CABINET FOR HEALTH AND FAMILY SERVICES

Department for Public Health

Division of Maternal and Child Health

(Amendment)

902 KAR 4:120. Health Access Nurturing Development Services (HANDS) Program.

RELATES TO: KRS 13B.080-13B.160, [~~200.700, 211.090,~~ ]211.180, 211.689

STATUTORY AUTHORITY: KRS 194A.050(1), 211.690

NECESSITY, FUNCTION, AND CONFORMITY: KRS 194A.050(1) requires the secretary of the Cabinet for Health and Family Services to promulgate administrative regulations necessary to operate the programs and fulfill the responsibilities vested in the cabinet. KRS 211.690 authorizes the Cabinet for Health and Family Services to implement a voluntary statewide home visitation program for the purpose of providing assistance to at-risk parents during the prenatal period until the child's third birthday. This administrative regulation establishes the eligibility criteria, services, provider qualifications, and hearing rights for participants of the Health Access Nurturing Development Services (HANDS) Program.

Section 1. Definitions.

(1) "Department" means the Department for Public Health or its designated representative.

(2) "Family support worker" [~~or "FSW"~~ ]means an employee or subcontractor of the local implementing agency[~~a provider's employee or subcontractor~~] who visits participants and performs services.

(3) "Local implementing agency" means a local health department or an agency that agrees to participate as a HANDS provider and to employ or contract with staff that:

(a) Meet the qualifications and training requirements for home visitation service delivery; and

(b) Agree to abide by all:

1. HANDS policies and procedures; and

2. Reporting requirements[~~"HANDS" means Health Access Nurturing Development Services, a voluntary statewide home visitation program for the purpose of providing assistance to at-risk parents during the prenatal period and until the child's third birthday as funding is available~~].

(4) "Participant" means the parent and child[~~an individual~~] enrolled in the HANDS program and receiving HANDS services.

(5) "Tele-service" means a home visitation service provided through video communication with the HANDS provider, parent, and child present in real time[~~"Provider" means a local health department agency subscribing to staff and training requirements, program policies and procedures, and reporting requirements of the HANDS Program and agreeing to participate as a HANDS provider~~].

Section 2. Eligibility Criteria.

(1) In order to receive a service established in Section 4 of this administrative regulation, an individual shall be:

(a) [~~Submit ACH-301, Consent for Services, to the local health department or their subcontractor, in accordance with KRS 211.690(4).~~]

[~~(b)~~] [~~Be:~~]

[~~1.~~] A pregnant individual who is under twenty (20) years old[~~woman who has not reached her 20th birthday~~];

(b)[~~2.~~] A pregnant individual[~~woman~~] who is at least twenty (20) years old and upon assessment is identified as having risk factors[~~a risk is deemed likely~~] for the pregnancy or the infant;

(c)[~~3.~~] The child of an individual identified in paragraph (a) or (b) of this subsection who is less than three (3) years of age and assessed[~~Up to the third birthday, an infant or toddler of an individual identified in subparagraph 1. or 2. of this subsection, whose family is determined to be at risk and is screened~~] for eligibility within ninety (90) days post-birth; or

(d)[~~4.~~] A father or guardian of a child identified in paragraph (c)[~~subparagraph 3.~~] of this subsection.

(2) The local implementing agency shall assess an applicant for eligibility. The assessment shall reflect:

(a) The child and parents unique strengths and needs; and

(b) The services appropriate to meet those needs.

(3) All assessments of the child and family shall be:

(a) Conducted in a nondiscriminatory manner;

(b) Selected and administered so as not to be racially or culturally discriminatory; and

(c) Conducted in the native or preferred language of the child or parent.

(4) Parental consent shall be provided to the local implementing agency before an assessment.

(5) The assessment shall:

(a) Be conducted by a family support worker professional who meets the qualifications listed in Section 3(2) of this administrative regulation; and

(b) Result in:

1. Eligibility for HANDS services, in which the family shall be referred for the development of a home visiting plan; or

2. Ineligibility for HANDS services, in which the family shall be provided with community resources, referral information and general parenting information.

(6) Participation in the HANDS Program is[~~shall be~~] voluntary.

