

Budget Detail Request - Fiscal Year 2016-17

Your request will not be officially submitted unless all questions and applicable sub parts are answered.

1. Title of Project: Help Me Grow Florida
2. Date of Submission: 01/12/2016
3. House Member Sponsor(s): Erik Fresen

4. DETAILS OF AMOUNT REQUESTED:

- a. Has funding been provided in a previous state budget for this activity? Yes
If answer to 4a is ?NO? skip 4b and 4c and proceed to 4d
- b. What is the most recent fiscal year the project was funded? 2015-16
- c. Were the funds provided in the most recent fiscal year subsequently vetoed? No
- d. Complete the following Project Request Worksheet to develop your request (Note that Column E will be the total of Recurring funds requested and Column F will be the total Nonrecurring funds requested, the sum of which is the Total of the Funds you are requesting in Column G):

FY:	Input Prior Year Appropriation for this project for FY 2015-16 (If appropriated in FY 2015-16 enter the appropriated amount, even if vetoed.)			Develop New Funds Request for FY 2016-17 (If no new Recurring or Nonrecurring funding is requested, enter zeros.)			
	Column: A	B	C	D	E	F	G
Funds Description:	Prior Year Recurring Funds	Prior Year Nonrecurring Funds	Total Funds Appropriated (Recurring plus Nonrecurring: Column A + Column B)	Recurring Base Budget (Will equal non-vetoed amounts provided in Column A)	INCREASED or NEW Recurring Requested	TOTAL Nonrecurring Requested (Nonrecurring is one time funding & must be re-requested every year)	Total Funds Requested Over Base Funding (Recurring plus Nonrecurring: Column E + Column F)
Input Amounts:	1,808,957	75,000	1,883,957	1,808,957	2,191,043	0	2,191,043

- e. New Nonrecurring Funding Requested for FY 16-17 will be used for:
 Operating Expenses Fixed Capital Construction Other one-time costs
- f. New Recurring Funding Requested for FY 16-17 will be used for:
 Operating Expenses Fixed Capital Construction Other one-time costs

5. Requester:

- a. Name: Debra Dowds
- b. Organization: Florida Developmental Disabilities Council, Inc.
- c. Email: debrad@fddc.org
- d. Phone #: (850)488-4180

6. Organization or Name of Entity Receiving Funds:

- a. Name: The Children?s Forum, Inc.
- b. County (County where funds are to be expended) Bay, Brevard, Broward, Calhoun, Duval, Escambia, Flagler, Franklin, Gadsden, Glades, Gulf, Hendry, Hillsborough, Holmes, Indian River, Jackson, Jefferson, Lee, Leon, Liberty, Madison, Martin, Miami-Dade, Okeechobee, Orange, Osceola, Palm Beach, Pinellas, Saint Lucie, Seminole, Taylor, Volusia, Wakulla, Washington
- c. Service Area (Counties being served by the service(s) provided with funding) Bay, Brevard, Broward, Calhoun, Duval, Escambia, Flagler, Franklin, Gadsden, Glades, Gulf, Hendry, Hillsborough, Holmes, Indian River, Jackson, Jefferson, Lee, Leon, Liberty, Madison, Martin, Miami-Dade, Okeechobee, Orange, Osceola, Palm Beach, Pinellas, Saint Lucie, Seminole, Taylor, Volusia, Wakulla, Washington

7. Write a project description that will serve as a stand-alone summary of the project for legislative review. The description should summarize the entire project?s intended purpose, the purpose of the funds requested (if request is a sub-part of the entire project), and most importantly the detail on how the funds requested will be spent - for example how much will be spent on positions and associated salaries, specifics on capital costs, and detail of operational expenses. The summary must list what local, regional or statewide interests or areas are served. It should also document the need for the funds, the community support and expected results when applicable. Be sure to include the type and amount of services as well as the number of the specific target population that will be served (such as number of home health visits to X, # of elderly, # of school aged children to receive mentoring, # of violent crime victims to receive once a week counseling etc.)

Help Me Grow (HMG) is a unique, comprehensive, and integrated statewide system designed to address the need for early identification of developmental and/or behavioral concerns, and then to link children and their families to community-based developmental and behavioral services and supports. It is an effective system because its efforts revolve around uniting a community to address the need for early detection through surveillance and screenings of children and building connections to community-based services and supports to address their needs. First initiated in Connecticut in 1998, with operation as a statewide system in 2002, Help Me Grow is now in 23 states across the nation.

