

By Representatives Frankel, Lynn, Thrasher, Ritchie, Morse, Bloom, Wise, Brennan, Bullard, Logan, Reddick, Turnbull, Mackenzie, Murman, Brown, Futch, Arnall, Merchant, Dawson-White, Casey and Jones

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; establishing the Healthy Families
 13 Florida Statewide Board; specifying criteria
 14 for community program grant funding; requiring
 15 collaboration with existing community boards,
 16 coalitions, providers, and planning groups;
 17 authorizing contracts for training and
 18 evaluation; providing for quality assurance;
 19 providing for application for a federal waiver;
 20 providing for rules; providing an effective
 21 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 the Healthy Families Florida program, a voluntary
 29 program for newborn children and their families.

30 (1) LEGISLATIVE FINDINGS AND INTENT.--
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1 (a) The Legislature finds that family well-being is
2 critical to a child's health and development, that parenting
3 is a difficult responsibility, and that most of the assistance
4 available to Florida's families occurs after there is a
5 problem, and often provides "too little, too late." Research
6 has shown that comprehensive early home visitation programs
7 prevent child abuse, help develop positive parent-child
8 interactions, and help avoid future social problems. In
9 addition to addressing child abuse, such programs help to
10 ensure that families' social and medical needs are met and
11 that children are ready for success in school. The Legislature
12 finds that Florida needs broad implementation of such a
13 program to help identify families who need and desire
14 assistance in establishing healthy relationships and
15 environments for their children.

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

27 (2) PURPOSE.--The purpose of the program is to
28 strengthen families; promote healthy childhood growth and
29 development; improve childhood immunization rates and
30 well-child care; improve child health outcomes; improve school
31 readiness; increase family self-sufficiency; increase the

1 involvement of both parents with their children; and reduce
2 the incidence of child abuse and neglect, through a primary
3 prevention approach that offers home visits and linkages to
4 family supports for families and their newborn children, and
5 continues until the children reach 5 years of age.

6 (3) DELIVERY OF SERVICES.--Service delivery under the
7 program shall be community-based and collaborative. Program
8 services shall be integrated and coordinated with services
9 provided under Florida's Healthy Start program and other home
10 visiting and family support service delivery systems currently
11 in place in Florida communities. Services shall be offered
12 with the intensity and duration required to prevent child
13 abuse and neglect and to improve child development and child
14 health outcomes.

15 (4) PROGRAM REQUIREMENTS.--The program shall provide
16 for intensive home visits and include the following critical
17 elements of the Healthy Families America model:

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

19 1. Initiation of services prenatally or at birth.

20 2. Use of a standardized assessment tool to
21 systematically identify those families most in need of
22 services.

23 3. Offering services on a voluntary basis, and using
24 positive, persistent outreach efforts to build family trust.

25 4. Working with family members to identify strengths
26 and resources that can be mobilized to help resolve identified
27 family concerns.

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

29 1. Offering services over the long term and
30 intensively, with well-defined criteria for increasing or
31 decreasing the intensity of the service.

- 1 2. Providing culturally competent services.
2 3. Providing services that focus on supporting parents
3 and families, encouraging the interaction of both parents with
4 their children, and enhancing the development of all children
5 in the family.
6 4. Linking families to medical providers to ensure
7 optimal health and development of the children; timely
8 childhood immunizations; well-child care that provides for
9 developmental assessment and is consistent with the standards
10 and periodicity schedules of Medicaid and the American Academy
11 of Pediatrics; and additional services, as needed. Children
12 who are eligible for Medicaid shall be referred for Early
13 Periodic Screening, Diagnosis, and Treatment (EPSDT) services.
14 5. Providing families the opportunity to create
15 neighborhood support systems to address mutual concerns and
16 solve problems without external resources.
17 6. Incorporating specialized services to accommodate
18 the needs of families with substance abuse problems. Staff
19 trained in providing substance abuse services will work with
20 these families to meet their unique needs.
21 (c) Selection and training of service providers. This
22 element provides for:
23 1. Weighted caseloads of not greater than 25:1 overall
24 and 15:1 for intensive services, for staff providing home
25 visits, as specified in the Healthy Families America model.
26 2. Selecting home visit providers based on the
27 provider's interpersonal skills; knowledge of community
28 resources; willingness to work with, or experience working
29 with, culturally diverse communities and families; and job
30 skills.
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1 3. Ensuring that home visit providers have basic
2 training in areas including, but not limited to: cultural
3 competency, substance abuse, reporting child abuse, domestic
4 violence, drug-exposed infants, and services available in the
5 community.

6 4. Ensuring that home visit providers have preservice
7 and ongoing training that is specific to their job
8 requirements.

9 5. Ensuring that home visit providers receive ongoing
10 weekly reviews and direct and intensive supervision.

11 (5) HEALTHY FAMILIES FLORIDA STATEWIDE BOARD.--The
12 program shall be developed, implemented, and administered by
13 the Department of Health and the Department of Children and
14 Family Services, or their designees, in cooperation with other
15 appropriate state agencies and public and private
16 organizations. For this purpose, there is created a Healthy
17 Families Florida Statewide Board of Directors composed of the
18 Secretary of Health, the Secretary of Children and Family
19 Services, and 11 members from other state agencies and public
20 and private organizations, one of whom shall be a parent
21 representative. The board shall be co-chaired by the Secretary
22 of Health and the Secretary of Children and Family Services.
23 The members shall be jointly appointed by the Secretary of
24 Health and the Secretary of Children and Family Services. The
25 board shall also be responsible for defining the scope of the
26 program, awarding grants to communities to implement the
27 program, and evaluating the program's progress toward
28 achieving measurable outcomes. The Department of Health and
29 the Department of Children and Family Services shall provide
30 clerical and staff support as may be reasonably needed by the
31 board for the proper performance of its duties, including, but

1 not limited to, program development, technical assistance, and
2 program monitoring. In the event of any statutory change to
3 the structure or organization of the Department of Health or
4 the Department of Children and Family Services, the board
5 shall be reconstituted for purposes of implementing this
6 section, replacing the original board member with the head of
7 the new department or agency having the same or similar
8 functions.

