# MINUTES OF THE SENATE COMMITTEE ON HEALTH AND HUMAN SERVICES

# Seventy-ninth Session May 1, 2017

The Senate Committee on Health and Human Services was called to order by Chair Pat Spearman at 3:34 p.m. on Monday, May 1, 2017, in Room 2149 of the Legislative Building, Carson City, Nevada. The meeting was videoconferenced to Room 4412E of the Grant Sawyer State Office Building, 555 East Washington Avenue, Las Vegas, Nevada. <a href="Exhibit A">Exhibit A</a> is the Agenda. <a href="Exhibit B">Exhibit B</a> is the Attendance Roster. All exhibits are available and on file in the Research Library of the Legislative Counsel Bureau.

# **COMMITTEE MEMBERS PRESENT:**

Senator Pat Spearman, Chair Senator Julia Ratti, Vice Chair Senator Joyce Woodhouse Senator Joseph P. Hardy Senator Scott Hammond

# **GUEST LEGISLATORS PRESENT:**

Assemblywoman Teresa Benitez-Thompson, Assembly District No. 27 Assemblywoman Olivia Diaz, Assembly District No. 11 Assemblywoman Amber Joiner, Assembly District No. 24 Assemblyman Michael C. Sprinkle, Assembly District No. 30

# **STAFF MEMBERS PRESENT:**

Megan Comlossy, Policy Analyst Eric Robbins, Counsel Debbie Carmichael, Committee Secretary

# OTHERS PRESENT:

Jon Sasser, Legal Aid Center of Southern Nevada Marlene Lockard, Service Employees International Union Local 1107 Travis Kieckbusch, MD Bruce N. Gruenewald Catherine Sparkman, Association of Surgical Technologists

Tyre Gray, Nevada Hospital Association; Nevada Rural Hospital Partners
Jared Busker, Children's Advocacy Alliance
Amber L. Howell, Director, Department of Social Services, Washoe County
Brad Keating, Clark County School District
Paula Hammack, Acting Director, Department of Family Services, Clark County
Julia Peek, Deputy Administrator, Community Services, Division of Public and
Behavioral Health, Department of Health and Human Services
Kim Amato, Board President, Baby's Bounty

# CHAIR SPEARMAN:

I will open the hearing on Assembly Bill (A.B.) 95.

ASSEMBLY BILL 95 (1st Reprint): Revises provisions governing child support. (BDR 38-197)

ASSEMBLYWOMAN TERESA BENITEZ-THOMPSON (Assembly District No. 27):

Assembly Bill 95 addresses the Temporary Assistance for Needy Families (TANF) program, more colloquially, Welfare. The TANF was created by the Personal Responsibility and Work Opportunities Reconciliation Act of 1996. It replaced the Aid to Families with Dependent Children. It is a federal block grant program administered through the Department of Health and Human Services (DHHS). Nevada is slated to receive about \$43 million in federal funds in the block grant allotment. The TANF program in Nevada has a maximum 60-month benefit. It is a lifetime limit by the federal government. In Nevada, the TANF benefit allotment is on for one year, off for one year, on for one year, off for one year, on for a year, off for one year then on the last two years. It is broken up as such so individuals who are eligible for TANF do not use the benefit in one continuous period. Assembly Bill 95 seeks to codify what was in practice until recently. This is where the intersection of the TANF benefit and child support comes together. Assembly Bill 95, section 1, subsection 1, addresses debts for support of a child owed to any person may not be incurred by a parent or any other person who is the recipient of the TANF benefit. When a person has reached the poverty point to be eligible for and receive the TANF benefit, that person will not be responsible for paying other support obligations. However, those obligations do not go away. Section 1, subsection 2 deals with any debts for support of a child owed to any person incurred by a parent or other person before becoming a recipient of the TANF benefit must be held in abeyance while the parent or other person is receiving such benefit. This has been in practice in Nevada since 1996. There was a Supreme Court case in

which the child support placed in abeyance was discussed. The amount the parent owes would not be extinguished but placed in abeyance.

## SENATOR HARDY:

What happens to the child who is not getting the child support?

#### ASSEMBLYWOMAN BENITEZ-THOMPSON:

The reason there is not a collection of child support dollars is because the individual does not have any dollars to give. If you look at Welfare and the federal poverty level, the amount an individual qualifies for and the amount the individual needs to receive are often insufficient to support a family let alone have enough left over to pay the child support obligation. The obligation is important. That is why the obligation will still be there and the amount owed held in abeyance. When the individual becomes employed and receives an income, he or she has to start making the payments again.

