# House Bill 2013

Sponsored by Representatives KOTEK, GELSER, TOMEI, KENY-GUYER, LIVELY, VEGA PEDERSON

#### SUMMARY

The following summary is not prepared by the sponsors of the measure and is not a part of the body thereof subject to consideration by the Legislative Assembly. It is an editor's brief statement of the essential features of the measure as introduced.

Directs Early Learning Council and Department of Education to assist school districts in implementing process to assess children to determine their readiness for kindergarten.

Requires standardized screening and appropriate referral services for voluntary statewide early learning system.

Expands assessments and services provided by Healthy Start Family Support Services programs to include children from zero through three years of age and their families.

Directs Oregon Health Authority and Early Learning Council to work collaboratively with coordinated care organizations to meet specified goals related to prenatal care. Directs Oregon Health Authority and Early Learning Council to establish grant program to

support effective and scalable strategies that align early learning systems and health systems for purpose of improving developmental outcomes for children zero through three years of age. Expands requirements for tiered quality rating and improvement system for child care. Requires that preschool child with disability have comprehensive plan for communication that

allows child, by age of three years, to engage in expressive and receptive communication. Directs Early Learning Council to establish demonstration projects to foster creation of locally

developed models of early learning service delivery.

Appropriates moneys from General Fund to Early Learning Council for demonstration projects. Declares emergency, effective July 1, 2013.

| A BILL FOR AN ACT | Г |
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Relating to early learning; creating new provisions; amending ORS 343.475, 417.728 and 417.795 and  $\mathbf{2}$ 

sections 14 and 130, chapter 37, Oregon Laws 2012; repealing section 14, chapter 37, Oregon 3

Laws 2012; appropriating money; and declaring an emergency. 4

 $\mathbf{5}$ Be It Enacted by the People of the State of Oregon:

SECTION 1. Section 14, chapter 37, Oregon Laws 2012, is amended to read: 6

Sec. 14. (1) The Early Learning Council established by section 4, chapter 519, Oregon Laws 7

8 2011, and the Department of Education shall jointly develop a process that allows for an assessment

9 of children to determine their readiness for kindergarten. The development of the process must in-

10 clude the input of kindergarten teachers prior to implementation as described in subsection (2) of 11 this section.

12 (2) By November 1, 2012, the process described in subsection (1) of this section must be made available to school districts that have been selected to be part of a pilot program for the imple-13 14 mentation of the process. The council and department shall select the participating school districts from school districts that volunteer to be part of the pilot program and in a manner that achieves 15the greatest possible diversity of school districts across this state. 16

17 (3)(a) By November 1, 2013, the process described in subsection (1) of this section must be made available to all school districts for implementation. 18

(b) The council and department shall assist school districts in implementing the process 19 described in subsection (1) of this section. Assistance shall include training on: 20

- 21(A) The goals of the process;
- 22(B) The implementation of the process;

**NOTE:** Matter in **boldfaced** type in an amended section is new: matter *[italic and bracketed]* is existing law to be omitted. New sections are in **boldfaced** type.

