and I look forward to continuing this important work together.

Sincerely,

A handwritten signature in black ink, appearing to read "Eileen Garcia-Matthews".

Eileen Garcia-Matthews
Executive Director

Executive Summary

CHILD POVERTY & FAMILY ECONOMIC SECURITY

Texas leaders maintained funds for **safety net** programs, like food stamps and affordable housing, that help meet children's basic needs. Also, to help lift families out of poverty, lawmakers concentrated on **improving families' ability to save for college** and get financial and **tax advice**. Unfortunately, several of these bills were vetoed by the governor.

INFANT, CHILD, & MATERNAL HEALTH

Texas has the nation's highest rate of uninsured children, and **health coverage** proposals for children won the support of a bipartisan alliance of faith, health, and business leaders. One new law will likely bring **systemic improvements** for some children who already qualify for public health insurance and another for children with disabilities will allow their families to "buy into" public coverage. Still, the major initiatives to cut red tape in the state's children's health insurance programs and allow more kids to see a doctor met last-minute procedural blocks that prevented their passage. Legislation to curb the state's growing child obesity problem fared better, with bills passed to raise **physical education** standards for most students, improve access to **healthy foods and nutrition education**, strengthen **school health planning**, and fund **neighborhood walkways** and crossings. Laws also passed to increase access to vaccines and screenings, inform parents about newborns' health and safety needs, and keep more children in car seats.

CHILDREN'S MENTAL HEALTH

Texas leaders worked at **improving behavioral and mental health services**, with new measures to streamline system planning and communication, establish an **autism resource center**, and **ensure youth in the juvenile justice system have better treatment options**. As a state with especially low funding for mental health, Texas could do more to invest early in preventing challenges from worsening. Still, some promising changes signal a new commitment to behavioral health from state leaders.

CHILD WELFARE

Relatives who care for young family members removed from their parents' care due to abuse or neglect will benefit from increased **kinship care guardian support**. The state also supported programs that have been proven to **prevent child abuse and neglect** and ones that **improve abused and neglected children's legal representation** in court. Funding to reduce the number of children Child Protective Services caseworkers see is still needed, though caseloads for certain caseworkers were reduced. State leaders also passed laws to help the thousands of foster kids who turn 18 with no family, giving them help to ease their **transition out of foster care**. A law that would provide caseworkers guidance on how to secure court orders for investigating child abuse was vetoed.

JUVENILE JUSTICE

Meaningful reform is underway in our state's troubled juvenile justice system. Laws this session moved toward **incarcerating only the most serious offenders** and doing so in smaller regional facilities. The state also began to put more emphasis on **treatments** youth need to succeed, with particular attention to mental health needs. A new law will also ensure schools moderate their "zero-tolerance" discipline policies, which unnecessarily lead kids into the correctional system.

EARLY CHILDHOOD

Texas was one of few states to increase investment in early education this year. However, a bipartisan coalition's bill to bring **full-day, high-quality prekindergarten** to more kids met the governor's veto. The \$25 million allocated for the program will go to existing prekindergarten initiatives.

OTHER KEY WINS FOR KIDS

Showing strong commitment to better outcomes for kids, Texas created a new **Council on Children and Families** that will require state agencies to be more strategic and coordinates planning for children's services statewide. Texas was also one of few states to **maintain health and human services funding**, despite a forecast of declining state revenue during the economic downturn.

Legislation Impacting All Areas of Child Well-Being

COORDINATION OF SERVICES

In Texas, there has been no single entity to coordinate the work of the many state agencies and various local entities that provide services and funding to children and youth. This lack of coordination often leads to children and families accessing services from multiple, disconnected programs or being unable to access services at all. It also leaves a vacuum in agency leadership to establish priorities, assess potential gaps and duplications in services, and coordinate policies and funding related to children’s well-being. The Legislature passed **SB 1646** by Senator Leticia Van de Putte, which was signed into law by the Governor. Along with its companion **HB 3259** by Representative Elliott Naishtat, SB 1646 addresses the current lack of coordination by creating the **Council on Children and Families**. The Council will improve **high-level interagency coordination** between state health, human services, education, and juvenile justice agencies serving children and address many of the challenges endemic to the state’s children’s services delivery system.

CHILD IMPACT STATEMENT

SB 56 by Senator Judith Zaffirini would have required the Legislative Budget Board (LBB) to prepare a **child impact statement** to accompany all bills throughout the legislative process. The statement would include information **on how the legislation affects children** or groups of children, and caregivers’ ability to care for children. This legislation was filed in 2007 and in 2009, but did not pass either session.

PROTECTING FUNDING

Entering the legislative session in the middle of an economic recession made it particularly significant that major cuts to health and human services programs were avoided. No significant new investments were made, but neither did state budget writers make cuts to the health and human services many families rely on. While increased investment would be particularly valuable at a time when more families face economic hardship, the decision not to make cuts at this time stands in positive contrast to the Legislature’s drastic budget cuts in 2003, the last time the state faced declining revenues.

TEXANS CARE FOR CHILDREN’S LEGISLATIVE PRIORITIES: CROSS-SYSTEMS ISSUES	STATUS
Coordinate an inter-agency strategic plan on children’s issues	Passed
Require all legislation to be accompanied by a Child Impact Statement	Did not pass
Protect funding for children’s services	Passed
Increase funding for community-based outreach for public benefits	Did not pass
Increase state agency transparency, accountability, and oversight	Did not pass
Fund structured screening to assess and treat problems in children and youth before they escalate	Did not pass



Children in Poverty and Family Economic Security

Nearly one in every four children in Texas lives in poverty. These children go without food, safe shelter, and quality medical care. They are at greater risk of suffering from health problems, encountering violent crime, and experiencing unhealthy levels of stress that can impair development. Growing up in poverty has lasting consequences that can continue into adulthood. These conditions of poverty exist for many families despite being employed. In 2005, almost 60 percent of Texas' poor families had a head of household who was employed. The number of working families that cannot make ends meet had been increasing even prior to the current nationwide economic downturn. As a result, Texas has a high demand on its safety nets for families experiencing financial stress, and the state's policymakers must decide how to assist low-income families in building a better economic future for their children. Family economic security was not a high priority for the 81st Texas Legislature, and the Governor vetoed a significant number of those few pieces of legislation passed by the Legislature.

SAFETY NET PROGRAMS

Several bills regarding accessibility of public benefits were filed, but no significant changes were made. Representative Elliott Naishtat's **HB 614** would have improved the appeals process for applicants denied Temporary Assistance to Needy Families (TANF) benefits, but it did not pass the Senate. **HB 1024** by Representative Joe Deshotel would have extended unemployment benefits to workers who lost employment at a part-time job; it did not become law either. One safety net improvement bill that became law with the Governor's signature was Representative Abel Herrero's **HB 3859**, which requires the Health and Human Services Commission (HHSC) to analyze staffing levels needed to **enhance the eligibility determination system, thereby limiting lapses in benefits for eligible children and families,** and expand the use of the Texas Integrated Eligibility Redesign System (TIERS).

FINANCIAL LITERACY

Just as safety net programs help families during economic distress, financial literacy helps families work toward economic security. **HB 2360** by Representative Joe Farias, which the Governor signed, requires employers to provide information about federal Earned Income Tax Credit (EITC) eligibility to employees. Other bills aimed at improving the personal financial literacy of different groups (e.g., public school teachers, high school and college students, prospective home owners) were filed, but none became law.

