

STORAGE NAME: h1015s1.ge.doc
DATE: April 10, 2001

**HOUSE OF REPRESENTATIVES
COMMITTEE ON
GENERAL EDUCATION
ANALYSIS**

BILL #: CS/HB 1015
RELATING TO: Learning disabilities in young children
SPONSOR(S): Committee on General Education and Representatives Harrell, Fiorentino, Byrd, Melvin, Farkas, Bean, and Meadows
TIED BILL(S): CS/HB 1561

ORIGINATING COMMITTEE(S)/COUNCIL(S)/COMMITTEE(S) OF REFERENCE:

- (1) GENERAL EDUCATION YEAS 9 NAYS 0
- (2) EDUCATION APPROPRIATIONS
- (3) COUNCIL FOR LIFELONG LEARNING
- (4)
- (5)

I. SUMMARY:

This Committee Substitute creates the Learning Gateway Project. This project provides grants to eligible universities to establish an integrated approach for health care providers and parents to lessen the effects of learning disabilities for children. The selected universities shall form a statewide consortium, and shall select a university with a medical program as its lead university. Parental consent shall be required for all services provided pursuant to the Learning Gateway Project. The project shall be administered by the Department of Education (DOE), and shall:

- Use the expertise, resources, faculty, and students of the participating universities;
- Work with state and local agencies and private projects to develop a list of regional providers;
- Identify the factors that interfere with or inhibit normal learning;
- Establish guidelines for screening;
- Develop a checklist for physicians and others, in order to implement more effective screening;
- Develop a model system of care, through establishment of Learning Gateway Centers;
- Develop a brochure and website to distribute information; and
- Develop a network of all available services within each identified service area.

Each Learning Gateway Center shall serve as a single point of access for screening, assessment, integration of services, linkages of providers, referrals, related information, and other services to assist parents and professionals in determining the factors that may be interfering with learning and normal development. The Learning Gateway Center shall make available a variety of screening, planning, referral, educational, and therapy services, if such services do not already exist.

By January 2003, the Learning Gateway Project shall report to the Governor, the Legislature, and the Commissioner of Education, the progress, success, integration of services, number and types of students served, outcomes, and referrals.

The Committee Substitute also provides that the DOE shall, by October 15, 2001, finalize all rule revisions necessary to properly implement the 1997 amendments to the Individuals with Disabilities Education Act (IDEA), and report to the Governor and Legislature regarding any additional rule authority it needs to implement IDEA.

This bill does not contain an appropriation for the Learning Gateway Project.

II. SUBSTANTIVE ANALYSIS:

A. DOES THE BILL SUPPORT THE FOLLOWING PRINCIPLES:

- | | | | |
|-----------------------------------|---|-----------------------------|---|
| 1. <u>Less Government</u> | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input checked="" type="checkbox"/> |
| 2. <u>Lower Taxes</u> | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input checked="" type="checkbox"/> |
| 3. <u>Individual Freedom</u> | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input checked="" type="checkbox"/> |
| 4. <u>Personal Responsibility</u> | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input checked="" type="checkbox"/> |
| 5. <u>Family Empowerment</u> | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> | N/A <input type="checkbox"/> |

For any principle that received a "no" above, please explain:

B. PRESENT SITUATION:

According to the Department of Health, children from birth to 9 years of age with learning problems or learning disabilities are often not identified until they are enrolled in school and experience difficulties in the classroom. Children from birth until age 5 with mild to moderate learning problems or learning disabilities frequently do not meet eligibility criteria for the Children's Medical Services Infants and Toddlers Early Intervention (EI) Program, nor the local school district's Prekindergarten Disabilities programs. Both of these programs focus on children with either established medical conditions known to have a high probability of developmental disabilities, or on children who have a demonstrated significant developmental delay.

School Readiness Act

In 1999, the Legislature established s. 411.01, F.S., The School Readiness Act. It established a statewide school readiness program for the state's at-risk birth-to-kindergarten population. The program consists of an integrated seamless service delivery system for all publicly funded early education and child care programs including: First Start, Even Start, pre-k, Head Start, migrant pre-k, Title I, subsidized child care, and teen parent.