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(C) Early learning services available to improve a child's readiness for kindergarten; and 1 2 (D) The recommended procedures to follow after implementation, including accessing any early learning services. 3 SECTION 2. Section 14, chapter 37, Oregon Laws 2012, is repealed June 30, 2015. 4 SECTION 3. ORS 417.728, as amended by section 44b, chapter 37, Oregon Laws 2012, is 5 amended to read: 6 417.728. (1) The Early Learning Council shall lead a joint effort with other state and local early 7 childhood partners to establish the policies necessary for a voluntary statewide early learning sys-8 9 tem that shall be incorporated into the local coordinated comprehensive plan. (2) The voluntary statewide early learning system shall be designed to achieve: 10 (a) The appropriate outcomes identified by the Early Learning Council with input from early 11 12 childhood partners; and 13 (b) Any other early childhood benchmark or outcome that demonstrates progress toward meeting a target and that is identified by the Early Learning Council with input from early childhood part-14 15 ners. 16(3) The voluntary statewide early learning system shall include the following components: (a) A process to identify as early as possible children and families who would benefit from early 17 18 learning services, including the required use of standardized screening and referral procedures used throughout the voluntary statewide early learning system; 19 (b) A plan to support the identified needs of the child and family that coordinates case man-20agement personnel and the delivery of services to the child and family; and 2122(c) Services to support children who are zero through six years of age and their families who give their express written consent, including: 23(A) Screening, assessment and home visiting services pursuant to ORS 417.795; 2425(B) Specialized or targeted home visiting services; (C) Community-based services such as relief nurseries, family support programs and parent ed-2627ucation programs; (D) Affordable, quality child care, as defined by the Early Learning Council; 28(E) Preschool and other early education services; 29(F) Health services for children and pregnant women; 30 31 (G) Mental health services; 32(H) Alcohol and drug treatment programs that meet the standards promulgated by the Oregon Health Authority pursuant to ORS 430.357; 33 34 (I) Developmental disability services; and 35 (J) Other state and local services. (4) In establishing the definition of affordable, quality child care under subsection (3)(c)(D) of 36 37 this section, the Early Learning Council shall consult with child care providers and early childhood 38 educators. The definition established by the council shall support parental choice of child care provider and shall consider differences in settings and services, including but not limited to child care 39 for school-aged children, part-time care, odd-hour and respite care and factors of cultural appropri-40 ateness and competence. 41 42(5) The Early Learning Council shall: (a) Consolidate administrative functions relating to the voluntary statewide early learning sys-43 tem, to the extent practicable, including but not limited to training and technical assistance, plan-44 ning and budgeting. This paragraph does not apply to the administrative functions of the Department 45

1 of Education relating to education programs.

2 (b) Adopt policies to establish training and technical assistance programs to ensure that per-3 sonnel have skills in appropriate areas, including screening, family assessment, competency-based 4 home visiting skills, cultural and gender differences and other areas as needed.

5 (c) Identify research-based age-appropriate and culturally and gender appropriate screening and 6 assessment tools that would be used as appropriate in programs and services of the voluntary 7 statewide early learning system.

8 (d) Develop a plan for the implementation of a common data system for voluntary early child-9 hood programs.

(e) Coordinate existing and new early childhood programs to provide a range of community-based supports.

(f) Establish a common set of quality assurance standards to guide local implementation of all
 elements of the voluntary statewide early learning system, including voluntary universal screening
 and assessment, home visiting, staffing, evaluation and community-based services.

(g) Ensure that all plans for voluntary early childhood services are coordinated and consistent with federal and state law, including but not limited to plans for Oregon prekindergarten programs, federal Head Start programs, early childhood special education services, early intervention services and public health services.

(h) Identify how the voluntary statewide early learning system for children who are zero through
 six years of age will link with systems of support for older children and their families.

(i) During January of each odd-numbered year, report to the Governor and the Legislative As sembly on the voluntary statewide early learning system.

(6) The State Board of Education, the Employment Department, the Department of Human Services and the Oregon Health Authority when adopting rules to administer voluntary early childhood
 programs under their individual authority shall adopt rules:

(a) That are consistent with the requirements of the voluntary statewide early learning systemcreated under this section; and

28 (b) With the direction of the Early Learning Council.

(7) Information gathered in conjunction with the voluntary comprehensive screening and as sessment of children and their families may be used only for the following purposes:

31 (a) Providing services to children and families who give their express written consent;

32 (b) Providing statistical data that are not personally identifiable;

33 (c) Accomplishing other purposes for which the family has given express written consent; and

34 (d) Meeting the requirements of mandatory state and federal disclosure laws.

35 <u>SECTION 4.</u> ORS 417.728, as amended by sections 44b and 91, chapter 37, Oregon Laws 2012,
 36 is amended to read:

417.728. (1) The Early Learning Council shall lead a joint effort with other state and local early
 childhood partners to establish the policies necessary for a voluntary statewide early learning system.