(7)[~~(3)~~] Participation in the HANDS Program shall be discontinued if[~~prevented or terminated if one (1) of the following occurs~~]:

(a) The child dies[~~Death of the fetus or infant~~];

(b) The family elects to withdraw from the program;

(c) The family moves out of state;

(d) Contact with the family is lost; or

(e) The family repeatedly fails to participate in program activities.[~~; or~~]

[~~(f)~~] [~~The goals established for the family are met.~~]

[~~(4)~~] [~~A screening shall include the following components:~~]

[~~(a)~~] [~~Using the ACH-300, Referral Record Screen, a provider shall determine eligibility~~][~~of an applicant by:~~]

[~~1.~~] [~~Face-to-face interview; or~~]

[~~2.~~] [~~Evaluation of health records;~~]

[~~(b)~~] [~~If an individual's screening indicates eligibility for HANDS services, the individual shall be referred for an assessment; and~~]

[~~(c)~~] [~~If an individual's screening indicates ineligibility for HANDS services, the individual shall be provided with community resource and referral information.~~]

[~~(5)~~] [~~An assessment shall:~~]

[~~(a)~~] [~~Consist of the following components:~~]

[~~1.~~] [~~Using the ACH-302, Parent Survey Summary, and ACH-303, Parent Survey Score Sheet, a comprehensive needs assessment shall be performed by conducting a face-to-face interview with the child, mother, and family to include information regarding each parent's:~~]

[~~a.~~] [~~Childhood experience;~~]

[~~b.~~] [~~Lifestyle behaviors and mental health;~~]

[~~c.~~] [~~Experience and expectations for parenting;~~]

[~~d.~~] [~~Coping skills;~~]

[~~e.~~] [~~Support system;~~]

[~~f.~~] [~~Stress and anger management skills;~~]

[~~g.~~] [~~Expectations of the infant's developmental milestones and behaviors;~~]

[~~h.~~] [~~Plans for the child's discipline;~~]

[~~i.~~] [~~Perception of the new infant; and~~]

[~~j.~~] [~~Bonding and attachment to the infant; and~~]

[~~2.~~] [~~Arrangement for delivery of needed services;~~]

[~~(b)~~] [~~Be conducted by:~~]

[~~1.~~] [~~A social worker;~~]

[~~2.~~] [~~A registered nurse;~~]

[~~3.~~] [~~A graduate of a four (4) year program in a social or behavioral science, education field, or a related field with one (1) year experience performing case management services, except that A master's degree in a human services field may be substituted for the one (1) year experience; or~~]

[~~4.~~] [~~A graduate with an associate degree in an early childhood education field and successful completion of the department's home visitation model training; and~~]

[~~(c)~~] [~~Result in:~~]

[~~1.~~] [~~Eligibility for HANDS services, in which the individual shall be referred for the development of a home visiting plan; or~~]

[~~2.~~] [~~Ineligibility for HANDS services, in which the individual shall be provided with community resource and referral information and general parenting information.~~]

Section 3. Provider Qualifications.

(1) A family support worker paraprofessional shall be a:

(a) High school graduate or holder of a general education development credential[~~GED~~] who[~~:~~]

[~~1.~~] is at least eighteen (18) years of age;

(b)[~~2.~~] Has received department training in:

1.[~~a.~~] Ongoing assessment of family strengths and needs;

2.[~~b.~~] Service plan development;

3.[~~c.~~] Evidence-based home visiting model;

4.[~~d.~~] Coordination of services; and

5.[~~e.~~] Evaluation; and

(c)[~~3.~~] Is supervised by a registered[~~public health~~] nurse or licensed social worker.[~~;~~]

(2) A family support worker professional shall be a:

(a) Licensed[~~;~~]

[~~(b)~~] [~~Public health~~] nurse who holds[~~has~~] a valid Kentucky Board of Nursing license as a registered nurse or advanced practice registered nurse;

(b)[~~(c)~~]

[~~1.~~] Licensed social worker who holds a valid Kentucky[~~meets the requirements for licensure by the State~~] Board of [~~Examiners of~~ ]Social Work license;

(c)[~~2.~~] Graduate with a master's degree in human services or closely related field who shall be supervised by a registered nurse or licensed social worker; or

(d) [~~social work from an accredited institution; or~~]

[~~3.~~] Graduate with a bachelor's degree in early childhood education, human services, or closely related field who shall be supervised by a registered nurse or licensed social worker.[~~social work from an accredited institution;]~~]

(3) A HANDS supervisor shall be a:

(a) Licensed nurse who holds a valid Kentucky Board of Nursing license as a registered nurse or advanced practice registered nurse; or

(b) Licensed social worker who holds a valid Kentucky Board of Social Work license.