#### SENATOR HARDY:

While the individual receives the TANF benefit, the child support payments are held in abeyance, but when the individual gets a job and receives an income he or she has to start making payments. Do the payments go until the child reaches age 18 or 21 or beyond because the individual missed making payments?

#### ASSEMBLYWOMAN BENITEZ-THOMPSON:

This legislation does not change the amount or change anything else in chapters 31A, 125B and 126 of the *Nevada Revised Statutes* (NRS). The amount owed is not forgiven or extinguished.

## SENATOR HARDY:

If the individual received the TANF benefit for three to five years and the individual did not have to pay child support during that time, does the individual owe child support in retrograde after the child has aged out?

## ASSEMBLYWOMAN BENITEZ-THOMPSON:

Section 1 of  $\underline{A.B. 95}$  addresses debts for support of a child owed to any person may not be incurred by a parent or any other person who is the recipient of the TANF benefit. For the year the individual is receiving the TANF benefit the individual is not incurring, or not responsible to pay child support for that time period.

#### SENATOR HARDY:

The abeyance is the abeyance of obligation not just the abeyance of payment. Is that correct?

## ASSEMBLYWOMAN BENITEZ-THOMPSON:

The abeyance is for the amount that is owed. If an individual becomes unemployed and he or she is eligible for and gets the TANF benefit, which can be up to \$400 a month, the individual does not have to pay child support while on the TANF benefit. The individual would owe any money not paid before getting the TANF benefit. The individual does not incur any child support payments while on the benefit.

# **SENATOR HARDY:**

Could you clarify what you just said?

# **SENATOR RATTI:**

Section 1, subsection 2 of <u>A.B. 95</u> addresses any debts for support of a child owed to any person incurred by a parent or other person before becoming a recipient of the TANF benefit. To clarify, an individual has debts, has not paid on the debts for whatever reason, and is not receiving the TANF benefit, then the individual gets the TANF benefit. While getting the TANF benefit, the child support debt does not grow, and the individual does not owe it. Once the individual comes off the TANF benefit, there was a balance of what was owed before, and now it has to be paid. Is that correct?

## ASSEMBLYWOMAN BENITEZ-THOMPSON:

Yes, that is correct.

# JON SASSER (Legal Aid Center of Southern Nevada):

To qualify for the TANF benefit, the individual has to have dependent children living with him or her. For example, an individual has two dependent children living with him or her and the individual qualifies for the TANF benefit. The individual is not employed, poor and cannot support the two dependent children living with the individual. The individual may get \$384 through the TANF benefit to support the individual and the two children. There is no additional money to pay for another child that the individual may have through another marriage or relationship. The poverty level for a family of 3 is \$1,600 a month. The standard of need is \$1,200 a month to cover basic necessities, but the State only gives the individual \$384 a month. It is like getting blood out of a turnip. If

the individual owes child support before getting the TANF benefit, the individual will still owe the child support once off of TANF. The obligation is held in abeyance while the individual is getting the TANF benefit. The average stay on the TANF benefit is seven months, so the individual is not evading the child support obligation for years.

## **SENATOR HAMMOND:**

An individual gets the TANF benefit for seven months, and the child support obligation is forgiven during that time. Prior to getting the TANF benefit the individual was behind \$1,500. While the individual is getting the TANF benefit, the \$1,500 obligation does not go up, but once the individual comes off TANF, he or she still owes the \$1,500. Does it not short-change the child who should be getting the child support? Once the individual gets a job and has enough money, the individual should fulfill the child support obligation that was not paid during the TANF benefit time period. Section 1, subsection 1 of A.B. 95 addresses the court's responsibility which is to find out if the parent or other person has remained purposefully unemployed. How does the court do that? If the court finds the parent or other person has remained purposefully unemployed, should they be obligated to go back and make those payments?

## ASSEMBLYWOMAN BENITEZ-THOMPSON:

The reason the language was added that you are talking about is to make sure there is no loophole for people who just do not want to pay child support. We want to help those individuals who are sincerely in poverty and unemployable, and not those who purposely become unemployed for the intent of not paying child support. We wanted to draw a very tight and narrow exception that has been in practice since 1996 and codify it in the NRS.

# SENATOR HAMMOND:

What is the mechanism that goes into place if the court does find the individual was purposely unemployed and now needs to pay child support for those months?

## ASSEMBLYWOMAN BENITEZ-THOMPSON:

If an individual believes that the other individual has become purposefully unemployed, then the first individual can go to court. If the court finds that is true, then the individual would not have the privilege of the statute. He or she would owe for the child support.

#### CHAIR SPEARMAN:

Is seven months the average number of months an individual stays on the TANF benefits?

# ASSEMBLYWOMAN BENITEZ-THOMPSON:

Mr. Sasser stated the average length of stay is seven months.

