

The Healthy Start Coalition of Flagler & Volusia Counties 2021-2025 Service Delivery Plan



Acknowledgements:

The Healthy Start Coalition of Flagler & Volusia Counties, Inc. 2021-2025 Service Delivery Plan (SDP) is the result of a collaboration between many individuals and organizations without whom this immense undertaking could not have been achieved. Direct service providers and community partners contributed to the data gathering and analysis across Flagler and Volusia counties to gain valuable insight into the achievements our community has made as well as where we need to target efforts in the future. The Coalition is grateful to the Healthy Start staff, care coordinators, physician providers, community agencies, and partners who contribute to our system of care and ultimately make a difference for mothers, babies, and families with young children. The Healthy Start Board of Directors also guided the process and we deeply appreciate their ongoing efforts and support of the Coalition.

A special thanks to those individuals who served as members of our 2021-25 Service Delivery Plan Workgroup and helped make this endeavor come to fruition:

- Karin Flositz, CEO, Community Partnership for Children
- Helena Girouard, OD2A Government Operations Consultant, FL Department of Health in Volusia County
- Susan Haley, Children's Home Society
- Kim Kania, Director of Family Services, Early Learning Coalition of Flagler and Volusia Counties, Inc.
- Lynn Kennedy, Program Coordinator, FL Department of Health in Volusia County
- Susan LeBlanc, Operations Director, Healthy Start Coalition of Flagler & Volusia Counties, Inc.
- Michelle Morrell, WIC & Nutrition Services Program Director, FL Department of Health in Flagler County
- Cher Philio, Marketing and Education Director, Healthy Communities
- Charles Puckett, Circuit 7 Family Safety Operations Manager, FL Department of Children and Families
- Jeanne Rademacher, Director of Community Partnerships, United Way Volusia Flagler Counties
- Heidi Rand, Director of Early Learning Programs, Mid Florida Community Services
- Thalia Smith, Program Director, Healthy Start Coalition of Flagler & Volusia Counties, Inc.
- Robert Snyder, Public Health Officer, FL Department of Health in Flagler County

The Healthy Start Coalition of Flagler & Volusia Counties would also like to express our appreciation to everyone who participated in the multi-year Needs Assessment and Service Delivery Planning Process:

- Denise Ayers, Executive Community Health Nursing Director, FL Department of Health in Volusia County
- Gabrielle Bargerstock, Executive Director, Healthy Start Coalition of Flagler & Volusia Counties, Inc.
- Patricia Boswell, Public Health Officer, FL Department of Health in Volusia County
- Mackenzie Butzer, MPH Program, Bethune-Cookman University
- Pamela Carbiener MD, OB, Faculty, Florida State University
- Tracy Claveau, FIMR Abstractor, Claveau Consulting
- Damaris Conner, Mid-Florida Early Head Start Home Based, Daytona State College
- Nathalie Dunning, Senior Child Development Specialist, Early Learning Coalition of Flagler & Volusia Counties, Inc.
- Beatrice Gilbert, Parent Leader, Community Organizing and Family Issues (COFI) Facilitator
- Jordan Halle, Parent Leader, CPRS, COFI Facilitator
- DJ Lebo, CEO, Early Learning Coalition of Flagler and Volusia Counties, Inc.
- Sarah MacDonald, Human Services Program Analyst, FL Department of Health in Volusia County
- Dr. Sadie McConner, Faculty, Bethune-Cookman University, Palmer College of Chiropractic
- Linda McLeod, Women's Intervention Specialist, Children's Home Society
- Paula Meek, Parent Educator, Lactation Consultant, Women and Children Services, AdventHealth
- Dixie Morgese, Healthy Start Coalition of Flagler & Volusia Counties, Inc.
- Linda Peterson, Nursing Director/MFC Supervisor, Children's Medical Services
- Shams Rahman, MD, MPH, Ph.D., Faculty, Bethune-Cookman University
- Cynthia Ritchie, Program Supervisor, Children's Home Society

TABLE OF CONTENTS

| Section | Subsections | Page |
|------------|--|------|
| Acknowle | dgements | 2 |
| Healthy St | tart Background & Coalition Structure | 5 |
| | The Florida Healthy Start Initiative | |
| | Healthy Start Coalition of Flagler & Volusia Counties | |
| | Programs & Initiatives | |
| | Universal Screening Coordination | |
| | Coordinated Intake & Referral (CI&R)/CONNECT | |
| | Healthy Start Care Coordination | |
| | Fetal Infant Mortality Review (FIMR) Initiative | |
| | Outreach, Screening & Medical Provider Awareness | |
| | Additional Local Programs and Initiatives | |
| | Healthy Families | |
| | Women's Intervention Services & Neonatal Outreach Services | |
| | Family Place | |
| | Nurse Home Visiting & Community Nursing Services | |
| | Substance Exposed Newborns (SEN) Taskforce | |
| | Family Engagement Advisory Board | |
| | Parent Partner Initiative | |
| | | |
| Major Acco | omplishments Over The Past Five Years | 12 |
| | Development and Implementation of the Connect CI&R System | |
| | Transition to a New Evidence-Informed Care Coordinated Program | |
| | Reaccreditation of Healthy Families Volusia/Flagler | |
| | Implementation of Nursing Services (CAPTA & Community Health) | |
| | Continuation of Services Through COVID | |
| Communi | ty Partnerships and Initiatives | 14 |
| | One Voice for Volusia | |
| | Behavioral Health Consortium | |
| | Early Childhood Court Team | |
| | Flagler CARES | |
| | Help Me Grow | |
| Process ar | nd Model Used to Update the Needs Assessment & Service Delivery Plan | 16 |
| | Summary of Data Sources | |
| | Florida CHARTS | |
| | Healthy Start Screening and Service Data | |
| | Fetal and Infant Mortality Review (FIMR) Data | |
| | Participant, Provider and Coalition Feedback | |
| | The Well Family Data System | |
| | Data Limitations | |
| | The Service Delivery Plan Development Process | |
| | | |
| | Community Input | |
| | Frontline Staff Survey | |

| | Ongoing Survey Activities | |
|----------|---|----|
| Additio | al Community Plans and Initiatives | 21 |
| | Florida Healthy Babies Initiative | |
| | Community Health Needs Assessment (CHNA) | |
| | Child Abuse Prevention and Permanency Plan (CAPP) | |
| 2021-20 | 25 Selected Indicators & Status | 22 |
| | Selected Health Indicators – Current Status & Goals by Planning Cycle | |
| | Selected System Indicators – Current Status & Goals by Planning Cycle | |
| 5 Year G | oals & Strategies To Address Health Indicators | 24 |
| | Infant Mortality | |
| | Maternal Morbidity & Mortality | |
| | Breastfeeding Initiation | |
| | Low Birth Weight | |
| | Early Entry Into Prenatal Care | |
| Additio | nal Organizational Priorities | 31 |
| | Maternal Substance Use Disorder & Substance Exposed Newborns | |
| | Neonatal Abstinence Syndrome | |
| Healthy | Start System Goals | 33 |
| | Prenatal & Infant Screening Rates | |
| | System Services | |
| Allocati | on Plan for Service Dollars for FY 2021-25 | 34 |
| Quality | Assurance/Improvement Plan | 35 |
| | Methodology | |
| | Healthy Start System of Care Monitoring Schedule | |
| | Thealthy start system of care Monitoring schedule | |

HEALTHY START BACKGROUND & COALITION STRUCTURE

The Florida Healthy Start Initiative

In 1991, the Florida Legislature launched the Florida Healthy Start Initiative (s.282.2161, F.S.) to improve the health and wellbeing of Florida's pregnant women, infants and young children. This landmark legislation sought to ensure that all babies born in the state of Florida are given the opportunity to have a healthy start in life. The primary objectives of the Healthy Start initiative are to reduce infant mortality and morbidity, to improve pregnancy outcomes, and to enhance the health and development of children birth to age three. The key components of the statute mandated:

- (1) Universal screening of pregnant women and newborn infants to identify those at risk of poor birth, health and developmental outcomes;
- (2) Increased access to comprehensive, risk-appropriate maternity and well-child care and support services;
- (3) State-wide implementation of community-based care coordination systems;
- (4) Expansion of Medicaid funding and expanded eligibility for pregnant women; and
- (5) Formation of local coalitions to spearhead system change through public-private partnerships at the community level and leverage additional resources. The statute ultimately vested these coalitions with the authority to allocate state and federal dollars to purchase and oversee services for families in their communities.

The wisdom of Florida's legislators has contributed to supporting healthy pregnancies for millions of women and saving the lives of thousands of babies over the past three decades.