There are four components to Help Me Grow:

- ? A centralized telephone access point that assists families of young children with early childhood questions, conducts basic child developmental screening, and links families with sources of support and services to address concerns about a child?s health, development, behavior and learning in a child?s first eight years of life.
- ? Child health care provider outreach to educate and motivate physicians and other child health care providers to conduct child developmental screenings, and use the HMG telephone access point.

? Community outreach to develop partners in the local community, promote HMG, and inform families and the community of the importance of child screening and role of HMG.

? Data collection to understand all aspects of the Help Me Grow system, including the identification of gaps and barriers in order to provide more effective services.

Purpose of the Funds Requested:

Florida became a HMG replication state in 2012 with the simultaneous launching of HMG in Hillsborough County and Miami-Dade County. The 2014 Florida Legislature appropriated \$2 million to establish a Help Me Grow Florida (HMGF) State Coordinating Office, provide an infrastructure for a State Help Me Grow Florida program, and to launch three to five (3-5) additional Help Me Grow Florida sites. With this funding a State Coordinating Office was established, five (5) HMGF sites were implemented reaching 19 counties, and six (6) strategic plans were developed to implement HMGF in additional sites in 2015-2016. As part of this plan, physician and early education training was developed, public awareness resources to promote HMG were created, a HMG Florida website was established, a statewide common database referral system is being implemented, and a third party project evaluation was conducted.

The FY 2015-2016 allocation for Help Me Grow Florida was \$1,883,957. With this funding the State Coordinating office is continuing to support the implementation of HMGF across the state. The five (5) HMGF sites launched in FY 2014-2015 are continuing to operate HMGF and five (5) of the sites that developed strategic plans are launching HMGF. With the addition of these new HMGF sites, the counties with HMG services have grown from 21 to 34.

For FY2016-2017, an increase in funding is being requested to annualize the 10.5 month budget (8/15/15 ? 6/30/16), to expand HMGF by a minimum of ten (10) additional counties (to total at least 44 HMGF counties), and to increase the HMGF local site staffing to provide more outreach promoting child screening and more care coordination to families as awareness of the program grows.

Details of how the Funds Requested will be Spent:

Please see Attachment A.

Areas of the State to be Served:

The 10 Help Me Grow Florida Affiliates funded with 2015-2016 funds would continue to receive funding in 2016-2017. Please see the chart and map below for the 34 counties served by these Affiliates (note: Hillsborough and Miami-Dade are funded through their Children?s Services Council). In addition, it is anticipated that with the \$4 million requested, Help Me Grow Florida could be expanded to a minimum of 10 additional counties (the specific counties in which the

expansion would occur is not yet known).

LOCATIONS OF CURRENT HELP ME GROW FLORIDA AFFILIATES

Help Me Grow Site Counties Served

2-1-1 Big Bend Franklin, Gadsden, Jefferson, Leon, Liberty, Madison, Taylor, Wakulla

2-1-1 Brevard* Brevard

2-1-1 Broward Broward

2-1-1 Palm Beach/Treasure Coast Indian River, Martin, Okeechobee, Palm Beach, St. Lucie

2-1-1 Tampa Bay Cares*Pinellas

Crisis Center of Tampa Bay Hillsborough

Heart of Florida United Way* Orange, Osceola, Seminole

Switchboard of Miami Miami-Dade

United Way of Escambia County* Escambia, Bay, Gulf, Holmes, Jackson, Calhoun, Washington

United Way of Lee, Hendry Glades and Okeechobee Glades, Hendry, Lee

United Way of Northeast Florida* Duval

United Way of Volusia and Flagler Counties Flagler, Volusia

*indicates new sites being contracted for 2015-16. These sites are not yet providing services.

The Need for the Funds:

Early detection and intervention are critical for optimal outcomes for children and can have a positive impact on improving Kindergarten readiness toward the state of Florida Education goal of Highest Student Achievement. Developmental delays in children that can impact their potential academic performance are often not identified until they enter school and achievement gaps that exist in Kindergarten are difficult to overcome in later years. Identification of child development issues early in the child's life can minimize the delays and maximize the child's academic achievement.

In addition, the early intervention services that children are able to access as a result of early detection of developmental and/or behavioral issues not only improves the chances of a child developing to their full potential, but accrues economic gains. The cost-benefit analyses from a recent RAND study showed that investing in early intervention services has measurable positive outcomes, with a rate of return as high as \$17.00 for every \$1.00 spent.