CHILDREN'S SAVINGS ACCOUNTS AND INDIVIDUAL DEVELOPMENT ACCOUNTS

Moving out of poverty involves more than financial literacy. Low- and middle-income families can increase their economic self-sufficiency by **building assets through programs like matched savings plans** and individual development accounts (IDAs). The IDA bill, **HB 885** by Representative Elliott Naishtat/**SB 27** by Senator Judith Zaffirini, did not pass this session. Senator Kirk Watson's **SB 1760** passed both chambers, but was vetoed by the Governor. Though the Legislature did not appropriate money to implement the bill, it would have authorized funding the Texas Save and Match Program for children's post-secondary education. **SB 1760** would have required the **Texas Tuition Promise Fund** to match contributions based on a family's household income. **SB 1941** by Senator Florence Shapiro became law with the Governor's signature and will allow state employees to make payroll deductions for contribution to the **Texas Save and Match Program**. The bill adds career schools among the educational institutions eligible to participate in the Texas Tuition Promise Fund.

COMMUNITY TAX CENTERS

One of the most effective tools in helping low-income families build assets and move out of poverty is the **Earned Income Tax Credit** because it encourages work and increases the earnings of workers with low-wage jobs. Many eligible Texas families either do not claim these credits or do so through costly tax filing companies. Representative Armando “Mando” Martinez’s **HB 2888**, which originally dealt only with affordable housing, was amended through the legislative process and would have established a **Volunteer Income Tax Assistance (VITA) grant program** under the Texas Department of Housing and Community Affairs. Like SB 1760 above, HB 2888 passed both chambers without funds appropriated for implementation, but ultimately was vetoed by the Governor.

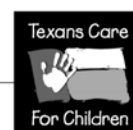
HOUSING

A home has traditionally been a family’s most valued asset, but homeownership is elusive for the many Texas families struggling to find affordable housing and challenged to keep their homes during financial turmoil. Various bills regarding homeownership and availability of affordable housing were filed. Representative Rodriguez’s **HB 2692** would have given cities with populations 1.7 million or more a way to **promote affordable housing** near commuter rail stations, but it was vetoed. **HB 1819** by Representative Dwayne Bohac provides a mechanism for protecting Houston families from living in structurally unsound apartments. HB 1819 requires Houston to adopt and enforce a comprehensive city ordinance that establishes minimum standards for multi-family apartments. HB 1819 was signed into law by the Governor.

TEXANS CARE FOR CHILDREN’S LEGISLATIVE PRIORITIES: CHILD POVERTY	STATUS
Promote asset building through matched savings plans and expand community tax centers into asset-building hubs	Passed, but vetoed: Legislation creating savings plans for post-secondary education and expanding community tax centers passed, but were vetoed. Did not pass: The IDA bill did not pass.

Child and Maternal Health

Lack of healthcare coverage and obesity are two of the most prevalent and serious problems undermining the health of Texas children. One in five children in Texas is uninsured (the worst rate in the country), making children here less likely than other American children to receive preventive care, well-child exams, and prompt attention when health problems emerge. The legislature made improvements in 2007 to restore children’s access to Medicaid and CHIP after the state’s uninsured child population climbed steeply due to budget cuts in 2003 and problems with the privatization of Medicaid processing. Efforts to continue to remove barriers to healthcare access this session, including six-month renewal requirements for Children’s Medicaid, a lack of options for uninsured children whose families have incomes just above the CHIP income, and limited outreach to eligible families, failed to become law. Obesity is another critical issue in Texas, with one in five school-age children obese and at significantly increased risk of developing chronic diseases such as Type II diabetes. Awareness of this problem allowed nutrition initiatives to pass, while there were mixed results relating to school physical activity requirements.



HEALTHCARE COVERAGE AND PUBLIC BENEFITS

Some important legislative efforts that would have helped children access health insurance received a great deal of support from legislators, but expired before session ended. An estimated 750,000 uninsured children in Texas—about half of the total—already qualify for Medicaid or CHIP, but are not enrolled, in large part due to inefficiencies in the enrollment system. Many bills were filed to **make Children’s Medicaid eligibility continuous for 12 months**, including **HB 1541** by Representative Sylvester Turner. This bill, which had multiple co-authors, would have allowed for 12 months Children’s Medicaid coverage only if additional federal funds were secured to cover the cost. The original bill also included measures to streamline eligibility processes and increase outreach efforts. The bill made it through some hurdles, but did not reach either chamber floor for a vote. Several other bills also included measures to **improve the eligibility system’s performance** and **outreach** to eligible families. Of these, only **HB 3859** by Representative Abel Herrero, the bill requiring a staffing analysis of the eligibility system at the Health and Human Services Commission, passed and was signed by the Governor.

HB 2962 by Representative Garnet Coleman, which 53 legislators co-authored, contained provisions that would have expanded which children are eligible for the **Children’s Health Insurance Program (CHIP)**, the public health insurance program for children between 100% and 200% of the Federal Poverty Level (FPL), and in its original version had significant provisions for improving the eligibility system, including 12 months eligibility for Children’s Medicaid and removing asset tests that serve as barriers for family eligibility. It advanced, as did **SB 841** by Senator Kip Averitt, both of which would have allowed families between 200-300% of the FPL to **buy into CHIP on a sliding scale based on income**. The CHIP buy-in legislation advanced further than the 12-month Medicaid bill, remaining a possibility until the very end of session. As legislative deadlines began to pass, several procedural tactics were used to keep the CHIP buy-in legislation viable, and, though similar versions of the proposal passed in both the House and the Senate, the bill died because of procedural inaction and lack of political will at the highest levels of leadership.

Although the CHIP buy-in bill failed, three other bills that will increase eligibility for public health insurance for certain populations did pass. **HB 1630** by Representative Elliott Naishtat and signed into law by the Governor, will make sure that **children released from Texas Youth Commission (TYC) facilities are assessed for and enrolled in, CHIP or Medicaid**, if eligible, upon release from the facility. The second bill, which was signed by the Governor, is **SB 187** by Senator Robert Deuell, which will allow families who have **children with disabilities to buy into Medicaid** on a sliding scale based on family income. Its companion bill, **HB 67** by Representative Eddie Lucio III, was also successful in gaining support. **SB 865**, the child support omnibus bill by Senator Chris Harris, was amended late in the legislative process. The version that became law with the Governor’s signature creates a health insurance program for uninsured children whose parents receive child support services. Noncustodial parents who are court-ordered to provide medical support for their children, but unable to find affordable health insurance coverage, would pay monthly health insurance premiums to purchase coverage through a health insurance plan administered by a private company contracting with the Attorney General’s Office.

Even though children are covered by CHIP or Medicaid, they may not be able to access health and mental health service providers. Rates of reimbursement to providers through these programs are low compared to market rates and do not automatically increase along with inflation. Providers received small rate increases in 1999 and 2001 that were then rescinded in 2001 and then increased again in 2007. There was hope this session for a 3% rate increase. However, the budget as passed in SB 1 by

Senator Steve Ogden only created **rate increases for a few provider types**, such as home attendants, nursing home staff and staff of Federally Qualified Health Centers (FQHCs). Therefore, compensation through Medicaid and CHIP for the majority of providers children need to access, like doctors and dentists, has gone down relative to inflation, creating a pressure that pushes even more of them away from serving Texas' neediest children.