The School Readiness Act established the school readiness program through school readiness coalitions established by a county or a multi-county combination, and the program is phased in on a coalition-by-coalition basis. The Act charges that each new school readiness program provide the elements necessary to prepare at-risk children for school, including health screening and referral. In May of 2000, the School Readiness Performance Standards were adopted. Of the 57 school readiness coalitions, 30 have approved plans ready for implementation. These coalitions work with state and local programs that provide health and mental and behavioral health services. These programs include:

- Department of Health Children's Medical Services, which screens, case manages and provides services for eligible children from ages 0 to 5 exhibiting clinical evidence of developmental delay and other disorders affecting the ability to learn;
- Healthy Start Coalitions' member providers that screen and track pregnant women and infants that qualify for Healthy Start Services;
- Department of Health School Health Program nurses that deliver services to Pre-K through 12th grade school children that include; screening and referral of children for vision, hearing and other health problems, nursing assessments and referrals to community-based medical

and mental and behavioral health providers, and administration of medications for mental and behavioral health problems;

- Department of Education that administers school-based Early Intervention programs, services to Exceptional Student Education students as defined by Part B (children from birth to age three) and C (children from age three to 21) of the Individuals with Disabilities Education Act (IDEA),¹ and the Florida Diagnostic and Learning Resources System funded through IDEA, Part B; Preschool; and State General Revenue funds; and
- Department of Children and Family Services that provides mental and behavioral health services to children of all ages through a network of contracted community mental health providers. The Department of Health currently has an Infant Screening Program which tests newborns for five hereditary diseases, utilizing the State Laboratory in Jacksonville with a follow-up component in the Children's Medical Services program to evaluate newborns with presumptively positive results on initial screenings.

2000 Legislation

In ch. 2000-330, L.O.F., the 2000 Legislature created a commission to carry out a study on children with developmental delays and report to the Legislature by January 1, 2001, with recommendations. The purpose of the study was to focus on developing early intervention strategies and programs. The commission was comprised of 16 members, as follows:

1. The Secretary of Juvenile Justice
2. A representative of the Department of Children and Family Services
3. A representative of the Department of Education
4. The Executive Director of the Agency for Health Care Administration
5. A representative of the Department of Health
6. The Department of Psychiatry chair of the University of Florida Brain Institute
7. The chairman of the Department of Pediatrics of the University of Miami Medical School
8. The chair of the Florida Partnership for School Readiness
9. The chair of the Florida Interagency Coordinating Council for Infants and Toddlers
10. A professional who has expertise in the needs of children with learning disabilities
11. A professional who has expertise in the needs of children with emotional or mental disorders
12. A professional who has expertise in the needs of children with developmental disabilities
13. A professional who has expertise in the diagnosis and treatment of children with speech and language disorders
14. A professional who has expertise in the early intervention and prevention services rendered to children in Florida
15. A professional with expertise in autism and related disorders.
16. The parent of a child with a learning disability or emotional or mental disorder.

¹ Since 1975, the Individuals with Disabilities Education Act, or IDEA, (formerly the Education for All Handicapped Children Act) has required states to provide all children with disabilities, aged three through twenty-one, with the right to a free appropriate public education (FAPE) in the least restrictive environment (LRE.) The IDEA assists states in meeting these requirements by funding each state based on the number of identified disabled children residing within its borders. A referral for evaluation of a child may be made by the child, the child's parents, a teacher, doctor, or social worker. The local school district must then evaluate the child, using multiple tools and methods, through a process that meets the IDEA's criteria for fairness, accuracy, and completeness. Only a child who has a disability which results in the need for special education is eligible under the IDEA. Once a child is eligible under the IDEA, the state's educational agency must arrange a meeting with the child's parents, teacher(s), evaluators, and educational facility administrators to prepare an individualized education plan (IEP). An IEP is a written document required by the IDEA which describes all of the services a particular child will need in order to get a FAPE. Parents have the right to participate in all decisions regarding the identification, evaluation, planning, or placement of their disabled child.

