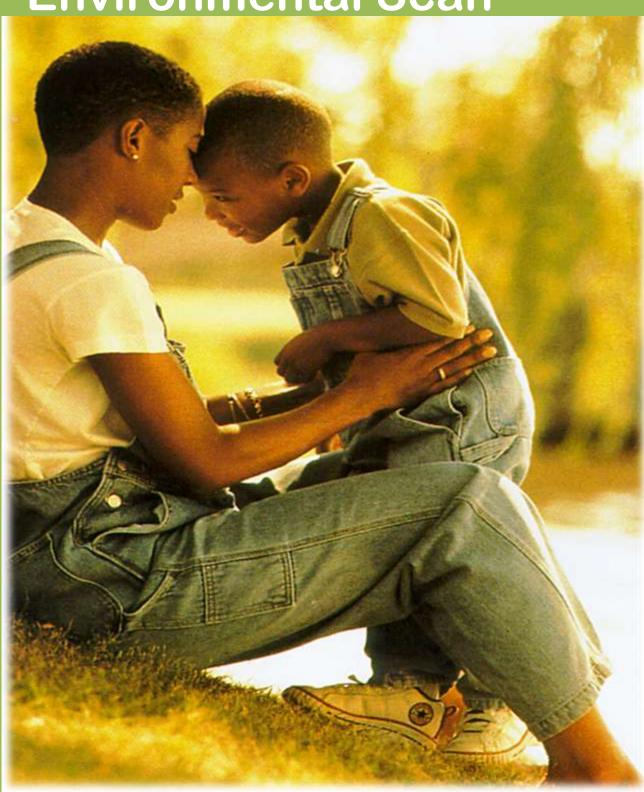
Florida's Project LAUNCH Environmental Scan



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Introduction

The State of Florida has the unique opportunity to enhance the existing health, behavioral health, and social service systems for young children from birth to eight years of age and their families through grant funding from the Substance Abuse and Mental Health Services Administration's Project LAUNCH – Linking Actions for Unmet Needs in Children's Health. This five year grant enhances the partnership between the Florida Department of Children and Families (DCF), the Florida Department of Health (DOH), and service providers in Pinellas County, Florida. The project is aimed at preventing youth behavioral disorders by improving family function and the quality of the parentchild relationship. Project LAUNCH will require a multi-level (individuals, families, communities) and multi-sectored (early childhood education combined with physical, emotional, social, and behavioral health services) collaborative approach, requiring all participants to respond to the changing needs of young children and their families to achieve the grant's desired results.

This report describes the landscape of systems, programs and other resources currently available, the process used for conducting the environmental scan, and the resulting themes that emerged across the regions. The issues affecting Florida families are layered, complex, and call for integrated, collaborative approaches. This environmental scan highlights critical areas of need, gaps in services, duplication of efforts, and successes in the early childhood system that will be used to address challenges facing young children, birth to age eight, and their families. The intent is to provide an overview of the early childhood system and its current resources, identify related issues in Florida from a State-level perspective, and identify opportunities to support the development of a comprehensive, family-centered public health approach for serving children and their families. This report is a "living document" and will be modified over the course of the Project to reflect changes in the systems and supports that address the well-being of children and families throughout Florida and the Project LAUNCH target area, Lealman Corridor, in the St. Petersburg, Florida area.



Stakeholder Participation

Florida's Project LAUNCH staff engaged a multitude of stakeholders at the local and state level to gather input, identify current resources, collect previous needs assessments and reports, and identify key partners and programs who have valuable input on the early childhood system. Stakeholders were engaged through presentations at council meetings, individual collaborative meetings, interactive virtual meeting space, and electronic communication.

Stakeholder buy-in and participant collaboration began immediately for the LAUNCH Initiative. A short summary created the was LAUNCH project upon onset of the grant program. This overview was used to engage stakeholders and provide a clear understanding and buyin from partnering agencies, LAUNCH discussed at was multi-agency meetings across the state and discussed with agency's teams during any notable interaction. Great efforts were made to ensure Florida's community, state and local, was made aware of this new initiative. **Documents** were created to provide greater detail, contact information, and gain further additional buy-in from agency personnel.



Once the council was created at the state level, members were engaged through electronic communications, meetings, and interactive virtual meetings. Each communicative effort was meant to engage representatives, provide clear expectations, remind participants of the importance of their contribution, thank them for their collaborative input, and clarify next steps toward completion of LAUNCH goals. These communication strategies ensured valuable insight from diverse perspectives in the early childhood service system. The adult service system, including the ACCESS (food stamp) Program, Domestic Violence Program, and the Substance Abuse Program Office were also invited to participate in the council so that a comprehensive view of the family's needs and service provision would be represented.

One unique engagement opportunity was created through an interactive virtual meeting space. The council convened late in the grant implementation phase which neared multiple deliverable due dates. As a way to maintain engagement and not overburden the dedicated team, a virtual meeting space was created to discuss the environmental scan findings and draw conclusions with the council and other vested stakeholders. The meeting space was housed in Adobe Connect, a web-based interactive tool. Participants were able to view a PowerPoint slide presentation that overviewed project LAUNCH's goals, core strategies, council responsibilities, and findings from the state scan. The group was then presented an excel spreadsheet presenting the findings which was able to be modified in real time. Whiteboards were created to house notes from the group, which were later revised and turned into this scan document. Participants were prepped beforehand on the meeting intent and given documents to review prior to create efficiency. Participants were engaged throughout the meeting, providing feedback and continuing an in depth dialogue. Overall, the interactive meeting was successful and a wealth of valuable input was gathered to drive our environmental scan and strategic planning efforts.

Representatives from the state and local agencies listed below have participated in the environmental scanning processes:

Agency for Health Care Administration (Medicaid)

Child Care Licensing

Child Support Enforcement

Child Welfare

Children's Medical Services

Community Health Centers of Pinellas

Department of Children and Families -ACCESS Program

Department of Children and Families Substance Abuse and Mental Health –Headquarters

Department of Children and Families Substance Abuse and Mental Health-Suncoast Region

Department of Children and Families -System of Care Initiative

Department of Children and Families -Family Safety Program Office

Department of Children and Families-Office of Domestic Violence

Department of Education-Division of Exceptional Education

Department of Education-Student Services

Department of Juvenile Justice

Early Learning Coalition

Early Steps

Early Childhood Comprehensive Systems Grant at DOH

Every Woman Florida

Families

Florida Breastfeeding Coalition

Florida Children's Forum

Florida Department of Health

Florida Developmental Disabilities Council

Florida Directory of Early Childhood Services

Florida Mental Health Institute- University of South Florida

Florida Pediatric Society

Florida Right from the Start (Florida Help Me Grow Initiative)

Florida's Women's Health

Florida State University Center for Prevention and Early Intervention

Georgetown Technical Assistance Team

Head Start/Early Head Start

Healthy Families

Healthy Start

Healthy Start-Pinellas County

Juvenile Welfare Board

KidCare

March of Dimes

NAMI-Florida

Office of Early Learning

Operation PAR

Ounce of Prevention

Network for Students with Emotional/Behavioral Disabilities (SEDNET)