40 (2) The voluntary statewide early learning system shall be designed to achieve:

(a) The appropriate outcomes identified by the Early Learning Council with input from earlychildhood partners; and

(b) Any other early childhood benchmark or outcome that demonstrates progress toward meeting
a target and that is identified by the Early Learning Council with input from early childhood partners.

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HB 2013 (3) The voluntary statewide early learning system shall include the following components: 1 2 (a) A process to identify as early as possible children and families who would benefit from early learning services, including the required use of standardized screening and referral procedures 3 used throughout the voluntary statewide early learning system; 4 (b) A plan to support the identified needs of the child and family that coordinates case man-5 agement personnel and the delivery of services to the child and family; and 6 (c) Services to support children who are zero through six years of age and their families who 7 give their express written consent, including: 8 9 (A) Screening, assessment and home visiting services pursuant to ORS 417.795; 10 (B) Specialized or targeted home visiting services; (C) Community-based services such as relief nurseries, family support programs and parent ed-11 12 ucation programs; 13 (D) Affordable, quality child care, as defined by the Early Learning Council; (E) Preschool and other early education services; 14 15(F) Health services for children and pregnant women; (G) Mental health services; 16 17 (H) Alcohol and drug treatment programs that meet the standards promulgated by the Oregon 18 Health Authority pursuant to ORS 430.357; 19 (I) Developmental disability services; and (J) Other state and local services. 20(4) In establishing the definition of affordable, quality child care under subsection (3)(c)(D) of 2122this section, the Early Learning Council shall consult with child care providers and early childhood 23educators. The definition established by the council shall support parental choice of child care provider and shall consider differences in settings and services, including but not limited to child care 24 for school-aged children, part-time care, odd-hour and respite care and factors of cultural appropri-25ateness and competence. 2627(5) The Early Learning Council shall: (a) Consolidate administrative functions relating to the voluntary statewide early learning sys-28tem, to the extent practicable, including but not limited to training and technical assistance, plan-2930 ning and budgeting. This paragraph does not apply to the administrative functions of the Department 31 of Education relating to education programs. 32(b) Adopt policies to establish training and technical assistance programs to ensure that personnel have skills in appropriate areas, including screening, family assessment, competency-based 33 34 home visiting skills, cultural and gender differences and other areas as needed. 35 (c) Identify research-based age-appropriate and culturally and gender appropriate screening and assessment tools that would be used as appropriate in programs and services of the voluntary 36 37 statewide early learning system. 38 (d) Develop a plan for the implementation of a common data system for voluntary early childhood programs. 39 40 (e) Coordinate existing and new early childhood programs to provide a range of community-

42 (f) Establish a common set of quality assurance standards to guide local implementation of all 43 elements of the voluntary statewide early learning system, including voluntary universal screening 44 and assessment, home visiting, staffing, evaluation and community-based services.

based supports.

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45 (g) Ensure that all plans for voluntary early childhood services are coordinated and consistent