Healthy Start Coalitions seek to lower risk factors associated with preterm birth, low birth weight, infant mortality and poor developmental outcomes. Across the state, 32 coalitions are charged with serving each of Florida's communities. This statewide network of nonprofit, community-based organizations is dedicated to improving the health of pregnant women, babies, and families with young children. They work continuously to reduce Florida's infant mortality rate, improve birth outcomes, and enhance the developmental outcomes of young children. Healthy Start Coalitions mobilize partnerships comprised of professionals and volunteers from all segments of the community including local, public and private medical professionals, representatives of local hospitals, school districts and social service agencies, faith-based representatives, local businessmen and women, consumers of maternal and child health services and other interested community members. These Healthy Start Coalition members work together to ensure that key services are in place for this important target population.

To achieve their comprehensive directive, Healthy Start Coalitions are required to perform a number of key functions, including:

- Building and maintaining broad community input and collaboration.
- Increasing overall public awareness of the importance of investing in pregnant women and children.
- Performing short- and long-range planning for improving maternal and child health in communities.
- building and maintaining broad community support; selecting and contracting with local providers for the delivery of Healthy Start services; performing ongoing monitoring and evaluation of contracted services; and, conducting short- and long-range planning for the local maternal and infant populations.
- Allocating maternal and child health funds on a local level for the provision of Healthy Start services.

The financial structure of Healthy Start Coalitions are unique in that they both receive and allocate funds from various funding sources.

Through the Healthy Start MomCare Network, Coalitions also work directly with the Agency for Healthcare Administration (AHCA) and Managed Care Organizations (MCO) across the state in order to serve women and babies who are on Medicaid. Collectively, Healthy Start Coalitions are working with all of the states' Managed Care entities to coordinate services for their participants and align efforts to meet outcome performance measures related to maternal and child health. With the 2021 extension of Medicaid services to postpartum women through one year after delivery, it is anticipated that this work and partnership with AHCA and MCOs will continue to grow and be enhanced in the coming years.

The Healthy Start Coalition of Flagler and Volusia Counties

The Healthy Start Coalition of Flagler and Volusia Counties was founded in 1992 as the result of a collaborative effort among many local individuals, organizations, and governmental entities. The founding

organizations included the Constituency for Children of Volusia and Flagler Counties, the Volusia County Children & Families Advisory Board (formerly the Volusia County Children's Services Council), Volusia County Health Department, Flagler County Health Department, Halifax Medical Center and the United Way of Volusia-Flagler Counties.

The Mission of the Healthy Start Coalition is to connect people and resources to support the needs and well-being of our families. Our Guiding Principles are:

- Quality must be integral to all facets of Healthy Start activities.
- The Protective Factors framework is our overarching philosophy to promote every family's ability to raise healthy and happy children and contribute to a strong community.
- All Healthy Start staff, volunteers, and partners must respect and value all cultures and commit to continuous improvement in our workforce's understanding of diversity – in employees, clients and partners.

The Coalition's programs, initiatives and efforts to provide maternal and child health services for women have expanded significantly since its inception. Service Delivery Planning and ongoing monitoring of community needs has driven growth in the programs and services provided.

Programs & Initiatives

The Healthy Start Coalition of Flagler and Volusia Counties has worked diligently to be a trusted voice and leader in the community with respect to maternal/child health and the well-being of families with young children. This role and the confidence we have earned from our stakeholders has enabled us to mobilize partners and leverage in-kind support and resources needed to better serve our families. The following initiatives represent those programs and services that our organization is charged with by the state of Florida as well as the supplemental programs and initiatives which have been built out to contribute to better birth and health outcomes for women, babies, and families:

Universal Screening Coordination

Across Florida, initial identification of risks is accomplished through standardized screening of the mother while pregnant and of the baby immediately after birth. Florida law mandates that physicians offer these screenings to all patients and Healthy Start Coalitions are charged with coordinating the screens and ensuring that vulnerable pregnant women and infants are connected to care. The standardized prenatal screening instrument for pregnant women includes a series of questions focusing on medical, environmental and psychosocial factors that are known, based on documented research, to be associated



with increased risk of adverse outcomes. The infant screen is completed in conjunction with the birth certificate. The risk factors examined are similar to those on the prenatal screen and include age, race, health, marital status, late or no prenatal care, birthweight, tobacco exposure and presence of congenital anomalies.

Coordinated Intake & Referral (CI&R)/CONNECT

If a pregnant woman needs assistance or a family with young children is overwhelmed, the Healthy Start Coalition of Flagler & Volusia Counties can assist with meeting the needs of women, children, and families through the coordinated intake and referral system (CI&R): CONNECT. CONNECT provides a one-stop entry point for needed services, such as:

- Education on childbirth, newborn care, parenting, child development, food and nutrition, mental health and financial self-sufficiency
- Care coordination and family support
- Homevisiting programs
- Connection to breastfeeding education and support
- Smoking cessation support
- Child development education and support
- Family planning education
- Car seat safety
- Infant safety
- Wraparound services and supports such as transportation, emergency shelter, food and other basic needs.

Self-referring individuals or families, referring agencies and healthcare providers can call 386-238-9347 or visit connect@healthystartfv.org to obtain information and enroll in local programs that help ensure a healthy start and a strong future.

Healthy Start Care Coordination

The Healthy Start Care Coordination Program is a free, voluntary, home visiting program that delivers education, care coordination services, and ongoing support to pregnant women and families of children under the age of three who are experiencing challenges that might negatively impact a healthy birth or other personal health outcomes. Healthy Start services are designed to support families in reducing the factors and situations that place pregnant women and infants in jeopardy for poor outcomes.

Key components of the program include:

- Prenatal and parenting education
- Childbirth education
- Interconception education
- Nutrition counseling
- Breastfeeding education and support
- Screening for perinatal depression, intimate partner violence, tobacco/substance use and child development
- Tobacco education and cessation counseling
- Follow-up and support to ensure participants gain access to prenatal and general health services, as well as other needed community services
- Anticipatory guidance and support to engage participants and build on their assets, strengths and goals

Fetal Infant Mortality Review (FIMR) Initiative

The Fetal Infant Mortality Review (FIMR) approach was developed by the American College of Obstetrics



and Gynecology (ACOG) and includes an abstraction of information from birth, death, medical, hospital, autopsy, and social service records. All information is "de-identified" to ensure that the focus is on systemic strengths, challenges, and recommendations and not on individual providers. Confidentiality is a key component to the process and is strictly maintained in accordance with Florida Statutes 766.101.

<u>The Case Review Team (CRT)</u> is a component of FIMR and is comprised of a multidisciplinary team of professionals who volunteer their time and expertise to the monthly FIMR case review process. These members are representative of the public and private sector and include physicians, nurses, midwives, public health officials, law enforcement, academic institutions, clinical staff from various health and human services fields, and hospital administration. FIMR CRT members review, discuss and make recommendations regarding actions that could be taken in Volusia and Flagler counties to promote healthy pregnancies, educate the community, advocate for policy change, engage partners and work toward prevention of future infant deaths.

<u>The FIMR Community Action Group (CAG)</u> takes the recommendations and data provided by the FIMR CRT in order to translate what has been learned into actionable steps intended to reduce the incidence of infant mortality and fetal loss, inform and improve the system of care, and better support our providers and families. During the 2019-2020 fiscal year, health equity was an area of focus for the Community Action Team. The work of this group helped the Healthy Start Coalition of Flagler & Volusia Counties explore neighborhood-level issues associated with social determinants of health and engage new partners in aiming to improve maternal and child health outcomes.

Outreach, Screening & Medical Provider Awareness

The Healthy Start Coalition of Flagler & Volusia also conducts activities to increase awareness of the program and/or promote improved birth outcomes for pregnant women and infants. These activities include, but are not limited to health fairs, community presentations, interagency network meetings, committee meetings, baby showers, community service projects, Grand Rounds, social media efforts, development of community partnerships and ongoing community development efforts.

Targeted visits and outreach are also directed to medical professionals and hospital staff on the risk screen, as well as maternal and child health issues to promote awareness of the Healthy Start Program. These visits and activities include but are not limited to: screening information (how to fill out forms, screening rates and other related education), updates on maternal and child health news and data, provision of resource materials such as safe sleep information, new program brochures, COVID resources, information and alcohol information), upcoming Healthy Start and partner meetings and events, presentations to obstetrical staff at hospitals, medical professional recognition programs, and obstetrical/pediatric relationship building activities.