Suncoast Center

Technical Assistance Education Development Center

United Way Florida

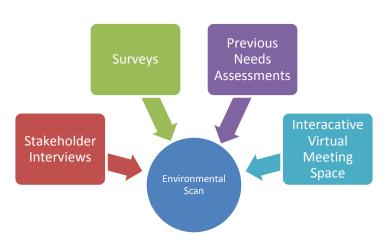
Women, Infant, & Children



Methodology

The LAUNCH group was able to extract information for this environmental scan from existing assessments and state plans compiled by the Juvenile Welfare Board of Pinellas County, the Florida Community Health and Wellness Dashboard, Florida Healthy Start Report (2011), Florida Maternal and Child Health Needs Assessment (2010), Family Home Visiting Needs Assessment (2010), and the annual Child Abuse Prevention and Treatment Act (CAPTA) report (2011). Early childhood stakeholders at the state and local levels were also fully engaged to provide clarification of findings and supplemental information. By engaging key stakeholders and reviewing existing reports and data sources, the Project LAUNCH team was able to compile a very comprehensive and holistic view of the early childhood system in Florida as well as its targeted area, the Lealman Corridor in Pinellas County, Florida.

Project LAUNCH staff gathered much of the data for the local environmental scan from *the Pinellas County Board of Commissioners 2012 Workshop Session: The Economic Impact of Poverty* (2012). This report highlights and discusses reducing disparities in at-risk communities and the impact of poverty and its link to these communities. This document also discusses strategies and initiatives within the Health and Human Services System in Pinellas County.



As part of the Florida Project LAUNCH Initiative, the staff created and disseminated local and state surveys to early childhood care providers in Pinellas County and state level program managers. purpose of this survey was to: identify existing financially services; begin mapping provision; provide a canvas for analyzing duplication of efforts and gaps in services; and begin engaging stakeholders for the project's council. information gathering was conducted through inperson meetings, online surveys, interactive webinars, and council meetings. By relying on multiple data sources, this scan will ensure that the information collected is comprehensive.

The State of Florida has a complex and intricate early childhood system. It took multiple attempts to

organize the multifarious system to obtain usable data. State level agencies and their programs do not provide direct services per se; rather major state agencies are delineated into program offices, which fund a variety of different "services." For the state level environmental scan, "services" will be identified as specific program entities that ensure state level compliance and standards of care for an explicit population related to a particular area of need. A chart was first created to ascertain programs across the state, their main purpose, specific service offered, and contacts for each. Once the chart was completed staff contacted each program to clarify their service provision and to ask direct questions regarding: systems development; financing mechanisms; council involvement; and collaborations with other state agencies. These interviews consisted of in-person and telephone discussions. Each stakeholder interviewed was provided information about the LAUNCH Grant.

While the above approach engages key informants and their understanding of issues in their community, the extent to which their views are truly representative of an entire community can always be called into question. Thus, transparency about the process of information gathering is key in allowing readers to decide whether the results are representative of the issues affecting families in their regions. This process was repeated for the local stakeholder survey and modified to reflect a local collaborative effort.

Upon completing data collection, information was compiled and matrices developed to reflect the five core strategies, plus a sixth strategy to include Substance Abuse (a Florida-specific focus). Through the use of an interactive webinar, stakeholders and state council members gathered to confirm data provided, offer additional information related to Project LAUNCH goals, discuss systems development, and then draw conclusions on the data reported and next steps for the LAUNCH initiative. Engaging the stakeholders throughout this process is critical in order to maintain buy-in and ownership of Project LAUNCH. The continual participation of the stakeholders and their level of involvement has made the environmental scan a community process to understanding needs, gaps, and existing resources.

Data collection at the local level began at DCF state headquarters office through a provider survey. Once the local coordinator was hired, he continued to evaluate the local needs and service provision by engaging the data analyst at the Juvenile Welfare Board (JWB). The JWB recently collected data from multiple sources on the Lealman Corridor and other areas in Pinellas County which are affected by poverty as well as poor outcomes. JWB has become a critical partner in better understanding the Lealman Corridor and the issues that particular community has and is currently facing. After this initial data scan was conducted, forms were created to follow up with providers to gain more specific details regarding services for the Lealman Corridor to address the many issues raised. The compiled information provided some great insight into identifying gaps in services and duplication of treatment. The data forms that were distributed to provider agencies requested data regarding; services provided; population served; goals; funding amount, and source of funding. In conjunction with this, online resource directories such as PCensus, Department of Health's Florida Charts, Pinellas indicators, and United States Census Bureau's Fact Finder 2 were reviewed and/or used to collect necessary data information to identify barriers to treatment and create a comprehensive picture of the service area in Pinellas County's Lealman Corridor.



Figure 1: Map represents Project LAUNCH zip codes and services offered in each area. You can see a lack of access to quality health services for this community's residents.

Results

The following section provides an overview of the barriers and successes encountered in completing the environmental scan as well as a summary of the key findings from both the state and local level broken out into the five main topic areas:

- Workforce Development,
- Screening/Early Intervention,
- Substance Abuse,
- Engaging and Supporting Families, and
- Agency Collaborative.

Barriers

By addressing the barriers encountered, this report is able to provide some context to better understanding the findings of the environmental scan and the needs raised at both the local and state level. This context will also allow for guidance in the next phase of the process with the completion of the strategic plan. One major challenge for gathering data was structuring a report to capture Florida's complex and intricate early childhood system. It took multiple attempts to organize this intricate system to obtain usable data. State level agencies and their programs do not provide direct services per se, rather state agencies through program offices, fund a variety of services. This made it difficult for staff members of LAUNCH to clearly communicate their specific data needs and for the stakeholders to understand how the project fits within their organization as well as the various departments within them. After a selfassessment of the tool used to collect the data, it was revised to be more concise allowing for programs to confirm their service provision as opposed to open-ended discussion of service components.

System Barriers are inevitable at all levels in any process. Florida's challenges in grant activities are mostly related to these system barriers. Environmental challenges related to funding approval had to be overcome: the legislative budget committee must approve all new grants prior to any grant related activities taking place. Unfortunately, this committee did not meet until late January, 2013, and so hiring grant positions and contracting for services was significantly delayed. Local level data collection was started by headquarters staff residing approximately 250 miles away. Compounding this process was attempting to connect to local providers telephonically to gather needed information and support. To offset this delay, local staff in the DCF office was engaged during this process to ensure the project continued while waiting to hire staff. However, they felt overextended due to staffing cuts, expansive priorities, and other job duties.

Delays in grant hiring and contracting meant a significant challenge for Project LAUNCH staff. Contract procurement through headquarters can take, on average, three months before a contracted service can begin. This would have pushed back our grant funded services beginning and completion of the environmental scan until just before the beginning of the second year of the grant. LAUNCH staff agreed to write the environmental scan to avoid such a delay and ensure the project gained momentum.

Successes

Despite the delay in starting the grant, LAUNCH staff engaged stakeholders and generated support for the grant as planned. Staff presented information about the project at multiple state early childhood advisory committees, interagency groups, and councils. Support from these groups included identifying council membership; providing programmatic overviews, and identifying agency contacts for follow-up interviews.