with federal and state law, including but not limited to plans for Oregon prekindergarten programs, 1 2 federal Head Start programs, early childhood special education services, early intervention services and public health services. 3 (h) Identify how the voluntary statewide early learning system for children who are zero through 4 six years of age will link with systems of support for older children and their families. 5 (i) During January of each odd-numbered year, report to the Governor and the Legislative As-6 sembly on the voluntary statewide early learning system. 7 (6) The State Board of Education, the Employment Department, the Department of Human Ser-8 9 vices and the Oregon Health Authority when adopting rules to administer voluntary early childhood programs under their individual authority shall adopt rules: 10 (a) That are consistent with the requirements of the voluntary statewide early learning system 11 12 created under this section; and (b) With the direction of the Early Learning Council. 13 (7) Information gathered in conjunction with the voluntary comprehensive screening and as-14 15 sessment of children and their families may be used only for the following purposes: 16 (a) Providing services to children and families who give their express written consent; (b) Providing statistical data that are not personally identifiable; 17 18 (c) Accomplishing other purposes for which the family has given express written consent; and (d) Meeting the requirements of mandatory state and federal disclosure laws. 19 SECTION 5. ORS 417.795, as amended by section 53, chapter 37, Oregon Laws 2012, is amended 20to read: 2122417.795. (1) The Early Learning Council shall establish Healthy Start Family Support Services programs through contracts entered into by local commissions on children and families in all coun-23ties of this state as funding becomes available. 2425(2) These programs shall be nonstigmatizing, voluntary and designed to achieve the appropriate early childhood benchmarks and shall: 2627(a) Ensure that express written consent is obtained from the family prior to any release of information that is protected by federal or state law and before the family receives any services; 28(b) Ensure that services are voluntary and that, if a family chooses not to accept services or 2930 ends services, there are no adverse consequences for those decisions; 31 (c) Offer a voluntary comprehensive screening and risk assessment of all [newly born] children, from zero through three years of age, and their families; 32(d) Ensure that the disclosure of information gathered in conjunction with the voluntary com-33 34 prehensive screening and risk assessment of children and their families is limited pursuant to ORS 417.728 (7) to the following purposes: 35 (A) Providing services under the programs to children and families who give their express 36 37 written consent; 38 (B) Providing statistical data that are not personally identifiable; (C) Accomplishing other purposes for which the family has given express written consent; and 39 (D) Meeting the requirements of mandatory state and federal disclosure laws; 40 (e) Ensure that risk factors used in the risk assessment are limited to those risk factors that 41 have been shown by research to be associated with poor outcomes for children and families; 42 (f) Identify, as early as possible, families that would benefit most from the programs; 43 (g) Provide parenting education and support services, including but not limited to community-44

45 based home visiting services and primary health care services;

(h) Provide other supports, including but not limited to referral to and linking of community and 1 2 public services for children and families such as mental health services, alcohol and drug treatment programs that meet the standards promulgated by the Oregon Health Authority under ORS 430.357. 3 4 child care, food, housing and transportation;  $\mathbf{5}$ (i) Coordinate services for children consistent with the voluntary local early childhood system plan developed pursuant to ORS 417.777; 6 (j) Provide follow-up services and supports from zero through six years of age; 7 8 (k) Integrate data with any common data system for early childhood programs; 9 (L) Be included in a statewide independent evaluation to document: (A) Level of screening and assessment; 10 11 (B) Incidence of child abuse and neglect; 12 (C) Change in parenting skills; and 13 (D) Rate of child development; (m) Be included in a statewide training program in the dynamics of the skills needed to provide 14 15 early childhood services, such as assessment and home visiting; and 16(n) Meet voluntary statewide and local early childhood system quality assurance and quality 17 improvement standards. 18 (3) The Healthy Start Family Support Services programs, local health departments and other providers of prenatal and perinatal services in counties, as part of the voluntary local early child-19 hood system, shall: 20(a) Identify existing services and describe and prioritize additional services necessary for a 2122voluntary home visit system; 23(b) Build on existing programs; (c) Maximize the use of volunteers and other community resources that support all families; 24 (d) Target, at a minimum, all [first birth] families in the county with children from zero 25through three years of age; and 2627(e) Ensure that home visiting services provided by local health departments for children and pregnant women support and are coordinated with local Healthy Start Family Support Services 2829programs. 30 (4) Through a Healthy Start Family Support Services program, a trained family support worker 31 or nurse shall be assigned to each family assessed as at risk that consents to receive services through the worker or nurse. The worker or nurse shall conduct home visits and assist the family 32in gaining access to needed services. 33 34 (5) The services required by this section shall be provided by hospitals, public or private entities 35 or organizations, or any combination thereof, capable of providing all or part of the family risk assessment and the follow-up services. In granting a contract, a local commission may utilize 36 37 collaborative contracting or requests for proposals and shall take into consideration the most ef-38 fective and consistent service delivery system. (6) The family risk assessment and follow-up services for families at risk shall be provided by 39 40 trained family support workers or nurses organized in teams supervised by a manager and including a family services coordinator who is available to consult. 41 42(7) Each Healthy Start Family Support Services program shall adopt disciplinary procedures for family support workers, nurses and other employees of the program. The procedures shall provide 43 appropriate disciplinary actions for family support workers, nurses and other employees who violate 44

45 federal or state law or the policies of the program.