## CHAIR SPEARMAN:

For seven months out of 60 months, there is a child support abeyance. Is that correct?

## ASSEMBLYWOMAN BENITEZ-THOMPSON:

There is a lifetime limit of 60 months. Before the Personal Responsibility and Work Opportunities Reconciliation Act of 1996, when it used to be Aid to Families with Dependent Children, it was an entitlement program with no time frame. An individual could be on Welfare for years and years or most of his or her adult life, if it was warranted and a person stayed eligible. Now, regardless of an individual's poverty level, the individual is only eligible for 60 months of TANF benefits.

## **SENATOR HARDY:**

How do the child support payments start up again once the individual comes off the TANF benefits and has a job?

# Mr. Sasser:

The court has a formula for calculating child support payments based on an individual's income. If there is an arrearage of child support, the court will order the payment for the current child support and will tag on a portion of the arrearage until it is paid off.

# SENATOR HARDY:

Is the restarting of the child support payment as well as the arrearage payment automatic, or does it have to be adjudicated in the court?

#### Mr. Sasser:

It is not automatic. Sometimes the individuals have to go to court or to a master within the Division of Welfare. Someone has to make a determination of what the payment will be. The individual may sign the determination voluntarily

without going to court. If the individual goes on or comes off the TANF benefit, the individual can ask for a review of the child support payment.

## ASSEMBLYWOMAN BENITEZ-THOMPSON:

When A.B. 95 was brought to me, I asked why the Legislature had not contemplated this before. One reason was there was practice already in place, and until there was a recent case begging the question of the Department versus the recipient, it was something we had always done by practice. The reason we have always done it by practice is if the dollars are allowed to be paid for child support, then the federal TANF block grant dollars that the State gets for an anti-poverty program are effectively becoming child support dollars. The public policy question is how do we want the dollars to work? The TANF benefit is the only cash assistance program in the State where money is literally put into people's pockets.

## CHAIR SPEARMAN:

I will close the hearing on A.B. 95 and open the hearing on A.B. 347.

ASSEMBLY BILL 347: Establishes certain requirements relating to surgical technologists. (BDR 40-721)

ASSEMBLYWOMAN AMBER JOINER (Assembly District No. 24):

When the idea of <u>A.B. 347</u> was brought to my attention, I was surprised to hear that the State does not have any laws about the basic qualifications that people must have in order to work as surgical technologists in the operating rooms. That is concerning in a time when hospital-acquired infections by antibiotic-resistant bacteria and medical errors are serious concerns for all of us. We need to make sure every precaution is taken to ensure patient safety. Although currently some of our hospitals have high quality in-house training programs that prepare people to work in these operating rooms, not all of them do. It is not a standard statewide. We need <u>A.B. 347</u> in order to optimize patient safety and create a minimum standard statewide. This bill simply ensures that surgical technologists have training, skills and knowledge when they are assisting with the operations performed on us and our loved ones.

<u>Assembly Bill 347</u> does not create a new licensure. Instead, the responsibility is with the hospitals to hire certified surgical technologists. Any violations will be found through the normal hospital inspection process which is done by the Division of Public and Behavioral Health (DPBH) of the DHHS. Sections 2 and 3

of <u>A.B. 347</u> provide definitions of what a surgical technologist does, such as ensure the area in which the surgery is conducted remains sterile, applies skin staples and dressings to close wounds, and counts the sponges. Surgical technologists are key to the process in the operating room. Section 4 requires that a health care facility may not employ or allow a person to engage in the practice of surgical technology unless the person has met certain requirements. One of the requirements is successful completion of a program for surgical technologists that is accredited by a national accrediting organization, and certification as a certified surgical technologist.

Some rural hospitals expressed concern about not being able to find and hire enough surgical technologists. Section 4, subsection 3 of A.B. 347 addresses an exception, which is if the health care facility has engaged in a diligent search and is unable to employ a sufficient number of certified surgical technologists, the health care facility may employ a person who does not possess the qualifications. As our State increases the number of surgical technologists, you will hear about programs coming up soon to add to the existing programs. We are hoping the exemption will not be needed, as there will be plenty of surgical technologists around. Section 5 addresses continuing education requirements of not less than 15 hours annually, and the hospital would retain the records for the certification and the continuing education. Section 6 clarifies the requirements for certification for a surgical technologist do not apply to professionals who are currently licensed under Title 54 of the NRS. These would be physicians, physician assistants, nurses and others. Sections 8 through 16 provide for regulations to be developed and for the implementation of these provisions in the same way that other hospital requirements are implemented.