Overcoming barriers often time leads to opportunities to create greater efficiencies. Learning about Florida's complex and intricate early childhood system within a short period of time afforded the chance to utilize creative means in gathering information and engaging stakeholders. Through an interactive webinar, data was presented to stakeholders for immediate feedback and editing to reflect the state's early childhood system. Participants looked at the information in tandem to derive conclusions from the data and move forward in the strategic planning process. This also allowed for council members to participate and continue buy-in without the need to travel in order to meet in person.

Florida's LAUNCH team partnered with the Project LAUNCH Technical Assistance Team (TAT) to create the web meeting forum that allowed for audience participation, dyadic teaching, and interactive features such as whiteboard writing, collecting notes, and electronic chatting between participants. The whiteboard feature allows for a visible place to write out key points for all participants to view similar to what flip chart notepads allow at face-to-face settings. A unique feature that utilizing a web format setting is the between-participant chat that allows participants to confer with one another prior to sharing with the larger group. The TAT indicated that this was the first time a state used technology in this format to engage stakeholders and provide input through such an interactive approach. For this reason, the process by which Florida used to host this meeting will be described in detail for future replication.

A key success in this webinar process was the seamless presentation that transitioned between several different displays. The LAUNCH facilitator provided verbal cues to notify the TAT to switch from the informative PowerPoint slides, to a white board, and then to sharing the screen where the service provision matrices were updated in real-time. Webinar members were very cooperative and provided a plethora of feedback on the early childhood system. Many members shared resources and links in the electronic chat box to further the discussion and enhance the webinar outcomes. The flow of the webinar format consisted of providing a clear overview of objectives for the meeting, a summary of LAUNCH project related to the lens in which people were viewing the information presented, overview of the environmental scanning and strategic planning process, and then each core strategy was broken up into its own individual section for overview, discussion, input/feedback, updating matrices in spreadsheet, then documenting comments on the whiteboard. The webinar completed with next steps and an explanation of how the information will be collected, analyzed and disseminated. This meeting was followed up shortly after with an email of the documents for final input, a high-end overview of the webinar, thanking everyone for their time, and clearly identified next steps to move forward.

Along with this interactive webinar, efforts were made to continue communication via meetings, emails, and telephone conversations allowing for maximizing input from stakeholders. Each meeting was prefaced with a "save the date" e-mail followed by a summary describing the meeting, goals for the meeting, and worksheets to be reviewed and completed prior to the meeting to help efficiently facilitate meeting participation. Stakeholders were not only encouraged to complete and bring prepared discussion points to each meeting, but were supported in having one-on-one meetings prior to further explain directives and provide detailed input. All information gathered before the council meeting was presented to all stakeholders and taken into account when analyzing the environmental scan findings.

At the local level, one major success through the data collection and agency collaboration process was the commitment of JWB. JWB ensures positive development and well-being of all children and families in Pinellas County through prudent investment in community-based solutions that work. The mission of JWB is to support the healthy development of all children and their families in Pinellas County through advocacy, research, planning, training, communications, coordination of resources and funding. JWB is at the crux of innovative human services in Pinellas County. They are a front-runner for data driven practice and are a model for communities across the state for cooperative integration, data collection, and council development. LAUNCH will continue to lean on this strong support as the grant expands across the state.

Findings

The state council collaborated to review data regarding the state's early childhood services at the same time that the local council engaged in a similar process in conducting their own local data analysis. After an extensive review, the councils were able to dissect the parts of the service systems, at both the local and state levels, into the five related core strategy of service provisions. This concerted analysis led to a group discussion on the gaps in services, barriers to treatment, need for enhancing workforce development, policy regulation, and duplication of efforts as related to project LAUNCH's goals and sustainability. As a result, the environmental scan identified a number of issues facing the early childhood service system in Pinellas County and across the state. These finding will help to build the LAUNCH grant's strategic plan for sustainability and expansion. This section reviews these major themes that emerged from the environmental scan process.



Workforce Development

A well trained and diverse workforce is crucial in successful and effective implementation and sustainability of Project LAUNCH's goals. The environmental scan of both the state's and local early childhood system found strong examples of training related to children in the dependency system. What this scan also revealed were deficiencies in practice, policy, and training to support a diversified, well-rounded workforce in the early childhood system. All LAUNCH partners, at the local and state level, express a commitment and dedication to improving the workforce capacity in all service systems that interact with young children and their families. These partners have recognized gaps in workforce development that present pressing concerns for capacity building at all levels. Based on the data collected, the needs for workforce development are:

- Further analysis and review of training and supervision curriculum for home visiting staff;
- Training Early Head Start and Head Start providers center-based staff on the Florida Kindergarten Readiness Screen (FLKRS) and the Florida Assessments for Instruction in Reading (FAIR);
- Provide training and technical assistance to direct care staff in early childhood settings on the effects of system transitions, trauma, abuse, and neglect on children and the symptoms expressed due to these factors;
- Increasing Home Visiting and screening programs to promote effective training and support;
- Enhancing training and support services to include LAUNCH principles and values; and
- Identifying opportunities for expansion and replication in workforce development to ensure quality care in early childhood and reduce behavioral health disparities.

Based on the findings noted above, it is clear that training and support is critically needed to better strengthen families to support young children. The State's Child Welfare System has identified and addressed many of the behavioral health disparities for children and their families. This past work provides a strong foundation for replicating successful workforce training activities and opportunities for expansion. The Florida Department of Children and Families' Child Welfare Program Office (DCF-CW) has created a training series called, *Family-Centered Practice and Training Series Trainings*, which is directed at child protective investigators and case managers and reinforces that "teaming" activities can and should occur throughout the life of the child's and family's services and are not solely precipitated by major crisis events. In addition, the Integration of Services Training Series (ISTS), is offered. This week-long intensive training curriculum is built on the Family-Centered Practice Series and provides module specific instruction related to child welfare professionals working in partnership with medical/developmental, substance abuse, domestic violence, and mental health professionals. These essential teaming strategies can help to create an infrastructure for training core curricula for other agencies.

Another opportunity to address aspects of the training and workforce development issues is to build upon existing legislative mandates for training staff serving the child welfare population. Currently, statute requires staff working with the child welfare population to receive 48 hrs of in-service training every 3 years. Community-Based Care agencies and Sheriff's offices historically partner in communities to leverage resources and provide these required inservices based on their communities needs. In the future, agencies that share this crossover population can partner with theses Community-Based Care agencies and Sheriff's offices to enhance professional development.

Building on existing efforts is a great way to build capacity in a cost-effective, time efficient manner. The System of Care Strategic Plan and the Substance Abuse and Mental Health Program Office at the Department of Children and Families have spearheaded the movement towards a trauma-informed system of care. Many presentations and curriculums have been developed for multiple populations. Collaborations with these efforts will help to avoid duplication and create an easy forum for educating Florida's workforce on important topics related to trauma, child welfare, substance abuse, agency collaborations, and family engagement. Taking on an integrated approach will help strengthen all systems involved and ensure a more holistic effort that avoids silos.

The local environmental scan revealed inconsistent provider understanding of Medicaid billing and the distorted perception that funding is driving services. Training in Medicaid billing, family driven treatment, system of care values, and the importance of the impact of care-givers health and well-being on the wellness of the child may prove valuable for the local stakeholders. Many initiatives, such as the System of Care expansion, have led to implementation of such trainings related to these important parameters. LAUNCH will link with these initiatives to enhance training opportunities and leverage resources to enhance workforce capacity.

