

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: Nurse Family Partnership Implementation
2. Date of Submission: 12/28/2015
3. House Member Sponsor(s): Jose Diaz

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? Yes
- 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:	0	487,500	487,500	0	0	1,362,000	1,362,000

- 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: Gabrielle Bargerstock
- b. Organization: Nurse Family Partnership National Office
- c. Email: Gabrielle.Bargerstock@nursefamilypartnership.org
- d. Phone #: (321)261-1454

6. Organization or Name of Entity Receiving Funds:

- a. Name: Florida Association of Healthy Start Coalitions (FAHSC)
- b. County (County where funds are to be expended) Statewide
- c. Service Area (Counties being served by the service(s) provided with funding) Statewide

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.)

Background and Linkage to Florida Priorities:

Nurse-Family Partnership (NFP) is an evidence-based, community health program for first-time, low-income moms and their babies. NFP is unique in its dedication to sound research and replication methodologies and the model rests on over 37 years of research including multiple randomized controlled trials and numerous large scale research studies proving its effectiveness .

In alignment with the FL Department of Health's priorities around special populations, Nurse-Family Partnership has extensive research and demonstrated impact on high risk populations (teens, substance use during pregnancy, women experiencing IPV, maternal depression etc).

With respect to FL DOH's specific objectives contained within the Long Range Program Plan, NFP has demonstrated impact in several areas:

- ? Goal #1, Objective 1A: Increase the immunization rate among young children
- ? Goal #1, Objective 1I: Prevent deaths from all causes of unintentional injury among Florida resident children ages 0-14
- ? Goal #2, Objective 2B: Reduce the proportion of Floridians, particularly young Floridians who use tobacco
- ? Goal #3, Objective 3F: Improve maternal and infant health
- ? Goal #3, Objective 3G: Improve health care disparities in maternal and infant health
- ? Goal #3, Objective 3H: Reduce births to teenagers

It is also worth noting Nurse-Family Partnership's work and research in a few additional areas:

- ? Goal #3, Objective 3I: Improve availability of dental health care services
- ? The NFP NSO, Prevention Research Center and NYU have been working together to develop supplemental materials and tools available to NFP Nurses in this area. NYU has designed and implemented an oral health training for NFP Nurses. Research is also underway to examine the impacts and effectiveness of the training, dental assessments and information provision by NFP nurses. Florida is directly participating in this research.
- ? The NFP NSO and Prevention Research Center are also currently conducting large scale research studies:
- ? to develop stronger protocols and intervention strategies for women in persistent danger of victimization from interpersonal violence.
- ? To expand mental health screening and strengthen nurse intervention strategies for clients with depression and anxiety.

In addition, multiple research studies have repeatedly demonstrated that NFP:

- ? Reduces the rates of subsequent pregnancies and births and increases the intervals between first and second pregnancies and births
- ? Improves self-sufficiency,
- ? And decreases the time that clients are dependent on public assistance

All of which decreases reliance on and expenses associated with public assistance programs thus enabling Florida government to function more efficiently and effectively over time.

Additional details and specific data on Nurse-Family Partnership's results in each of the outcomes above can be found in the Full NFP 2016 Legislative Proposal document.

Nurse-Family Partnership Statewide Funding Strategy:

- ? An initial year of planning and RFP cycle conducted by a private, independent organization. The Florida Association of Healthy Start Coalitions (FAHSC) is the proposed administrator of any statewide NFP funds.
- ? In this role, FAHSC will manage the RFP processes, program evaluation and coordination with the NFP National Service Office with respect to technical assistance, data collection and fidelity monitoring.
- ? FAHSC as the administrator allows for efficiencies in seeking sustainable, varied funding as FAHSC and NFP National Office can work collaboratively to promote and replicate work with MCOs that is occurring with NFP across the country.
- ? 3 years of initial implementation funding of 5-8 new/expansion NFP sites
- ? Multi-year data collection, contract monitoring and independent evaluation

? Efficiencies can be created by incorporating NFP model-specific analyses into the existing evaluation of homevisiting programs being conducted by the FAHSC and the University of South Florida.

? Pay for performance model. Evaluation & data tracking built into programmatic funding. Any ongoing or expansion funding contingent upon achievement of results.

Requested Funding Amounts:

	Administration, Contract Mgmt, TA, & Evaluation	10% Local Match Requirement	NFP Program Funding	Total
Legislative Allocation			Legislative Allocation	
Year 1	\$262,500	\$1,100,000	\$137,500	\$1,500,000
Year 2 - 3	\$315,000/yr	\$2,475,000/yr	\$247,500/yr	
	2,542,500/yr	\$2,790,000/yr		
3 Year Total Allocation:	\$632,500	\$6,322,500	\$7,080,000	

Benefits:

A statewide Nurse-Family Partnership implementation strategy in partnership with the FAHSC layers upon and supports existing maternal-child health programming within the state, incorporates efficiencies, and enables achievement of priority birth and economic outcomes such as reductions in pre-term births, infant mortality, and improved workforce participation by NFP program participants. In addition, Nurse-Family Partnership online data system provides real-time, standardized outcomes reporting capability.

Communities prioritized for Nurse-Family Partnership implementation:

Florida counties were assessed and prioritized according to their performance across 14 indicators: total births, Medicaid births, pre-term births, infant mortality, low birthweight, adolescent births, repeat adolescent births, inter-pregnancy interval less than 18 months, late or no prenatal care, smoking use during pregnancy, breastfeeding initiation, hospitalizations (ages 1-5), kindergarten readiness, and unemployment.

27 communities prioritized for implementation:

? Alachua, Bay, Brevard, Broward, Collier, Columbia, Duval, Escambia, Hillsborough, Lake, Lee, Leon, Manatee, Marion, Miami-Dade, Okaloosa, Orange, Osceola, Palm Beach, Pasco, Pinellas, Polk, Putnam, Sarasota, Seminole, St. Lucie, Volusia

10 additional communities meet prioritization data requirements but have insufficient individual capacity to implement/expand NFP. To be eligible for funding these communities (Baker, Bradford, Franklin, Gadsden, Glades, Okeechobee, Sumter, Suwannee, Taylor, Walton) would need to partner with a contiguous prioritized community.

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

Federal: 0

State: 1,362,500 (Excluding the requested Total Amount in #4d, Column G)

Local: 137,500

Other: 0

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

Yes