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SENATE MEMORIAL 5

51ST LEGISLATURE - STATE OF NEW MEXICO - SECOND SESSION, 2014

INTRODUCED BY

Gerald Ortiz y Pino

FOR THE LEGISLATIVE HEALTH AND HUMAN SERVICES COMMITTEE

A MEMORIAL

REQUESTING THE UNIVERSITY OF NEW MEXICO HEALTH SCIENCES CENTER TO RECONVENE THE J. PAUL TAYLOR EARLY CHILDHOOD TASK FORCE TO CONTINUE ITS WORK IN IMPROVING COLLABORATION AMONG EARLY CHILDHOOD DEVELOPMENT STAKEHOLDERS AND DEVELOPING AN INFANT AND EARLY CHILDHOOD MENTAL HEALTH ACTION PLAN; REQUESTING THE NEW MEXICO LEGISLATIVE COUNCIL TO DIRECT APPROPRIATE INTERIM COMMITTEES TO STUDY THE FEASIBILITY OF THE J. PAUL TAYLOR EARLY CHILDHOOD TASK FORCE'S PRELIMINARY RECOMMENDATIONS.

WHEREAS, in the 2013 first session of the fifty-first legislature, the legislature passed House Memorial 75, which requested the university of New Mexico health sciences center to appoint the "J. Paul Taylor early childhood task force" in honor of former legislator and tireless children's advocate, J. Paul Taylor; and

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1 WHEREAS, during the 2013 interim, the university of New
2 Mexico convened the task force, which was chaired by the chair
3 of the children's trust fund board of trustees and included a
4 wide range of stakeholders for and experts in infant and early
5 childhood mental health services; and

6 WHEREAS, the task force was requested to develop and
7 recommend means and methods to:

8 A. improve collaboration among early childhood
9 development stakeholders;

10 B. develop a system to identify invisible, unserved
11 and underserved at-risk infants and young children;

12 C. develop an early childhood mental health plan
13 for infants and children through age eight, ranging from
14 prevention through early intervention and treatment, and review
15 state and local funding streams throughout the early childhood
16 system;

17 D. identify how the early childhood system can be
18 used for child abuse prevention; and

19 E. promote evidence-based, community early
20 childhood programs in New Mexico by establishing a link to
21 state data for early childhood research; and

22 WHEREAS, during the first year of service, the task force
23 made significant strides in building a coherent outcomes-based
24 infant and early childhood mental health and child abuse
25 prevention action plan; and

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1 WHEREAS, the task force reviewed health screening models
2 that prioritize reaching at early ages at-risk children and
3 families, i.e., those individuals living in the most vulnerable
4 of circumstances; and

5 WHEREAS, the task force has identified significant gaps in
6 funding and service provision that require coordinated
7 attention to address children's social and emotional
8 development across a broad set of policies affecting health,
9 mental health, early childhood and social services and family
10 support; and

11 WHEREAS, the task force has identified needed linkages
12 among health and behavioral health practitioners and
13 practitioners in other child-serving settings to improve the
14 ability to recognize and respond to risks or early signs of
15 compromised social and emotional development and health
16 disorders; and

17 WHEREAS, the task force has created a broad-based
18 coalition of stakeholders that, with expanded membership, can
19 develop a road map for an infant and early childhood mental
20 health action plan; and

21 WHEREAS, an infant and early childhood mental health
22 action plan could result in a comprehensive, strength-based,
23 child- and family-focused early childhood mental health and
24 child abuse prevention system to achieve better outcomes for
25 at-risk children and families; and

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1 WHEREAS, members of the task force presented preliminary
2 findings and recommendations to the interim legislative health
3 and human services committee in November 2013; and

4 WHEREAS, members of the task force have informed the
5 committee that the first year action plan developed by the task
6 force does not contain all of the details for achieving the
7 goals, but it provides a "best practice strategy" for building
8 a better system and a better future for New Mexico's at-risk
9 children and families; and

10 WHEREAS, among the preliminary recommendations of the task
11 force was the recommendation that the task force's work be
12 continued for another year in order to allow it to review
13 funding streams for an infant and early childhood mental health
14 action plan as well as to recommend a state policy for early
15 childhood mental health and child abuse prevention;

16 NOW, THEREFORE, BE IT RESOLVED BY THE SENATE OF THE STATE
17 OF NEW MEXICO that the J. Paul Taylor early childhood task
18 force be requested to continue for another year its work in
19 improving collaboration among stakeholders to develop a road
20 map to execute an infant and early childhood mental health
21 action plan; and

22 BE IT FURTHER RESOLVED that the J. Paul Taylor early
23 childhood task force be requested to develop in its infant and
24 early childhood mental health action plan a comprehensive,
25 strength-based child- and family-focused early childhood mental

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1 health and child abuse prevention system to achieve better
2 outcomes for at-risk children and families; and

3 BE IT FURTHER RESOLVED that the J. Paul Taylor early
4 childhood task force be requested to develop recommendations
5 regarding the policy and funding details required to
6 successfully implement an infant and early childhood mental
7 health action plan; and

8 BE IT FURTHER RESOLVED that the J. Paul Taylor early
9 childhood task force be requested to expand its membership to
10 include legislative finance committee staff and additional
11 stakeholders, including managed health care organizations,
12 representatives from the medical assistance division of the
13 human services department and the New Mexico association of
14 health councils; and

15 BE IT FURTHER RESOLVED that the New Mexico legislative
16 council be requested to charge the co-chairs of the legislative
17 finance committee and the chair and vice chair of the
18 legislative health and human services committee with a review
19 of the feasibility of the J. Paul Taylor early childhood task
20 force's preliminary recommendations with respect to the
21 budgeting, oversight, data collection and reporting
22 requirements that those recommendations may entail; and

23 BE IT FURTHER RESOLVED that the J. Paul Taylor early
24 childhood task force be requested to make recommendations to
25 the interim legislative health and human services committee and

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1 the legislative finance committee by October 1, 2014; and
2 BE IT FURTHER RESOLVED that copies of this memorial be
3 transmitted to the governor, the chair of the interim
4 legislative health and human services committee, the chair of
5 the legislative finance committee, the secretary of children,
6 youth and families and the chancellor of health sciences of the
7 university of New Mexico.

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