The environmental scan also identified some shining examples in the Pinellas County area with regard to professional development and training. The Crisis Center of Tampa Bay is a valuable local resource that has a team of trainers offering evidence-based training in trauma-related topics. Dr. Robert Macy and his team from the International Trauma Center have established a certification process for the cadre of trainers. Members of this group certified in Basic Trauma-Informed Care have developed material for training multiple disciplines and will make any adaptations needed for providers of young children exposed to prescription drug abuse and living in at-risk environments. This training will be expanded to the providers in the Lealman Corridor.

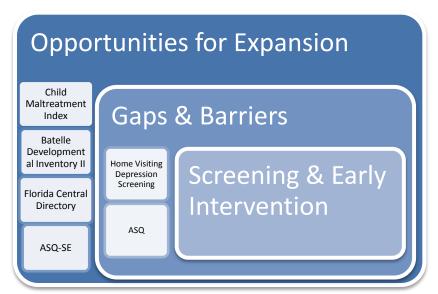
Screening/Early Intervention

Regular screenings are imperative in all service provision systems to enable earlier identification of mental health and substance use disorders, which translates into earlier care. Screenings should be provided to people of all ages to be of greatest effect in improving the health and wellness of Florida's young children and their families. Through the

environmental scan, LAUNCH's stakeholders identified barriers and gaps in services, opportunities for expansion, and duplication of efforts with regard to screening and early intervention services.

The state council and other stakeholders met to discuss screening and early intervention services around the State. Through this process of stakeholder engagement, it became quite evident that there was a great deal of passion and dedication from participants. Identifying this attitude of willingness and support is of great value in identifying next steps for the strategic plan and what players to involve. This impactful discussion helped to identify multiple gaps and barriers in the service delivery system that currently exist in Florida. The Maternal and Child Health needs assessment identified gaps in the home visiting curriculum related to addressing important risk factors related to pregnant and post partum women. From the findings, the need to strengthen the current curriculum to include depression screening and treatment follow-up as part of the home visiting program and begin including this into primary care services for this population was identified.

Another gap in care, identified by our environmental scan workgroup, relates to the screening instruments used by providers. The scan revealed that while the Ages and Stages Questionnaire (ASQ) is used by many of the early childhood partners, the ASQ-SE (Social Emotional) is only used in the most intensive programs. This social



questionnaire emotional advantageous to spread throughout the early childhood system to gain greater insight in the much needed social emotional state of children. This would lead to more effective early intervention care. Working with families and building rapport is crucial in the provision of effective treatment. Even in the earliest stages of care, while screening a child and his/her family, this facet is imperative to keep in mind. Sometimes in early childhood, parents ignore, deny, or just do not recognize that the behaviors of their children need special attention. Council members acknowledge the need to understand how difficult it is for parents to be truthful at times about their children's development or problems.

Discussion of the systems' gaps and barriers provided a natural transition into identifying opportunities to augment service provision and address the issues that affect young children and their families. One opportunity for expansion was found in the Child Welfare Program Office's Child Maltreatment Index. This index allows for an opportunity to identify needs in families and is given to all children in the child welfare system. This index can be expanded to create clear connections in communities for local support. Also, the Florida Central Directory is an excellent information and referral source for children age 0-3 with special needs and their families. Not only could this hotline be linked to the Child Maltreatment index, but it can also be included in short technical assistance papers for all professionals interacting with children ages 0-3 similar to primary care providers completing well-checks for the first years. Professionals identify that one of the major barriers to screening is the lack of referrals once the child is identified at-risk. Creating technical assistance papers helps to provide support for these professionals and addresses their barriers to screening.

Through the environmental scan, the Battelle Developmental Inventory-II (second edition) was also identified as another opportunity to expand to measure outcomes for children. Currently, the Early Steps state office uses this indicator for their child outcomes. The benefit of this tool is that it has multiple domains including a social emotional section. Stakeholders envision expanding this screening for other early childhood programs and agencies to ensure the use of a universal measure.

The ASQ was prominent in our discussion of collaborative efforts and expansion of current screenings. The group identified that the ASQ was being used by multiple agencies to track progress of clients. Many concerns and questions arose from this discussion including possible duplication of efforts. Parents will complete the survey multiple times for different providers to meet the provider's need. Often since services begin around the same time, the parent will complete the same questionnaire multiple times in a given month. The questionnaire has been tested and is valid and reliable and therefore does not require the parent to complete on multiple occasions in the same timeframe. Further discussion is needed to determine:

- Whether or not there is duplication of effort;
- How screening information can be shared among programs; and
- How each program is using the information they are receiving.

The local environmental scan revealed that 48% of children in the Lealman Corridor are not ready for school when they enter kindergarten compared to only 34% of the county's children. Also, for several years, the Lealman Corridor has exceeded local capacity for their area daycare needs and children continue to be placed on a waiting list for services. It is important to ascertain the curriculum of the daycare centers and their screening standards to further develop a correlation between the lack of school readiness and the quality or quantity of daycare providers.

One way this gap is beginning to be addressed in this area is through the Early Learning Coalition (ELC). The ELC is providing developmental screenings free of charge to those living within Pinellas County. These screenings and intervention target families of children who are not in child care. Through these screenings and assessments parents

can consult with a therapist and developmental specialist about their concerns with the child's development.

Another positive use of screening in the local area is through the Federally Qualified Health Center (FQHC) in Pinellas County; the Community Health Center of Pinellas County (CHCP) is using the Screening Brief Intervention Referral to Treatment (SBIRT), which is a screening tool that identifies people who are at high risk for substance misuse. Once identified, referrals are made to the proper substance abuse providers for intervention and treatment as necessary. These current screenings will be evaluated further to find opportunities for



expansion and sharing of information to help in transition, continuity of care, and supporting families moving through a complex system.

Substance Abuse

Family and environmental risk factors can make children more vulnerable to social, emotional, and behavioral problems. Young children of parents with mental illness and/or substance use disorders are at greater risk for developing social, emotional, and behavioral disorders. For children with parents with substance abuse disorders, parental treatment of the disorder, coupled with enhanced parenting, can reduce the risk for the child and serve as a preventative factor. The council and stakeholders identified one of the major gaps in early childhood care is the lack of training on and integration with substance abuse prevention, treatment, and the effects of substance use in parents

on the developing child. This lack of training was seen as a theme throughout the discussion of the substance abuse strategy matrix.

The council disclosed a need for a technical assistance and training series on substance abuse related to signs, symptoms, referral, cultural consideration, and trauma for the early childhood services workforce. The Screening, Brief Intervention, and Referral to Treatment (SBIRT) Program was funded by both the Department of Health and Department of Children and Families in areas across the state. This program continues to be utilized in the FQHC, including the FQHC in Pinellas County that is linked with the Project LAUNCH Program. Council members can look for the possibility of offering this training to direct care providers and supervisors outside of the FQHC to expand its service provision.