MARLENE LOCKARD (Service Employees International Union Local 1107): I began working with the surgical technologists arm of the Service Employees International Union Local 1107 over a year ago. The Service Employees International Union Local 1107 supports A.B. 347.

# TRAVIS KIECKBUSCH, MD:

I fully support <u>A.B. 347</u>. With the exception of the surgeon, surgical technologists have more hands-on direct contact with patients than anyone else in the operating room. Yet, they are the only people in the State that are not required to go through a certification program. Surgical technologists take care of minor details that can cause major problems in the operating room. Those major problems include surgical site infections that can be caused by the

slightest break in surgical technique, and most of those happen from the surgical technologists. It is not something the surgeon is watching for, as he or she is usually very focused on the surgery itself. We need someone who is well trained so when the surgeon walks into the operating room we are giving patients the very best care we can. Assembly Bill 347 allows that to happen.

# Bruce N. Gruenewald:

I support A.B. 347. I am a surgical technologist and have been practicing in Reno for over 30 years. I have been in the operating room for 43 years. Patients are my life. Taking good care of surgical patients is what surgical technologists are about. I am one of the people behind the mask in the operating room. Surgery is a specialty, and no one is born with those skills. They have to be continually updated. About 2,000 total hip and knee surgeries are done every year at the clinic where I work. If any one of those patients gets an infection, it is devastating to them, but it costs each and every one of us money when that happens. Surgical technologists are the first line of defense in aseptic care of patients. It should not matter in this State whether a person has surgery in Las Vegas, Reno or Elko. Every patient deserves quality patient care. I have many jobs in the operating room, but my primary responsibility is to the patient. In 2015, 170,000 surgeries were performed in Nevada hospitals and another 99,000 at ambulatory surgical centers. The vast majority involved a surgical technologist. Every surgical technologist must be educated and continue to be updated.

# CATHERINE SPARKMAN (Association of Surgical Technologists):

I represent the Association of Surgical Technologists which represents the interests of 80,000 certified surgical technologists nationwide. It is our primary mission to make sure that surgical patients in the operating room have the highest quality of patient care that is available including the competency, education and training of every member of the surgical team. The Association of Surgical Technologists supports <u>A.B. 347</u> and looks forward to making this a benchmark for all surgical patients.

## **SENATOR HARDY:**

Does A.B. 347 allow for grandfathering certain people?

#### Ms. Sparkman:

Yes, <u>A.B. 347</u> has a grandfather clause. We do not want to put anybody out of work. Those people currently working as surgical technologists and those who

are military trained surgical technologists are grandfathered into this scheme. Those people will have the same requirement of continuing education, 15 hours per year, that all certified surgical technologists currently have. The playing field will be leveled for all the practitioners.

## SENATOR HARDY:

Does anybody ever apply cautery to a blood vessel that is oozing and not clamped?

## DR. KIECKBUSCH:

Yes, quite often.

# SENATOR HARDY:

We may want to look at section 2, subsection 1, paragraph (d), subparagraph (10) of A.B. 347 that addresses applying cautery to a blood vessel cut during surgery.

## DR. KIECKBUSCH:

I want to clarify that if the vessel is not clamped, the surgical technologists cannot apply cautery because it will be in the surgeon's hands. In my opinion that does not need a change to A.B. 347.

## SENATOR HARDY:

You said we do it quite often, but we do not need to change the language in the bill. Is that correct?

## DR. KIECKBUSCH:

Generally, the surgeon is the person who cauterizes a vessel that is not clamped. For the assistant to cauterize a vessel, a clamp has to be on it.

## **SENATOR HARDY:**

Did you say generally?

## DR. KIECKBUSCH:

There always has to be a clamp on the vessel for the surgical technologist to cauterize it.

#### CHAIR SPEARMAN:

Section 4, subsection 3 addresses that a health care facility may employ a person who does not possess the qualifications prescribed by subsection 1 to engage in the practice of surgical technology at the health care facility if after conducting a thorough and diligent search, the health care facility is unable to employ a sufficient number of surgical technologists. Are there provisions in A.B. 347 that will allow or mandate the same safety precautions?

#### **ASSEMBLYWOMAN JOINER:**

The provision is in  $\underline{A.B.\ 347}$ . In the case there is the situation where the health care facility cannot find a certified surgical technologist, the person working as a surgical technologist would fall under the health care facility and the physician he or she is working with. All the federal and State laws still apply regarding hospital-acquired infections. The purpose of  $\underline{A.B.\ 347}$  is to constantly improve. We could not settle on the requirement that all surgical technologists had to be certified because the main concern was people would be laid off. The health care facilities may not be able to hire all certified surgical technologists.