Help Me Grow promotes and facilitates early detection and intervention by building collaboration among community programs; providing a centralized access point for information, referral and care coordination; promoting surveillance and screenings; and educating and informing the community. The impact of Help

Me Grow has been demonstrated in Connecticut, California and other states that have sufficient length of experience administering and evaluating Help Me Grow (i.e., 6-12 years) to assess program impact:

? Utilization of community based programs and services, which can provide cost-effective alternatives to unnecessary and expensive medical specialty referrals, preserving the availability of specialists for the tertiary care for those children who need it most. The Connecticut Help Me Grow program has successfully connected 85% of children and families with community-based programs and services since 2002.

? Cost savings by shifting service usage away from expensive medical and behavioral services toward more readily available community-based programs and services. Outcomes evaluation of a Help Me Grow program in California found that Help Me Grow reduced inappropriate referrals to medical and behavioral specialists, utilizing instead more readily available, less costly community-based programs and services. Specifically, Help Me Grow reduced referrals to specialists by 10%, saving estimated costs of consultation and testing of over \$2,300 per child.

? Building the capacity of parents: The 2012 University of Hartford Center for Social Research evaluation of the impact of Help Me Grow on children's healthy development found that parents were more engaged, supported, educated, and better equipped to meet their children's needs and foster healthy developmental outcomes.

Community Support:

Help Me Grow Florida is using the local 2-1-1 organizations as the organizing entities for the Help Me Grow Affiliates throughout the state. There are 16 local 2-1-1 organizations which offer an existing comprehensive inventory of services and supports covering every county in the state. The 2-1-1 organizations are contributing time, space, and resources to the Help Me Grow Florida program with their existing United Way funds, Early Learning Coalition funds, local Children's Services Council funds, administrative costs not covered by the state funding, and some local grants, such as a local hospital. It is estimated that this funding from non-state sources will total over \$500,000 this year. In addition, each HMGF site is required to have Leadership Team meetings of the major stakeholders to review and analyze the common indicator data for their area and the implication of the data for community system development.

Expected Results:

The Help Me Grow Florida system has a strong foundation in data collection and utilization of that data to evaluate both the effectiveness of the program and services and the capacity of the community service system to support parents' efforts to address their child's needs and optimize their child's development. The Help Me Grow National Center has a set of Common Indicators that are required to be collected and compiled by all Help Me Grow programs. Florida identified additional indicators that would be important to track. These data elements, which are being collected by each HMGF site and analyzed quarterly by the State Coordinating Office, will document the services and outcomes of the program.

Quarter 1 data results from the five (5) HMGF Affiliates implemented in 2014-2015 and continued into 2015-2016 indicate that 761 children were served by Help Me Grow Florida for the months of July through September 2015. This is a 394% increase from the 193 children served during the first reporting period. Current totals are actually higher, but one site was unable to count multiple children in the same household and this depressed their totals. The Volusia/Flagler 2-1-1 site contributed 66% of the total due to their successful implementation of iPads in WIC and pediatric offices.

The data collected shows that mothers are the primary users of the Help Me Grow system. Demographics indicate that most callers are White (49%), followed by Black/African American (25%). Both Non-Hispanics (41%) and Hispanic/Latino (31%) families are contacting Help Me Grow. Callers are mostly English speaking (88%) while Spanish speakers account for 11%. Most HMG users learned about HMG from their healthcare provider or from a 2-1-1 counselor.

The children referred to HMG were mostly three years old or younger (72%). Twenty-four percent were infants, 12 months or younger. This data is very encouraging because we know the importance of early intervention and understand that detecting developmental delays as early as possible is critical.

The learning environment/care setting for 62% of children referred was the home. This provides an ideal opportunity to share information with, and link parents to, community-based services and supports. Most HMG users expressed concerns about their children's General Development, Communication, Cognitive, Fine Motor and Social Emotional development. Ninety-three families reported being concerned for 6 months to over a year and 40 families reported being concerned for two years or longer. Eighty-five percent of families reported that their child was not receiving services or support for a delay or disability.

Six-hundred and nineteen screenings were conducted and 48% resulted in concerns or need for monitoring. This data indicates that there is a clear need for Help Me Grow as families have concerns and are waiting long periods of time before finding somewhere to reach out for help. Families contacting Help Me Grow are receiving assistance, information, and referrals to assist them with basic needs and child care. They are also receiving Part C and Part B services. Most families report having insurance such as Medicaid and medical home but those that do not may also receive assistance with these healthcare needs.