Another opportunity to expand current integration efforts is to review the current Healthy Families model of adding Family Specialists to their home visiting curriculum for families who have high risk factors including those at-risk of and currently abusing substances. The Healthy Families High Risk Pilot adds Family Specialists, who are licensed clinicians, to the Healthy Families core staffing in six Healthy Families Florida sites. The role of the Family Specialist is to support the Healthy Families home visitor to better serve families who have a history or who are experiencing Substance Abuse, Mental Health issues and Domestic Violence by providing in-home therapeutic counseling. Historically, many Healthy Families participants have refused counseling referrals to an outside provider, but when referred to a licensed clinician who can provide counseling in the privacy of their homes and who is a co-worker of the home visitor whom the families trust, they are more likely to accept these services. This approach has improved referral acceptance and worked to reduce the stigma of accepting a referral for these services. The High Risk Pilot is funded through June 30, 2013, unless additional funds are identified to sustain the project.

Lealman Corridor has a high incidence of substance abuse and mental health disorders. Data analysis of this area identified a major gap in services for substance abuse and mental health treatment. Only half the people identified as requesting services were able to receive treatment. Although there are providers serving the area, it is not enough to meet the community's needs. Often treatment is not linear; the citizens have compounding health concerns related to substance use, mental health, and health care treatment. Although the Federally Qualified Health Centers use screening techniques and some level of case management to link clients with additional health care services, families identify transportation as a major barrier to treatment. In addition, LAUNCH stakeholders identify lack of continuity of care and collaboration between agencies as a major barrier to quality, family-driven care. LAUNCH will continue to look at ways to collaborate between providers and agencies to help fill these gaps.

The local community is fortunate to have a program that is nationally recognized for its excellence in bringing research to practice in their area. Operation PAR's substance abuse treatment program has been putting Florida's families first for more than 37 years. It is widely recognized on a national and international basis for its research initiatives funded by the Center for Substance Abuse Treatment and the National Institute of Drug Abuse. In addition to their award winning substance abuse treatment, Operation PAR addresses child development needs through the Nurturing Parenting Program. The program focuses on parents and children and is designed to build self awareness, positive concepts/self esteem and levels of empathy. It also encourages alternate methods of discipline rather than hitting and yelling, which can be detrimental to a child's development. Over time, Operation Par hopes to enhance family communication and awareness of needs, replace abusive behaviors with nurturing behaviors and to promote healthy physical and emotional development by teaching appropriate roles and developmental expectations.

Engaging and Supporting Families

Families play a critical role in understanding the young childhood service system. The State of Florida is very cognizant of this important premise and has responded with multiple programs to engage families and build on collaborative efforts with families. One of the major goals in Florida's Project LAUNCH initiative is to ensure advocacy and meaningful engagement of families at all levels of services provision. The State Young Child Wellness Council and environmental scan stakeholders problem-solved gaps in engaging families and identified multiple programs currently engaging families and opportunities to expand across domains.

There appears to be a need for a greater emphasis on providing parents with information to support their role as a parent to prevent child maltreatment and neglect. The Department of Health, who conducted the needs assessment, identified Child Maltreatment and Neglect as a concern that needed special focus and attention; their capacity to address this through the Department of Health Divisions of Children's Medical Services and Family Health and the Office of Injury Prevention. These programs provide public awareness and educational information on several topics that are associated with infant abuse and neglect: Safe Sleep for Infants; Shaken Baby Syndrome/Abusive Head Trauma; and Drowning Prevention. There still appears to be a need for a greater emphasis on providing parents with



information to support their role as a parent to prevent child maltreatment and neglect. Project LAUNCH Initiative will outreach these program offices to engage in braided funding, or provide clinical content expertise to expand and create additional flyers to address the specific needs related to child maltreatment and neglect and Project LAUNCH's goals.

Another gap in services is related to the Home Visiting Programs which stop at age 3. Only one of these programs run until the child is the age of 5, and only if the child is still in need of services. This may be due to the critical importance of the parent child relationship in the early years and after age 3 the child will gain more independence and be able to go outside the home for support and care. The council will need to analyze this further to determine if the need should be addressed as strategic planning moves forward.

While looking at the gaps in services, team members quickly began identifying current service provision successes and potential for expansion in other domains. The Individualized Family Support Plan (IFSP) is a collaboration between DOH-Early Steps and DCF-Child Welfare and is intended to ensure that all eligible children and their families have a plan of supports and services that is based on shared assessment of information and knowledge. This plan meets the unique needs of each child and family, and is developed in an open forum that supports the collaborative partnership between parents and professionals. This model is seen throughout the state in different programs and agencies. It would be advantageous to review all of the family engagement programs similar to this to identify successes and barriers and create a training model and manual for family engagement.



Another past attempt in engaging families was a partnership between Healthy Families and Prevent Child Abuse Florida. This parent leadership training was rolled out twice. It focused on public awareness and educational information on several topics related to infant abuse and neglect. This project was successful in its goals but lacked in its efforts to sustain. The council can draw upon the curriculum to build on its family engagement piece and begin to create sustainable strategies beyond its inception period.

A review of the local area found no grocery stores within a reasonable distance for families with limited financial capacities and difficulties with transportation to access. A nickname for Lealman was identified at a local human services consortium as the "beef jerky zone" because of their dependence on

convenience stores for their primary food consumption. This awareness has brought a greater understanding to this impoverished area to help identify ways in which Lealman residents can obtain their basic needs before they can even begin to address alternate levels of Maslow's hierarchy of need.

Another important facet of the local scan was the lack in advocacy and support for families. Many consumers sit on boards at local providers, but few were able to be engaged easily when discussing the early childhood system. The state scan, as well as the local, identified unique challenges to engaging families to advocate for the early childhood system. Families report:

- Feeling overwhelmed with being pushed into a system without prior preparation or support;
- Lack of understanding of the exact needs from the system; time constraints in ability to meet inside working business hours; and
- Training on advocating and speaking out for important issues.

The stakeholders will look at linking with the System of Care Expansion Grant to provide trainings and toolkits for family engagement.

Although there is much progress to be made, the local providers are engaging families through programs that foster support. The families are engaged by having access to parent educators who come out to homes to promote school readiness and also address the needs of families with substance use concerns. They engage families by supporting a lifestyle of positive change. Operation PAR engages parents with their family intervention service program, which encourages families who are involved with child welfare due to substance misuse, to seek appropriate substance abuse treatment. They also provide other resources like bus fare. Community Health Centers engage families by providing health care free of charge at their facility if necessary. Community health gives support to the community not only by having a sliding fee scale for doctor's appointments but they also have worked to integrate behavioral health into their line-up of services.

Agency Collaborative

A multi-agency collaborative partnership contributes immensely to improving the learning and well-being outcomes of young people and their families. The state council has worked well in its early stages to inform the environmental scan and draw conclusions on current service provision and ways to improve the system for young children and their families. The state of Florida is very passionate about their children and ensuring health, wellness, and every opportunity possible for every child to succeed. Looking into the statutory regulations, state councils, and current interagency meetings/agreements the following gaps in services and duplication of efforts were identified:

- Identifying key trends and barriers to successful collaborations between Head Start/Early Head Start and Early Learning Coalitions;
- Identifying strategies to overcome barriers to successful collaborations as the initiative moves forward;
- Duplication of screening tools should be analyzed further to identify strategies to reduce this;
- Strong collaborations and workgroups are needed to specifically address crossover children to provide continuity as children age out of one service provision to the next;
- Primary health and behavioral health systems are often disjointed. Both systems can be engaged through their service provision to include a universal health approach;
- Many of the concerns are that the programs are not state-wide; program availability may vary geographically. As expansion begins across the state, it is imperative to look into expanding service capacity to rural areas; and
- Kid Care, the State Insurance Office, limits services; may not be able to get more than 6 services for the year. Primary Care reimbursement needs to be looked at and updated for special need services.