## SENATOR HARDY:

If a person in a rural community is being trained as a surgical technologist, is that person allowed to move somewhere else in the State and have that work experience count toward the surgical technologist certification?

#### **ASSEMBLYWOMAN JOINER:**

If a person is in a rural area and is currently employed as a surgical technologist as of January 1, 2018, they can move anywhere within the State and continue to engage in the practice. There are online programs to certify as surgical technologists, and we do not anticipate the exemption will be used for very long.

TYRE GRAY (Nevada Hospital Association; Nevada Rural Hospital Partners): The Nevada Hospital Association and the Nevada Rural Hospital Partners support A.B. 347.

#### CHAIR SPEARMAN:

I will close the hearing on A.B. 347 and open the hearing on A.B. 346.

ASSEMBLY BILL 346 (2nd Reprint): Enacts requirements relating to certain providers of child care. (BDR 38-283)

#### **ASSEMBLYWOMAN JOINER:**

I am here today as a parent who has been through the struggle of finding quality child care for my children. I am also here as a concerned neighbor who wants to make sure a basic level of security is provided for all of the children in Nevada who are in child care. Currently, in Nevada there are people who are watching children in his or her home for profit, as a business, who are completely unregulated and unregistered in any way. The State law only requires people to be licensed as a child care facility if they are caring for five or more children. A recent study by the Children's Cabinet found that those licensed facilities only meet 22 percent of the needs for child care for children aged 0 to 5. That means that more than three-quarters of our children are in other settings. Some are watched by family members, but because 65 percent of our children between the ages of 0 to 5 are in a home where both parents work, many of the children are in for-profit settings that watch fewer than 5 children. This measure would provide protections for those children.

Assembly Bill 346 adds a new category of child care called small child care establishments. It would authorize anyone who watches between one and four children, for a profit, to obtain a background check and to register with the Division of Welfare and Supportive Services (DWSS) to provide a basic level of security. Assembly Bill 346 would also give the DWSS the ability to inspect and fine these small child care providers if there is reason to believe that they are violating laws relating to the number of children. This is needed because complaints and reports have been received about people watching more than four children who refuse to become licensed in the State. They refuse to comply with the current licensing requirements that are in law. The DWSS has no recourse except to send cease and desist letters, and what they find is people simply ignore them. It creates a dangerous situation for children when the adult-to-child ratio is too high, and it increases the likelihood of a child in danger.

Section 2 of A.B. 346 defines a small child care establishment as an establishment that furnishes care to not more than 4 children under 18 years of age who are not related to the operator of the establishment within the fourth degree of consanguinity or affinity. The operator must watch the children for at least six hours each day, at least four days each week for more than three consecutive weeks. This language is meant to get at the places that are advertising themselves as businesses, not friends who are helping out.

As a parent, I have no way of knowing the results of the federal background check on someone who claims he or she can watch my child in his or her home. I have no way to compel him or her to get a background check because the FBI only allows us to run background checks if it is in statute. Section 3 of A.B. 346 places, in statute, the ability for a parent to ask the operator of a small child care establishment if he or she has had a background check, and if he or she does not, then the parent does not have to leave the child. It also allows the small child care provider to advertise that he or she has had a background check.

Section 4.5 of <u>A.B. 346</u> allows the DWSS to recoup costs if there is a substantiated violation. This is consistent with other inspections that DWSS performs. Section 5 establishes that the licensee of a child care facility shall ensure that each child at the facility wears a helmet while using a bicycle, tricycle, skateboard, scooter, roller skates or any other similar device. As a mom, I have watched both of my children go to a child care where there was a racetrack around the facility with many tricycles, and I watched my children jump off of them. I started providing my children with helmets. What I discovered was there are facilities that provide helmets for children, or the parents can provide helmets for their children. Studies have proven that young children should not be hitting their heads.

Sections 7.2 through 7.8 of <u>A.B. 346</u> relate to the small child care facilities that choose to get the background check. Section 8 authorizes the DWSS to investigate complaints and stop the unlicensed facilities from happening.

# JARED BUSKER (Children's Advocacy Alliance):

About one year ago, a mother reached out to Prevent Child Abuse Nevada, which, in turn, referred her to the Children's Advocacy Alliance (CAA). Her child was being cared for in a small child care establishment. One of the child care workers got frustrated with the child and dropped the child on his head. The child suffered brain damage and eventually passed away. The mother reached out to CAA in hopes of preventing this from happening to other children. The CAA looked into how many children were dying or getting hurt in these types of small facilities. The CAA found there were seven children who have passed away in the last eight years. The CAA worked with the DPBH to look deeper into this issue. The Child Care Licensing Bureau sent us all the complaint reports it received from late November 2012 to early February 2016. From our analysis, we found there were 103 complaints. The majority of the complaints were

about facilities watching too many children. The DPBH did not have the ability to find the providers but sent cease and desist letters. Looking at the complaints, we found repeat offenders. The passage of A.B. 346 will be the first step the State can take to empower parents to have a better understanding of the types of homes they are sending their children into. Parents should have the option to decide if they want to send their children to licensed care, family or friends.