OBESITY PREVENTION

This was a very successful session for nutrition-related legislation. **SB 282** by Senator Jane Nelson passed and was signed by the Governor to allow the Texas Department of Agriculture (TDA) to set up two grant programs: one to support schools using **best practices in nutrition education** and another to support community and faith-based organizations and early childhood education programs that provide nutrition education to children. **SB 343**, also by Senator Nelson, and signed by the Governor, creates an advisory committee to study the **availability of healthy foods in underserved areas** of Texas. The advisory committee will report back to the Legislature an implementation plan for a statewide program that would bring healthy foods to areas of the state that do not have **access to fresh fruit and vegetable retailers**. **SB 1027** by Senator Kirk Watson, which became law with the Governor's signature, establishes a farm-to-school task force to **promote the availability of locally grown fresh foods in public schools**. The task force will provide schools with training and technical assistance, create a database of available locally grown food, and implement a grant program for schools to recover the cost of purchasing locally grown fresh food. Finally, **SB 395** by Senator Eddie Lucio Jr. creates the **Early Childhood Health and Nutrition Interagency Council** to assess barriers and best practices to improving healthy nutrition and physical activity in early childhood care settings, and to develop a plan for increasing physical activity and healthy nutrition in early childhood care settings. SB 395 was signed into law by the Governor. **HB1622** by Representative Giddings and signed by the Governor will establish a program under the Texas Department of Agriculture (TDA) that will award grants to non-profit organizations to **coordinate existing food bank efforts** in order to provide nutritious food to children at risk of hunger or obesity.

There were also significant nutrition-related bills that did not pass, including: **SB 1088** by Senator Eliot Shapleigh and **SB 344** by Senator Nelson, both of which related to the use of food stamps at farmers' markets; **HB 1970** by Representative Roland Gutierrez about nutritional standards and training for child-care facilities; and **SB 204** by Senator Shapleigh that would have banned trans fats in restaurants.

Two bills passed supporting physical education for children. **SB 891** by Senator Jane Nelson and signed by the Governor extends the current requirement of at least **30 minutes of physical activity** per school day for grades K-5 to **pre-kindergarten students** as well. It also adds requirements regarding school districts' physical education (P.E.) curriculum for all grades, pre-kindergarten through 12, to require that **at least 50 percent of the weekly P.E. class time be used for physical activity**. P.E. programs are also required to meet learning objectives for physical education knowledge and skills. A requirement in the initial bill that teacher/student ratios for P.E. are comparable to academic classes was removed. **SB 161** by Senator Rodney Ellis was signed into law by the Governor and allows specialty license plates fees to **fund the Safe Routes to School Program**. Safe Routes to School funds projects like **sidewalks and crosswalks** that make routes safer for children to walk and bicycle, as well as education programs to help children learn to travel safely to and from school. Through a rider to the budget, legislators also allocated \$10 million in each of the next two fiscal years for the Texas Education Agency to make **grants to middle schools to support physical education and fitness programs** in school districts that have proportionately high numbers of economically disadvantaged children.

One negative impact on physical education came in **HB 3** by Representative Rob Eissler, which changes **high school graduation requirements, making health class optional and reducing the existing P.E. requirement** from one and a half semesters to one semester. HB 3 was signed into law by the Governor.

Two bills passed this session that strengthen existing efforts for schools, families, and communities to partner to promote child health. **SB 283** by Senator Jane Nelson became law with the Governor's signature. It requires that **local school district school health advisory councils (SHACs)** have as their **chair or co-chair a parent that is not employed by the district and has a student enrolled in the district**. The SHAC would be required to **meet at least four times per year** and submit a written **report annually** to the school district's board of trustees. **SB 892**, also by Senator Jane Nelson and signed by the Governor, requires public school campuses to **evaluate their coordinated school health program at the campus level** as part of their campus improvement plan. This elevates campus accountability for school health. The evaluation will include success with physical activity requirements, student fitness assessments, academic performance, attendance rates, and other data indicators recommended by the local school health advisory council.

The Department of State Health Services (DSHS) requested funding to support comprehensive, **evidence-based programs at the community level to impact obesity**. Of the money appropriated to DSHS for chronic disease prevention, \$4 million will be available for the biennium to fund competitive grants to approximately twenty communities for obesity interventions.

ENVIRONMENTAL STANDARDS, VACCINATIONS, AND SAFETY

Another area of important public policy for children's health is the way government uses its power to help protect children—from toxins, from diseases, and from injury. A bill that would have **prevented smoking in all workplaces and public areas**, **HB 5** by Representative Myra Crownover, failed despite over 85 legislators co-sponsoring the bill. Proposed legislation that would have mandated that fish vendors post warning information from public agencies about **mercury consumption** for pregnant women and young children also failed to become law. **SB 61** by Senator Judith Zaffirini takes effect September 1, 2009. It requires that children under eight years old be **secured in a safety seat while in an automobile**; the current law applies to children under five years old.

Two bills related to child vaccination passed. **SB 347** by Senator Jane Nelson, which was signed into law by the Governor, allows for **immunization information to be released to emergency providers** in the case of a disaster. **HB 1409** by Representative Chuck Hopson was signed by the Governor. It **increases access to influenza vaccinations for children older than age 7** by allowing pharmacists to administer them. Since this is the first year that the Center for Disease Control has recommended that vaccination for influenza be included for all children in the regular vaccination schedule, some policymakers have suggested using schools as a site for administering these vaccinations. **SB 424** by Senator Leticia Van de Putte would have **created a study of existing school-based influenza vaccination programs** and appointed a board to make recommendations to the state agencies about administering influenza vaccines in schools. This bill advanced through the Senate and passed committee in the House, but was not passed into law.

MATERNAL AND INFANT HEALTH

Three bills passed and were signed by the Governor regarding newborn screenings. **HB 1795** "Greyson's Law" by Representative Paula Pierson **expands the scope of genetic disorders screened for at birth**. **HB 1672** by Representative Myra Crownover, requires DSHS **to add sickle cell newborn screening to existing requirements**. It also requires DSHS to disclose its usage of genetic material collected during newborn screenings and allows parents the option of having genetic material destroyed. **Funding for**

cystic fibrosis screening was also appropriated in the budget. **HB 1671**, also by Representative Myra Crownover, authorizes DSHS to enter into **contracts with other states to ensure continuity of newborn screening services** in the event that a disaster affects the state laboratory. Several other newborn screening bills (including bills that would require screening for HIV and fetal alcohol syndrome) did not become law.

The Legislature took action to improve treatment of pregnant women who are incarcerated. **HB 3654** by Representative Marissa Marquez establishes **minimum health care and housing standards for pregnant county jail inmates**. **HB 3653** by Representative Marissa Marquez prohibits the Texas Department of Criminal Justice (TDCJ), the Texas Youth Commission (TYC), counties, and cities from **using restraints on a pregnant inmate** while she is in labor, being transported to a birthing facility, or in postpartum recovery unless necessary to ensure the safety of the mother or her child or to prevent escape. When used, the restraints employed must be the least restrictive option possible. Both bills were signed by the Governor.

