

1 A bill to be entitled
2 An act relating to children and families;
3 creating s. 383.145, F.S.; creating the Healthy
4 Families Florida program; providing legislative
5 findings and intent; providing purpose;
6 requiring integrated community-based delivery
7 of services; specifying program requirements;
8 providing responsibilities of the Department of
9 Health and the Department of Children and
10 Family Services; providing for development,
11 implementation, and administration of the
12 program; specifying criteria for community
13 program grant funding; requiring collaboration
14 with existing community boards, coalitions,
15 providers, and planning groups; authorizing
16 contracts for training and evaluation;
17 providing for quality assurance; establishing
18 the Healthy Families Florida Advisory
19 Committee; providing for application for a
20 federal waiver; providing appropriations;
21 providing an effective date.

22
23 Be It Enacted by the Legislature of the State of Florida:

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25 Section 1. Section 383.145, Florida Statutes, is
26 created to read:

27 383.145 The Healthy Families Florida program.--There
28 is created within available resources the Healthy Families
29 Florida program, a voluntary program for newborn children and
30 their families.

31 (1) LEGISLATIVE FINDINGS AND INTENT.--

1 (a) The Legislature finds that family well-being is
2 critical to a child's health and development. Research has
3 shown that comprehensive early home visitation programs
4 prevent child abuse, help develop positive parent-child
5 interactions, and help avoid future social problems. In
6 addition to addressing child abuse, such programs help to
7 ensure that families' social and medical needs are met and
8 that children are ready for success in school. The Legislature
9 finds that Florida needs broad implementation of such a
10 program to help identify families who need and desire
11 assistance in establishing healthy relationships and
12 environments for their children.

13 (b) It is the intent of the Legislature to establish
14 the Healthy Families Florida program as a collaborative effort
15 that builds on existing community-based home visiting and
16 family support resources and will not duplicate the existing
17 services. It is the further intent of the Legislature that
18 the program provide the needed intensity and duration of
19 services that extend beyond those available through Florida's
20 Healthy Start initiative. By creating a Healthy Families
21 Florida program, a major gap in the existing continuum of
22 early childhood prevention and assistance services will be
23 filled.

24 (2) PURPOSE.--The purpose of the program is to
25 strengthen families; promote healthy childhood growth and
26 development; improve childhood immunization rates and
27 well-child care; improve child health outcomes; improve school
28 readiness; increase family self-sufficiency; increase the
29 involvement of both parents with their children; and reduce
30 the incidence of child abuse and neglect through a primary
31 prevention approach that offers home visits and linkages to

1 family supports for families and their newborn children and
2 continues until the children reach 5 years of age.

3 (3) DELIVERY OF SERVICES.--Service delivery under the
4 program shall be community-based and collaborative. Program
5 services shall be integrated and coordinated with services
6 provided under Florida's Healthy Start program and other home
7 visiting and family support service delivery systems currently
8 in place in Florida communities. Services shall be offered
9 with the intensity and duration required to prevent child
10 abuse and neglect and to improve child development and child
11 health outcomes. The following disclaimer shall be presented
12 verbally and in writing at the initial contact with the
13 parent, which may occur before or after the birth of a child:
14 "Participation in the initial interview and assessment process
15 and all services provided through the Healthy Families Florida
16 program is voluntary. You have the right not to answer any
17 questions asked during the assessment process and the right to
18 decline to participate in the program at any time."

19 (4) PROGRAM REQUIREMENTS.--The program shall provide
20 for intensive home visits and include the following critical
21 elements:

22 (a) Initiation of services. This element provides for:

23 1. Initiation of services prenatally or at birth.
24 2. Use of a standardized assessment tool to
25 systematically identify those families most in need of
26 services. Under no circumstances shall an assessment tool use
27 the fact that a person has been spanked or has spanked a child
28 as an indicator of a need for services unless such spanking
29 constitutes harm as defined in s. 415.503(9).

30 3. Offering services on a voluntary basis and using
31 outreach efforts to build family trust.

1 4. Working with family members to identify strengths
2 and resources that can be mobilized to help resolve identified
3 family concerns.

4 (b) Service content. This element provides for:

5 1. Offering services over the long term and
6 intensively, with well-defined criteria for increasing or
7 decreasing the intensity of the service.

8 2. Providing services that are sensitive and
9 appropriate and that respect the cultural differences among
10 participants.

11 3. Providing services that focus on supporting parents
12 and families, encouraging the interaction of both parents with
13 their children, and enhancing the development of all children
14 in the family, including reading skills and school readiness.

15 4. Linking families to medical providers to ensure
16 optimal health and development of the children; timely
17 childhood immunizations; well-child care that provides for
18 developmental assessment and is consistent with the standards
19 and periodicity schedules of Medicaid and the American Academy
20 of Pediatrics; and additional services, as needed. Children
21 who are eligible for Medicaid shall be referred for Early
22 Periodic Screening, Diagnosis, and Treatment (EPSDT) services.