Help Me Grow Care Coordinators made a total of 1,232 contacts with families and service providers in order to connect families with information and community programs and supports. Forty-three percent of children and families were successfully connected to community supports and services and 57% were pending a start date. Care coordinators helped identify gaps and barriers experienced by families. Some of these include affordable child care, lack of health insurance or high deductibles, location and distance to services, and caregiver's lack of follow through.

A total of 221 outreach events reaching approximately 5741 individuals were conducted by the five affiliate sites. Community outreach has proven to be dominant while outreach to healthcare professionals has been more difficult and, therefore, less prevalent. It is anticipated that increases in exposure will make more families aware of Help Me Grow as a new resource available for Florida's families and will lead to a steady increase in the use of the Help Me Grow Florida system.

The additional five (5) new Help Me Grow Florida Affiliates launching in FY 2015-2016 will require time to fully implement. If the FY 2015-2016 quarter 1 data

from the first five (5) Affiliates is used to estimate a full year for all ten (1) Affiliates for 2016-2017, the projections for amounts of services and target population to be served for each of the Help Me Grow Florida outcomes would be as follows:

Outcome 1: Identifying gaps and barriers and developing community systems to address the gaps and barriers:

- o 5 top program/service gaps will be identified for each of the ten (10) HMGF sites.
- o 5 top barriers that keep children from receiving a service/program that does exist will be identified for each of the ten (10) HMGF sites.
- o 44 Organizations will partner with the HMGF sites to promote HMGF services.

Outcome 2: Outreach that educates child health care providers and motivates them to conduct child screening and use HMGF:

- o 300 physicians and child health providers will be provided with information on child screening and HMGF.
- o Physicians will agree to conduct child screening and/or refer families to HMGF. (projection not available)

Outcome 3: Community Outreach to develop partners and inform families and communities of the importance of child screening and HMGF:

- o 1,000 community outreach events or presentations will be conducted.
- o 25,000 families and caregivers will be provided with information about HMGF.
- o 17,000 service providers and community members will be provided with information about HMGF.

Outcome 4: Linking families to services to address concerns about their child's health, development, behavior, and learning:

- o Families will contact HMGF for services.
- o Issues and concerns of families relative to their child identified by the families.
- o Children will receive child developmental screening.
- o Child screenings identify concerns and issues relative to the child that need to be addressed.
- o Families will be referred to services.

Note: A number of these projections are not possible with only one quarter of service delivery from which to base the projections. The focus of the program thus far has been building the HMGF Affiliates to provide the services. With the funding requested for 2016-2017, major public awareness strategies will be undertaken to so that families have the information needed to access these services.

Additional Information:

The Florida Developmental Disabilities Council has been the administering agency for HMGF for FY 2014-2015 and FY 2015-2016. Effective FY 2016-2017, the administering agency will be the Children's Forum. Proviso related to the FY 2016-2017 funding needs to identify the Children's Forum as the recipient of the

Help Me Grow Florida funds. In addition, the contracting configuration of HMGF with subcontracts to 2-1-1 organizations to operate HMGF programs requires a different administrative costs methodology than is currently used by the Office of Early Learning. Currently, the Office of Early Learning, as recipients of the federal Child Care Block Grant funds, allows a 5% administrative cost for the administering agency, i.e., the Early Learning Coalitions. The child care providers subcontracted by the Early Learning Coalitions that actually deliver the services are considered "vendors" which are not required to break out administrative costs.

Conversely, the 2-1-1 organization subcontractors are considered "subrecipients" requiring budgets that reflect administrative costs. The 2-1-1 organizations can operate HMGF with a 5% administrative cost limitation and the Children's Forum can administer the program with a 5% administrative cost limitation. However, it is not possible to operate HMGF with the two administrative costs together not exceeding 5%. We, therefore, need for the proviso language to include that the administering agency can have 5% for administrative costs and the 2-1-1 organization subcontractors can have 5% for administrative costs.

The Children's Forum is located in Leon County. However, most of the funding will be subcontracted to Help Me Grow Florida Affiliates across the state.