The Legislature also passed measures to improve education for parents of newborns. **HB 1240** by Representative Mike Villarreal and signed by the Governor requires that all parents who have a baby delivered through the Medicaid program receive a **child development and resource guide** that includes information in English and Spanish relating to child development, health, and safety from birth until age five. **HB 1510** by Representative Dennis Bonnen and signed by the Governor will add material about preventing **Sudden Infant Death Syndrome (SIDS)** to an already-existing information booklet provided to all parents at the time of birth.

TEXANS CARE FOR CHILDREN’S LEGISLATIVE PRIORITIES: CHILD HEALTH	STATUS
Improve the state’s benefits eligibility system	Mixed Results: Legislation passed improving some aspects of the eligibility system, but insufficient to bring system to federal timeliness standards.
Provide 12-month coverage for Children's Medicaid	Did not pass
Create a CHIP buy-in program for families over 200% of the federal poverty level	Did not pass
Support implementation of Coordinated School Health Programs	Passed
Improve nutrition education and access to healthy foods	Passed
Strengthen physical education in schools and communities to reflect best practices	Mixed Results: Legislation passed strengthening P.E. curriculum and activity requirements, and extending requirements to prekindergarten programs, but reductions to high school P.E. requirements also passed.
Support comprehensive, evidence-based programs at the community level that impact obesity	Passed
Increase reimbursement rates for CHIP and Children’s Medicaid	Mixed Results: There were rate increases for some providers, but not doctors or dentists.



Children's Mental Health

When mental health needs in children go unmet, those children may grow into adults whose problems are much more difficult and costly to solve. Behavioral and mental health interventions early in life can prevent later challenges, and this session brought some successes for children's mental health, including some key wins for families with children with disabilities and for youth in the juvenile justice system. However, investments in children's mental and behavioral health remained flat.

COORDINATION OF SERVICES

The Council on Children and Families, made into law this session with passage of **SB 1646**, by Senator Leticia Van de Putte, will address many challenges in the state's children's mental health systems. Representative John Davis's **HB 620** would have established a **Children's Behavioral Health Council** to focus on children's mental health services. Portions of HB 620 were rolled into SB 1646, but later removed, and the bill did not pass. The Governor signed into law both **SB 1824** by Senator Eddie Lucio, Jr. and **HB 2196** by Representative Vicki Truitt, each creating an interagency **Taskforce on Children with Special Needs** to improve services provided to children with chronic illnesses, intellectual or developmental disabilities, or mental illnesses. **HB 2196** also requires a workgroup that will recommend to the Legislature how to **integrate health and behavioral health services**. The Legislature addressed local coordination of services to at-risk children by approving **HB 1232** by Representative Jose Menendez, which the Governor signed into law. This bill authorizes a behavioral health intervention pilot project in Bexar County to provide **local integrated systems of care services to divert youth** at risk of expulsion, placement in restrictive settings, or incarceration. The passage of HB 1232 could lead to using a systems of care approach across the state.

FUNDING

The Legislature continued its investment in crisis mental health services this session by appropriating **\$109 million for enhanced crisis services** and **\$55 million for transitional and ongoing services** for children and adults coming out of crisis, though no funds are set aside specifically for children. Community Resource Coordination Groups (CRCGs) provide a local, coordinated approach to children and adults receiving services from multiple agencies. HHSC requested **\$3 million in new funding for CRCGs** to provide services for youth coming out of the Texas Youth Commission, children at-risk of being relinquished to the state, and children of military families. HHSC also requested **\$600,000 to expand the systems of care approach** to four new sites through the Texas Integrated Funding Initiative (TIFI), which supports communities in employing this best practice approach to address the complex needs of children with serious emotional disturbance and their families. **Neither of HHSC's funding requests was granted.** There is a shortage of children's mental health providers in Texas, and existing providers are often discouraged from serving CHIP and Medicaid patients due to the state's low reimbursement rates. Efforts within **SB 7** by Senator Jane Nelson to develop a quality-based reimbursement system for Medicaid services, which may have resulted in increased reimbursement rates to some Medicaid providers, failed to reach a vote in the House before session ended.

MENTAL HEALTH SERVICES WITHIN THE JUVENILE JUSTICE SYSTEM

Too often, youth who fail to receive appropriate mental health services in their communities end up in the juvenile justice system, with delinquent behavior frequently stemming from untreated mental health and substance abuse issues. As passed and signed by the Governor, the Juvenile Justice Sunset Bill, **HB 3689** by Representative Ruth Jones McClendon, contains provisions originally in **SB 1286** by Senator Royce West to establish a **continuity of care system for juvenile offenders with mental impairments** to help ensure these youths' health, mental health, educational and rehabilitative needs are identified and met through coordinated services. **HB 1630**, signed into law by the Governor, by Representative Elliott Naishtat will help prevent youth in the juvenile justice system who qualify for Medicaid or CHIP from facing gaps in their health insurance coverage upon discharge, and **HB 4451** by Representative Jim McReynolds, also signed by the Governor, allows youth released from TYC due to a mental impairment to access community-based mental health services through the Texas Correctional Office on Offenders with Medical or Mental Impairments (TCOOMMI) when they return to their communities. It also allows youth receiving services through TCOOMMI as TYC parolees to continue treatment beyond their 17th birthday until parole completion. The Governor signed Representative Jose Menendez' **HB 1232**, mentioned above, which creates a local **behavioral health pilot project** for Bexar County **youth at risk of being removed from home or school** due to behavior challenges. It authorizes relevant state and local agencies to collaborate and share information, with parental consent, to facilitate early identification and treatment of youth using a **systems of care** approach.

OTHER KEY LEGISLATION

Health care coverage is a critical component of supporting children's mental health, helping children access appropriate care and medication as needed. Significant **CHIP and Medicaid bills failed**, though **SB 187** by Senator Robert Deuell, which allows families of children with a disability to buy into Medicaid coverage if the family earns too much to be covered under previous law, did pass and received the Governor's signature. SB 187 and its companion bill, **HB 67** by Representative Eddie Lucio III, received broad, bipartisan legislative support. To learn more about children's health care coverage, see the Child and Maternal Health section of the Summary.

As in previous sessions, legislation was filed to address the unequal coverage of mental illnesses by state regulated health insurance plans. **None of the broad parity bills passed**. **HB 451** by Representative Alma Allen, requiring health insurance plans to **cover children with autism until age 10**, passed with the Governor's signature.

HB 1574 by Representative Senfronia Thompson, and sponsored in the Senate by Senator Mario Gallegos, Jr., was the primary autism legislation passed this session. Signed by the Governor, the bill **establishes an autism spectrum disorders resource center** to distribute information, conduct training, coordinate with local service providers, and provide support for families. The creation of an **autism direct services program**, originally filed in **SB 1217** by Senator Florence Shapiro, made significant progress, but did not pass. Another bill that came close to being approved was **SB 100** by Senator Eddie Lucio, Jr. This bill would have created a professional development program to help teachers work with students with disabilities, including autism spectrum disorder.

Senator Lucio also filed **SB 1613** to help young children with challenging behaviors succeed in early child care settings by providing child caregivers with access to **early childhood behavioral consultations** and technical assistance to help them meet the social, emotional, and behavioral needs of young children in their care. After receiving a hearing, the bill was left pending in Senate committee.