#### SENATOR WOODHOUSE:

I have a similar bill, <u>S.B. 189</u>, that I have worked with the CAA on, and I would like to work with Assemblywoman Joiner to make sure we do not have any redundancy. I see A.B. 346 and S.B 189 as complementary.

**SENATE BILL 189**: Revises provisions relating to child care facilities. (BDR 38-61)

#### CHAIR SPEARMAN:

If <u>A.B. 346</u> were to pass, would there be a need for additional people to monitor or inspect the small child care establishments?

#### ASSEMBLYWOMAN JOINER:

There are three fiscal notes, and they came back as zero impact. The DPBH, the Division of Welfare and Supportive Services and the Department of Public Safety (DPS) can implement <u>A.B. 346</u> within the current structure of some of the other programs they have.

#### CHAIR SPEARMAN:

Is the licensing process extensive?

## ASSEMBLYWOMAN JOINER:

We are purposefully not licensing them, as we have received feedback in previous sessions that it may be too much of a burden on small child care facilities. We looked at requiring that they get business licenses, but some of them do not make enough money to reach that threshold every year. We did not want to excessively burden them. The small child care facilities would voluntarily choose to be in a registry with the DWSS; the DPBH would authorize the background check, then it would go through the DPS. The background check is a fingerprint FBI check, which is multistate.

#### SENATOR HAMMOND:

Besides being a mom and seeing the number of complaints on small child care facilities, did the incident that happened in Reno spur you on to sponsor A.B. 346?

#### ASSEMBLYWOMAN JOINER:

That was not the instigating incident. Just being a parent is what spurred me on. It was difficult for me to find child care for my children at a reasonable price. When I looked at different home providers it was difficult for me to assess their quality. If I could have had a background check on some of the facilities, it would have given me peace of mind and feel more comfortable. I ended up choosing a licensed facility, because I wanted that level of security. The more protections we can have for our children, the better.

#### CHAIR SPEARMAN:

I will close the hearing on A.B. 346 and open the hearing on A.B. 236.

ASSEMBLY BILL 236 (1st Reprint): Authorizes an agency which provides child welfare services to obtain the education records of certain pupils. (BDR 38-838)

# ASSEMBLYMAN MICHAEL C. SPRINKLE (Assembly District No. 30):

We put a lot of faith, hope and security in the different State agencies that take care of and provide for the welfare for our children, particularly those children who have been removed from their homes. One of the fundamental, important factors of a child having a normal life and assimilating into a scary and difficult environment is how well the child is doing at school. It is a mandate of social services that take care of children to make sure, while the child is at school, he or she is in a positive learning environment and is doing well. Assembly Bill 236 allows the social workers or case workers to have access to the school records of children in the agency's control or custody to follow their progress, just like any parent would do with his or her own child. Assembly Bill 236 puts a mandate on the school districts to give the records to those who are requesting them within ten days or upon the next court hearing for the child, whichever is sooner. Once the request has been put into place, a memorandum of understanding (MOU) is established between the agency and the school district. This will make sure the records are being used for the correct reasons, and there is no misuse of the information that is contained in the records. If misuse does occur, the MOU will spell out the consequences. It was brought to my

attention there was a problem in the past, and A.B. 236 will help solve the problem.

AMBER L. HOWELL (Director, Department of Social Services, Washoe County): Statewide, we have approximately 5,000 children in foster care. It is really important for us to continue to enhance our collaboration access and focus on educational outcomes for youth. Foster youth are twice as likely to be absent from school, and they change schools from 56 percent to 75 percent of the time when they are first entering care. Foster youth ages 17 to 18 have had at least 5 school moves. They are twice as likely to get out-of-school suspensions and three times as likely to be expelled. The average reading level of a 17- or 18-year-old foster youth is Grade 7. They are 3 times as likely to be put in special education, and only 50 percent of the foster youth graduate on time. About 84 percent of foster youth want to attend college, but 2 percent to 9 percent of former foster youth actually complete it. Those statistics are why it is so important for Washoe County Social Services to have a complete picture of what is happening regarding foster youths educational needs.

