By:  Parker, Zerwas, Miller, H.B. No. 4183

     Thompson of Harris, Sanford, et al.

A BILL TO BE ENTITLED

AN ACT

relating to addressing adverse childhood experiences and developing a strategic plan to address those experiences.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

SECTION 1.  Subchapter B, Chapter 531, Government Code, is amended by adding Section 531.0222 to read as follows:

Sec. 531.0222.  COORDINATION TO ADDRESS ADVERSE CHILDHOOD EXPERIENCES; PROGRESS REPORT AND STRATEGIC PLAN. (a) In this section, "adverse childhood experience" includes:

(1)  abuse as defined by Section 261.001, Family Code;

(2)  neglect as defined by Section 261.001, Family Code;

(3)  family violence as defined by Section 71.004, Family Code;

(4)  death of a parent;

(5)  parental separation or divorce; and

(6)  substance use disorder, mental illness, or incarceration of a member of a child's household.

(b)  A program, service, or support established under this section may not include sex education.

(c)  In order to reduce exposure of children in this state to adverse childhood experiences and to address the social, health, and economic impacts of those experiences, the commission, in collaboration with the Department of Family and Protective Services, the Department of State Health Services, the Texas Education Agency, the Texas Workforce Commission, the office of the attorney general, the Texas Juvenile Justice Department, and an institution of higher education, as defined by Section 61.003, Education Code, with expertise in addressing adverse childhood experiences through a public health framework shall:

(1)  analyze data related to the causes and effects of adverse childhood experiences, including data from the Behavioral Risk Factor Surveillance System established by the Centers for Disease Control and Prevention of the United States Public Health Service;

(2)  evaluate prevention needs and gaps in services and support regarding awareness, assessments, and interventions addressing adverse childhood experiences;

(3)  identify methods to incorporate best practices for preventing and treating adverse childhood experiences into existing services and support programs offered for children and families; and

(4)  develop and implement a five-year strategic plan to prevent and address adverse childhood experiences.

(d)  In developing the five-year strategic plan under Subsection (c)(4), the commission may collaborate with representatives of:

(1)  state and local agencies and nonprofit organizations that work directly with children and families;

(2)  child welfare services providers;

(3)  early childhood education programs;

(4)  public schools;

(5)  medical and mental health services providers;

(6)  family support and social services providers;

(7)  the law enforcement, judicial, and criminal justice communities;

(8)  faith-based organizations;

(9)  the intellectual or developmental disability community;

(10)  families and children impacted by adverse childhood experiences; and

(11)  the business and philanthropic communities.

(e)  The strategic plan must incorporate a public health approach that promotes collaboration between agencies and community-based providers. The strategic plan may include strategies to:

(1)  train and educate professionals to assess, intervene, and prevent adverse childhood experiences;

(2)  provide trauma-informed practices for families, children, and providers impacted by adverse childhood experiences;

(3)  provide high quality child care;

(4)  provide support to parents to develop social and economic independence;

(5)  provide support to strengthen the engagement of fathers in their children's lives and establish paternity;

(6)  incorporate voluntary, evidence-based home visiting programs to strengthen families and to connect families to community resources;

(7)  develop parental support programs for teen parents and young mothers;

(8)  develop parental education training and counseling programs;

(9)  identify best practices for child protective services and investigations;

(10)  prevent and treat mental illness and substance use disorder;

(11)  prevent family violence; and

(12)  prevent chronic diseases related to adverse childhood experiences.

(f)  The entities listed in Subsection (c) shall develop a community awareness approach to implement the strategies and recommendations in the strategic plan required under Subsection (c)(4).

(g)  The entities listed in Subsection (c) shall publish the five-year strategic plan required by Subsection (c)(4) on their respective Internet websites.

SECTION 2.  Not later than March 1, 2020, the Health and Human Services Commission shall develop a progress report to include data, best practices, and implementable changes within the commission's current capacity.

SECTION 3.  Not later than December 31, 2020, the Health and Human Services Commission shall:

(1)  develop the five-year strategic plan required by Section 531.0222(c)(4), Government Code, as added by this Act; and

(2)  submit a report to the Senate Health and Human Services Committee, the Senate Education Committee, the Senate Criminal Justice Committee, the House Public Education Committee, the House Juvenile Justice and Family Issues Committee, the House Public Health Committee, and the House Human Services Committee regarding the commission's strategies for preventing and treating adverse childhood experiences and any plan to incorporate those strategies into existing services and support programs for children and families.

SECTION 4.  This Act takes effect September 1, 2019.