Communities will now be better able to **identify and prevent suicide clusters**, or groups of suicides or attempts, with the Governor’s signing of **HB 1067** by Representative Elliott Naishtat, which allows certain entities to share statistical, non-identifying suicide data with one another in a timely manner. Senator Jane Nelson proposed a **suicide prevention program for public high schools** in **SB 84** and **SB 85**, but neither bill received a hearing this session.

TEXANS CARE FOR CHILDREN’S LEGISLATIVE PRIORITIES: CHILDREN’S MENTAL HEALTH	STATUS
Increase public funding for children’s mental health	Did not pass
Improve mental health services for youth in the juvenile justice system	Mixed Results: Funding was not increased, but important legislation passed.

Early Childhood

The research is clear—quality early care and education programs are a proven way to help prepare children for success in school and later in life. Quality child care programs are associated with positive long-term outcomes such as academic success, higher graduation rates, and increased workforce participation, as well as reduced rates of criminal involvement and welfare participation in adulthood. Unfortunately, given low state standards and minimal investment in Texas’ child care system, the care young children experience often falls far short of what they need to support their cognitive, social and emotional development. Early care investments bring a high return, and the Legislature has given significant consideration to the issue of quality pre-kindergarten and child care programs the past three sessions. This session, however, notable progress on early care and education was more limited.

EARLY CHILDHOOD BEHAVIORAL CONSULTATIONS

There is growing concern about young children being asked to leave a child care program due to behavioral problems, and research suggests children struggling with behavioral and emotional problems at a young age have a 50% chance of continuing to struggle into adolescence and adulthood. Senator Eddie Lucio, Jr. filed **SB 1613** to provide child caregivers with access to **early childhood behavioral consultation** and technical assistance to help them meet the social, emotional, and behavioral needs of young children in their care and to help young children with challenging behaviors succeed in early child care settings. This was the first year for this legislation modeled after a nationally-recognized best practice to receive a hearing in Texas, but the bill was left pending in Senate committee.

TRAINING FOR CHILD CARE PROVIDERS

Caregiver education and training are predictors of children receiving care that promotes their cognitive, social, and emotional development. Yet in Texas, a person needs just eight hours of pre-service training before caring for children in a child care setting. Senator Royce West’s **SB 1730** would have increased both the pre-service and annual training requirements for child care employees and directors. **SB 59** by Senator Judith Zaffirini would have helped ensure child care professionals receive **training from appropriate trainers**. Currently, there are no restrictions as to who may provide training to child care employees. Both bills passed the Senate and failed to be called for a vote in the House.



CHILD CARE REIMBURSEMENT RATES

The subsidized child care system in Texas has long lost pace with the market rate for child care. Many providers limit the number of subsidized children they accept, if they accept them at all, and make do with the resources available, often at the cost of quality. Representative Kino Flores sought to address this critical problem in **HB 2218**, which would have increased funding to regions with the lowest reimbursement rates. However, no new funds were attached to the bill, so regions paying higher reimbursement rates would have had funding reduced. This would have failed to address the statewide problem with reimbursement rates, and the bill did not advance.

FULL-DAY QUALITY PRE-KINDERGARTEN PROGRAMS

The Governor vetoed **HB 130**, a bill passed by the Legislature that would have created a **full-day, enhanced quality pre-k grant program**. The program would have allowed some school districts to extend their half-day programs while requiring them to limit class sizes to 22 children, maintain an 11 to 1 child per staff ratio, and employ certified teachers with additional early childhood education training. Funding set aside for the full-day pre-k grant program will be used for the state's current half-day pre-kindergarten program, but schools will not have to implement the higher quality standards approved by the Legislature. Other bills aimed at limiting class sizes or ratios for all public pre-kindergarten classes failed to gain traction.

OTHER KEY LEGISLATION

Several bills were filed this session to set aside funding to support quality child care. **SB 1722** by Senator Carlos Uresti and **HB 4202** by Representative Abel Herrero would have used a portion of child care licensing fees to support continuing education targeting the care of infants and toddlers, and Representative Mark Strama's **HB 4447** and Senator Kirk Watson's **SB 2022** would have directed federal child care dollars to improving child care. Although none of these bills passed, the Legislature did direct a portion of federal stimulus funds within the state's budget to improve infant and toddler child care.

Senator Jane Nelson's **SB 68** addresses various licensing and inspection requirements for a wide range of child care facilities. This bill was signed into law by the Governor and expands the list of child care facilities exempt from regulation, allowing before-school, after-school, and school-age programs to be regulated differently; requires specific standards for child-care facilities located in temporary shelters; expands background and criminal history checks for certain persons; and extends the waiting period for licensing renewal following revocation of a child care license.

The Legislature also authorized the Department of Assistive and Rehabilitative Services (DARS) to use federal stimulus funds to increase the **rates paid to Early Childhood Intervention (ECI) providers**, but only if the agency could maintain current eligibility criteria and service levels, as well as other criteria. However, since DARS received less than half of the funding it requested to meet anticipated caseload growth, it is unlikely ECI providers will see a rate increase. Moreover, if ECI caseload growth increases as expected, given the level of funding appropriated by the Legislature, over the next biennium DARS may be forced to reduce or restrict services to families with children birth to three with disabilities and developmental delays.

Texans Care For Children's Legislative Priorities: EARLY CHILHOOD	STATUS
Pilot First Steps to link child care providers and experts to improve infant and toddler care	Did not pass
Increase pre-service training for childcare providers	Did not pass
Increase childcare provider reimbursement rates	Did not pass
Expand voluntary pre-kindergarten for all currently eligible children from a half day to a full day	Passed, but vetoed
Establish a maximum teacher to student ratio for public pre-kindergarten programs	Did not pass

Child Welfare

Compared to the significant reforms that lawmakers made to the child welfare system in 2005 and 2007, the 2009 Texas Legislature was relatively quiet regarding child abuse and neglect. The biggest child welfare changes this past session were to kinship care and services for youth aging out of care. Otherwise, the child protective services system and its budget were relatively unchanged. The Texas child welfare system still faces many challenges. The lack of change in the 81st Legislature allows the child welfare system to focus on improving quality services and successfully implementing reforms from recent sessions statewide, while clarifying the policy reforms that need to be made in future sessions.

YOUTH TRANSITIONING OUT OF FOSTER CARE

HB 1912 by Representative Eddie Rodriguez made multiple changes to **transition services to youth aging out of foster care**; it has become law with the Governor's signature. This bill requires the Department of Family and Protective Services (DFPS) to form a transitional services workgroup including former foster youth and develop a comprehensive plan based on **best practices to improve transitional living services**. The bill requires transition planning to begin at age 14 rather than age 16, youth to enroll in the Preparation for Adult Living Program before the age of 16, and **experiential life skills training to be tailored to the youth's skills and needs**. Further, DFPS will ensure that youth aging out of foster care have help obtaining a birth certificate, social security card and state I.D. before turning 16, and **help replacing documents** if lost.

SB 43 by Senator Judith Zaffirini was signed into law by the Governor. It expands the college tuition waiver program for foster youth to cover dual-credit high school courses and to be available until age 25. Also signed by the Governor was **SB 983** by Senator Wendy Davis, which requires DFPS to provide foster children with important records like a birth certificate, immunization records, and health passport at least one month before exiting foster care. The bill also requires a plan outlining how foster youth can **obtain a drivers license** before leaving foster care, which is a very important issue to many youth formerly in care.