In 2006, Washoe County entered into a MOU with the Washoe County School District, and that has helped tremendously with access to Infinite Campus, which the school district uses to allow us to get education information. The information is limited to school enrollment, grades and attendance. <a href="Assembly Bill 236">Assembly Bill 236</a> will allow us to get access to special educational plans and individualized education programs, and it will broaden the amount of access we would have on the foster youth's education. This is critical for the child welfare agencies to have a comprehensive understanding of a child's overall social, emotional and educational needs. This will help us facilitate as many wrap-around and supportive services that we can provide the foster youth and assist parents if reunification should occur. We want children and their families to have a complete toolbox to create opportunities to move forward and thrive.

## SENATOR HARDY:

What is the role of the social worker who is employed in the school? Is there communication between the social worker in the school and the social worker outside?

#### Ms. Howell:

We have a close relationship between our social workers and the schools counselors, especially if foster youth are struggling. We try to build upon that relationship as much as possible.

## SENATOR HARDY:

Social workers have been hired in the schools. Do they interact with the State social workers? Are the social workers doing the same thing but not talking to one another?

# Ms. Howell:

The social workers in the schools are there for many reasons like mental health needs, suicidal ideations and difficulty at home. Social workers play a different role in the schools. Our social workers work with the family and try to reunify. They are not duplicating work.

#### SENATOR HAMMOND:

Is there a mechanism in <u>A.B. 236</u> that would relinquish the access to the youth's school records back to parents once the reunification has happened?

#### Ms. Howell:

Yes, once a case has been closed with our agency and reunification has occurred, our access to school records would be terminated. The MOU states what the consequences would be if someone within social services accessed those records. When someone has access to Infinite Campus, he or she will always have access, but once the case is closed there should be no reason to be in there.

## SENATOR HAMMOND:

Will the MOU state that once reunification has occurred, a report will be submitted and if someone tries to access the records there will be a penalty?

# Ms. Howell:

Yes, that is correct. Wording similar to that will be in the MOU.

# BRAD KEATING (Clark County School District):

The Clark County School District is in support of <u>A.B. 236</u>. We have had issues in the past concerning case workers asking for additional information outside of their scope. Assembly Bill 236 explains what is required for the school district

to give and the Department of Family Services (DFS) to take, so everyone is in the clear legally at all times. The Clark County School District and the DFS has a MOU in place. The DFS is able to access the 1,500 students from the Infinite Campus system and can pull the records from there. We hope it will not be the ten-day turnaround for information, so people will be able to access it immediately.

PAULA HAMMACK (Acting Director, Department of Family Services, Clark County): The Clark County Department of Family Services supports A.B. 236.

## CHAIR SPEARMAN:

I will close the hearing on A.B. 236 and open the hearing on A.B. 340.

ASSEMBLY BILL 340 (1st Reprint): Requires the Department of Health and Human Services to take certain actions to improve access to diapers and diapering supplies for recipients of public assistance. (BDR 38-871)

ASSEMBLYWOMAN OLIVIA DIAZ (Assembly District No. 11):

I learned about the financial hardships and dire needs that many families in our State face in order to provide one of the most basic essential necessities to have healthy and happy babies—diapers. <u>Assembly Bill 340</u> requires that the Department of Health and Human Services takes certain actions to improve access to diapers and diapering supplies for recipients of public assistance.

# Mr. Busker:

The cost of diapers places a huge financial burden on Nevada's most at-risk families. Infants, on average, use about 240 diapers per month, which costs a family approximately \$78. Not all low-income families can afford to purchase diapers in bulk due to lack of transportation, cash flow or credit. This results in the families paying a higher cost than the \$78 per month. Diapers are considered a luxury item and, therefore, are not covered by the TANF, the Supplemental Nutrition Assistance Program or the Women, Infants and Children program.

A recent study by Yale University found that 30 percent of mothers reported that they were unable to afford to change their child's diapers as often as they would like. To stretch the use of diapers, many families reported reusing diapers by removing the diaper, dumping out the excrement and then placing the soiled diaper back on the infant or leaving soiled diapers on longer than they should.

This practice leads to negative health outcomes for the child such as urinary tract infections (UTI), sometimes resulting in chronic UTIs and severe diaper rashes.

The use of cloth diapers is also not an option for many low-income working families. For these families, the ability to send their infant to child care often requires providing disposable diapers to the facility. Low-income families struggle with washing and drying cloth diapers as washing machines and dryers are not always available in their housing units. These families cannot wash and dry the diapers at coin-operated laundromats as they do not allow washing and drying diapers due to health and sanitary reasons.

