

The Florida Senate **Local Funding Initiative Request Fiscal Year 2022-2023**

LFIR # 1640

1. Project Title	Broward Health Eve	Broward Health Every Woman		
2. Senate Sponsor	Lauren Book			
3. Date of Request	11/15/2021			
4. Project/Program D	escription			

Project/Program Description

Broward Health's Every Woman (EW) project is needed to address the disproportionate percentage of women of color who experience a cancer diagnosis in Broward County, providing personalized guidance through treatment and/or survivorship. EW will utilize a full-time, nurse navigator and social worker who will form partnerships with community-based organizations, including houses of worship and sorority/fraternal groups, to provide outreach, education, screening, referrals, and navigation to and through the cancer screening, treatment, and survivorship processes. EW will identify women living in Broward County who need assistance navigating the complex and often overwhelming healthcare landscape. The EW Navigator will be the main contact for community partners and be a friendly face through an often scary and uncertain time. The EW Social Worker will ensure all social determinants of health are addressed to ensure optimal health and well-being during cancer treatment/survivorship.

5. State Agency to receive requested funds		Department of Health
State Agency contacted?	Yes	

6. Amount of the Nonrecurring Request for Fiscal Year 2022-2023

Type of Funding	Amount
Operations	241,920
Fixed Capital Outlay	0
Total State Funds Requested	241,920

7. Total Project Cost for Fiscal Year 2022-2023 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	241,920	82%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	53,528	18%
Total Project Costs for Fiscal Year 2022-2023	295,448	100%

8. Has this project previously received state funding?

Fiscal Year	Amo	ount	Specific	Vetoed
(уууу-уу)	Recurring	Nonrecurring	Appropriation #	

9. Is future funding likely to be requested?	Yes		
a If yes, indicate nonrecurring amount per year	241 290		

b. Describe the source of funding that can be used in lieu of state funding.



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At the moment, Broward Health does not have a source of funding that can be used in lieu of state funding. If state funding is not provided, the applicant will continue to pursue funding from other sources, including donations and grant-making activities.

10. Has the entity requesting this project received any federal assistance related to the COVID-19 pandemic?

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If yes, indicate the amount of funds received and what the funds were used for.

Yes, Broward Health received federal assistance related to the COVID-19 from both direct federal grants and Provider Relief Funding. Grant funds from the CARES Act in the amount of \$6,174,767 were used to increase service delivery capacity during the COVID-19 pandemic. Additionally, Broward Health received \$78,627,812.27 in Provider Relief Funding to assist in covering unfunded costs related to treating patients with COVID-19.

11. Details on how the requested state funds will be expended

Spending Category	Description	Amount			
Administrative Costs:					
Executive Director/Project Head Salary and Benefits		0			
Other Salary and Benefits		0			
Expense/Equipment/Travel/Supplies/Other		0			
Consultants/Contracted Services/Study		0			
Operational Costs: Other					
Salary and Benefits	1 FTE ARNP/Nurse Navigator (\$126,880 salary + benefits), 1 FTE Social Worker/LCSW (\$52,000 salary + \$11,440 benefits), education and outreach supplies (\$20,000), office supplies (\$5,600), mileage (\$26,000)	241,920			
Expense/Equipment/Travel/Supplies/Other		0			
Consultants/Contracted Services/Study		0			
Fixed Capital Construction/Major Renovation:					
Construction/Renovation/Land/ Planning Engineering		0			
Total State Funds Requested (m	Total State Funds Requested (must equal total from question #6) 241,920				

12. Program Performance

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

Broward Health's Every Woman (EW) project is needed to address cancer disparities within racial and ethnic minority groups in Broward County. The goal of the program is to help women of color navigate the complex healthcare system in a safe and welcoming environment. The program will also help to build trust in the healthcare system within communities of color in Northern Broward County through deepening connections between healthcare providers and community and faith-based organizations.

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



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To meet the intended purpose of these funds, Every Woman will utilize an embedded nurse navigator model. This model of care fosters a collaborative approach between the oncology team, primary care providers, and patients and their families allowing for a connected, holistic approach. The EW navigator and social worker would be embedded in the community, allowing for Broward Health to build trust within communities of color. Services provided through this program will include: community outreach and education; prevention education; cancer screening, education, and referral; health system navigation upon diagnosis and/or navigation to complementary health services; navigation to insurance enrollment and/or financial aid services; survivorship education and support.

c. What direct services will be provided to citizens by the appropriation project?

Direct services provided by the project include:

- Community outreach, including forming relationships with faith-based organizations, sororities, social clubs, etc;
- Prevention education, including education on the importance of nutrition, exercise, and environmental hazards;
- Cancer screening, education, and referral for additional clinical screenings in the clinic or hospital;
- Health system navigation upon diagnosis, including enrollment into insurance coverage and screening for available financial aid as necessary; and
- Survivorship education and support, including group education and support.

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

The target population are women of color in Broward County. Broward County is a minority, majority community (Broward.org, 2019); EW would serve the approximately 150,000 women of color in Northern Broward County. In addition to being racially diverse, nearly one-third of Broward County residents identify as foreign-born residents. Cancer burden is highest in African Americans, who face greater obstacles to cancer prevention, detection, treatment, and survival; Black people have the highest death rate and shortest survival of any racial/ethnic group for most cancers in the United States. Moreover, Black women are 40% more likely to die of breast cancer than white women, and are twice as as likely to die if they are over 50 years of age (American Cancer Society, 2020). In Broward County, Black residents experience a high rate of cancer incidence and are more likely to die of cancer than white residents. EW will aim to directly serve at least 500 women by the end of the project period.

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

Impact will be tracked using the following outcomes:

- Number of agencies and community-based organizations where formal relationships or MOUs are formed;
- Number of women of color educated during outreach events;
- Number of women of color provided prevention education;
- Number of women of color provided a screening or healthcare referral;
- Number of women who are navigated to insurance enrollment; and
- Number of women who receive healthcare services.

f. 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 the contract?

Broward Health is open to discuss any and all penalties for failing to meet deliverables or performance measures provided for in the contract. Please note that if only partial funding was granted, the number of persons served would be modified.

13. The owners of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the relationship between the owners of the facility and the entity.

Broward Health owns the facility(s) where the appropriation project will be implemented.



d. Phone Number (305)935-1866

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14.	14. Requestor Contact Information							
	a. First Name	Alex Last Name Fernandez						
	b. Organization	North Broward Hospital District d/b/a Broward Health						
	c. E-mail Address	amfernan	amfernandez@browardhealth.org					
	d. Phone Number	(954)473-	(954)473-7483 Ext.					
15.	15. Recipient Contact Information							
	a. Organization	North Bro Health	North Broward Hospital District d/b/a Broward Health					
	b. Municipality and	l County [Broward					
	c. Organization Ty	Organization Type						
	□For Profit Entity	/						
	☑Non Profit 501(c	·)(3)						
	□Non Profit 501(c	·)(4)						
	□Local Entity	Entity						
	□University or Co	ersity or College						
	□Other (please specify)							
	d. First Name Kelly Last Name Hearne							
	e. E-mail Address	khearne@browardhealth.org						
	f. Phone Number							
16.	16. Lobbyist Contact Information							
	a. Name	Ronald L	. Book					
	b. Firm Name	Ronald L	. Book PA					
	c. E-mail Address	ron@rlbo	okpa.com					