Senator Jane Nelson's **SB 493** did not pass, though its provisions were successfully added onto **SB 939** by Senator Kirk Watson, which was signed by the Governor and became law. The most important impact of the changes originally proposed in SB 493 is ending the current practice of planning for a child to be in long-term foster care. It requires DFPS to plan to place foster children in a permanent home outside of DFPS custody. Like SB 43, this bill also extends the cut-off age for higher education tuition waivers for former foster children to age 25 and changes the school enrollment requirement.

Also passed and signed into law was **HB 1043** by Representative Rob Orr, which creates **employment preferences at state agencies for former foster children**. **HB 704** by Representative Patrick Rose has been signed by the Governor, allowing a **court to continue being involved in the case of a child who remains in foster care after they turn 18** if the child requests it or if the youth is not able to care for him- or herself. Previously, courts lost jurisdiction when a foster child turned 18, even if the youth was voluntarily in foster care.

KINSHIP CARE

Kinship care is the placement of a child with a relative rather than with a foster family when that child has been removed from home due to abuse or neglect. Kinship care allows children to maintain family and community connections and ethnic and cultural identities, and reduces the trauma caused through loss and attachment issues. **SB 1411** by Senator Royce West was the **kinship bill** that advanced furthest this legislative session. However, the bill's passage was threatened by end-of-session deadlines, so its provisions were successfully amended onto **HB 1151** by Representative Senfronia Thompson and **SB 2080** by Senator Carlos Uresti, both of which became law with the Governor's signature. The two versions differ, and SB 2080 will govern since it was passed last.

SB 2080 takes advantage of new **federal funds** from the **Fostering Connections to Success Act** by directing DFPS to create a **subsidized guardianship** program that provides financial assistance to **relatives who take permanent custody of a child who would otherwise be in long-term foster care**. Benefits could extend until the child is 21, in some circumstances, as could **adoption assistance**.

IMPROVING FOSTER CARE SERVICES AND CHILD OUTCOMES

HB 1629 by Representative Elliott Naishtat was passed to improve services to **foster children who are committed to Texas Youth Commission (TYC) for delinquent behavior**. It was signed by the Governor and has already taken effect. The bill changes how case management, medical consent, judicial oversight, and transition services are handled for these youth dually committed in two state systems.

Concerning **education of foster children**, two pieces of legislation passed. **SB 2248** by Senator Judith Zaffirini requires the Texas Education Agency (TEA) to assist **foster children in transitioning smoothly from one school to another**. It was passed by the Legislature and signed by the Governor. **SB 939** by Senator Kirk Watson, also now law, ensures that the Public Education Information Management System (PEIMS) compiles information so TEA can track performance of students in foster care.

Provisions of **SB 1877** by Nelson, which did not pass, were added to **SB 2080 by Senator Carlos Uresti** and have become law. This legislation creates the Texas Medical Child Abuse Resources and Education System (**MEDCARES**) grant program for regional programs for pediatric centers of excellence to **improve the medical diagnosis of suspected child abuse, primarily physical abuse and neglect**. This grant will fund education and training of professionals working with this population of children, as well as telemedicine for rural areas, and other targeted quality measures.

The original provisions of **SB 2080** by Senator Carlos Uresti, which remained in the bill that became law, created a **task force to develop a strategy for improving child welfare and reducing child abuse and neglect**. This group will consist of members appointed by the Governor, the Lieutenant Governor, and the Speaker of the House. Similarly, **HB 2225** by Representative Tan Parker was signed by the Governor and has become law. It creates a committee to review the adoption process and develop ways to **improve the foster care system**. The committee will have members appointed by the Health and Human Services executive commissioner, the Governor, the Lieutenant Governor, and the Speaker of the House.

A bill that failed to become law was **SB 69** by Senator Jane Nelson. SB 69 had many provisions, including **privatization of case management in a small percentage of child abuse and neglect cases**. It would have built on the privatization statute in SB 758 passed by Senator Nelson in 2007. **SB 69** also would have provided for foster parents to mentor a child's parents, exit interviews with foster parents, and limiting reassessment of foster youth in specialized or intense services to once every 6 months.

JUDICIAL ASPECTS OF CHILD ABUSE AND NEGLECT CASES

Bills were filed this session to improve child representation in the legal proceedings of child abuse and neglect cases. **HB 1462** by Representative Joe Pickett grants state employees an additional five hours of leave time per month to participate in training or volunteer work for **Court Appointed Special Advocates (CASA)**. It became law with the Governor's signature, as did **SB 1369** by Senator Eddie Lucio, Jr. **SB 1369** requires judges to maintain a **rotating list of all attorneys qualified to serve as attorney ad litem** in child abuse and neglect cases and to appoint the attorney whose name appears first unless a case involves complex matters requiring an attorney with special qualifications. **SB 2385** by Senator Eliot Shapleigh was signed into law and requires DFPS to file the child placement resources form, background checks, home studies, and a statement offering reasons for the selected placement at the adversary hearing.

While **SB 1064** by Senator Kirk Watson did not advance through both chambers, its key provisions were added to **SB 1440**, also by Watson, to ease passage into law. The bill provided procedures for DFPS to obtain a court order to gain access to a child or information regarding a child in a child abuse or neglect investigation. **SB 1440** passed both chambers of the Legislature, but was vetoed.

CASELOADS

Caseloads for Family-Based Safety Services and Conservatorship workers who work directly with children in the state's care are consistently much higher than national averages and federal standards, for which Texas has been fined in its last two federal reviews. For children in the care of the state, the Legislature **did not pass legislation that would have put a caseload cap in law**, nor did it give DFPS the necessary funds to meet the federal standard. Without this funding, the state can expect to fail its next federal review in this area. However, for children and families receiving **Family-Based Safety Services**, DFPS was given funding that should allow it to reduce caseloads and meet the federal standard of seeing 95% of children and parents in person at least once per month.

CHILD ABUSE AND NEGLECT PREVENTION

Apart from **SB 2080** discussed above, this legislative session, child abuse and neglect prevention was given attention more in terms of funding rather than in passage of bills. DFPS received a \$4.4 million **increase in prevention funding**, of which \$2.9 million goes toward **evidence-based prevention programs** operated at the community level. The remaining \$1.5 million is an **increase for statewide networks of prevention programs** like the Boys and Girls Club or Big Brothers, Big Sisters, though the funds will be distributed through a competitive process. Funding for **Services to At-Risk Youth (STAR)** and **Community Youth Development (CYD)** was kept level; it has not increased in approximately 10

years. The **Nurse-Family Partnership**, a home-visitation program with a strong impact on improving child well-being, was first implemented in Texas last session. It received funding in the Health and Human Services Commission budget sufficient to continue its Texas rollout as envisioned last legislative session.