Section 2, subsection1, of A.B. 340 requires the Director of the Department of Health and Human Services to appoint a committee to research opportunities to increase the availability of diapers and diapering supplies to recipients of public assistance and other low-income families in the State. The committee would research opportunities to use money received from the federal government to carry out a program of public assistance or other programs for which the Department is responsible. The committee would also obtain in-kind donations of money, diapers and diapering supplies and donations from private foundations and manufacturers of diapers and diapering supplies. Section 2, subsection 2, of A.B. 340 outlines the makeup of the committee. Section 2, subsection 3, requires the committee to report the results of its research to the director. Section 2, subsection 4 requires the Director to submit a report of the results to the Legislature. Section 3 requires the Director to work collaboratively with the diaper banks and other nonprofits to ensure that recipients of public assistance and low-income families are made aware of the existence, location and services provided. Section 3, subsection 2, requires the Director to post the information on the Department Website.

## SENATOR HAMMOND:

The cloth diaper may not be a bad idea; back in the 1950s and 1960s, there were services available to pick up the soiled cloth diapers, wash and sanitize them. Those facilities created an industry. That is not available any longer. But who knows, maybe it will happen again.

#### ASSEMBLYWOMAN DIAZ:

A lot has changed in our society with the composition and the makeup of our families. I know my mother used cloth diapers on my siblings, but she was a stay-at-home mom. She had the ability to be there 100 percent of the time, and that definitely helps. When you are a single parent with a single source of income, you have to go to work and pay child care service. If you are making minimum wage and bringing in about \$17,000 a year, and you add up the cost of living, it is hard, as a single parent, to make those ends meet. During the Interim, I listened to some child care providers and workers who are making minimum wage to take care of other people's children. They said they are there 100 percent for those children in the child care centers, but they themselves cannot take care of their own children, because they are not bringing home what they need for the basic necessities. I heard many testimonials like that.

# CHAIR SPEARMAN:

I remember changing my siblings' cloth diapers. I think one of the reasons that practice went away is because of sanitation. Many people did not have the space or the accoutrements necessary to store the cloth diapers, especially those that contain feces, until they could wash them.

JULIA PEEK (Deputy Administrator, Community Services, Division of Public and Behavioral Health, Department of Health and Human Services):

The Department of Health and Human Services supports <u>A.B. 340</u>, as we are committed to working on this issue.

# KIM AMATO (Board President, Baby's Bounty):

I am founder and Board President of Baby's Bounty, a nonprofit that provides cribs, car seats, clean clothes, diapers and hygiene items to low-income families with a child from birth to six months.

Baby's Bounty relies on the generosity of the community to provide diapers and funding for our diaper bank program as we do not have a steady diaper supply. This can result in providing fewer diapers to low-income mothers and children. A lack of disposable diapers keeps mothers from school, job training and work because day care centers require that they provide diapers for their children.

A minimum wage employee must devote wages from one full eight-hour shift to provide enough diaper changes for one month. Seventy-five percent of the families we serve are from single-parent households earning far below the

national poverty level. When surveyed by the National Diaper Bank Network in 2016, 34 percent of the families said they had to cut back on basics such as food, utilities and child care to purchase diapers for their children.

Women with diaper needs also reported more difficulty with stress management, depression and coping with trauma, which can negatively affect a child's health and development. Assembly Bill 340 will ensure that once federal funding becomes available, poor women and children will have access to diapers in Nevada. Baby's Bounty supports A.B. 340.

## **ASSEMBLYWOMAN DIAZ:**

Many child care facilities do not take cloth diapers. Cloth diapers are not an option.

#### CHAIR SPEARMAN:

I am a co-sponsor on S.B. 400, which is also known as Pay for Success.

SENATE BILL 400: Authorizes the Director of the Department of Health and Human Services to enter into success contracts. (BDR 18-310)

Once the infrastructure is in place, DHHS will administer the program and diapers and diapering supplies may qualify under that legislation. The Pay for Success contracts would use private dollars to fund needed programs that the State may not be able to fund completely.

#### SENATOR HAMMOND:

Assembly Bill 340 will require the Director of DHHS to appoint a committee to research opportunities to increase the availability of diapers and diapering supplies. I brought up cloth diapers because things have a way of becoming circuitous. They come and they go. It is a possibility that cloth diapers could come back, but the committee would be the one to figure that out.

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CHAIR SPEARMAN:	
I will close the hearing on A.B. 340. Seeing no meeting at 5:00 p.m.	o further business, I adjourn the
	RESPECTFULLY SUBMITTED:
	Debbie Carmichael, Committee Secretary
APPROVED BY:	
Senator Pat Spearman, Chair	-

DATE:\_\_\_\_\_

EXHIBIT SUMMARY				
Bill		hibit / pages	Witness / Entity	Description
	Α	2		Agenda
	В	10		Attendance Roster