The study commission met in seven public meetings across the state, and provided opportunity for public testimony at those meetings. The commission invited experts in brain research, child development, and early intervention to participate in the commission's activities.

The commission formed an advisory workgroup to provide information on the effectiveness of various early intervention and prevention programs. The community advisory workgroup identified gaps and problems in current services:

- Reduced attention to serving at-risk children after the adoption of Part C;
- Differences in eligibility thresholds between Part C and Part B;
- Limited case management services;
- Inadequate attention by some physicians to infants' and toddlers' development;
- Unavailability of intervention services after delays are discovered;
- Inadequate parental knowledge and participation in seeking services for their children; and
- Insufficient coordination across programs.

According to the Commission, approximately 12 percent of Florida's public school population, ages 3-21, has an identified disability.

In 1999-2000, Florida schools served 27,677 children ages three through five in preschool disability programs, under Part B (children age three through 21) of the Individuals with Disabilities Education Act (IDEA). Of these:

- 54 percent were speech or language impaired
- 27 percent were developmentally delayed
- 19 percent were in other categories

Under Part C (children from birth to three) of IDEA, the Developmental Evaluation and Intervention Program in the Department of Health serves 29,053 children from birth through age two that have established disabilities and developmental delays.

In January 2001, the commission submitted a report, including proposed legislation. The commission stated in its findings:

- Many parents lack an adequate understanding of child development and may not receive the assistance they need from existing systems in identifying problems that require further assessment and interventions.
- There is no visible central point in communities to access information about screening and services to address early learning problems and developmental delays.
- Many of the screening opportunities available in medical settings and early care and education settings are missed.
- Research has advanced medical screening methods to screen for a wider range of medical and biological conditions that lead to learning problems, developmental delays and disabilities.
- Many more children at risk of learning problems, learning disabilities, and mild developmental delays could be identified through a more deliberate screening effort.
- Capacity in existing programs and services is limited; services may not be available for young children and their families even after screening is conducted.
- Many proven interventions are not being implemented due to lack of funding, trained personnel and capacity of communities to provide sufficient services.

The commission recommended establishing three pilot programs to create a system for the best use of current resources and to identify gaps in current services in addressing children's learning problems. The commission also recommended a steering committee to oversee the pilot projects and provide technical assistance to them.

Existing State Programs Serving Children With (or At Risk of) Developmental Delays/Learning Problems

Florida's programs and services for children birth through age nine are administered by five state-level entities and a number of local coalitions. The state-level entities with responsibilities for serving young children or their parents include:

- Department of Health
- Agency for Health Care Administration
- Department of Education
- Department of Children and Family Services
- Florida Partnership for School Readiness

Councils or coalitions overseeing services for children birth through age nine include:

- School Readiness Coalitions
- Florida Interagency Coordinating Council for Infants and Toddlers (FICCIT)
- Part C Regional Policy Councils
- Community Alliances
- Healthy Start Coalitions

In addition, federal Head Start and Early Head Start programs for preschool children operate throughout the state, administered by federal agencies and local councils. Florida law (s. 125.901, F.S.) also allows counties to establish Children's Services Councils. The statute provides for the creation by county ordinance of independent special districts that may levy ad valorem taxes by a majority vote of the people to provide services for children. Seven counties have approved tax levies for Children's Services Councils: Broward, Hillsborough, Martin, Okeechobee, Palm Beach, Pinellas, and St. Lucie. Children's Services Councils operate without taxing authority in Highlands, Lake, Manatee, Miami-Dade, Orange, and Volusia counties, and in Jacksonville.

As indicated above, Florida's programs and services for children birth through age nine encompass a wide array of legislative initiatives creating programs with different goals and funding sources, and sometimes serving overlapping populations of young children, with a variety of medical and developmental conditions. According to the House Committee on Children and Families, Interim Report, 1999, the programs and services are fragmented; families often find it difficult to understand and access services; and the demand for services exceeds capacity.

A Department of Health spokesperson provided further information about the Part C program (children ages birth to three) under IDEA. He said 32 percent of the children enrolled enter the Part B (children age three through 21) system at 36 months, 21 percent enter other programs, 23 percent receive no further services, and 24 percent are lost to follow-up.