Additional Local Programs and Initiatives:

The purpose established for Healthy Start Coalitions by the state of Florid and legislature is a noble one and as an organization the Healthy Start Coalition is proud to serve Flagler and Volusia Counties. At the

same time, the Coalition's leadership and Board of Directors recognized early in the organization's lifespan that the limited funds provided through the state of Florida cannot sustain all the programming needed to truly impact birth and maternal health outcomes. As a result, The Healthy Start Coalition of Flagler & Volusia has continuously looked for additional funding that supports the mission of the organization and can help positively impact the lives of vulnerable pregnant women, infants, and families with young children. The programs outlined below are representative of the additional services that have been built out by the Coalition to complement and supplement the state funded core activities.

Healthy Families

Healthy Families is a nationally-accredited family support and coaching program that helps parents provide the safe and stable environments children need for healthy growth and development. Parents voluntarily participate in services provided in their homes. Highly-trained support workers help them improve their parenting skills and achieve goals that increase family stability and self-sufficiency.



Last year, the Healthy Families Florida program served 9,960 families and their 18,313 children with state funding and local contributions. Projects exceeded every goal for child and parent outcomes including:

- 98% of children in families served were free from abuse during services and one year following program completion
- 99% of children were connected to a primary healthcare provider
- 85% of participants improved their self-sufficiency by gaining employment, enrolling in job training, furthering their education, securing stable housing or obtaining a driver's license

Healthy Families Volusia Flagler works with new and expecting families to help their family grow healthy, happy and safe. Families engaged in the Healthy Families program learn about healthy child development and the most current positive parenting practices through parent coaching and support from skilled Parent Educators. In 2019-20, the local Healthy Families Volusia/Flagler team served 121 families and 229 children (target and nontarget) by providing over 1300 homevisits and the program achieved strong impacts for families by exceeding all expected outcomes:

- 95% of target children were up to date with immunizations at 24 months of age
- 95% of children were also up to date with well-child visits at 24 months of age
- Additionally 95% of mothers enrolled in the project didn't have a subsequent pregnancy within two years of their target child's birth.
- 95% of children in families served were free from abuse during services and one year following program completion

All these impacts are well above the Healthy Families Florida state goals.

Women's Intervention Services and Neonatal Outreach Services

There are pregnant women and infants born in Volusia and Flagler counties who are experiencing complex and difficult circumstances. These women may be in situations of homelessness, Domestic violence, substance use, unemployment, mental illness, or other challenges. Often these women and babies are experiencing multiple stressors and potential avenues of risk. As a result, the Healthy Start Coalition has created Women's Intervention Services Specialists and Neonatal Outreach Specialist positions. These staff work with high-risk referrals on a time-limited basis to support women and families toward a healthy birth and better stability. Often the cases engaged by the Women's Intervention Services Specialists and Neonatal Outreach Specialist require coordination across multiple service organizations and collaboration of support to the women and babies engaged.

Family Place

The Family Place promotes health equity, social equality, positive parenting and family leadership by connecting pregnant women and families with young children to needed health and community services. On a limited basis tangible supports such as transportation, food, diapers, and other critically needed supports are also provided. A core purpose of the Family Place is to provide direct avenues and mechanisms by which individuals and families in need can be successfully connected to health supports such as Medicaid, Supplemental Nutritional Assistance for Women Infants and Children (WIC), Temporary Assistance to Needy Families (TANF), Supplemental Nutrition Assistance Program (SNAP or food stamps) and other basic needs assistance as well as housing support and vouchers.

Family Place seeks to be as accessible to pregnant women and families as possible and as such operates multiple small sites located directly within communities. Staff provide case management to vulnerable pregnant women and families and work collaboratively with other community partners to develop plans of action that support participants to better health and overall stability. Specifically, Family Place staff provide hands on, detailed assistance to:

- Aid families with successful applications for SNAP and WIC.
- Provide navigation to health services by supporting families to gather and submit all needed documentation for Medicaid, TANF and KidCare (Florida's health insurance for children).
- Link to prenatal and pediatric care as well as connect women to family planning.
- Enter families into the HMIS Coordinated Entry system to support their connection to housing and provide direct funding/support to families to assist with deposits, utilities payments, etc.
- Link women and families who are not already engaged in Healthy Start services to available programs, Career Source (Florida's workforce development program) for resume support/job applications, Early Learning Coalition for childcare assistance, etc.
- Build Protective Factors by engaging women and families to build personal self-efficacy. This includes working with participants to develop personal plans, goals, family budgets, etc.

Nurse Homevisiting & Community Nursing Services

In 2020, the Healthy Start Coalition was fortunate to implement nurse homevisiting and community health nursing services through Child Abuse Prevention and Treatment Act (CAPTA) funding, private philanthropic support and partnership with the Community Partnership for Children as well as the Department of Health in Volusia County. As new initiatives which took several years of planning and effort to bring to fruition, the Nursing Services are discussed in greater detail under the Healthy Start Coalition of Flagler & Volusia Counties' Accomplishments.

Substance Exposed Newborns (SEN) Taskforce

Like many areas of Florida and the country, Volusia County continues to experience significant increases in the number of women utilizing controlled substances during their pregnancy and sharp rise of babies exposed to drugs in utero who often require extended Neonatal Intensive Care Unit (NICU) stays. At the same time, women with Substance Use Disorder (SUD) and those on opioid management often have few resources for services and our community is challenged with ways to coordinate services for all the women who come into our system. As a result, HSCFV took the lead in convening key stakeholders to address the needs of pregnant women and mothers with SUD as well as babies suffering from Neonatal Abstinence Syndrome (NAS).

Members of this group include the Department of Children and Families, Children's Medical Services, Early Steps, AdventHealth, SMA Behavioral Healthcare, Community Partnership for Children, Halifax Health Neonatal Intensive Care Unit, University of Florida, private OB/GYN's, Pathfinders, Children's Home Society, Healthy Communities, Chrysalis Recovery, Darryl Strawberry Recovery Center, 7th Judicial Circuit, Healthy Start providers, Healthy Families Behavioral Healthcare Navigator, and parent consumers.

The SEN Taskforce leverages funds for intervention, case management, medical support, family planning, behavioral health care, and practical support for women and babies impacted by substance use. The Taskforce has also worked steadily toward best practices and an integrated services model that focuses on staff development, participant engagement, peer support, trauma counseling, coordination with opioid prescribers and OB/GYN's, and inter-conceptional support after the birth of the baby.

Family Engagement Advisory Board

Family Place operates on a foundational tenet that individuals and families must be engaged in driving improvement to their personal and community health. We must effectively engage and listen to women and families on what issues are important to them and affecting their health. Healthy Start and Family Place recognize women and families as leaders and drivers of not just their own health but that of our community's health and future prosperity.

Family Engagement has been identified as a core value of our service delivery and cannot be accomplished without a consistent process designed for hearing the family voice. With funds leveraged from the Community Partnership for Children, this group is regularly convened with parents acting in leadership roles to train and advise the child welfare system about family needs, trauma, family case planning challenges, and ways to engage families who are struggling in the system. Policy recommendations and potential system improvements are presented by this group. In addition, the Chair of the Family Engagement Advisory Board, one of Healthy Start's Parent Partners, has been has been asked to participate in the Casey Family Foundation's national Birth Parent Network, she has also testified before the United States Senate Ways and Means committee about issues impacting family well-being and has provided her experience and expertise to numerous other DCF circuits, programs and organizations to help move parent engagement programs forward in Florida and across the country.

Parent Partner Initiative

The Parent Partner Initiative helps to bring parents out of isolation and connect them with positive supports. Parent Partners are appointed to child welfare cases/families and provides a mentor to assist families with navigating through the child welfare system. This program gives hope to families that they can successfully reunify with their children, or supports them as they courageously make a deliberate decision to surrender their rights and help their children find a permanent home. The science of early childhood development is the common ground for this program and seeks to give babies the best chance at growing up with stable and loving caregivers.

Parents of families that are engaged within the child welfare system are provided with support and resources to assist them with family reunification and long-term stability and success. Healthy Start Parent Partners work with families to:

- Work with families to promote engagement in case plan activities.
- Help maintain connections between parents and children while the children are placed out of the home.
- Share insight about their own personal experiences that may help parents be successful in their reunification efforts.
- Assist in reunification goals and/or development of appropriate alternative permanent plans.
- Provide a sense of hope and inspiration to parents involved in the child welfare system.
- Connect parents with resources.
- Provide encouragement, outreach and support.
- Work with a Parent Partner team (supervisor, child welfare case worker, planning committees, etc.)

In addition to the Parent Partner program, Healthy Start staff also offer a seven week 'We Time' parenting course that focuses on protective factors. Upon successful completion of the 'We Time' course, families are presented with a Certificate of Completion. Families that are engaged in the child welfare system are able to present this Certificate as a demonstration of the efforts they are making toward achievement of parenting goals and stability.