# $\rm HB\ 2013$

| 1             | <b>SECTION 6.</b> ORS 417.795, as amended by sections 53 and 95, chapter 37, Oregon Laws 2012, is amended to read: |
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| 2             | 417.795. (1) The Early Learning Council shall establish Healthy Start Family Support Services                      |
| $\frac{3}{4}$ | programs in all counties of this state as funding becomes available.   |
| 5             | (2) These programs shall be nonstigmatizing, voluntary and designed to achieve the appropriate                     |
| 6             | early childhood benchmarks and shall:  |
| 7             | (a) Ensure that express written consent is obtained from the family prior to any release of in-                    |
| 8             | formation that is protected by federal or state law and before the family prior to any services;                   |
| 9             | (b) Ensure that services are voluntary and that, if a family chooses not to accept services or                     |
| 10            | ends services, there are no adverse consequences for those decisions;  |
| 11            | (c) Offer a voluntary comprehensive screening and risk assessment of all [newly born] children,                    |
| 12            | from zero through three years of age, and their families;  |
| 13            | (d) Ensure that the disclosure of information gathered in conjunction with the voluntary com-                      |
| 14            | prehensive screening and risk assessment of children and their families is limited pursuant to ORS                 |
| 15            | 417.728 (7) to the following purposes:   |
| 16            | (A) Providing services under the programs to children and families who give their express                          |
| 17            | written consent;   |
| 18            | (B) Providing statistical data that are not personally identifiable;   |
| 19            | (C) Accomplishing other purposes for which the family has given express written consent; and                       |
| 20            | (D) Meeting the requirements of mandatory state and federal disclosure laws;                                       |
| 21            | (e) Ensure that risk factors used in the risk assessment are limited to those risk factors that                    |
| 22            | have been shown by research to be associated with poor outcomes for children and families;                         |
| 23            | (f) Identify, as early as possible, families that would benefit most from the programs;                            |
| 24            | (g) Provide parenting education and support services, including but not limited to community-                      |
| 25            | based home visiting services and primary health care services;   |
| 26            | (h) Provide other supports, including but not limited to referral to and linking of community and                  |
| 27            | public services for children and families such as mental health services, alcohol and drug treatment               |
| 28            | programs that meet the standards promulgated by the Oregon Health Authority under ORS 430.357,                     |
| 29            | child care, food, housing and transportation;  |
| 30            | (i) Coordinate services for children consistent with other services provided through the Oregon                    |
| 31            | Early Learning System;   |
| 32            | (j) Provide follow-up services and supports from zero through six years of age;                                    |
| 33            | (k) Integrate data with any common data system for early childhood programs;                                       |
| 34            | (L) Be included in a statewide independent evaluation to document:   |
| 35            | (A) Level of screening and assessment;   |
| 36            | (B) Incidence of child abuse and neglect;  |
| 37            | (C) Change in parenting skills; and  |
| 38            | (D) Rate of child development;   |
| 39            | (m) Be included in a statewide training program in the dynamics of the skills needed to provide                    |
| 40            | early childhood services, such as assessment and home visiting; and  |
| 41            | (n) Meet statewide quality assurance and quality improvement standards.  |
| 42            | (3) The Healthy Start Family Support Services programs, local health departments and other                         |
| 43            | providers of prenatal and perinatal services in counties shall:  |
| 44            | (a) Identify existing services and describe and prioritize additional services necessary for a                     |
| 45            | voluntary home visit system;   |

1 (b) Build on existing programs;

2 (c) Maximize the use of volunteers and other community resources that support all families;

3 (d) Target, at a minimum, all [*first birth*] families with children from zero through three 4 years of age in the county; and

5 (e) Ensure that home visiting services provided by local health departments for children and 6 pregnant women support and are coordinated with local Healthy Start Family Support Services 7 programs.