The Department of Education has a number of programs for children from birth to age five. Of 27,677 children in the prekindergarten disabilities program, 54 percent have a speech or language deficit diagnosis. Programs include:

- The Prekindergarten Early Intervention program, serving 30,500 children;

- Title I prekindergarten, serving 3,699 children;
- Migrant prekindergarten, serving 5,424 children;
- Even Start family literacy, serving 3,900 children;
- Florida First Start, serving 3,000 children;
- The Home Instructional Program for Preschool Youngsters (HIPPY), serving 370 single parents in 16 school districts; and
- The Teen Parent Program, serving about 5,000 babies and their parents.

Florida laws that govern intervention programs for young children, as mentioned above, are listed below:

- Section 228.055, F.S., establishing six regional autism centers to provide nonresidential resource and training services for persons with autism, a pervasive developmental disorder that is not otherwise specified, an autistic-like disability, dual sensory impairment, or sensory impairment with other handicapping conditions.
- Chapter 230, F.S., creating educational programs for preschool children including the Prekindergarten Early Intervention Program, Florida First Start Program, teenage parent programs, and educational services in Department of Juvenile Justice programs.
- Chapter 232, F.S., which defines academic performance standards for students in Florida's public education programs.
- Chapter 383, F.S., governing maternal and child health programs including Healthy Start; Regional Perinatal Intensive Care Centers; screening for metabolic disorders, other hereditary and congenital disorders, and environmental risk factors; newborn hearing screening; perinatal intensive care services; community-based prenatal and infant health care; and birth records.
- Chapter 391, F.S., which establishes Children's Medical Services, including general program provisions, Children's Medical Services Councils and Panels, and the Developmental Evaluation and Intervention Program.
- Chapter 402, F.S., governing Child Care services and quality initiatives, including licensing standards, Gold Seal standards and incentives, and subsidized child care regulations.
- Chapter 409, F.S., which creates the Healthy Families program as well as the children's health insurance programs.
- Chapter 411, F.S., which contains the Florida Prevention, Early Assistance and Early Childhood Act and establishes the Florida Partnership for School Readiness.

Regional Autism Centers

Known as the Centers for Autism and Related Disorders (CARD), each of the state's six autism centers established in s. 228.055, F.S., is operationally and fiscally independent. Each center is statutorily charged with coordinating services within and between state and local agencies and school districts but may not duplicate services provided by those agencies or school districts. Each of the six centers is located at a university (see next section *University Programs* for specific locations and service areas).

The centers are community-based programs. The staff members travel to visit constituents in their homes, schools, or wherever assistance is needed. The state of Florida is divided by counties into six regions with CARD professionals serving each area. CARD centers serve children and adults of all levels of intellectual functioning who have autism, autistic-like disabilities, pervasive developmental disorders, dual sensory impairments, or other disabling conditions.

Florida Diagnostic Learning and Resources Systems (FDLRS) Centers.

There are two types of FDLRS -- "associate" (district) and "university." The associate FDLRS are a network of 19 state and federally funded associate centers that provide support services to teachers, communities, agencies, and families of children with disabilities. They are funded by DOE through local school districts and serve from one to nine counties. Each center provides services in the areas of Child Find, Human Resources and Development, Parent Services, and Technology. The FDLRS centers provide services required by the Individuals with Disabilities Education Act (IDEA).

The second type of FDLRS is the "university" model. This FDLRS system is a statewide medical model, offering full-service diagnostic centers which reach out to special needs children by providing diagnostic and treatment services to children with behavioral, developmental and learning disorders. The five centers are located at major universities (University of Florida, University of Miami, University of South Florida, Florida State University and University of Florida/Jacksonville) to better reach these children. Each center serves between five and 16 counties. Comprehensive evaluation services are provided through the use of a multidisciplinary diagnostic clinic. The interdisciplinary teams consist of professionals from pediatrics, psychology, psychiatry, and communicative disorders. These professionals are also available to work closely with schools and parents to better facilitate the education of Florida's children.

In-service training programs are provided to Florida teachers, guidance counselors, and other direct providers in schools. Pre-service is also provided for undergraduate and graduate students as well as medical students, interns and residents.