TEXANS CARE FOR CHILDREN'S LEGISLATIVE PRIORITIES: CHILD WELFARE	STATUS
Reduce CPS caseworker caseloads to national standards	Mixed Results: Funding was approved to meet federal standards in Family-Based Safety Services caseloads, but not Conservatorship caseloads.
Invest in improved transitional services for youth aging out of foster care	Passed
Invest in research-based and best practice prevention programs	Passed; \$4.4 million increase in prevention programs plus funding for the Nurse-Family Partnership
Provide more resources for kinship care placements	Passed; \$3.6 million for caseload growth plus funding for subsidized guardianship
Increase in-home Family-Based Safety Services for poverty-related neglect	Did not pass (though part-year funding from 2008-2009 was annualized for 2010-2011)
Improve representation of children and children's interests in child abuse and neglect cases	Passed
Increase rates for all foster care providers	Passed; \$32.2 million for 2010-2011

Juvenile Justice

Major reform legislation, SB 103 by Senator Juan “Chuy” Hinojosa, passed two years ago, and the two state agencies that jointly comprise the juvenile justice system in Texas, the Texas Youth Commission (TYC) and the Texas Juvenile Probation Commission (TJPC), along with the 168 county juvenile probation departments, have been implementing those reforms. In the middle of SB 103 implementation, both agencies underwent review by the Sunset Commission in 2008-09. The Sunset bill was this session’s primary legislative vehicle for continuing the reforms begun in SB 103. Policy changes, along with a leadership change at TYC, are having a cumulative positive effect. The goal of juvenile justice leaders is still to successfully divert as many kids as possible from juvenile justice involvement, to treat most youth outside of facilities in community-based service settings, and to engage those who must be incarcerated in successful treatment programs.

SUNSET REVIEW

HB 3689 by Representative Ruth Jones McClendon contained the recommendations of the Sunset Commission for TYC, TJPC, and the Office of the Independent Ombudsman. Though the Sunset Commission had originally recommended that TYC and TJPC be combined, early in session both chambers re-wrote the legislation in a way that kept the two agencies independent. Apart from that issue, the House and Senate took very different approaches to the Sunset bill, and it was unclear until



the last week of session whether the two chambers would be able to agree to a single version of continued juvenile justice reform.

The final Juvenile Justice Sunset bill that was signed by the Governor and became law includes:

- Provisions to create a **continuity of care for juveniles with mental impairments**,
- Requirements for a comprehensive **Reentry and Reintegration Plan**,
- Direction on a two-year juvenile justice strategic plan jointly developed by the agencies,
- Authorization for the **continued involvement of the committing court** in a juvenile's progress,
- TJPC's authority to **regulate nonsecure juvenile facilities**,
- Data collection requirements for local juvenile board programs, outcomes, and risk/needs assessments,
- Performance-based contracting provisions between TJPC and local juvenile boards,
- Specificity about how the Ombudsman and TYC should work together,
- Authorization for TJPC to open a residential treatment center at the **Peavy Switch** facility in East Texas,
- Detailed provisions regarding a plan and program to **improve reading skills** for students at TYC,
- Addition of Travis County as a venue for cases of abuse or neglect at TYC,
- Quarterly reports on abuse and neglect in facilities,
- Changes to TJPC's governing Commission, and
- **Sunset Review of TYC and TJPC again immediately**, for the 2011 legislative session.

One component of the Sunset discussion that did not end up in the final Sunset bill was a **community corrections pilot**. A stand-alone bill on the same issue, **SB 1374** by Senator Royce West, would have established guidelines and grant funds for community corrections pilot programs in large counties as an **alternative to sending juveniles who commit non-violent felonies to TYC**. **SB 1374** did become law with the Governor's signature, though its final version omitted all of the community corrections pilot provisions except for adding reporting requirements to existing community-based programs for the purpose of measuring success and cost effectiveness.

The Legislature also made policy decisions in the TYC and TJPC budgets. One notable decision is that TYC is prohibited from continuing to fund operations of the West Texas State School and Victory Field Correctional Academy after the end of Fiscal Year 2010. Additionally, TJPC was given \$26 million in Fiscal Year 2010 and \$24 million in Fiscal Year 2011 to fund counties to divert youth from TYC by expanding their community corrections programs.

MENTAL HEALTH AND JUVENILE JUSTICE

A discussion of legislative changes regarding mental health issues in the juvenile justice system is included on page 9 in the Mental Health section of this Summary.

OTHER KEY LEGISLATION

HB 1629 by Representative Elliott Naishtat was passed to improve services to **foster children who are committed to TYC for delinquent behavior**. It was signed by the Governor and has taken effect. The bill changes how case management, medical consent, judicial oversight, and transition services are handled for these youth dually committed in two state systems.

Out of the many **school discipline** bills that were filed this session to address the "school to prison pipeline" challenges, such as those that arise when schools implement "zero tolerance" rules that lead to mandatory expulsions for certain behaviors, the only one that became law was **HB 171** by

Representative Dora Olivo. The bill requires schools to consider **mitigating factors** such as self-defense, intent or lack of intent at the time the student engaged in the conduct, the student's disciplinary history, or a disability that substantially impairs the student's capacity to appreciate the wrongfulness of the conduct regarding suspensions, removals, or expulsions. It was signed by the Governor.

The Governor signed into law **SB 58** by Senator Judith Zaffirini, which requires TJPC to participate in and assist counties with the creation and maintenance of the Juvenile Justice Case Management System (JJCMS). The JJCMS will improve delivery of services, aid in the early identification of at-risk and delinquent children, and facilitate cross-jurisdictional sharing of information related to juvenile offenders between authorized agencies. TJPC would also be responsible for the collection and maintenance of all information related to juvenile offenders and offenses.

Also newly enacted into law with the Governor's signature is **SB 518** by Senator Chris Harris, which requires juvenile courts to provide the child's attorney and the prosecuting attorney five days to review a juvenile's file before a hearing to transfer a juvenile to an adult court. Currently, the child's attorney only gets one day, so this bill is intended to increase procedural fairness for juveniles and **reduce certifications of juveniles to the adult system**. **HB 1793** by Representative Jessica Farrar seeks to **improve judicial understanding of juvenile delinquency** by requiring judges who hear fine-only juvenile misdemeanors to complete two to four hours of training on child welfare and the Individuals with Disabilities Education Act; this bill was signed and became law.

The Legislature addressed juvenile sentencing by passing **SB 839** by Senator Juan "Chuy" Hinojosa. It requires that a juvenile convicted of capital murder be sentenced to **life in prison**, which has parole as an option after 40 years. Before this session, a juvenile convicted of capital murder had to be sentenced to life without parole. **A juvenile records sealing bill, HB 2386** by Representative Joaquin Castro, was signed into law. It allows a juvenile court to immediately seal the record of a juvenile adjudicated of delinquent conduct if the child successfully completes a drug court program. **HB 558** by Representative Ana Hernandez, which makes **public intoxication a punishable offense for youth**, has also become law. All three of these bills were signed by the Governor.

TEXANS CARE FOR CHILDREN'S LEGISLATIVE PRIORITIES: JUVENILE JUSTICE	STATUS
Incarcerate only the most serious offenders in small, regional juvenile justice facilities	Passed
Improve interventions at the county and state level by using wrap-around and community-based treatments in probation and parole	Passed
Increase funding significantly for research-based practices geared towards delinquency prevention	Did not Pass
Decrease public school practices that funnel students into the juvenile justice system	Mixed Results: One positive bill passed, though many aspects of this issue remain unaddressed.