23 5. Providing families the opportunity to create
24 neighborhood support systems to address mutual concerns and
25 solve problems without external resources.

26 6. Incorporating specialized services to accommodate
27 the needs of families with substance abuse problems. Staff
28 trained in providing substance abuse services will work with
29 these families to meet their unique needs. Linkages will be
30 developed with existing community-based, substance-abuse
31 services.

1 (c) Selection and training of service providers. This
2 element provides for:

3 1. Weighted caseloads of not greater than 25:1 overall
4 and 15:1 for intensive services for staff providing home
5 visits. The establishment of weighted caseloads may take into
6 consideration the Healthy Families America model.

7 2. Selecting home visit providers based on the
8 provider's interpersonal skills; knowledge of community
9 resources; willingness to work with, or experience working
10 with, culturally diverse communities and families; and job
11 skills.

12 3. Ensuring that home visit providers have basic
13 training in areas including, but not limited to: cultural
14 competency, substance abuse, reporting child abuse, domestic
15 violence, drug-exposed infants, child development, services
16 available in the community, infant care and development, and
17 parenting.

18 4. Ensuring that home visit providers have preservice
19 and ongoing training that is specific to their job
20 requirements.

21 5. Ensuring that home visit providers receive ongoing
22 weekly reviews and direct and intensive supervision.

23 (5) IMPLEMENTATION.--In order to gain the
24 efficiencies, advocacy, and broadbased support of a
25 public-private partnership, the Department of Children and
26 Family Services shall contract with a private nonprofit
27 corporation that is incorporated to identify, fund, support,
28 and evaluate programs and community initiatives to improve the
29 development and life outcomes of children and to preserve and
30 strengthen families, with a primary emphasis on prevention.
31 The corporation must be registered, incorporated, organized,

1 and operated in compliance with chapter 617, and shall not be
2 a unit or entity of state government. This contract with the
3 private nonprofit corporation must provide for the
4 development, implementation, and administration of the Healthy
5 Families Florida program. This contract must be
6 performance-based, including at a minimum the performance
7 standards adopted by the Legislature, and must cover the
8 expenditure of all funds appropriated for Healthy Families
9 Florida other than funds appropriated to the department for a
10 contract manager and for expenses incident to that position.
11 The private nonprofit corporation under this contractual
12 agreement shall:

13 (a) Using the criteria set forth in this section,
14 implement a community-based Healthy Families Florida program.

15 (b) Award community grants and determine requirements
16 for matching funds. Community grants must be awarded in
17 accordance with weighted criteria based on population
18 demographics, factors associated with child abuse and neglect,
19 and other appropriate criteria recommended by the advisory
20 committee. Matching funds may be in-kind or cash as determined
21 by the advisory committee with the approval of the private
22 nonprofit corporation's board of directors.

23 (c) Develop a plan of implementation to equitably
24 distribute funds.

25 (d) Require that the following criteria be used in
26 selecting recipients of grant funds:

27 1. Each community must have a community-based lead
28 entity for planning and implementing the Healthy Families
29 Florida program. This lead entity must demonstrate the
30 support, integration, and collaboration of existing boards,
31 coalitions, planning groups, business, and consumers. These

1 groups must include, but need not be limited to, the
2 following, if locally established: Healthy Start coalitions,
3 local healthy families steering committees, Success by Six,
4 family preservation and support planning entities, health and
5 human services boards, children's services councils, Head
6 Start boards, prekindergarten early intervention councils,
7 community child care coordinating agencies, school advisory
8 councils, substance abuse and mental health services boards,
9 juvenile justice councils, civic groups, business, and other
10 nonprofit organizations.

11 2. Preference for grant awards must be given to
12 existing community-based entities that have broad
13 representation and have the fiscal and administrative capacity
14 to implement the program.

15 3. Those community-based entities that are currently
16 providing intensive home visiting services and that meet the
17 criteria set forth in this section must be given preference,
18 during fiscal year 1998-1999, for grant awards to fully serve
19 their designated service area.

20 4. The Healthy Families Florida program must
21 complement and coordinate with Healthy Start and other home
22 visiting and family support programs.

23 5. One application per designated service delivery
24 area is to be submitted. A designated service area may be a
25 county, any area within a county, or contiguous counties.

26 6. Each successful grant applicant must agree to be
27 credentialed as directed by the private nonprofit
28 corporation's board of directors. Credentialing must be based
29 on the applicant's capacity to provide the critical elements
30 of Healthy Families Florida as defined in paragraphs
31 (4)(a)-(c). To continue qualifying for funding under this

1 section, an entity must achieve these credentials within the
2 specified deadlines articulated by the private nonprofit
3 corporation and must maintain the credentials in good standing
4 for the duration of program operation.

5 7. Each applicant must agree to use a standardized
6 assessment tool approved by the private nonprofit
7 corporation's board of directors.