(4)[~~(d)~~] [~~Graduate of a four (4) year program in a social or behavioral science, education field, or a related field with one (1) year experience performing case management services, except that a master's degree in a human services field may be substituted for the one (1) year experience; or~~]

[~~(e)~~] [~~Graduate with an associate degree in an early childhood education field and successful completion of the department's home visitation model training.~~]

[~~(2)~~] A local implementing agency[~~health department~~] shall meet the requirements to provide HANDS services if:

(a) The[~~Its~~] staff or subcontractor receives the required training provided by the department to become a family support worker;

(b) It assures that appropriate staff meet the licensure requirements of the department pursuant to subsection (1) or (2)[~~(b) or (c)~~] of this section;

(c) It assures supervision by licensed personnel pursuant to subsection (3)(a) or (b)[~~subsection (1)(b) or (c)~~] of this section;

(d) It reports program data into the online HANDS database no later than the first Sunday of the month following the date of service; and

(e) It abides by the policies of the HANDS program.

Section 4. Services.

(1) Home visitation may take place in the client's home or another community site if justified in the record. A home visit[~~visitation~~] shall include[ ~~the~~][~~following~~]:

(a) Monitoring the child[~~of the child's, mother's,~~] and family's progress by:

1. Making referrals to community resources;

2. Tracking appointments to ensure they are being kept;

3. Following up on referrals[~~Performing follow-up services as identified by the provider~~]; and

4. Performing periodic evaluations of [~~the~~ ]participant's changing needs;

(b) The preparation and maintenance of case records that document[~~which shall be documented with~~] contacts, services needed, reports, and progress;

(c) Consultations with the family[~~parent or primary caregiver~~] on positive pregnancy outcomes, optimal child growth and development, safe and healthy[~~health and safe~~] homes, and family decision making and self-sufficiency; and

(d) Crisis assistance.

(2)

(a) Service frequency shall be provided in accordance with the level of need of the parent or family[ ~~pursuant to ACH-306, Parent Completion LEVELS~~ ].

(b) The frequency of visitation shall be lessened as the family meets goals agreed to by the provider and the participant.

[~~(3)~~] [~~Between the second and third birthday, home visitation services shall be limited to a child whose family does not progress beyond level I of ACH-306, Parent Completion LEVELS~~].]

Section 5. Appeal Rights.

(1) A local implementing agency[~~provider~~] shall notify an individual who does not meet criteria for admission or continuation in the program or who has had a service discontinued, in writing, within ten (10) days of the denial or discontinuance.

(2) An individual wishing to appeal an adverse action by the local implementing agency shall notify the department in writing within thirty (30) days of the date of the notice identified in subsection (1) of this section that a hearing is requested.

(3) Notice of an administrative hearing shall be provided in accordance with KRS 13B.050.

(4) The administrative hearing process shall be conducted in accordance with KRS 13B.080 through 13B.160.

Section 6. Tele-service Delivery Methods.

(1)

(a) HANDS home visitation services that are otherwise designated as face-to-face in accordance with this administrative regulation may be provided through tele-service delivery methods with informed parental consent.

(b) These services shall include those listed in Sections 2(5) and 4 of this administrative regulation.

(c) Verbal and written consent shall be provided for each child in a shared household. For example, if the family has twins, verbal and written consent shall be provided for each child.

(2) Tele-service delivery methods shall be reimbursed at the usual and customary rate.[~~Incorporation by Reference. (1) The~~][~~following material is incorporated by reference:~~]

[~~(a)~~] [~~"ACH-300, Referral Record Screen", 5/2016;~~]

[~~(b)~~] [~~"ACH-301, Consent for Services", 5/2016;~~]

[~~(c)~~] [~~"ACH-302, Parent Survey Summary", 5/2016;~~]

[~~(d)~~] [~~"ACH-303, Parent Survey Score Sheet", 5/2016; and~~]

[~~(e)~~] [~~"ACH-306, Parent Completion LEVELS", 5/2016.~~]

[~~(2)~~] [~~This material may be inspected, copied, or obtained, subject to applicable copyright law, at the Department for Public Health, first floor, Health Services Building, 275 East Main Street, Frankfort, Kentucky 40621, Monday through Friday, 8 a.m. to 4:30 p.m.~~]

STEVEN J. STACK, Commissioner

ERIC C. FRIEDLANDER, Secretary

APPROVED BY AGENCY: August 17, 2023

FILED WITH LRC: September 13, 2023 at 1:00 p.m.