The local environmental scan found extensive participation in agency collaboration. One unique collaborative in Pinellas County is the administrative forum. This forum allows agencies and important personnel within the county to work collaboratively to identify the needs of the community and how to bridge the gaps in services and decrease duplication of services. The forum is made up of collaboration of city officials and agency directors that meet regularly to identify the needs in Pinellas County, with one of the focuses on the Lealman Community. This forum will continue to serve as a model for state expansion in local collaborative efforts.

Summary

The Council's wide-reaching experience in early childhood development is a great asset to Florida's Project LAUNCH. They have been able to give a clear snap-shot of the early childhood system and have identified multiple points to begin improving the early childhood system through prevention and early intervention efforts. These gaps, barriers, opportunities for expansion, and duplication of efforts will all continue to be looked at as we move forward with our strategic planning. Workgroups will be developed as needed to investigate these findings further and create clear understandings of strategies to promote young child wellness. The local young child wellness council will continue to move forward and will expand their representation to reflect the community stakeholders for families of young children. The state council will remain supportive and constructive in guiding local implementation. Together the state and local LAUNCH initiatives will persist in continuous improvement. This cycle involves identifying needs, followed by analyzing gaps, barriers, successes, system issues, and policy to reflect said need. As stated previously, this fluid document is a snapshot of the current early childhood system and will be continually reviewed and updated alongside the strategic plan for the purpose of promoting the health and wellness of Florida's young children and their families.

Appendix A: Environmental Scan Data **State Early Childhood Partners**

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Services Funded	Early Childhood System Partner	Population Served	Goals
School Readiness	Department of Health-Head Start	Children 3 to 5 from low income families	A comprehensive education, health, nutrition, and parent involvement services -supports and improves collaboration between Head Start and other providers of educational, medical, and social services in Floridahelps ensure a unified early care and education system.
Early, Continuous, Intensive and Comprehensive Child Development and Family Support Services	Department of Health-Early Head Start	Children Birth to 3 from low income families	Enhance children's physical, social, emotional, and intellectual development; to support parents' efforts to fulfill their parental roles; and to help parents move toward self-sufficiency
Florida Race to the Top	Department of Education	School Aged Children	A student-centered school environment where all teachers are engaged in peer collaboration, use data to improve teaching and learning, and are consistently guided and supported by effective instructional leaders
Early Childhood Care, Nurturing relationships, quality early childhood education	Florida State University Center for Prevention and Early Intervention	Vulnerable infants and toddlers	To implement and investigate what interventions are most effective, translate the related research findings into public policy and programs, and evaluating the impact on children, families and communities
Bureau of Exceptional Education for Students	Department of Education	Students ages 3 - 21 who have disabilities and students who are gifted	Supports school districts and others in their efforts to provide exceptional student education programs
Child Care Licensing	Department of Children and Families	Florida's child care facilities, specialized child care facilities for the care of mildly ill children, large family child care homes and licensure or registration of family day care homes	Ensure a healthy and safe environment for the children in child care settings and to improve the quality of their care through regulation and consultation
Enhancing School Readiness	Office of Early Learning	All children in VPK programs and all children entering into Kindergarten will be administered a school readiness assessment	Provides final approval and an annual review of coalitions and plans; safeguarding the effective use of federal, state, local, and private resources to achieve the highest possible level of school readiness for the state's children; adopting a system for measuring school readiness that provides objective data regarding the expectations for school readiness and can be used to assist in determining program effectiveness; developing and adopting performance standards and outcome measures and preparing a plan for measuring school readiness which includes a uniform screening that will provide objective data regarding expectations for school readiness

Mental Health Consultation cont.						
Services Funded	Early Childhood System Partner	Population Served	Goals			
Children's Mental Health	Department of Children and Families- Substance Abuse and Mental Health Program Office	Children Birth to age 18	Provides funding for in-home and community based outpatient services, crisis services and residential treatment, including psychiatric residential treatment facilities, Therapeutic Foster Care and Therapeutic Group Homes provided through joint Medicaid and Mental Health Program contracts with behavioral health managed entities and providers. The program also provides coordination and management of the Juvenile Incompetent to Proceed (JITP) program. These services are designed to build resilience and to prevent, severity, duration and disabling aspects of children's mental and emotional disorders.			
SEDNET	Department of Education	Children in Public Schools with mental, emotional and behavioral problems, and their families	Works with education, mental health, child welfare, and juvenile justice professionals; along with other agencies and families, to ensure access to the services and supports needed to succeed			
Infant Mental Health Program	Agency for Health Care Administration	Children 0-3	Training and infant mental health services through fee-for service or Medicaid managed care plan			
Early, Continuous, Intensive and Comprehensive Child Development and Family Support Services	Health Families	New and expectant parents with child under the age of 3 months up to the child turns 5 based on the needs of the families	Promote the use of positive a parenting skill that support and encourage a child's cognitive and social development across developmental stages and connects them to family supports in the community then need beyond the home visiting services.			

Home Visiting						
Services Funded	Early Childhood System Partner	Population Served	Goals	Funding Amount and Source		
Home Visiting	Florida State University Center for Prevention and Early Intervention	Vulnerable infants and toddlers	To implement and investigate what interventions are most effective, translate the related research findings into public policy and programs, and evaluating the impact on children, families and communities	Totally funded through grants and contracts with a current annual budget of approximately four million dollars.		
Home Visiting	DOH-Healthy Start	All Florida's pregnant women and newborn infants	To identify those at risk of poor birth, health and developmental outcomes and provide targeted supports	State funds- \$468,857.01		
Home Visiting	DCF-Healthy Families Florida	New and Expectant Parents and Parents with children under 3 months of age who are assessed as having multiple research-based risk factors that place their children at risk of abuse and neglect and other poor outcomes	Nationally accredited, evidence-based home visiting program that is proven to prevent child abuse and neglect in high risk families	\$18.1 million in state and federal funds; over \$12 million in local cash and in- kind contributions		