Funding would continue for the Help Me Grow Florida Affiliates funded with 2015-2016 funding. The 34 counties served by these Affiliates are as follows: Franklin, Gadsden, Jefferson, Leon, Liberty, Madison, Taylor, Wakulla, Brevard, Broward, Indian River, Martin, Okeechobee, Palm Beach, St. Lucie, Pinellas, Hillsborough (funded by Children's Services Council), Orange, Osceola, Seminole, Miami-Dade (funded by Children's Services Council), Escambia, Bay, Gulf, Holmes, Jackson, Calhoun, Washington, Glades, Hendry, Lee, Duval, Flagler, and Volusia. In addition, it is anticipated that with the \$4 million requested, Help Me Grow Florida could be expanded to a minimum of 10 additional counties (the specific counties in which the expansion would occur is not yet known).

- Proven Benefits of Early Childhood Interventions, Lynn A. Karoly, M. Rebecca Kilburn, Jill S. Cannon, Rand Corporations
- Cost Benefits of "De-medicalizing" Childhood Developmental and Behavioral Concerns: National Replication of Help Me Grow, Help Me Grow National Center, June 2012
- Cost Benefits of "De-medicalizing" Childhood Developmental and Behavioral Concerns: National Replication of Help Me Grow, Help Me Grow National Center, June 2012
- Help Me Grow Promotes Optimal Child Development by Enhancing Protective Factors, Help Me Grow National Center, February 2013

ATTACHMENT A

2016-2017 Help Me Grow Florida Budget

Budget	\$4,000,000		
Expense Category	Budget		
Personnel Category	Salary	% on Project	
Chief Research Officer	80,854	15%	12,128
Chief Financial Officer	72,092	15%	10,814
Contracts Administrator	56,785	15%	8,518
Program Manager 1	53,795	100%	53,795
Program Manager 2	54,891	100%	54,891
Fiscal Specialist	37,127	50%	18,564

State Coordinating Office

HMG State Coordinator/Program Dir.	81,200	100%	81,200
State Program/Research Manager	42,000	100%	42,000
Staff Assistant	35,000	50%	17,500

Total Personnel Category: 5.45 299,409

Fringe Benefits: Calculated at 26% of salaries

Total Fringe 77,846

Other Services

Supplies at \$500/FTE per year	2725
Occupancy/Shared Costs for Miami staff	10,315
Occupancy/Shared Costs for Tallahassee staff	13,466
Total Other Services	26,507

Contracted Services

Help Me Grow Florida Affiliate Funding:

? Continuation and New Full Implementation Affiliate Funding: \$200,000 - \$300,000 X 11 Affiliates =2,600,000

? Strategic Plan Development and half year Implementation: \$60,000 - \$65,000 X 5 = \$324,738

- ? Existing Affiliate Funding: \$25,000
- ? Public Awareness Campaign: Funding to broadcast radio and TV PSAs, post bus stop billboards, and disseminate public awareness materials. \$25,000 for each of the 13 full Implementation Affiliates = \$325,000

\$3,274,738

STAR (System for Tracking Access to Referrals): Annual Subscription costs

- ? Annual Base Subscription: \$6,500
- ? Annual Site Subscription: \$2,000 X 17 affiliates/sites = \$34,000

(The STAR system is a referral and tracking system specifically for the HMGF network that provides a common database for the Affiliates and linking with the State Coordinating Office.) \$ 40,500

Parent Portal: Two options are under consideration for the parent portal. The first provides a searchable directory from the Help Me Grow Florida website to all Help Me Grow participating 2-1-1's databases. The second option, which needs to be further development and may exceed the budget allotted, is a search engine which provides parents approved content related to development, parenting tips and child/family related topics. \$ 25,000

HMGH website maintenance and fees \$ 4,500

Florida Single Audit \$ 4,000

Travel:

- ? Technical Assistance site-visits to Affiliates
- ? Affiliate Monitoring
- ? HMG Stakeholder Committee Meeting
- ? HMGF Affiliates Meeting
- ? Presentations, Exhibits, training, and generally increasing visibility \$ 45,000

HMG National Membership Fee \$ 2,500

Total Contracted Services \$3,396,238

Indirect/Administrative Costs (5% of \$4,000,000) \$200,000

Total \$ 4,000,000

*The 2-1-1 organizations are contributing time, space and resources to the HMGF program with their existing United Way funds, Early Learning Coalition funds, local Children's Services Council funds, administrative costs not covered by the state funding, and some local grants, such as a local hospital. It is estimated that this funding from non-state sources will total over \$500,000.

8. Provide the total cost of the project for FY 2016-17 from all sources of funding:

Federal: 0

State: 0 (Excluding the requested Total Amount in #4d, Column G)

Local: 500,000

Other: 0

9. Is this a multi-year project requiring funding from the state for more than one year?

Yes