MAJOR ACCOMPLISHMENTS OVER THE PAST FIVE YEARS

The Healthy Start Coalition has achieved multiple accomplishments toward the improvement of maternal, child and family health in our Flagler and Volusia County service areas. A few of the milestones achieved over the course of the implementation of the 2017-2021 Service Delivery Plan are outlined below:

Development and Implementation of the CI&R CONNECT System

In 2017, Healthy Start Coalitions across the state were tasked with enhancing their community maternal and child health system by incorporating coordinated intake and referral system which ultimately was titled CONNECT. This process began with a year-long planning period to gather community and partner input as well as develop a plan for implementation of CONNECT services.

Healthy Start Flagler & Volusia believes that Cl&R CONNECT services are the foundation for our local system of care. It is through Cl&R that potential participants are initially contacted, assessed, provided information, and referred to home visiting programs and other community services. Eligibility for Cl&R begins when a pregnant woman, interconceptional woman, or an infant/child is referred to Cl&R by a health care provider, a community service provider, or through self-referral. The key CONNECT principles are:

- Each community's CI&R process is based on their unique local system of care.
- Cl&R is the primary point of entry for various home visiting, care coordination, and support services.
- Pregnant women and new mothers must be able to select home visitation and other services based on their needs and preferences.

The CI&R feedback loop (information about what happens with referrals) provides data transparency in referrals, enrollments and retention for home visitation services.

The Healthy Start Coalition of Flagler & Volusia ultimately added an additional office location, implemented an entirely new team of CI&R/CONNECT staff including administrative support, procedural manuals, guidelines, and quality assurance/improvement mechanisms. The Flagler and Volusia CI&R/CONNECT Team has consistently delivered strong outcomes and performance metrics since inception and the local team is considered one of the strongest across the state.

Transition To A New Evidence-Informed Care Coordination Program

Over the course of 2018-19, the Florida Healthy Start system developed and subsequently rolled out a new evidence-informed Care Coordination program utilizing the Florida State University Center for Prevention and Early Intervention's Partners for a Healthy Baby curriculum.

Performance Measures associated with the Care Coordination program are monitored quarterly and annually based on established goals. For Healthy Start Flagler & Volusia all measures were met or exceeded for all four quarters and the fiscal year. 95% of records reviewed showed:

| Percentage of Who Families Received: | Annual Target/Goal | HSCFV Actual |
|---|--------------------|--------------|
| Breastfeeding Education And Support | 90% | 90% |
| Childbirth education services | 90% | 98% |
| Adherence to guidelines associated with tobacco education and cessation | 90% | 92% |
| Interconception Education and Counseling services | 90% | 98% |

Reaccreditation of Healthy Families Volusia/Flagler

Healthy Families Volusia/Flagler was honored to be selected by Healthy Families Florida to be the first Florida site to receive a Healthy Families America Peer Review Visit as part of the process for Florida's multi-site system reaccreditation. Healthy Families Volusia/Flagler received notification within a week of the March 2019 site visit that the site was found to be in adherence to all First Order Standards, all Safety Standards, all Sentinel Standards, and 97 percent of standards overall thereby meeting the threshold for accreditation. Prevent Child Abuse America[®] and Healthy Families America[®] notified all Florida sites in May 2020 that Florida's multi-site system accreditation was effective through June 2025. The Healthy Families America[®] accreditation process is designed to identify individual sites and multi-site systems that have achieved high standards for performance and a commitment to quality.

Implementation of Nursing Services (CAPTA & Community Health)

In 2020 the Healthy Start Coalition of Flagler and Volusia Counties, Inc. was fortunate to obtain funding which enabled the organization to implement nursing services. Thanks to partnership with the Community Partnership for Children the Coalition was able to access Child Abuse Prevention and Treatment Act (CAPTA) funding to support an intensive Nurse Home Visiting program for highly vulnerable women with substance use disorder and substance exposed newborns.

In addition, thanks to private philanthropic support and partnership with the Florida Department of Health in Volusia County, a Community Health Nurse position was able to be implemented in one of the most challenged zip codes in our community. This nursing position is able focus on reproductive health needs

for families where our community's low birth weight rates and infant mortality rates are the highest in the County. The nurse can conduct assessments, link to family planning and other healthcare services, make referrals to provide breastfeeding support and WIC, connect families to smoking cessation programs, as well as provide referral follow up with women and families who reside in the target neighborhood.

Continuation of Services Through COVID

2020 marked an unprecedented period of adversity and struggle to maintain direction for the world as we know it. The COVID 19 pandemic posed a monumental challenge to the Healthy Start Coalition of Flagler and Volusia Counties and had the potential to disrupt virtually all aspects of the organization's operations.

However, the Healthy Start Coalition of Flagler and Volusia Counties is very proud of the fact that our staff rose to the occasion and displayed tremendous flexibility, creativity and tenacity to continue to get the job done and sucessfully navigate through the COVID-19 pandemic. Staff successfully transitioned to providing homevisits, care coordination, application support and connection to care, as well as demonstrations and parenting programs virtually while still meeting the needs of pregnant women and families with young children.

It is also worth mentioning though that the Healthy Start Coalition of Flagler and Volusia Counties was only completely closed for approximately three days. The organization never discontinued opportunities for families to directly engage with staff, set appointments, and receive services. IT staff completed the herculean task of transitioning virtually the entire workforce to remote access, office locations were retrofitted with plexiglass and other safety barriers, and staff rapidly learned how to efficiently utilize various technology tools and virtual supports. In addition, the organization actually added direct housing assistance and nursing services as new programs in summer and Fall of 2020. Finally and perhaps the most important indicator of accomplishment, the Coalition's programs and subcontracts remained on track to meet outcome objectives and provide as many or more services to vulnerable families in the 2020-21 fiscal year, despite all the challenges that COVID presented.

In addition to the successes that the Healthy Start Coalition of Flagler & Volusia Counties can claim directly, the communities of Flagler and Volusia Counties have tremendous community partnerships which support the mission of the Coalition and ongoing improvements to our communities' health and wellness. The partnerships and initiatives which Healthy Start participates in, contributes to, and benefits from are described below.

COMMUNITY PARTNERSHIPS AND INITIATIVES

There are multiple services and systems that intersect in maternal and child health in Flagler and Volusia county service areas. The Healthy Start Coalition is a convener of partners where focused collaboration is needed to achieve desired results. We also participate in initiatives in our community that address the well-being of families through health and human services, academic support, and workforce development. We list those below that have been particularly instrumental in promoting improvements for our pregnant and postpartum women, infants, young children, and their families.

One Voice for Volusia

The Healthy Start Coalition participates in a broader coalition building initiative known as One Voice for Volusia. One Voice for Volusia advocates for efficient use of resources and data-driven outcomes, and promotes system and community improvements by fostering diverse partnerships in the health and human services field. One Voice for Volusia is a neutral convener that engages leaders, organizations and individuals to develop and implement strategies to improve the community.

The One Voice for Volusia Coalition collaborative currently has over 1000 members representing more than 100 agencies and organizations from all sectors of the community. It is governed by a dynamic and engaged Board of Directors comprised of key community leaders committed to improving the quality of life in Volusia County. The Healthy Start Coalition Executive Director serves on this Board as an advocate for the needs of pregnant women and families with small children.

One Voice for Volusia convenes monthly and meetings are open to all who are interested in learning something new, networking and sharing information that will improve the quality of life in our community. Members and community stakeholders stay connected through subscribing to the Community Connector e-blast system and come together annually with over 500 attendees at the Health and Human Services Summit.

<u>Thrive by Five -</u> One Voice for Volusia convenes stakeholders among its coalition who serve families with children prenatal through age five. Through strategic planning stakeholders are able to align our efforts and increase collective impact through partnership building, information sharing and integration of services. This has resulted in networking and partnerships that have contributed to leveraging of significant resources through Healthy Start.

Behavioral Health Consortium

The Volusia and Flagler County Behavioral Health Consortium convenes to review the service delivery system for those experiencing problems with substance abuse or mental health. The Healthy Start Coalition is a member of this consortium, and strives to increase awareness through our behavioral health partners about perinatal mood disorders, maternal mental health and infant mental health. The Coalition also works to ensure that the challenges and needs associated with substance and alcohol use during pregnancy are prioritized within our community and among partner organizations. The Coalition highlights and reiterates that substance use disorders combined with pregnancy can result in fetal alcohol spectrum disorders, neonatal abstinence syndrome, and higher risk for developmental, neurobiological, and physical health challenges for our babies.