Family Strengthening and Parent Skills Training					
Services Funded	Early Childhood System Partner	Population Served	Goals		
Florida's Central Directory	Early Steps	Families of children with disabilities and special health care needs	Provides information and referral services. Resource specialists provide answers and/or possible choices of services within the community, education on disability related services and provides advocacy roles for families		
The Florida State University (FSU) Institute for Family Violence Studies, Clearinghouse on Supervised Visitation	Collaboration between DCF-Child welfare and FSU	Children and families in child welfare system undergoing supervised visitation services	Provides technical support, training, and expertise for supervised visitation programs, maintaining regular communication and networking with program directors, other agencies, and interested parties to help ensure the safety of children and their families during the supervised visitation process.		
Early Steps	DOH- Children's Medical Services	Families of children with disabilities and special health care needs	Florida's Early Steps is a partnership with providers and families to deliver services that support children's well-being and development where they live, learn and play		
Child Protection and Support	DOH-Children Medical Services	For families seeking information about parenting, family care and support, and overall well-being of your child.	Medically directed, multidisciplinary statewide program designed to supplement the child protective investigation activities of local Sheriff's offices and the Department of Children and Family Services in complex cases of child abuse and neglect.		
Mom Care	DOH-Healthy Start	Pregnant Women enrolled in Medicaid	Provides information, referral and assistance for pregnant women covered by Medicaid. A maternity care advisor will ensure women have a prenatal care doctor, are enrolled in the WIC program and are screened for Healthy Start risk factors		
Temporary Assistance for Needy Families (TANF)	Department of Children and Families	To be eligible, families must meet both financial and non-financial requirements established in state law. In general, families must include a child (or a pregnant woman) and be residents of Florida. Children under age 5 must be current with childhood immunizations and children age 6 to 18 must attend school and parents or caretakers must participate in school conferences. Countable assets must be \$2,000 or less and licensed vehicles needed for individuals subject to the work requirement may not exceed \$8,500.	Block grant program to help move recipients into work and turn welfare into a program of temporary assistance. Grant that provides States, Territories, and Tribes Federal funds each year. These funds cover benefits and services targeted to needy families.		
Child Support Enforcement	Department of Revenue	Department staff provide child support services in all but two Florida counties; Miami-Dade County & Manatee County	The services we provide include: •Proving paternity •Getting child support orders •Enforcing child support orders •Changing child support orders		
Florida Developmental Disabilities Council	Agency for Persons with Disabilities	Individuals with developmental disabilities	To advocate and promote meaningful participation in all aspects of life for Floridians with developmental disabilities		
Office of Family Safety	Department of Children and Families, Office of Child Welfare and Community Based Care	All children in Florida who may be victims of abuse and/or neglect and children in foster care to ensure adoptions	Responsible for policy development and oversight of child protection. They offer primary, secondary, and tertiary prevention programs and services. Specialists coordinate efforts with providers, communities, and state and local leaders and advocates		
System of Care Expansion Grant	Department of Children and Families, Substance Abuse and Mental Health Program Office	Children diagnosed with Seriously Emotionally Disturbed and their families	To create a system of care that is: family-driven; youth-guided; community-based; and culturally and linguistically competent.		

Screening and Assessment					
Services Funded	Early Childhood System Partner	Population Served	Goals		
Child Maltreatment Index	Department of Children and Families- Child Welfare	Any child or family alleged to be abused or neglected	Provides for clearer definitions of maltreatment types, examples of assessment factors and types of evidence and documentation recommended to provide a verified finding of abuse and neglect and, ultimately, more consistent application.		
Universal Risk Screening	DOH-Healthy Start, Healthy Families	All Florida's pregnant women and newborn infants to identify those at risk of poor birth, health and developmental outcomes	To identify those at risk of poor birth, health and developmental outcomes and provide targeted supports		
Universal Screening	Office of Early Learning	Child Birth to age 3	Provides final approval and an annual review of coalitions and plans; safeguarding the effective use of federal, state, local, and private resources to achieve the highest possible level of school readiness for the state's children; adopting a system for measuring school readiness that provides objective data regarding the expectations for school readiness and can be used to assist in determining program effectiveness; developing and adopting performance standards and outcome measures and preparing a plan for measuring school readiness which includes a uniform screening that will provide objective data regarding expectations for school readiness		
ASQ-#, and ASQ-SE	Health Families Florida	All target and non-target children enrolled in the program	Screen to determine potential eligibility, risk of abuse and neglect, and need for further assessment		

Services Funded	Early Childhood System Partner	Population Served	Goals
Prevention Services	Department of Children and Families Substance Abuse and Mental Health Program Office	 Adults who have substance abuse disorders and a history of intravenous drug use. Persons diagnosed as having co-occurring substance abuse and mental health disorders. 	Educate and counsel individuals on substance abuse and provide for activities to reduce the of substance abuse
Detoxification Services		 Parents who put children at risk due to a substance abuse disorder. Persons who have a substance abuse disorder and have been ordered by the court 	The administrative oversight responsibilities of the Substance Abuse Program at the state an circuit levels include the development and management of service provision through
Treatment Services		to receive treatment. 5. Children at risk for initiating drug use. 6. Children under state supervision. 7. Children who have a substance abuse disorder but who are not under the supervision	contracts with community-based providers, issuance and monitoring of licenses for substabuse providers, planning and policy development, and budget allocation and management
Licensing		of a court or in the custody of a state agency. 8. Persons identified as being part of a priority population as a condition for receiving services funded through the Center for Mental Health Services and Substance Abuse Prevention and Treatment Block Grants.	
Prevention Services	Health Families Florida	New and Expectant Parents and Parents with children under 3 months of age who are assessed as having multiple research-based risk factors that place their children at risk of abuse and neglect and other poor outcomes	Address risk factors like current or past experience of substance abuse that places the child at risk of abuse, neglect, and/or other proutcomes

Integration of behavioral health and primary care					
Services Funded	Program	Population Served	Goals		
Health Services	DOH- Children's Medical Services	Eligible infants, children, adolescents, and young adults who have on-going physical or behavioral conditions	Family-centered, comprehensive, coordinated statewide managed system of care that links community-based health care with multidisciplinary, regional, and tertiary pediatric care. Provides a medical home for children with special health care needs, including essential preventive, evaluative, and early intervention services		
Florida Right From the Start	DOH- Adolescent, Infant and Maternal Health	Expecting Mothers	Created to help moms-to-be with basic information about pre-, post-, and during pregnancy health -Provides local resources for each county in FL		
Pregnancy & Newborn Health Education Center	March of Dimes	Pregnant Women	Nonprofit organization that helps moms have full-term pregnancies and researches the problems that threaten the health of babies		
Women Infant Children (WIC)	Department of Health	Pregnant Women and Women with children	Nutrition program for Women, Infants, and Children. WIC provides the following at no cost: healthy foods, nutrition education and counseling, breastfeeding support, and referrals for health care		
Every Woman Florida	Department of Health	Pregnant Women and Women of child- bearing age	Provides resources for infants, maternal, and reproductive health		
Kid Care	Department of Children and Families in collaboration with Agency for Health Care Administration, Health Kids Corporation and Department of Health	Children from birth through age 18, even if one or both parents are working	State of Florida's high-quality, low-cost health insurance for children		
Health Care Services	Florida Pediatric Society	Newborns, infants, children, adolescents and young adults	Promote the health and welfare of Florida's children (newborns, infants, children, adolescents and young adults), and support pediatricians and pediatric specialists as the best qualified provider of their healthcare		
ECCS	Department of Health- Maternal and Child Health Unit	Young Children ages 0-5	Implementation of a statewide early childhood system that promotes the health and well being of young children in Florida, supporting their health, education and social emotional development, and getting them prepared to enter school able to learn		
Florida Healthy Kids Program	Florida Healthy Kids	Children ages 5 through 18	Administers the Florida Healthy Kids program, determines eligibility for non-Medicaid parts of the program, collects monthly premiums, and manages the Florida Kid Care customer call center		