8 8. Each applicant must agree to provide outcome and
9 performance data in the format and at the frequency specified
10 by the private nonprofit corporation's board of directors.

11 9. Each applicant must identify local resources
12 available for implementation.

13 10. Local assessment and planning for the program must
14 be collaborative and must include representatives from the
15 entities listed in subparagraph 1., if locally established.
16 During the planning phase, these entities, and others as
17 appropriate, shall participate in: a strength-based community
18 assessment process that identifies existing home visiting and
19 family support services and uses existing needs assessments;
20 the grant application and the development of a local
21 implementation plan for service delivery; and the
22 determination and identification of local funds and resources
23 that will support the implementation of the program.

24 11. Each applicant must show evidence that consumers
25 and families have been involved in the planning and
26 development of the grant application and support the Healthy
27 Families Florida program in the designated service area
28 identified in the grant application.

29 12. Implementation design must include service
30 delivery strategies that, when appropriate, involve both
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1 parents when they have shared parental responsibility,
2 regardless of residential custody arrangements.

3 13. Each applicant must identify mechanisms, programs,
4 and services in the designated service-delivery area to refer
5 at-risk children between the ages of 4 months and 3 years, who
6 were not identified before the age of 4 months, for other
7 intervention services available in the community.

8 (e) Evaluate and approve the grant applications and
9 the local implementation plans for service delivery.

10 (f) Work with the Department of Health and the
11 advisory committee to develop a single, integrated screening
12 and assessment process for Healthy Families Florida and
13 Healthy Start and referrals to other family supports by July
14 1, 2000.

15 (g) Coordinate service delivery with Healthy Start
16 care coordination.

17 (h) Contract to develop and implement preservice and
18 inservice training. Funds for inservice training may be
19 incorporated into the grants.

20 (i) Contract to develop and implement an evaluation
21 design for the program.

22 (j) Provide for ongoing technical assistance and
23 coordination to each community-based program.

24 (k) Develop and implement a quality assurance and
25 improvement process for the program.

26 (l) Evaluate the progress of the program and provide
27 an annual report regarding the progress and achievement of
28 designated outcomes to the Governor, the President of the
29 Senate, the Speaker of the House of Representatives, and other
30 vested parties.

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1 The private nonprofit corporation may subcontract the
2 performance of tasks or services described in this subsection.
3 (6) HEALTHY FAMILIES FLORIDA ADVISORY
4 COMMITTEE.--There is created a Healthy Families Florida
5 Advisory Committee, which shall assist and advise the private
6 nonprofit corporation and assure coordination and
7 collaboration with appropriate state agencies and public and
8 private organizations. The advisory committee shall operate
9 under the auspices of the private nonprofit corporation's
10 board of directors. The responsibilities of the advisory
11 committee include developing measurable outcomes consistent
12 with the department's performance-based budget, outcomes,
13 measures, and standards; reviewing grant applications and
14 recommending grant awards under this section to the board of
15 directors of the private nonprofit corporation; defining the
16 scope of this program; and generally advising the private
17 nonprofit corporation on the development, implementation, and
18 administration of this program. The board of directors of the
19 private nonprofit corporation has the final approval of grant
20 awards and contracts but may consider only those applicants
21 recommended by the advisory committee. The advisory committee
22 shall consist of eleven members, including the Secretary of
23 Children and Family Services or the secretary's designee, the
24 Secretary of Health or the secretary's designee, one
25 representative of the department's Interagency Workgroup for
26 Children and Families, one representative of the Florida
27 Association of Healthy Start Coalitions, two active board
28 members of the private nonprofit corporation, two community
29 representatives who have direct experience and significant
30 knowledge of the Healthy Families Florida program, two
31 representatives from the business community, and one consumer

1 representative who has direct experience with the Healthy
2 Families Florida program. The President of the Senate shall
3 appoint one community representative and one business
4 representative. The Speaker of the House of Representatives
5 shall appoint one community representative and one business
6 representative. The Governor shall appoint the consumer
7 representative.

8 (7) WAIVER.--The Department of Health and the
9 Department of Children and Family Services shall work jointly
10 with the Agency for Health Care Administration to seek a
11 federal waiver to secure Title XIX matching funds for the
12 Healthy Families Florida program. The waiver application shall
13 include allowance to use new and existing general revenue and
14 local contributions. The Department of Children and Family
15 Services and the Agency for Health Care Administration may not
16 implement the federal waiver unless the waiver permits the
17 state to limit enrollment or the amount, duration, and scope
18 of services to ensure that expenditures will not exceed funds
19 appropriated by the Legislature or available from local
20 sources.

21 Section 2. The sum of \$10 million is appropriated from
22 tobacco settlement revenues and the sum of \$5 million is
23 appropriated from funds of the Temporary Assistance for Needy
24 Families program to the Department of Children and Family
25 Services to implement this act.

26 Section 3. This act shall take effect July 1, 1998.
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