Early Childhood Court Team

Using the National ZERO TO THREE organization's Safe Babies Court Team approach and the Miami Child Well-Being model, Florida's Early Childhood Court emerged in 2014 and is the primary initiative within the Dependency Court Improvement Program. Early Childhood Court addresses child welfare cases involving children under the age of three. It is a problem-solving court where legal, societal, and individual problems intersect. The 7th Judicial Circuit was one of the original pilot projects that held this special court for families with very young children. These Early Childhood Court teams were a model for the state and have expanded to 27 sites across the state. Additionally, the Florida Supreme Court adopted the Early Childhood Court Best Practice Standards in November 2019.

The Healthy Start Coalition has participated in this project since its inception and has recruited and trained Parent Partners that are appointed to cases within the Early Childhood Court so that families have a mentor to help them navigate with their babies through the child welfare system.

The Early Childhood Courts in Florida have demonstrated significant success including:

- Reunification: ECC children attained permanency through reunification 8.5 months sooner than non-ECC children.
- Permanent Guardianship: ECC children attained permanency through permanent guardianship 7.5 months sooner than non-ECC children.
- Overall Permanency (this includes reunification, adoption, and permanent guardianship): ECC children attained permanency 4.75 months sooner than non-ECC children

Early Childhood Courts outcomes demonstrate tangible improvements in services and stability for very young children and the Healthy Start Coalition of Flagler & Volusia continues to take pride in our participation in this initiative.

Flagler CARES

Though Flagler County is a smaller county with less than 1,000 births annually, they have very active leaders and seek to improve the service delivery system for their residents and families. The Flagler CARES group focuses on access to health care for residents and developing a continuity of care for all. The commitment of this group resulted in the successful implementation of a Federally Qualified Health Center, which was awarded to Azalea Health. The Healthy Start Coalition participates in this group and contributes to the knowledge bases' and access concerns for pregnant women and young children. The very low number of clinical prenatal health services in Flagler County makes this group a valuable one to participate in, as prenatal care access is a primary objective of our Service Delivery Plan.

Help Me Grow

Florida became a Help Me Grow replication state in 2012, with the simultaneous launching of the initiative in Hillsborough (Tampa) and Miami-Dade counties. On a state-wide level, Help Me Grow promotes the Ages and Stages Developmental Screening through multiple venues to ensure parents are able to screen their children and link to services if their child(ren) are not developmentally on task. The Healthy Start Coalition has been an active partner and provides screening at our Family Place ACCESS locations and promotes the program to our participants during intake, assessment, and home visiting.

PROCESS & MODEL USED TO UPDATE THE NEEDS ASSESSMENT/ SERVICE DELIVERY PLAN

The Healthy Start Coalition of Volusia and Flagler Counties continually strives to identify and meet the emerging needs of the communities we serve. Information relating to local population characteristics, current and past birth outcomes, and health indicator data related to birth outcomes, reported service needs, perinatal services utilization, and local area resources was compiled from multiple sources to serve as the basis for the 2020 Healthy Start Needs Assessment.

The Service Delivery Planning process has been improved through systemic review of data and action planning objectives using the MAPP process (Mobilization for Action through Planning and Partnerships). The Coalition adjusted its timeline for Coalition system and planning meetings to ensure that quarterly reports can be reviewed publicly after the 15th of the month following the end of any given quarter. In this way, core performance measures are reviewed in relation to our action plan objectives with stakeholders convened to determine which strategies are effective and which strategies may require modification. This promotes an open evaluative process where stakeholders can openly discuss the need for programmatic or systemic change in order to meet objectives. This follows the MAPP process of Evaluation, Planning, Implementation and Action.

The MAPP process provides for ongoing planning and a more informed and mobilized Coalition who participates more fully in the five year planning process because they are an active part of action planning throughout the year. This also allows our action plan to be a living guide that stakeholders are familiar with and feel empowered to change when needed.

Healthy Start participant feedback and information relating to specific health status and service delivery indicators are collected and compiled regularly by the Coalition's staff and management team each year. The organization periodically conducts a full comprehensive needs assessment during each service delivery planning cycle, which then serves as the foundation for the next Service Delivery Plan. The full assessment incorporates additional consumer and provider surveys, more detailed indicator and service data, and active community input and feedback, which is organized into a detailed analysis of local maternal and child health needs.

Upon completion of the analysis of the Needs Assessment findings, the Coalition identifies priority areas for Service Delivery Plan development.

Summary of Data Sources

Florida CHARTS

The vast majority of the health status indicator and demographic data utilized in the 2020 Needs Assessment process was obtained from Florida CHARTS, the Florida Department of Health's data website. FL CHARTS provides extensive information on a range of health and wellness indicators. The Healthy Start Coalition of Flagler & Volusia draws heavily from the births data viewer, infant deaths data viewer and the young child profiles.

Healthy Start Screening and Service Data

In addition to serving as the entry point to the Healthy Start system of care, Healthy Start prenatal and infant screens also serve as a vital source of data that, when combined with other sources, help to illustrate the circumstances and conditions that local consumers face each day. Data from completed Healthy Start screens is recorded daily into a statewide database. Summary reports generated by geographic location, race, ethnicity, etc. allow researchers to identify community-specific issues and trends among expecting mothers and their babies. The screening instruments address a wide variety of topics to identify potential risk factors for poor perinatal outcomes, and are often the only available documentation of specific risks, behaviors, and circumstances that occur within a particular community. It is important to note however, that the screening data is based on client self-report and reflects only what was documented and processed by the individuals who administer the screen. Therefore, the information may be affected by such issues as: fear among consumers about disclosing specific behaviors, staff turnover, and inconsistent reporting methodologies. For this reason, the data generated and collected from these tools are considered as minimum estimates of the actual occurrence of each factor and/or behavior.

Healthy Start service data provided throughout the state, is available through Florida Department of Health CHARTS, Executive Summary Reports, and the Well Family Data system. De-identified, aggregate reports regarding the number and type of Healthy Start services provided in each county are updated by the Department of Health on a monthly basis and are available through the Department's website. These reports are invaluable tools in implementing effective quality management of Healthy Start services and systems of care, and for identifying and monitoring various trends in service provision.

Fetal and Infant Mortality Review (FIMR) Data

The findings of this committee relating to the leading causes of death and relevant associated risks were compiled and discussed among the Service Delivery Plan Committee members as an integral part of the needs assessment process. FIMR data is reported from the BASINET (Baby Abstracting System and Information Network) database; hence, FIMR data does not have epidemiological significance due to the small population size and geographical area investigated. Fetal and infant death cases are individually presented and examined to determine what systemic changes may have prevented the death or better responded to prevent future loss.

Participant, Provider and Coalition Feedback

In addition to utilizing data from public health and other electronic sources, Healthy Start conducts periodic surveys among local consumers, Healthy Start participants, and area medical service providers. Healthy Start participant satisfaction surveys are conducted semi-annually, while separate surveys pertaining to local participants needs are distributed to both consumers and medical providers during each full needs assessment cycle. The surveys are intended to solicit feedback regarding quality and value of existing services and needs. The survey process is an invaluable component to the comprehensive assessment in that it allows for qualitative data collection and provides an avenue for both participants and providers to express their needs and opinions regarding local programs and services.

<u>The Well Family Data system.</u> This system allows us to track unique client identifiers over time in alignment with established coding and can adapt to the changing reporting needs as we consider new designs in our service system.

All of the data and information that was considered during the needs assessment and subsequent planning processes is available for review as a supplement to this document.

Data Limitations

It is important to note that all data comes with limitations. Data sets have been compiled from numerous sources and may not be perfectly aligned with one another. Some data are presented in rolling averages and others by single year with the most current data available. Any conflicting data has been verified to provide for the most accurate accounts available.

Data that is presented by service area must also be reviewed in their proper context. Flagler County consistently has less than 1,000 births annually and therefore may seem to show severe fluctuations, even though it may be the result of two or less incidents of an outcome indicator, such as infant mortality. This is an important factor to consider when identifying trends for analysis and viewing data in chart form. It is also the reason that looking at 3 year rates and trends is critically important.

Through the process of conducting needs assessment activities, we were able to identify data sets that need to be developed and analyzed more thoroughly in the future. Important examples of this are in the areas of maternal substance use and substance exposed newborns. Despite being critically important indicators, particularly in the Flagler and Volusia service delivery areas, there still isn't good aggregate data available through FL CHARTS, vital statistics or alternative state and national level systems. Healthy Start Flagler & Volusia staff and leadership have coordinated extensively with local and state partners to identify sources of data that can be obtained to gain a better understanding of the nature and scope of

these particular issues but we continue to look forward to a point when up to date and comparative data is widely available.