8 (4) Through a Healthy Start Family Support Services program, a trained family support worker 9 or nurse shall be assigned to each family assessed as at risk that consents to receive services 10 through the worker or nurse. The worker or nurse shall conduct home visits and assist the family 11 in gaining access to needed services.

(5) The services required by this section shall be provided by hospitals, public or private entities or organizations, or any combination thereof, capable of providing all or part of the family risk assessment and the follow-up services. In granting a contract, collaborative contracting or requests for proposals may be used and must include the most effective and consistent service delivery system.

(6) The family risk assessment and follow-up services for families at risk shall be provided by
 trained family support workers or nurses organized in teams supervised by a manager and including
 a family services coordinator who is available to consult.

(7) Each Healthy Start Family Support Services program shall adopt disciplinary procedures for
 family support workers, nurses and other employees of the program. The procedures shall provide
 appropriate disciplinary actions for family support workers, nurses and other employees who violate
 federal or state law or the policies of the program.

23 <u>SECTION 7.</u> The Oregon Health Authority and the Early Learning Council shall work 24 collaboratively with coordinated care organizations to develop performance metrics for 25 prenatal care, delivery and infant care that align with early learning outcomes.

26 <u>SECTION 8.</u> The Oregon Health Authority and the Early Learning Council shall establish 27 a grant program. The grant program shall provide funding to support effective and scalable 28 strategies that align voluntary statewide early learning systems and health systems for the 29 purpose of improving the developmental outcomes for children from zero through three 30 years of age.

31 **SECTION 9.** Section 130, chapter 37, Oregon Laws 2012, is amended to read:

**Sec. 130.** (1) In addition to the minimum standards established for child care facilities and the operation of child care facilities under ORS 657A.260 and subject to available funds, the Child Care Division of the Employment Department, under the direction and with the approval of the Early Learning Council, shall initiate development of a tiered quality rating and improvement system for child care facilities.

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(2) The tiered quality rating and improvement system implemented under this section shall:

(a) Establish a set of progressively higher standards that are used to evaluate the quality of an
 early learning and development program and to support program improvement.

40 (b) Consist of the following components:

(A) Tiered standards that define a progression of quality for early learning and developmentprograms.

(B) Monitoring of programs to evaluate quality based on established standards.

44 (C) Support for programs and providers of programs to meet tiered quality standards, including 45 training, technical assistance and financial incentives.

1 (D) Program quality ratings that are publicly available.

(c) Support the provision of quality care that is provided by friends, family or neighbors
 and that is subsidized by the Employment Related Day Care program.

**SECTION 10.** ORS 343.475 is amended to read:

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5 343.475. (1)(a) In accordance with rules adopted by the State Board of Education, the Super-6 intendent of Public Instruction in collaboration with the Early Learning Council shall develop 7 and administer a statewide, comprehensive, coordinated, multidisciplinary, interagency program of 8 early childhood special education and early intervention services for preschool children with disa-9 bilities [and may:].

10 (b) The program must ensure that each preschool child with a disability has access to a 11 comprehensive plan for communication that allows the child, by the age of three years, to 12 engage in expressive and receptive communication across all learning, home and community 13 settings. The plan may allow for communication orally, by sign language, by assistive tech-14 nology or by augmentative communication.

(2) In accordance with rules adopted by the State Board of Education, the Superintendent
 of Public Instruction in collaboration with the Early Learning Council may:

(a) Establish and designate service areas throughout the state for the delivery of early childhood
special education and early intervention services that shall meet state and federal guidelines and
be delivered to all eligible children.