PUBLIC HEARING AND PUBLIC COMMENT PERIOD: A public hearing on this administrative regulation shall, if requested, be held on November 27, 2023, at 9:00 a.m. using the CHFS Office of Legislative and Regulatory Affairs Zoom meeting room. The Zoom invitation will be emailed to each requestor the week prior to the scheduled hearing. Individuals interested in attending this virtual hearing shall notify this agency in writing by November 16, 2023, five (5) workdays prior to the hearing, of their intent to attend. If no notification of intent to attend the hearing is received by that date, the hearing may be canceled. This hearing is open to the public. Any person who attends virtually will be given an opportunity to comment on the proposed administrative regulation. A transcript of the public hearing will not be made unless a written request for a transcript is made. If you do not wish to be heard at the public hearing, you may submit written comments on this proposed administrative regulation until November 30, 2023. Send written notification of intent to attend the public hearing or written comments on the proposed administrative regulation to the contact person. Pursuant to KRS 13A.280(8), copies of the statement of consideration and, if applicable, the amended after comments version of the administrative regulation shall be made available upon request.

CONTACT PERSON: Krista Quarles, Policy Analyst, Office of Legislative and Regulatory Affairs, 275 East Main Street 5 W-A, Frankfort, Kentucky 40621; phone 502-564-6746; fax 502-564-7091; email CHFSregs@ky.gov.

REGULATORY IMPACT ANALYSIS AND TIERING STATEMENT

Contact Person: Krista Quarles

(1) Provide a brief summary of:

(a) What this administrative regulation does:

This administrative regulation establishes the eligibility criteria, services, provider qualifications, and appeal rights for participants of the Health Access Nurturing Development Services (HANDS) Program.

(b) The necessity of this administrative regulation:

The HANDS Program supports pregnant people and parents with young children who live in communities that face greater risks and barriers to achieving positive maternal and child health outcomes. Families choose to participate in home visiting programs, and partner with health, social service, and child development professionals to set and achieve goals that improve their health and well-being.

(c) How this administrative regulation conforms to the content of the authorizing statutes:

KRS 211.690 establishes within the Cabinet for Health and Family Services the Health Access Nurturing Development Services (HANDS) program as a voluntary statewide home visitation program, for the purpose of providing assistance to at-risk parents during the prenatal period and until the child's third birthday.

(d) How this administrative regulation currently assists or will assist in the effective administration of the statutes:

This administrative regulation ensures pregnant people or parents of young children who are at risk are appropriately identified and receive the supports and services necessary to achieve positive pregnancy and early childhood outcomes.

(2) If this is an amendment to an existing administrative regulation, provide a brief summary of:

(a) How the amendment will change this existing administrative regulation:

The amendment to this administrative regulation updates defined terms for clarification, updates the provider qualifications, removes the material incorporated by reference to conform to programmatic changes, and adds the options for tele-service delivery methods when an emergency limits the ability to provide traditional face-to-face services.

(b) The necessity of the amendment to this administrative regulation:

The amendment to this administrative regulation is necessary to update the defined terms, ensure a local implementing agency employs or contract with qualified staff, and to allow for the provision of tele-service delivery methods when traditional service delivery methods are not possible.

(c) How the amendment conforms to the content of the authorizing statutes:

KRS 211.690 establishes the Health Access Nurturing Development Services (HANDS) program as a voluntary statewide home visitation program, for the purpose of providing assistance to at-risk parents during the prenatal period and until the child's third birthday.

(d) How the amendment will assist in the effective administration of the statutes:

KRS 211.690 establishes within the Cabinet for Health and Family Services the Health Access Nurturing Development Services (HANDS) program as a voluntary statewide home visitation program, for the purpose of providing assistance to at-risk parents during the prenatal period and until the child's third birthday.

(3) List the type and number of individuals, businesses, organizations, or state and local governments affected by this administrative regulation:

In fiscal year 2021 the HANDS program served 1,845 participants in 988 households. Local implementing agencies include fifty-six (56) local health departments and six (6) contracted provider agencies.

(4) Provide an analysis of how the entities identified in question (3) will be impacted by either the implementation of this administrative regulation, if new, or by the change, if it is an amendment, including:

(a) List the actions that each of the regulated entities identified in question (3) will have to take to comply with this administrative regulation or amendment:

Local implementing agencies will need to ensure home visiting staff meet qualifications, will need to ensure home visiting staff and participants have the supports necessary to provide non-traditional services, and will need to ensure program participants are aware of the appeals process.