The Service Delivery Plan Development Process

The Service Delivery Planning process is an ongoing activity that takes place each quarter with reports of outcomes presented by and to numerous providers and stakeholders. The focus on the 2021-2025 Service Delivery Plan began in October 2018. A timeline of the Service Delivery Planning process is provided in the 2020 Needs Assessment and is available upon request. The phases of the timeline are described as follows:

As noted in the 2020 Needs Assessment:

<u>Phase I -</u> The Comprehensive Needs Assessment began with convening of the Healthy Start provider agencies to review Healthy Start Service Delivery data in relation to core performance measures and outcomes and the ongoing action planning of the Coalition.

<u>Phase II -</u> The second phase of the Needs Assessment process brought all community stakeholders together to review the findings of the provider agency group and begin to review related indicator data.

<u>Phase III -</u> The large group divided into groups and reviewed on specific indicators and conducted an assessment of the indicator data in their related area. Healthy Start staff responded to requests for data and meeting support as needed. The large group convened one final time to share their findings and build consensus about action plan strategies.

Based on the preliminary needs assessment data, the following areas were determined to be areas for ongoing strategy development and action:

- Fetal and Infant Mortality
- Low Birth Weight
- Entry into Prenatal Care
- Screening Prenatal and Postnatal
- Substance Exposed Pregnant Women and their Babies
- Social Determinants of Health and Health Equity

<u>Phase IV –</u> A smaller Service Delivery Planning Workgroup was formed in early 2021 and came together for six additional meetings to finalize the selected indicators, review subsequent community input from frontline staff and leaders among Community Partners, and finally provide input to the Service Delivery Plan Document, priorities and strategies.

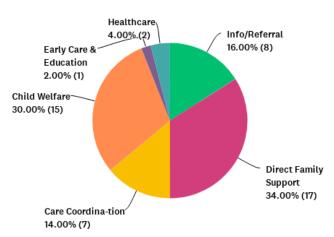
Community Input

As part of our Service Delivery Planning Process, and supplemental to the initial 2020 Needs Assessment which was finalized in December 2020, the Healthy Start Coalition of Flagler & Volusia developed and implemented two surveys to gather input from frontline workers as well as the leadership of our partner organizations.

Q1 | Work In:

Frontline Staff Survey

Fifty individuals responded to the Frontline staff survey and represented a variety of different organizations within the local maternal/child health and early childhood systems. Generally speaking, Frontline staff responded positively with respect to their views of the maternal and child health system and the services of the Healthy Start Coalition. As reflected in the table below, mean scores for questions on whether they have the supports they need from Healthy Start, if they are able to connect pregnant women and families with young children to the services they need all scored within a range of 4.08 to 4.30.



| | Mean Score | Standard Deviation |
|--|------------|--------------------|
| Q2. I have all the supports from the Healthy Start Coalition that I need to gather information and refer to services effectively. | 4.08 | 1.09 |
| Q3. Generally speaking, I am able to connect pregnant women to the services and supports they need. | 4.12 | 1.03 |
| Q4. Generally speaking, I am able to connect families with young children to the services and supports they need. | 4.30 | 0.98 |

When asked to report the most frequently requested additional services by clients, frontline staff reported that:

- Car Seats/Pack & Plays, Diapers (22%)
- Counseling, Mental Health and Substance Use Treatment (22%)
- Childcare (20%)
- WIC, Food Stamps, Financial Assistance (14%) if you count Medicaid (22%)

Finally, when asked their own opinions of additional services needed staff requested more: Counseling, Mental Health and Substance Use Treatment (26%), Housing (22%), and Parenting Supports (22%)

Community Leaders Survey

Thirteen members of executive leadership from community partner organizations responded to the Leadership Survey. They represented organizations that provide: Information/Referral, Direct Family Support, Care Coordination/Homevisiting, Resource Referral/Coordination, Child Abuse Prevention/ Child Welfare, and Early Care & Education.

Volusia and Flagler leaders identified the Parent Partner program, Healthy Families and Care Coordination as being the three best programs or supports provided by the Healthy Start Coalition of Flagler & Volusia Counties.

When asked what programs/initiatives should be expanded if resources were available, the following services represented the top (5) choices selected:

- 1) Doula/Midwifery Services,
- 2) Other Programs/Services
- 3) Peer support
- 4) Direct care/nursing (tie)
- 4) Parent/family engagement activities (tie)

Interestingly, when asked about their perceptions as to whether Flagler and Volusia Counties have wellcoordinated approaches to maternal and child health initiatives the mean score from Leadership of Community Partner organizations for Flagler County was 3.0. Conversely Volusia County had a mean score of 4.08 on the same question. There were also a couple of anecdotal comments from frontline staff regarding the absence of 'presence' of The Healthy Start Coalition of Flagler & Volusia Counties in Flagler County. Healthy Start programs are serving significant numbers of women and families in Flagler County, however a disconnect seems to exist between actions taking place and visible presence/community awareness. The Healthy Start Coalition of Flagler & Volusia Counties will be examining how to address these perceptions in the near future as well as incorporating the feedback of frontline staff and leadership into our strategies and action plans moving forward.

Ongoing Survey Activities

In addition to the Community surveys administered specifically for the purposes of Service Delivery Planning, the Coalition regularly surveys healthcare providers (OBs and Pediatrician offices) as well as our program participants to gain feedback about their satisfaction with services provided by our staff and subcontractors. These surveys utilize text prompts and communications in order to maximize responses. Coalition staff and leadership regularly review the information gained from these surveys to drive quality assurance and improvement of day to day operations.

ADDITIONAL COMMUNITY PLANS & INITIATIVES

Florida Healthy Babies Initiative

HSCFV has worked very closely throughout the years with our local health departments and have been involved in the Florida DOH "Healthy Babies" initiative for several years. We are actively involved in the Volusia Flagler Breastfeeding Coalition and support the efforts being taken to improve breastfeeding rates in the community. The Coalition sees the Florida Healthy Babies Workplan and their selected indicators of safe sleep, breastfeeding promotion, and establishing 'Breastfeeding Welcome' spaces in our community as in direct alignment with and supportive of the priorities of Healthy Start and the strategies identified in this Service Delivery Plan. We look forward to continuing to work collaboratively with the Volusia County Healthy Babies Initiative to address these and additional issues in the future.

Community Health Needs Assessment (CHNA)

The Healthy Start Coalition actively participates in the Flagler and Volusia County Community Health Needs assessment process (CHNA) which is led by the FL Department of Health. The CHNA drives the

deliverables for the Community Health Improvement Plan (CHIP) and The Coalition works closely with FL Department of Health staff to ensure the alignment of strategies as it relates to maternal and child health. With respect to the CHIP, the Coalition focuses our efforts primarily on supporting the areas of Barriers to Accessing Health Care Services and Social & Economic Issues.

Child Abuse Prevention and Permanency Plan (CAPP)

The Healthy Start Coalition has been a leading participant in the Circuit 7 Child Abuse Prevention and Permanency Plan and has worked with stakeholders to ensure a focus on safety issues affecting young children to include safe sleep, safe caregivers, drowning prevention, shaken baby, and hot car abandonment. This has helped align efforts in infant safety and reduce duplication of effort. We have identified substance use by parents and caregivers as a major factor impacting the outcomes in these cases, and we work as a collaborative group to employ effective strategies to improve outcomes for our most vulnerable children.

2021-2025 SELECTED INDICATORS, STATUS & 5 YEAR GOALS

After decades of engagement with our community, the Healthy Start Coalition of Flagler & Volusia has refined our planning approach to determine what specific factors are affecting our system of care for mothers and babies and/or are negatively impacting birth outcomes. We utilize a multifaceted approach that is dynamic in nature, recognizes the growing, changing and relatively transient nature of Volusia and Flagler communities as well as the larger state of Florida. Ongoing review of MCH data, collaboration with the many community partners, participation in community initiatives, and regular input from our Board, coalition members, subcontracted providers and our clients, has assisted the Healthy Start Coalition of Flagler & Volusia to identify and address needs which impact the well-being of pregnant women, babies, and our larger maternal and child health care delivery system.

Priorities for the 2021-25 plan were established based on extensive review of the data, discussion of resources and priorities and known gaps in services. Throughout the planning period Healthy Start staff and Service Delivery Plan Workgroup members reviewed the data on existing priorities and indicator goals to determine progress, assess which strategies should be expanded upon and explore new initiatives and goals that data indicates are needed.