(b) Designate in each service area a primary contractor that shall be responsible for the ad ministration and coordination of early childhood special education and early intervention services
 to all eligible preschool children and their families residing in the service area.

[(2)] (3) Early childhood special education and early intervention services shall:

(a) Participate in the planning process under ORS 417.777 to develop a voluntary local earlychildhood system plan; and

(b) Coordinate services with other services that are coordinated through the plan. The coordi nation of services shall be consistent with federal and state law.

[(3)] (4) Preschool children with disabilities shall be considered residents of the service area where the children are currently living, including children living in public or private residential programs, hospitals and similar facilities.

31 [(4)] (5) In addition to any other remedy or sanction that may be available, the Superintendent 32 of Public Instruction may withhold funds and terminate the contract of any contractor that fails to 33 comply with any provisions of the contract.

34 <u>SECTION 11.</u> ORS 343.475, as amended by section 89, chapter 37, Oregon Laws 2012, is 35 amended to read:

36 343.475. (1)(a) In accordance with rules adopted by the State Board of Education, the Super-37 intendent of Public Instruction in collaboration with the Early Learning Council shall develop 38 and administer a statewide, comprehensive, coordinated, multidisciplinary, interagency program of 39 early childhood special education and early intervention services for preschool children with disa-40 bilities [and may:].

(b) The program must ensure that each preschool child with a disability has access to a comprehensive plan for communication that allows the child, by the age of three years, to engage in expressive and receptive communication across all learning, home and community settings. The plan may allow for communication orally, by sign language, by assistive technology or by augmentative communication.

1 (2) In accordance with rules adopted by the State Board of Education, the Superintendent 2 of Public Instruction in collaboration with the Early Learning Council may:

3 (a) Establish and designate service areas throughout the state for the delivery of early childhood
4 special education and early intervention services that shall meet state and federal guidelines and
5 be delivered to all eligible children.

6 (b) Designate in each service area a primary contractor that shall be responsible for the ad-7 ministration and coordination of early childhood special education and early intervention services 8 to all eligible preschool children and their families residing in the service area.

9 [(2)] (3) Early childhood special education and early intervention services shall coordinate ser-10 vices with other services provided through the Oregon Early Learning System. The coordination of 11 services shall be consistent with federal and state law.

12 [(3)] (4) Preschool children with disabilities shall be considered residents of the service area 13 where the children are currently living, including children living in public or private residential 14 programs, hospitals and similar facilities.

15 [(4)] (5) In addition to any other remedy or sanction that may be available, the Superintendent 16 of Public Instruction may withhold funds and terminate the contract of any contractor that fails to 17 comply with any provisions of the contract.

18 <u>SECTION 12.</u> (1) The Early Learning Council shall establish demonstration projects as 19 provided by this section. The purpose of the demonstration projects is to foster the creation 20 of locally developed models of early learning service delivery.

(2) Applicants may apply to the council to participate in a demonstration project estab lished under this section. The council may approve the establishment of no more than five
 demonstration projects.

24 (3) The council shall give priority to applicants that demonstrate the ability to:

(a) Improve results for at-risk children, including the ability to identify, evaluate and
 implement coordinated strategies to ensure that a child is ready to succeed in school.

(b) Integrate efforts with education providers, providers of health care, providers of hu man services and providers of other delivery systems in the community.

29 (c) Use coordinated and transparent budgeting.

30 (d) Operate in a fiscally sound manner.

31 SECTION 13. Section 12 of this 2013 Act is repealed on June 30, 2015.

<u>SECTION 14.</u> In addition to and not in lieu of any other appropriation, there is appropriated to the Early Learning Council, for the biennium beginning July 1, 2013, out of the General Fund, the amount of \$\_\_\_\_, which may be expended for the demonstration projects established under section 12 of this 2013 Act.

36 <u>SECTION 15.</u> This 2013 Act being necessary for the immediate preservation of the public 37 peace, health and safety, an emergency is declared to exist, and this 2013 Act takes effect 38 July 1, 2013.

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