University Programs in Florida Regarding Developmentally Disadvantaged

UNIVERSITY OF SOUTH FLORIDA (Tampa):

- Degree programs in Emotional & Behavioral Disabilities, Behavioral Disorders, Counselor Education, Varying Exceptionalities
- *Center for Autism & Related Disorders (CARD)* – The Louis de la Parte Florida Mental Health Institute serves Charlotte, Collier, DeSoto, Glades, Hardee, Hendry, Highlands, Hillsborough, Indian River, Lee, Manatee, Martin, Okeechobee, Pasco, Pinellas, Polk, St. Lucie, and Sarasota Counties.
- Chiles Center for Healthy Mothers & Babies
- Florida Health Information Center
- Institute for Child Health Policy - Health Services Research, Characteristics of Risk Adjustment Systems
- College of Medicine - includes Family Medicine, Pediatrics (Immunology, Child Development & Neurology), and Psychiatry & Behavioral Medicine

FLORIDA STATE UNIVERSITY (Tallahassee)

- Council for Exceptional Children
- Emotional Disturbance/Learning Disabilities/Varying Exceptionalities Programs
- Mental Disabilities Program
- College of Medicine (same programs as listed above - USF)
- *Center for Autism and Related Disorders (CARD)* – The Department of Communication Disorders serves Bay, Calhoun, Escambia, Franklin, Gadsden, Gulf, Holmes, Jackson, Jefferson, Leon, Liberty, Madison, Okaloosa, Santa Rosa, Taylor, Wakulla, Walton, and Washington Counties
- L. L. Schendel Clinic for Communication Disorders teaching, research, and service laboratory for student learning that serves over 500 clients annually

- TaCTICS - (Therapists as Collaborative Team members for Infant/Toddler Community Services)
- Nutrition, Food & Exercise Science Program

UNIVERSITY OF FLORIDA (Gainesville):

- College of Medicine (*regional autism center*) serves Alachua, Bradford, Citrus, Columbia, Dixie, Gilchrist, Hamilton, Hernando, Lafayette, Levy, Marion, Putnam, Suwannee, and Union Counties

UNIVERSITY OF FLORIDA HEALTH SERVICE CENTER (Jacksonville):

- *Regional autism center* serves Baker, Clay, Duval, Flagler, Nassau, and St. Johns Counties

FLORIDA ATLANTIC UNIVERSITY (Boca Raton)

- Communication Disorders Department - Graduate course sequence designed to meet the needs of individuals holding an undergraduate degree in Communication Disorders as well as individuals who have an out-of-field baccalaureate degree. Coursework is offered for students whose baccalaureate degrees are in a field other than speech, language, and hearing and who require prerequisite coursework prior to initiating graduate courses.
- Counselor Education Department - Master's degree (M.Ed.) designed to prepare counselors for educational and mental health settings.
- Exceptional Student Education Department - Undergraduate degree in Exceptional Student Education: Varying Exceptionalities; Master's degrees in Varying Exceptionalities, Emotional Handicaps, Learning Disabilities, and Mental Retardation; Doctor of Education degree. An endorsement in pre-kindergarten handicapped is also offered.
- *Center for Autism and Related Disorders (CARD)* – not referenced in statute

UNIVERSITY OF MIAMI:

- *Center for Autism and Related Disorders (CARD)* – The Mailman Center for Child Development serves Broward, Dade, Monroe, and Palm Beach Counties and offers the following programs:
 - Clinical programs focus on diagnostic and intervention activities related to many conditions associated with developmental delay or disability. The quality and quantity of clinical services provide the basis for advanced clinical training, research and the development of more effective strategies for diagnosis and treatment. Community based intervention activities are included.
 - Attention Deficit Hyperactivity Disorder Early Identification Research Project
 - Debbie Institute Early Intervention and Child Care Program
 - Florida's Early Intervention Program - Developmental evaluations for NICU graduates who are significantly at risk for developmental delay. Coordinates early intervention services for infants and toddlers ages birth through two who live in the north section of Dade County, and who have a developmental delay or disability.
 - Comprehensive Evaluation Team - Interdisciplinary evaluation and diagnosis for children with developmental delay, disability or complex learning needs. Counseling, referral and care coordination are provided.
 - Infant, Child and Adolescent Nutritional Services
 - Psychological Assessment Services
 - Florida Child Health and Developmental Disabilities Surveillance Project - Computer database system for the long-term monitoring, care coordination and analysis of the incidence of conditions that require special school services
 - EPS Educational Research
 - Early Childhood Special Education

