

Local Funding Initiative Request - Fiscal Year 2018-2019

1. Title of Project: Florida Association of Healthy Start Coalitions - Enhanced Services for Drug-Addicted Pregnant

Women and Drug-Exposed Infants

2. Senate Sponsor: Bill Montford

3. Date of Submission: <u>01/05/2018</u>

4. Project/Program Description:

Place 50 new Family Engagement Specialist positions across the state of Florida to provide outreach, education, and service coordination for pregnant women addicted to drugs and families with a drug- exposed newborn. Family Engagement Specialists will engage mothers with drug exposed babies in the community such as the NICU, pregnant women on methadone treatment or other drugs, and women referred from obstetricians, pediatricians, and community organizations.

5. State Agency Contacted? Yes

- a. If yes, which state agency? Department of Health
- b. If no, which is the most appropriate state agency to place an appropriation for the issue being requested?

6. Amount of Non-recurring Requested for fiscal year 2018-19:

Amount Requested for Operations	Amount Requested for Fixed Capital Outlay	Total Amount of Requested State Funds
3,807,920		3,807,920

7. Type, amount and percent of matching funds available for this project for fiscal year 2018-19:

Туре	Amount	Percent
Federal	0	0.0%
State (excluding the amount of this request)	0	0.0%
Local	0	0.0%
Other	0	0.0%
TOTAL	0	0.0 %

8. Total Project Cost for fiscal year 2018-19 (including the Total Amount of Requested State Funds): 3,807,920

9. Previous Year Funding Details:

- a. Has funding been provided in a previous state budget for this activity? No
- b. In the previous 5 fiscal years, how many years was funding provided? (Optional)
- c. What is the most recent fiscal year the project was funded?



Local Funding Initiative Request - Fiscal Year 2018-2019

- d. Were the funds provided in the most recent fiscal year subsequently vetoed?
- e. Complete the following Worksheet.

FY:	·	Input Prior FY Appropriation for this project for FY 2017-18 (If appropriated in FY 2017-18 enter the appropriated amount, even if vetoed.)		
Column:	Α	В	С	
Funds Description: Input Amounts:	Prior Year Recurring Funds *	Prior Year Nonrecurring Funds *	Total Funds Appropriated (Column A + Column B)	

10. Is future-year funding likely to be requested?

Yes

a. If yes, indicate non-recurring amount per year.

\$3.8 million

11. Program Performance:

a. What is the specific purpose or goal that will be achieved by the funds requested?

(1) Help prevent future drug exposed babies, by engaging more pregnant women and new mothers using drugs in treatment services and connecting them with community resources such as home visiting education / support and family planning. (2) Help protect drug exposed babies by facilitating a Safe Plan of Care for the baby; coordinating services from DCF, the treatment center, medical team, Early Steps, and home visiting program; ensuring the baby has follow-up with a pediatric medical home; and provide education about substance exposed infants including special handling techniques, safe sleep, coping with crying, and infant safety for the family (or foster family, relative placement).

b. What are the activities and services that will be provided to meet the intended purpose of these funds?

The Family Engagement Specialist will engage mothers with drug exposed babies in the NICU, pregnant women on methadone treatment or other drugs, and women referred from obstetricians, pediatricians, and community organizations. She will have specialized training to utilize SBIRT (Screening, Brief Interventions, and Referral to Treatment), Seeking Safety, and Naloxone. The Family Engagement Specialist will connect the mother with treatment resources, and coordinate services with the treatment center, home visiting programs, DCF, Early Steps and medical providers. She will work with the mother to create a Safe Plan of Care for the baby and encourage the mother to participate in a home visiting program.

c. How will the funds be expended?

Spending Category	Description	Amount
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Local Funding Initiative Request - Fiscal Year 2018-2019

Administrative Costs		
☐Executive Director/Project Head Salary and Benefits		
☑Other Salary and Benefits	Quality assurance, contract management, finance, program coordination, etc.	380,000
□Expense/Equipment/Travel/Supplies/Other		
□Consultants/Contracted Services/Study		
Operational Costs		
☑Salary and Benefits	Family engagement specialists	2,539,200
☑Expense/Equipment/Travel/Supplies/Other	Program Support: travel, educational materials, computers, supplies, etc.	888,720
□Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation		
☐Construction/Renovation/Land/Planning Engineering		
TOTAL		3,807,920

d. What are the direct services to be provided to citizens by the appropriations project?

In addition to services in 11b above, If the mother declines participation in a home visiting program, the Family Engagement Specialist will also: (1) Screen the pregnant woman utilizing the Substance Use Risk Profile-Pregnancy Scale. Re-screen at 36 weeks gestation and following pregnancy at the first visit following birth. (2) Provide services using the evidence based Substance Abuse (SA) Screening & Intervention Pathway. (3) Use Motivational Interviewing, Screening and Brief Intervention and Referral to Treatment (SBIRT). (4) Link the mother to community services, including a pediatric medical home. (5) Provide education about substance exposed infants including special handling techniques, safe sleep, coping with crying, and infant safety for the family (or foster family, relative placement). (6) Screen the mother for depression. (7) Provide developmental screening for the infant, if not in Early Steps.

e. Who is the target population served by this project? How many individuals are expected to be served?

At least 1,000 Pregnant women using drugs and new mothers with drug exposed newborns.

Local Funding Initiative Request - Fiscal Year 2018-2019

f. What is the expected benefit or outcome of this project? What is the methodology by which this outcome will be measured?

At least 1,000 pregnant women using drugs and mothers with drug exposed newborns will be reached to encourage and connect to treatment services and education and support from home visiting programs.

- g. What are the suggested penalties that the contracting agency may consider in addition to its standard penalties for failing to meet deliverables or performance measures provided for in the contract?

 No additional penalties are recommended for year 1 as we establish a baseline.
- 12. The owner(s) of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the relationship between the owner(s) of the facility and the entity.

 N/A
- 13. Requestor Contact Information:

a. Name: Jim Bracher

b. Organization: FL Association of Healthy Start Coalitions

c. Email: jbracher@fahsc.orgd. Phone Number: (850)999-6206

14. Recipient Contact Information:

a. Organization: FL Association of Healthy Start Coalitions

b. County: <u>Statewide</u>c. Organization Type:

O For Profit

● Non Profit 501(c) (3)

O Non Profit 501(c) (4)

O Local Entity

O University or College

O Other (Please specify)

d. Contact Name: Jim Bracher

e. E-mail Address: jbracher@fahsc.org f. Phone Number: (850)999-6206

15. If there is a registered lobbyist, fill out the lobbyist information below.

a. Name: <u>Brian Jogerst</u>b. Firm: <u>BH and Associates</u>

c. Email: brian@bhandassociates.com d. Phone Number: (850)222-0191