(b) In complying with this administrative regulation or amendment, how much will it cost each of the entities identified in question (3):

There will be no costs to participants. There will be no change in the costs to the local implementing agencies.

(c) As a result of compliance, what benefits will accrue to the entities identified in question (3):

The goals of the HANDS program are positive pregnancy outcomes, optimal child growth and development, children live in healthy, safe homes, and families make decisions that enhance long-term independence over meeting short term or immediate needs. By participating in the HANDS program families of young children will receive supports and services that will help them help their child develop and grow.

(5) Provide an estimate of how much it will cost the administrative body to implement this administrative regulation:

(a) Initially:

This is an existing program, there will be no initial costs to implement this administrative regulation.

(b) On a continuing basis:

There will be no changes to the costs to implement this administrative regulation.

(6) What is the source of the funding to be used for the implementation and enforcement of this administrative regulation:

The source of funding for this administrative regulation is a mix of tobacco settlement dollars, federal grant funding from Health Resources and Services Administration, and Medicaid reimbursement.

(7) Provide an assessment of whether an increase in fees or funding will be necessary to implement this administrative regulation, if new, or by the change if it is an amendment:

An increase in funding is not necessary to implement the amendment to this administrative regulation.

(8) State whether or not this administrative regulation establishes any fees or directly or indirectly increases any fees:

There are no fees established by this administrative regulation.

(9) TIERING: Is tiering applied?

Tiering is not applied as the requirements of this administrative regulation are equally applied to the regulated entities.

FISCAL NOTE

(1) What units, parts, or divisions of state or local government (including cities, counties, fire departments, or school districts) will be impacted by this administrative regulation?

This administrative regulation impacts the Division of Maternal and Child Health and local health departments that participate in the HANDS program.

(2) Identify each state or federal statute or federal regulation that requires or authorizes the action taken by the administrative regulation.

KRS 194A.050(1) and 211.690.

(3) Estimate the effect of this administrative regulation on the expenditures and revenues of a state or local government agency (including cities, counties, fire departments, or school districts) for the first full year the administrative regulation is to be in effect.

(a) How much revenue will this administrative regulation generate for the state or local government (including cities, counties, fire departments, or school districts) for the first year?

This administrative regulation does not generate revenue.

(b) How much revenue will this administrative regulation generate for the state or local government (including cities, counties, fire departments, or school districts) for subsequent years?

This administrative regulation does not generate revenue.

(c) How much will it cost to administer this program for the first year?

The HANDS program receives $7,000,000 in tobacco settlement funding and $7,000,000 from Health Resources and Services Administration. There will be no changes in the costs to the program.

(d) How much will it cost to administer this program for subsequent years?

The HANDS program receives $7,000,000 in tobacco settlement funding and $7,000,000 from Health Resources and Services Administration. There will be no change in the costs to the program.

Note: If specific dollar estimates cannot be determined, provide a brief narrative to explain the fiscal impact of the administrative regulation.

Revenues (+/-):

Expenditures (+/-):

Other Explanation:

(4) Estimate the effect of this administrative regulation on the expenditures and cost savings of regulated entities for the first full year the administrative regulation is to be in effect.

(a) How much cost savings will this administrative regulation generate for the regulated entities for the first year?

This administrative regulation will not result in costs savings for the regulated entities.

(b) How much cost savings will this administrative regulation generate for the regulated entities for subsequent years?

This administrative regulation will not result in costs savings for the regulated entities.

(c) How much will it cost the regulated entities for the first year?

This administrative regulation will not result in increased costs for the regulated entities.

(d) How much will it cost the regulated entities for subsequent years?

This administrative regulation will not result in increased costs for the regulated entities.

Note: If specific dollar estimates cannot be determined, provide a brief narrative to explain the fiscal impact of the administrative regulation.

Cost Savings (+/-):

Expenditures (+/-):

Other Explanation:

(5) Explain whether this administrative regulation will have a major economic impact, as defined below.

"Major economic impact" means an overall negative or adverse economic impact from an administrative regulation of five hundred thousand dollars ($500,000) or more on state or local government or regulated entities, in aggregate, as determined by the promulgating administrative bodies. [KRS 13A.010(13)] This administrative regulation does not have a major economic impact.