

LFIR # 1513

We Are Supported: Baker Act Care Coordination Integrated Data System Pilot Program
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2. Senate Sponsor Rosalind Osgood

3. Date of Request 10/30/2023

4. Project/Program Description

"We Are Supported" is intended to improve data sharing among providers and caregivers so that youth who experience a Baker Act receive high- quality, coordinated, and rapid care. 25% of youth who experience a Baker Act once will experience it again. The overall goal is to lower recidivism rates among youth in Baker Act situations, provide savings to both the state and hospitals, and to empower caregivers to make the best healthcare decisions for their child.

5. State Agency to receive requested funds Dep

Department of Children and Families

State Agency contacted? Yes

6. Amount of the Nonrecurring Request for Fiscal Year 2024-2025

Type of Funding	Amount
Operations	650,000
Fixed Capital Outlay	0
Total State Funds Requested	650,000

7. Total Project Cost for Fiscal Year 2024-2025 (including matching funds available for this project)

Type of Funding	Amount	Percentage	
Total State Funds Requested (from question #6)	650,000	65%	
Matching Funds			
Federal	0	0%	
State (excluding the amount of this request)	0	0%	
Local	350,000	35%	
Other	0	0%	
Total Project Costs for Fiscal Year 2024-2025	1,000,000	100%	

8. Has this project previously received state funding? No

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

9. Is future funding likely to be requested?

a. If yes, indicate nonrecurring amount per year.

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

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

No

No



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

Complete questions 11 and 12 for Fixed Capital Outlay Projects

- 11. Status of Construction
 - a. What is the current phase of the project?
 - O Planning

🔵 Construction 🛛 🔘 N/A

b. Is the project "shovel ready" (i.e permitted)?

🔘 Design

- c. What is the estimated start date of construction?
- d. What is the estimated completion date of construction?
- 12. List 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.

No

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

Spending Category	egory Description			
Administrative Costs:				
Executive Director/Project Head Salary and Benefits				
Other Salary and Benefits		0		
Expense/Equipment/Travel/Supplies/ Other		0		
Consultants/Contracted Services/Study		0		
Operational Costs: Other				
Salary and Benefits	Project Director administer, supervise, manage entire program. Engage and coordinate with system partners to ensure the data submission and exchange is effective and timely to support and enhance treatment and discharge planning for baker Acted children (fringe benefits @ 25% included).	98,000		
Expense/Equipment/Travel/Supplies/ Other Cell phone @ \$35 per month = \$420. IT support @ \$115 per month = \$1,380. Supplies \$200.		2,000		
Consultants/Contracted Services/Study	Velatura Integrated Data System design and implementation.			
Fixed Capital Construction/Majo	r Renovation:			
Construction/Renovation/Land/ Planning Engineering		0		
Total State Funds Requested (m	ust equal total from question #6)	650,000		

14. Program Performance

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



"We Are Supported" is intended to improve data sharing among providers and caregivers so that youth who experience a Baker Act receive high- quality, coordinated, and rapid whole- person care. 25% of youth who experience a Baker Act once will experience it again. The overall goal is to lower recidivism rates among youth in Baker Act situations, provide savings to both the state and hospitals, and to empower caregivers to make the best healthcare decisions for their child.

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

The primary activity will be the implementation of the Integrated Data System for youth being Baker Acted in Broward County. Parents who enroll into this program will receive direct training so that they can make more informed decisions. Through care coordination, case management, parental consent, and peer support linking to services that include psychiatry, therapy, supportive housing, vocational and other community supports, the health outcomes for youth who have been baker acted will improve.

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

Through the informed consent process parents will better be able to serve their children and through improved coordination, providers can better serve youth. Parents of children enrolled will receive education of the Behavioral Health System, specifically on the Baker Act process and the follow up required. Through rapid, secure sharing of youth's information, a more comprehensive care coordination care approach will be provided to the child/ youth who has experienced a Baker Act.

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

The target population are children/ youth who experience a Baker Act and their caregivers. Last year, about 2000 youth experienced a Baker Act in Broward County. This project should serve a larger number of youth in Broward as well as youth who have been baker acted across county lines with the long term goal of expanding across the state. The secondary population served are caregivers and the care providers. Recognizing that a parent or caregiver is central to a child's care management team, they will receive rapid notifications on their child, just as a provider would, and will receive education of the Behavioral Health System, specifically on the Baker Act, empowering them to make more informed decisions for their child. Providers will also save money and time because of more rapid and coordinated communication among one another. The resulting decrease in recidivism will free up more space to serve more youth.

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

be measured?

Connecting youth to behavioral health treatment will improve physical health and reduce cost. Our goal is to connect 90% of youth coming through the program to a pediatric or medical practice. This project will help connect youth to services including psychiatry, therapy, supportive housing, vocational and other community supports to improve mental health outcomes. Our goal is for 75% of youth to improve in their Children's Functional Assessment Rating Scale (CFARS). 100% of parents of children enrolled will receive education on the Behavioral Health System, specifically on the Baker Act. 10- 15 larger providers identified and integrated into the pilot to include all partners in a youth's care management team. Additional goal measurements include, 75% of enrolled youth will not be re- arrested, 50% less youth will not experience crossover in the dependency system, and a 10% reduction in youth being baker acted more than once.

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?

Efforts to meet performance measures and deliverables will be paramount to the operational plan. Failure to meet measures will be examined and justified as necessary. Processes will be re-evaluated, and an improvement plan will be developed to address deficiencies.

15. Requester Contact Information

a. First Name	Silvia	Last Name Quintana			
b. Organization	Broward Behavioral Health Coalition				
c. E-mail Address	Silvia.Quintana@browardbehavioralhc.org				
d. Phone Number	(954)279-3857	Ext.			



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16.	16. Recipient Contact Information								
	a. Organization	Broward Behavioral Health Coalition							
	b. Municipality and	County Broward							
	c. Organization Type								
	□For Profit Entity								
	⊠Non Profit 501(c)(3)								
	□Non Profit 501(c)(4)								
	□Local Entity								
	□University or College								
	□Other (please specify)								
	d. First Name	Silvia		Last Name	Quintana				
	e. E-mail Address	s Silvia.Quintana@browardbehavioralhc.org							
	f. Phone Number	er (954)279-3857							
17.	17. Lobbyist Contact Information								
	a. Name	Nicholas Hessing							
	b. Firm Name								
	c. E-mail Address	nhessing	@cscbroward.org	g					
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d. Phone Number (954)592-2370