In developing the 2021-25 Service Delivery Plan, the Healthy Start Coalition of Flagler & Volusia Counties, Inc. has elected to segment objectives, strategies and actions into three areas of effort. The Coalition will continue to track and review specific health indicators while also monitoring, strategizing, and setting objectives related to the larger system of care, improving health equity and addressing social determinants of health.

The following health indicators have been selected for the Coalition's overarching goals for the next five year planning cycle.

- Infant Mortality
- Maternal Mortality
- Breastfeeding Initiation
- Low Birth Weight
- Entry into Prenatal Care

Breastfeeding Initiation was added as a priority indicator primarily because although improvements have been made in the overall breastfeeding rates for both Flagler and Volusia communities, they continue to lag behind the rest of Florida. Additionally, Maternal Mortality was added because of this indicator's emergence as a critical need and the alarming increases in the maternal death rate over the past few years.

It is important to note that entry into prenatal care entry was simultaneously removed as a frontline indicator. This is not because the Healthy Start Coalition doesn't prioritize prenatal care, rather the monitoring and support of early prenatal care is seen as a contributing factor to several other indicators (low birth weight, infant mortality and maternal mortality). Therefore, tracking of first trimester prenatal care as well as the quantity of women who receive late or no prenatal care are being included in the strategies and supports of the priority indicators identified above.

Improving health equity and reducing racial disparities across all the indicators is also a critical priority for the Coalition and underpins all our programs and initiatives. Every indicator we track will also be monitored for racial and ethnic inequities and our ongoing health equity initiative within the Coalition will drive specific actions and targeted programming to advocate for and support health equity. As an organization, we are aware that structural racism exists and regularly impacts the care and support that vulnerable pregnant women and families receive. We will continue to work internally and with all our community partners to improve our efforts and impacts with respect to racial justice and health.

| SELECTED HEALTH INDICATORS Add 2017 status | 2016 STATUS | CURRENT STATUS* | | SERVICE AREA 5-YEAR GOALS | SERVICE AREA 5-YEAR GOALS |
|---|--------------------------|-----------------|--------------------------|------------------------------------|------------------------------------|
| | Local Volusia/Flagler | FL | Local Volusia/Flagler | 2017-2021 | 2021-2025 |
| Reduce Infant Mortality Rate** | 4.5** | 6.0** | 6.2/6.5** | 4.5 | 5.5 |
| Reduce Maternal Mortality Rate** | 26.9/0.0** | 20.1 | 40.7/40.6** | N/A | 25.0 |
| Increase Breastfeeding Initiation | 78.3%/86.0% | 86% | 79.8%/81.5% | N/A | 87% |
| Reduce Low Birth Weight | 8.7%/8.9% | 8.8 | 8.3/8.5 | 7.2 | 7.9 |
| Increase First Trimester Prenatal Care | 72.3% | 75.9% | 78.8/80.1 | 85% | 85% |

Selected Health Indicators - Current Status & Goals by Planning Cycle

*Current Status is based upon most current data available, generally 2019

**Indicates that rolling 3 year data was utilized for goal setting purposes. However, 2017-2021 Service Delivery Plan looked at single year rates

| HEALTHY START SYSTEM INDICATORS | CURRENT STATUS* | | SERVICE AREA 5-YEAR GOALS | SERVICE AREA 5-YEAR GOALS |
|---|--------------------|--------|------------------------------|------------------------------|
| | FL | Local | 2017-2021 | 2021-2025 |
| Prenatal Screening Rates (Consent) | 90.08% | 93.61% | 97% | >94.0% |
| Prenatal Screening Rates | 65.01% | 80.53% | >93.0% | >83.0% |
| Infant Screening | 95.94% | 93.11% | 90.0% | >96.0% |
| CI&R/CONNECT Completed Initial Intakes - Prenatal | 49.80% | 43.30% | N/A | >50% |
| CI&R/CONNECT Completed Initial Intakes - Infant | 65.80% | 64.40% | N/A | >70% |
| Cases referred to services - Prenatal | 31.96% | 18.86% | N/A | >30% |
| Cases referred to services - Infant | 33.19% | 30.77% | N/A | >40% |

Selected System Indicators - Current Status & Goals by Planning Cycle

5 YEAR GOALS & STRATEGIES TO ADDRESS HEALTH INDICATORS

Infant Mortality

Infant mortality is a primary indicator of the health of a community as well as one of the core indicators Healthy Start programs were created to work on and positively impact. Infant Mortality is defined as the death of an infant prior to his or her first birthday. As an important measure of maternal and child health, infant mortality is divided into two age periods: neonatal (birth to 27 days) and postneonatal (28 to 364 days).

Neonatal mortality occurring within the first 28 days of life and is strongly correlated with low birth weight, prematurity and other issues related to pregnancy and birth. This indicator, including use and availability of neonatal intensive care units (NICU), measures the effectiveness of the perinatal high-risk system. The leading causes of death in the neonatal period include congenital anomalies, respiratory distress syndrome, disorders relating to short gestation, and effects of maternal complications.

Post-neonatal mortality refers to deaths occurring during the period between 28 days and one year of life. These deaths are associated with the effectiveness of the community's child health system of care, as well as socioeconomic factors relating to the child's home environment. The leading causes of death in this period are sudden unexpected infant death (SUID), congenital anomalies, injuries and infection. Area infant services and community outreach are most likely to impact this indicator of infant health. Educational discussion regarding safe sleep and injury prevention will continue to be incorporation within our Healthy Start initiatives to ensure communities' knowledge and understanding on how to avert postneonatal mortality.

According to the Centers for Disease Control and Prevention (CDC), In 2018 (latest data available) the infant mortality rate in the United States was 5.7 deaths per 1,000 live births. Comparatively, the Infant Mortality Rate for Florida in 2018 was 6.0.

Both Flagler and Volusia Counties' infant mortality rates are above the state of Florida. The Infant Mortality Rate in Volusia County is currently 6.2 (2017-19). It has decreased over the last few years but remains up from a rate of 4.3 in 2012-14. In Flagler County rates stand at 6.5 and have been climbing since a low of 4.8 in 2002-04.

Infant Mortality

| Indicators/5-Year Goals | Adopted Strategies |
|---|--|
| Reduce the Infant Mortality Rate to 5.5 across the service delivery area. | Continue efforts to increase public awareness about access to prenatal services and other resources. Continue FIMR project and successfully implement the recommendations from the CRT Group. Explore/create prenatal and postpartum apps including Thrive By Five and other local resources that can be promoted to pregnant woman and vulnerable families. Maintain and expand health equity initiatives work, particularly in the 32114, 32117, and 32720 zip code areas. Continue marketing and training on the Healthy Start prenatal screen to better identify risk and support provider linkage to Healthy Start. Work with hospitals to improve infant screening to better identify infants at risk and improve linkages. Promote broad-based awareness/media campaigns focused on early entry to prenatal care (in Spanish and English). Provide leadership support to Infant Mental Health Chapter. Continue neonatal outreach work and placement/connection of staff to hospitals, NICU facilities and provider offices. Continue preconception/interconception care initiatives. Support assessment services at the community birthing centers. Promote and explore options for enhancing father involvement. |

| Continue to promote Safe Sleep initiative, crib/pack and play distribution and educate mothers, fathers, and related caregivers about safe sleep practices. Continue Neonatal Outreach Services and educate mothers regarding importance of pediatric follow-up and a permanent medical home. Address risk factors such as hypertension, obesity, stress, and social determinants of health in partnership with the Florida's Healthy Babies Initiative. Increase public awareness through media messaging about safe sleep that can be targeted to participants, caregivers, providers, and the community at large. Continue to integrate cultural competency into training plans for home visiting and care coordination services. Work with the African American Community to increase awareness and education about preventable causes of death and interconception support. Continue dissemination of the Bereavement Guide to providers for |
|---|
| Continue dissemination of the Bereavement Guide to providers for support and follow up when women have experienced a fetal loss/infant loss to support bereavement and health access in between pregnancies. |

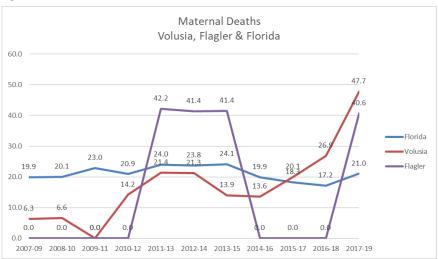
Maternal Morbidity & Mortality

Maternal morbidity and mortality has emerged as a significant issue in the United States as well as locally. The United States has experienced a steady rise in pregnancy-related deaths over the last 3 decades and now ranks worst overall among industrialized countries for maternal mortality. In addition, the rate of severe maternal morbidity has also increased.