9 (6) IMPLEMENTATION.--The Department of Health and the
10 Department of Children and Family Services, or their
11 designees, shall:

12 (a) Implement a community-based Healthy Families
13 Florida program using the criteria provided in this section.

14 (b) Award community grants and determine requirements
15 for local matching funds using a weighted criteria based on
16 population demographics, factors associated with child abuse
17 and neglect, and other criteria developed by the Healthy
18 Families Florida Statewide Board.

19 (c) Require the following selection criteria for grant
20 funding:

21 1. Each community must select the local lead planning
22 and implementation entity for the Healthy Families program.
23 Existing boards, coalitions, planning groups, and consumers
24 shall be involved in selecting the lead entity. These groups
25 shall include, but are not limited to, the following, if
26 locally established: Healthy Start coalitions, local healthy
27 families steering committees, family preservation and support
28 planning entities, health and human services boards,
29 children's services councils, Head Start boards,
30 prekindergarten early intervention councils, community child
31 care coordinating agencies, school advisory councils,

1 substance abuse and mental health services boards, and
2 juvenile justice councils.

3 2. When selecting the local lead planning and
4 implementation entity for Healthy Families Florida, each
5 community shall give preference to existing entities that have
6 broad representation and have the fiscal and administrative
7 capacity to implement the program.

8 3. The Healthy Families Florida program must build on
9 and be integrated with Healthy Start and other home visiting
10 and family support programs and must target geographic areas
11 at high risk of child abuse and neglect.

12 4. One application per designated service delivery
13 area shall be submitted for approval.

14 5. Each applicant community must agree to seek
15 national Healthy Families America credentialing within 2 years
16 after implementing the program.

17 6. Each applicant community must agree to use the
18 Kempe Family Stress Checklist or other standardized assessment
19 tool approved by the Healthy Families Florida Statewide Board.

20 7. Each applicant community must agree to provide
21 outcome and performance data in the format and at the
22 frequency specified by the board.

23 8. Each applicant community must identify local
24 resources available for implementation.

25 9. Local assessment and planning for the program must
26 be collaborative and include representatives from the entities
27 listed in subparagraph 1., if locally established. During the
28 planning phase, these entities, and others as appropriate,
29 shall participate in: a strength-based community assessment
30 process that identifies existing home visiting and family
31 support services and uses existing needs assessments; the

1 grant application and the development of a local
2 implementation plan for service delivery; and the
3 determination and identification of local funds and resources
4 that will support the implementation of the program.

5 10. Each community must show evidence that consumers
6 and families have been involved in the planning and
7 development of the grant application and support the Healthy
8 Families Florida program in the targeted area identified in
9 the grant application.

10 11. Implementation design must include service
11 delivery strategies that, when appropriate, involve both
12 parents who have shared parental responsibility, regardless of
13 residential custody arrangements.

14 12. Each community must develop mechanisms to refer
15 at-risk children ages 4 to 36 months, who were not identified
16 before age 4 months, for other intervention services available
17 in the community.

18 (d) Evaluate and approve the grant applications and
19 the local implementation plans for service delivery.

20 (e) Enhance the Healthy Start postnatal risk
21 screening, to include factors associated with child abuse and
22 neglect.

23 (f) Coordinate service delivery with Healthy Start
24 care coordination, as specified in the service delivery plans
25 of the Healthy Start coalitions.

26 (g) Contract with providers to establish a statewide
27 training program and to develop and provide preservice and
28 inservice training and ongoing technical assistance to each
29 community-based program.

30 (h) Contract with evaluators to develop and implement
31 an evaluation design for the program.

1 (i) Develop and implement a quality assurance and
2 improvement process for the program.

3 (7) WAIVER.--The Department of Health and the
4 Department of Children and Family Services shall work jointly
5 with the Agency for Health Care Administration to seek a
6 federal waiver to secure Title XIX matching funds for the
7 Healthy Families Florida program. The waiver application shall
8 include allowance to use new and existing general revenue and
9 local contributions. Healthy Families Florida program services
10 shall not be considered an entitlement under this waiver.

11 (8) RULES.--The Department of Health, with the
12 concurrence of the Department of Children and Family Services,
13 may adopt rules to implement the program. These rules may
14 include criteria for provider selection, provisions for
15 provider contracts and reimbursement provisions for data
16 collection and reporting, and requirements for program design,
17 program services, staff qualifications, service delivery, and
18 state and local agency coordination.

19 Section 2. This act shall take effect July 1 of the
20 year in which enacted.

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HOUSE SUMMARY

Creates the Healthy Families Florida program, a voluntary program to promote the health of newborns and their families. Provides for integration with existing community-based family support service delivery systems. Specifies requirements relating to initiation and content of services and selection and training of service providers. Provides for development, implementation, and administration of the program under the Department of Health, the Department of Children and Family Services, and the Healthy Families Florida Statewide Board established pursuant to the act. Provides for locally matched grants. Specifies criteria for community program grant funding. Requires collaboration with existing community boards, coalitions, providers, and planning groups. Authorizes contracts for training and evaluation. Provides for quality assurance. Requires the departments and agency to seek a federal waiver to secure federal matching funds. Provides that the program is not an entitlement. Provides for rules.