BILLS FOR CHILDREN THAT PASSED WITH TEXANS CARE FOR CHILDREN'S SUPPORT



Children's Services

- SB 1646 Sen. Leticia Van de Putte Creates an interagency Council on Children and Families
- HB 3859 Rep. Abel Herrero Addresses gaps in staffing in state health and human services
- SB 1 Sen. Steve Ogden Budget funds for numerous child-serving programs this biennium:
- Maintained funding for all critical health and human services programs
 - Texas will provide \$4.4 million more for research-based programs that prevent child abuse and neglect, including the Nurse Family Partnership and after-school and mentoring programs.
 - Federal funds from the Fostering Connections to Success Act will be used to provide \$3.6 million for caseload growth and subsidies to relatives caring for children who otherwise would be in the foster care system. Rates for foster care providers also increased for the first time in years.

Child Poverty/Family Economic Security

- HB 2360 Rep. Joe Farias Requires employers to give employees information about the Earned Income Tax Credit
- SB 1941 Sen. Florence Shapiro Allows state employees to contribute payroll deductions to Texas' Save and Match Program
- HB 1819 Rep. Dwayne Bohac Protects Houston families from living in structurally unsound apartments

Infant, Child and Maternal Health

- HB 1630 Rep. Elliott Naishtat Improves health coverage access for youth upon release from the Texas Youth Commission (TYC)
- SB 187 Sen. Robert Deuell Allows families with disabled children to purchase Medicaid coverage on a sliding-scale basis
- SB 282 Sen. Jane Nelson Provides for grants for nutrition education and nutrition programs in early childhood programs
- SB 343 Sen. Jane Nelson Improves the availability of fresh fruits and vegetables in underserved areas of Texas
- SB 1027 Sen. Kirk Watson Establishes a farm-to-school task force so public schools have more locally grown fresh foods
- SB 395 Sen. Eddie Lucio, Jr. Creates a council to improve nutrition, health and physical activity in early childhood programs
- SB 891 Sen. Jane Nelson Requires prekindergarten-12 students to spend at least half of their P.E. time physically active
- SB 161 Sen. Rodney Ellis Applies specialty license plate fees to fund sidewalks and crosswalks near schools
- SB 283 Sen. Jane Nelson Strengthens community representation and the role of school health advisory councils
- SB 892 Sen. Jane Nelson Increases schools' accountability for health by requiring evaluations of campus health programs
- HB 1409 Rep. Chuck Hopson Allows pharmacists to administer influenza vaccines to children older than 7, increasing access
- HB 1671 Rep. Myra Crownover Ensures continuity of newborn screening services in the event of a disaster
- HB 3653 Rep. Marissa Marquez Prohibits the use of restraints on pregnant inmates in labor or recovery from childbirth
- HB 3654 Rep. Marissa Marquez Establishes minimum health and housing requirements for pregnant county jail inmates
- HB 1240 Rep. Mike Villarreal Gives a child-development and resource guide to families on Medicaid with infants
- HB 1510 Rep. Dennis Bonnen Ensures parents of newborns get information about preventing Sudden Infant Death Syndrome

Children's Mental Health

- SB 1824 Sen. Eddie Lucio, Jr. Creates a Taskforce on Children with Special Needs (as does HB 2196 by Rep. Vicki Truitt)
- HB 2196 Rep. Vicki Truitt Promotes integration of mental health services with other health services for kids
- HB 3689 Rep. Ruth Jones McClendon Incorporates Sen. Royce West's SB 1286 to promote coordinated services to juvenile offenders with mental impairments
- HB 4451 Rep. Jim McReynolds Lets juveniles released from TYC for mental health reasons get community-based treatments
- HB 451 Rep. Alma Allen Requires health insurance plans to cover children with autism through age 10
- HB 1574 Rep. Senfronia Thompson Establishes an autism spectrum disorders resource center for Texas
- HB 1232 Rep. Jose Menendez Creates a Bexar County pilot effort to prevent juvenile delinquency



Child Welfare

HB 1912	Rep. Eddie Rodriguez	Improves transition services for youth aging out of foster care
SB 43	Sen. Judith Zaffirini	Raises the age limit for former foster youths' college tuition waivers (as does SB 939)
SB 983	Sen. Wendy Davis	Ensures foster children have important personal documentation before exiting care
SB 939	Sen. Kirk Watson	Incorporates Sen. Nelson's SB 493, requiring Texas to plan for permanent homes for foster kids, and ensures education tracking systems examine outcomes for foster children
HB 704	Rep. Patrick Rose	Allows courts to stay involved in cases of children remaining in foster care after age 18
HB 1043	Rep. Rob Orr	Gives state hiring preferences to former foster children
SB 2080	Sen. Carlos Uresti	Incorporates Sen. West's SB 1411, to create a subsidized guardian program for caregiver kin, and Sen. Nelson's SB 1877, to improve medical diagnoses of suspected child abuse; creates a taskforce to reduce child abuse and neglect and improve child welfare
HB 1629	Rep. Elliott Naishtat	Improves services to foster youth incarcerated in the Texas Youth Commission
SB 2248	Sen. Judith Zaffirini	Requires the Texas Education Agency to smooth school transitions for foster children
HB 2225	Rep. Tan Parker	Creates a committee to review adoption processes and plan improvements to foster care
HB 1492	Rep. Joe Pickett	Grants time off to state employees volunteering as court appointed special advocates
SB 1369	Sen. Eddie Lucio, Jr.	Improves children's access to attorneys ad litem for child abuse and neglect cases
SB 2385	Sen. Eliot Shapleigh	Requires the state to file necessary paperwork at hearings pertaining to child placements

Juvenile Justice

HB 3689	Rep. Ruth Jones McClendon	Addresses a range of issues raised in the "sunset" review of the juvenile justice system: improving services to youth with mental impairments, planning for reentry, supporting reading programs for TYC students, a new residential treatment center, more accountability
SB 1374	Sen. Royce West	Establishes a pilot program as an alternative to incarceration for nonviolent young offenders
SB 58	Sen. Judith Zaffirini	Involves using the Juvenile Justice Case Management System to improve and assess outcomes
SB 518	Sen. Chris Harris	Aims to increase fair representation for juveniles and reduce the number sent to adult court
HB 1793	Rep. Jessica Farrar	Requires judges who hear juvenile misdemeanor cases to complete certain trainings
SB 839	Sen. Juan "Chuy" Hinojosa	Gives juveniles convicted of capital murder the option of parole after 40 years
HB 2386	Rep. Joaquin Castro	Allows courts to seal juvenile records of a minor who successfully completes a drug program
HB 171	Rep. Dora Olivo	Mandates that school discipline policies allow for consideration of mitigating factors

HARMFUL PROPOSALS TEXANS CARE SUCCESSFULLY FOUGHT

Potentially Dangerous Ideas for Children that will NOT Become Law

HB 2789	Rep. Doug Miller	This bill, as well as Sen. Jane Nelson's SB 342, would have allowed newborn babies to be used as evidence against their mothers in drug cases, increasing the odds of mothers giving birth to the most vulnerable babies in unsafe settings and putting infant lives in danger
Sunset Commission Recommendation		The state Sunset Commission suggested abolishing the Texas Juvenile Probation Commission and the Texas Youth Commission and replacing them with one agency, but such a move would have diluted the distinct missions in each agency and reduced Texas' prevention focus



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