Appendix A: Environmental Scan Data Local Early Childhood Partners

	Family Support and Parenting Education						
Organization	Service Provided	Population Served	Goals	Funding Amount and Source			
Healthy Start Coalition	Parents as Teachers Plus= Home visiting parent education	Pregnant Woman or family with children from 0-3 year old that misuse drugs	To increase mother and child bonding and relationship; teach parent to identify and address developmental milestones and delays; prepare child to excel in school; reduce mothers and other family members substance abuse	HRSA, MIECHV; HSC GR			
Child Protection Services	Child Protection Investigations	All	Assess child abuse, neglect, and abandonment	Dept. of Children and Families- \$10,250,000.00			
DOH Nurse Family Partnership Program	Evidence Based Home Visiting by Nurses	125 Pregnant mothers and their children up to age 2	Helps transform the lives of vulnerable mothers pregnant with their first child. Improved pregnancy outcomes. Improved child health and development. Improved economic selfsufficiency.	\$536,000 annually.			
Pinellas County Health Department: Healthy	Screening and Assessment: In FY 2011/12 (ending 9/30/2012), Healthy Families provided screening and assessment to more than 8,000 Pinellas County births.	Pregnant women identified through the Healthy Start Prenatal Risk Screen and women delivering a baby considered high risk for child abuse and neglect.	Goal of screening was to identify target population for program referrals for home visiting program.	Total program funding is \$6,369,474			
Families Pinellas	Parenting Education and Family Support	Parents identified through the Healthy Families Florida Assessment Tool as being high risk for child abuse/neglect.	Increased knowledge of parenting and child development, children fully immunized by 24 months, goal setting with Family Support Plan, Increasing self-sufficiency through education and employment, father services, family planning, ensuring all parents and children have a medical home, promoting bonding and attachment, developmental screening and linking families to needed community services (based on comprehensive needs assessment).	84% of total program funding (approximately \$5,350,000 annually).			
Pinellas County Health Department: St. Petersburg Healthy Start Federal Project	Outreach and Recruitment, Case Management including Father Services (Home Visiting), Parenting Education using Parents as Teachers, Depression Screening and Referral, Interconceptional Care Education, Health Education, CREED Consortium. The Parents as Teachers Curriculum is used during case management when mothers agree to extended services. Currently there are 5 clients being served with PAT.	African American Women of childbearing age, infants 0-2, fathers living in zip codes 33705, 33711, 33712, 33713.	Reduce Infant Mortality Rate in Project Area	1.1 million dollars			

Early care and education						
Organization	Service Provided	Population Served	Goals	Funding Amount and Source		
	Screening, Intervention, Professional Development, Provider Services, Resource & Referral	Low-income, TANF, At- Risk (PS)				
Early Learning Coalition	VPK	440	School Readiness	30 mil +		

Primary care						
Organization	Organization Service Provided		Goals	Funding Amount and Source		
Community Health Centers of Pinellas	Physician and ARNP Healthcare		To provide quality health care			
	Dental	All		HRSA- Federal 1.2 million, Patient Revenue, Insurance		
	Pharmacy					

Organization	Partnership Collaborations	Project Collaborating On	Population Served	Have an MOU
Community Health Centers of Pinellas County	Suncoast Center	Integration of Primary Care and Behavioral Health	All	Yes
	Healthy Start	Care Coordination for Pregnant Woman	Pregnant Population	Yes
	Bayfront and Baycare	ER Diversion move patients into a medical home reduce ER use	All	Yes
Healthy Start Coalition	Juvenile Welfare Board	Provides 25 day care slots and access to family services initiative pool	All PAT+ clients are eligible	Yes
	R'club	Participate in the home visiting committee (HIPPV)	Service Coordination that affects all eligible families	Yes
	Pinellas County Health Department	Provide referrals, screening and access to HMS to ensure no duplication of services	All pregnant woman and families with children 0-3	Yes
	Operation Par	Work together to ensure parents who need treatment have access working on improved communication.	Woman with substance abuse issues	Yes
Early	Juvenile Welfare Board	Program Evaluation	Birth-5 Data Study	Yes
	Juvenile Welfare Board	Safety Net Services	0-5	Yes
	Lew Williams Project	Development of model school		No
01.11.1	Community Action Steps Abuse (CASA)	Assist Domestic Violence Victims		Yes
Child Protection	Early Learning Coalition	Day Care Assistance		no
Services	Direction for Living	Diversion Services		
JCI VICCS	Eckerd Community Alternatives	CBC/Case management		Yes
	All Children's Hospital	Co-located investigator		Yes
Family Partnership Program	Home Visiting Advisory Committee coordinated by the Healthy Start Coalition of Pinellas	Represents home visiting programs in Pinellas County for age 0-5.	Ages 0-5	no
	Directions for Mental Health	Mental Health Counseling	Mothers served in NFP	no
	Suncoast Mental Health	Mental Health Counseling	Mothers served in NFP	no
	JWB Quality Early Learning Initiative	Child Care extending from 0-kindergarten	0-2	no
Pinellas County Health Department: Healthy Families	Home Visiting Advisory Committee coordinated by the Healthy Start Coalition of Pinellas	Represents home visiting programs in Pinellas County for age 0-5.	Ages 0-5	no
	Suncoast Center	Mental Health Counseling	Families served in HF Pinellas	Contract
	JWB Quality Early Learning Initiative	Child Care extending from 0-kindergarten	0-2	no
	CASA	Shelter for abuse women	Mothers served in HF Pinellas	Yes

Organization	Partnership Collaborations	Project Collaborating On	Population Served	Have an MOU
Pinellas County Health Department: Healthy Families Pinellas	Morton Plant Mease Health Care	Screening & Assessment for Eligibility	Pregnant women giving birth who are assessed as being "high risk" for child abuse/neglect	Contract
	Bayfront Medical Center	Screening & Assessment for Eligibility	Pregnant women giving birth who are assessed as being "high risk" for child abuse/neglect	Contract
	The Haven of RCS	Shelter for abuse women	Mothers served in HF Pinellas	Yes
Pinellas County Health Department: St. Petersburg Healthy Start Federal Project	Home Visiting Advisory Committee coordinated by the Healthy Start Coalition of Pinellas	Represents home visiting programs in Pinellas County for age 0-5.	Ages 0-5	no
	Collaborative partnership through contracts with All Children's Hospital, Bayfront Medical Center, Healthy Start Coalition of Pinellas, and Infinite Solutions.	Social Worker in Hospital, Community Services Team (Health Education, Outreach, and Consortium), FIMR reviews, Project Consultation	High risk pregnant women, interconceptional women ages 15-44), fathers, infants 0-2	yes
Florida Department of Health	Collaborating with Pinellas County, Action Learning Collaborative, the Association of Maternal and Child Health Programs (AMCHP), CitiMatCH, and the Pinellas County Healthy Start Coalition in a project examining the relationship between racism and racial disparities in the delivery of health care services.	Examining the relationship between racism and racial disparities in the delivery of health care services.	ALL	