UNIVERSITY OF CENTRAL FLORIDA (Orlando):

- National Student Speech Language Hearing Association
- FLARE - Family Literacy and Reading Excellence Center
- *Regional autism center* – College of Health and Public Affairs serves Brevard, Lake, Orange, Osceola, Seminole, Sumter, and Volusia Counties.

FLORIDA INTERNATIONAL UNIVERSITY (Miami):

- Degree programs in Special Education, Counselor Education, Educational Psychology and School Psychology, and Deaf Education

NOVA SOUTHEASTERN UNIVERSITY (Ft. Lauderdale):

- Degree programs in Speech-Language Pathology, Family Support Studies, Early Childhood Education, Exceptional Student Education (Emotionally Handicapped, Mentally Handicapped, Specific Learning Disabilities, Varying Exceptionalities)

1997 Amendments to the Individuals with Disabilities Education Act (IDEA)

In 1997, the Individuals with Disabilities Education Act (IDEA), a federal law, was amended. Federal regulations related to these changes were promulgated in 1999. However, the DOE has yet to complete its process of promulgating rules to accommodate these changes in the federal law. See sections 2 and 3 of the CS.

C. EFFECT OF PROPOSED CHANGES:

This Committee Substitute creates the Learning Gateway Project. This project provides grants to eligible universities to establish an integrated approach for health care providers and parents to lessen the effects of learning disabilities for children. The selected universities shall form a statewide consortium, and shall select a university with a medical program as its lead university. Parental consent shall be required for all services provided pursuant to the Learning Gateway Project. The project shall be administered by the Department of Education (DOE), and shall:

- Use the expertise, resources, faculty, and students of the participating universities;
- Work with state and local agencies and private projects to develop a list of regional providers;
- Identify the factors that interfere with or inhibit normal learning;
- Establish guidelines for screening;
- Develop a checklist for physicians and others, in order to implement more effective screening;
- Develop a model system of care, through establishment of Learning Gateway Centers;
- Develop a brochure and website to distribute information;
- Develop a network of all available services within each identified service area.

Each participating university may, with the Learning Gateway Project funds, expand the current services provided by the university to set up clinics on-site or at other locations to serve areas of the state where no services currently exist.

Each Learning Gateway Center shall serve as a single point of access for screening, assessment, integration of services, linkages of providers, referrals, related information, and other services to assist parents and professionals in determining the physical, emotional, nutritional, environmental, and mental factors that may be interfering with learning and normal development.

Staff at the Learning Gateway Center must be knowledgeable in the appropriate areas, and the center shall make available a variety of screening, planning, referral, educational, and therapy services, if such services do not already exist.

By January 2003, the Learning Gateway Project shall report to the Governor, the Legislature, and the Commissioner of Education, the progress, success, and integration of services, including the number and types of students served by the centers, and the outcomes, as well as the referrals.

The Committee Substitute also provides that the DOE shall, by October 15, 2001, finalize all rule revisions necessary to properly implement the 1997 amendments to the Individuals with Disabilities Education Act (IDEA), and report to the Governor and Legislature regarding any additional rule authority it needs to implement IDEA.

D. SECTION-BY-SECTION ANALYSIS:

Section 1. This Committee Substitute creates the Learning Gateway Project. This project provides grants to eligible universities to establish an integrated approach for health care providers and parents to lessen the effects of learning disabilities for children. The selected universities shall form a statewide consortium, and shall select a university with a medical program as its lead university. Parental consent shall be required for all services provided pursuant to the Learning Gateway Project. The project shall be administered by the Department of Education (DOE), and shall:

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Staff at the Learning Gateway Center must be knowledgeable in the appropriate areas, and the center shall make available a variety of screening, planning, referral, educational, and therapy services, if such services do not already exist. By January 2003, the Learning Gateway Project shall report to the Governor, the Legislature, and the Commissioner of Education, the progress, success, and integration of services, including the number and types of students served by the centers, and the outcomes, as well as the referrals.

Section 2. Provides that the DOE shall, by October 15, 2001, finalize all rule revisions necessary to properly implement the 1997 amendments to the Individuals with Disabilities Education Act (IDEA).

Section 3. Provides that the DOE shall, by October 15, 2001, report to the Governor and Legislature regarding any additional rule authority it needs to implement IDEA.

Section 5. Provides that the act shall take effect July 1, 2001.

III. FISCAL ANALYSIS & ECONOMIC IMPACT STATEMENT:

A. FISCAL IMPACT ON STATE GOVERNMENT:

1. Revenues:

None.

2. Expenditures:

See Fiscal Comments section.

B. FISCAL IMPACT ON LOCAL GOVERNMENTS:

1. Revenues:

None.

2. Expenditures:

None.

C. DIRECT ECONOMIC IMPACT ON PRIVATE SECTOR:

None.

D. FISCAL COMMENTS:

Expenditures cannot be projected from the language of the bill. Rather, it seems likely that the projects will fully use whatever money the Legislature, in its appropriations process, decides to appropriate.

The bill does not establish a specific appropriation, and does not establish any dimensions of infrastructure (i.e., *how many* Learning Gateway Centers are to be established, which will establish *how many* satellite clinics, etc.) as its goal. Instead, the bill provides that universities may apply to receive grants in order to provide certain specified services, and to establish Learning Gateway Centers, possibly with associated clinics.

Therefore, the funds necessary to accomplish this program seem dependent on the number of universities that apply for the grants (i.e., the number of centers which will be established). And, the number of universities that will apply will likely be influenced by the amount of money that is appropriated, and therefore available.

However, it should be noted that the bill in its original form would have established the Learning Gateway program, consisting of three demonstration (pilot) projects. The estimated initial cost of those three projects was \$6,000,000. At the time of this writing, the Senate Appropriations bill has a \$6,000,000 appropriation for the Learning Gateway Program.

IV. CONSEQUENCES OF ARTICLE VII, SECTION 18 OF THE FLORIDA CONSTITUTION:

A. APPLICABILITY OF THE MANDATES PROVISION:

This bill does not require counties or municipalities to spend funds or to take an action requiring the expenditure of funds.

B. REDUCTION OF REVENUE RAISING AUTHORITY:

This bill does not reduce the authority that municipalities or counties have to raise revenues in the aggregate.

C. REDUCTION OF STATE TAX SHARED WITH COUNTIES AND MUNICIPALITIES:

This bill does not reduce the percentage of a state tax shared with counties or municipalities.

V. COMMENTS:

A. CONSTITUTIONAL ISSUES:

None.

B. RULE-MAKING AUTHORITY:

None.

C. OTHER COMMENTS:

The bill refers to *eligible* universities being able to apply for the grants, but does not set forth what standards or criteria shall be used to determine eligibility. It would be possible to leave the development of such standards or criteria to the DOE, except that courts have held that providing such discretion to executive branch entities amounts to an unlawful delegation of Legislative powers, and is unconstitutional.

Therefore, it is advisable to place in statute the criteria that make a university eligible.

VI. AMENDMENTS OR COMMITTEE SUBSTITUTE CHANGES:

On April 10, 2001, the House Committee on General Education adopted one "strike everything" amendment, removing the substance of the bill as filed (see previous analysis for details) and substituting the bill, which this analysis describes. The two most important differences between the original bill and the CS are that the CS (i.e., present bill): (1) Requires parental consent prior to the provision of any services established in the bill; and (2) Establishes grants for existing universities to perform the services, rather than establishing a new infrastructure in the form of three demonstration projects.

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VII. SIGNATURES:

COMMITTEE ON GENERAL EDUCATION:

Prepared by:

Staff Director:

Gip Arthur

Ouida Ashworth