In addition, according to the Commonwealth Fund, significant racial disparities exist with respect to maternal mortality. The maternal death ratio for Black women (37.1 per 100,000 pregnancies) is 2.5 times the ratio for white women (14.7) and three times the ratio for Hispanic women (11.8).

A Black mother with a college education is at 60 percent greater risk for a maternal death than a white or Hispanic woman with less than a high school education.

Causes of death vary widely, with death from hemorrhage most likely during pregnancy and at the time of birth and deaths from heart conditions and mental health-related conditions (including substance use and suicide) most common in the postpartum period. In Volusia and Flagler counties the maternal deaths mirror what has been happening across the U.S. with data trending upward



over time and somewhat alarmingly in the past few years.

The 2019-2019 Maternal Death Rate in Volusia was 47.7 and 40.6 in Volusia and Flagler counties respectively. This was more than double the rate of Florida (21.0) and well above the rate of the U.S.

At the same time, it is estimated that approximately 50% of maternal deaths are preventable. As a result of the overwhelming data the Healthy Start Coalition of Flagler & Volusia Counties has adopted Maternal Deaths as a new focal area and priority indicator for 2021-2025.

Maternal Mortality

| Indicators/5-Year Goals | Adopted Strategies |
|--|---|
| 1. Reduce the Maternal Death Rate to 20.0 | Support comprehensive training to Healthy Start staff and community partners on Maternal Morbidity and Mortality causes as well as prevention methods. Continue to support and promote early entry into prenatal care through outreach, community education and marketing initiatives. Support access to and maintenance of care for women during pregnancy and post delivery Conduct public awareness efforts to ensure women are aware of their ability to obtain health care coverage Work with managed care providers to enroll women in available services and programs Utilize Family Place staff and other service providers to ensure enrollment of women in Medicaid and other healthcare coverage mechanisms. Continue and explore expansion of health equity initiatives such as Family Place and community health nursing. Include expansion of place-based service locations or on-site community staff in targeted geographies and zip codes. Explore and promote evidence-based approaches to reducing maternal mortality such as midwives and doulas. Continue and explore expansion of homevisiting programs, particularly for high-risk populations. Continue enterconception education services for pregnant women. Continue smoking cessation education services to support pregnant recovering women. Continue to fund Care Coordination services to support pregnant women. Continue marketing and education to patients, providers, and the community about maternal and pregnancy related morbidity and mortality. Link women to WIC services |

| ٠ | Provide screening and support for maternal mental health and link to |
|---|--|
| | services and resources that can support stress reduction. |
| | |

Breastfeeding Initiation

Breastfeeding has enormous economic and health benefits for mothers, babies and communities. Breast milk provides optimal nutrition for infants and is associated with decreased infant mortality. Although breastfeeding rates have slowly increased, Black mothers are significantly less likely than White mothers to breastfeed. While the percentage of mothers who initiated breastfeeding in the Healthy Start Flagler & Volusia service area has been increasing steadily however, the percentage of mothers who initiated breastfeeding in the Coalition area is significantly less than the Florida mothers overall who initiated breastfeeding (72.6 percent compared to 81.0 percent).

The Healthy People 2020 goal was 81.9% of infants are ever breastfed. Healthy People revised their 2030 objectives from focus on 'mothers who breastfeed' to 'infants who are exclusively breastfed at 6 months and infants who are breastfed at one year. While Healthy Start agrees with the motivation behind these goals and will absolutely monitor what breastfeeding rates look like at 6 and 12 months in our service delivery area, the decision was made to focus our initial effort on this indicator to address initiation. After all, it is difficult to impact longer term goals if the initial behavior isn't adopted at sufficient levels.

| Breastfeeding Initiation | |
|--|--|
| Indicators/5-Year Goals | Adopted Strategies |
| Increase the percentage of women who initiate breastfeeding to 86.5% | Continue to actively participate in the Volusia Flagler Breastfeeding Coalition and support the efforts being made by that group to promote breastfeeding in Volusia County. Promote and support culturally competent breastfeeding and childbirth education for all women. |
| | Seek support to develop a program for regular training of Certified Lactation Counselors within Flagler and Volusia Counties. |
| | Pursue funding and partners to support new/expanded breastfeeding promotion initiatives. |
| | Expand training for Healthy Start staff, subcontractors and partners on effective methods and mechanisms to support breastfeeding. |
| | • Continue smoking cessation education services for pregnant women. |
| | Research, promote and explore development of apps that support prenatal health and behavior support such as VROOM and text4baby. |
| | Link women to WIC services |
| | • Support educational opportunities for staff to include Strategies to engage women in breastfeeding, skill development to address and advocate for Health Equity implicit bias, and family engagement. |

Low Birth Weight

Low birth weight (LBW) infants are those born weighing less than 2500 grams (5 lbs.8 oz.), and very low birth weight infants weigh less than 1500 grams (3lbs.5oz.). Social determinants of health including poverty and poor education, along with chronic maternal health conditions such as alcohol use, smoking and poor nutrition are associated with an increased risk of having a low birth weight baby. Although advances in medical care have reduced the death rate associated with low birth weight, these infants are more likely to have significant long-term health and developmental problems. In fact, LBW, together with premature birth, is the major factor contributing to infant mortality and thus is one of the strongest predictors of our infants' health and longevity.

At first glance, Flagler and Volusia Counties appear to be doing fairly well when compared to the state of Florida's low birth weight rate of 8.8 since the local rates are 8.5 and 8.3 respectively. However, in both Flagler and Volusia counties the rates have been increasing over the past 15 years. This is problematic and given the impacts that low birth weight can have on other important health indicators, the Healthy Start Coalition of Flagler & Volusia believes continued focus on this indicator is warranted for the 2021-25 Service Delivery Plan.

| Low Birthweight |
|-----------------|
| |

| Indicators/5-Year Goals | Adopted Strategies |
|---|--|
| Reduce the Low Birth Weight (<2500 grams) rate to 7.9. | Promote the benefits of early entry into prenatal care. Increase collaboration with community partners serving high risk populations to increase number and scope of consumers receiving educational information on the importance of early prenatal care. Continue to operate Family Place sites to assist pregnant women in application for Medicaid, food stamps, WIC, TANF and other needed services. Promote broad-based awareness/media campaigns focused on early entry to prenatal care (in Spanish and English). Increase collaboration with community partners serving high risk populations to increase number and scope of consumers receiving education on the importance of early and regular prenatal care. Provide support for transportation to medical appointments and care for vulnerable pregnant women. Conduct provider, participant, and community awareness activities to increase access to prenatal services. Develop ongoing strategies associated with serving women and babies adversely impacted by the use of opiates/opioids, alcohol, tobacco and other drugs. Continue safety net options for the provision of clinical prenatal services for uninsured women (working poor) to include funding prenatal clients with no payer source through the Florida Department of Health in Flagler County. |

| Develop stronger partnership with the Domestic Abuse Council to coordinate on behalf of women who enter the shelter and need prenatal services. |
|---|
| Continue smoking cessation education services for pregnant women. |
| Continue marketing and education to patients, providers, and the community about infant mortality, low birth weight and healthy pregnancy. |
| Promote and explore development of social media and apps that support prenatal education and support. |
| Support and continue comprehensive trainings to Healthy Start staff and the larger community about preeclampsia, kick counts, SUID and SIDS, and other causes of prematurity and LBW. |

Early Entry Into Prenatal Care

Having a healthy pregnancy is one of the best ways to promote a healthy birth. Getting early and regular prenatal care improves the chances of a healthy pregnancy. This care can begin even before pregnancy with a pre-pregnancy care visit to a health care provider.

Prenatal care can help prevent pregnancy complications and support women with taking important steps to help ensure a healthy pregnancy and infant. Early and regular prenatal care can:

- Reduce the risk of pregnancy complications.
- Controlling existing conditions, such as high blood pressure and diabetes, is important to prevent serious complications and their effects.
- Reduce the fetus's and infant's risk for complications. Tobacco smoke and alcohol use during
 pregnancy have been shown to increase the risk for Sudden Infant Death Syndrome and alcohol
 use also increases the risk for fetal alcohol spectrum disorders which is linked to a variety of
 problems such as abnormal facial features, small head size, poor motor coordination, intellectual
 disability and memory issues, and problems with the heart, kidneys, or bones.

Healthcare providers will support women to follow a safe and healthy diet, get regular exercise, and avoid exposure to potentially harmful substances including certain medications which may be harmful for the fetus. Following this advice can reduce the risk for problems during pregnancy and promote fetal health and development.

Early entry into prenatal care into Flagler and Volusia Counties is somewhat of a mixed bag. Both Flagler (80.1) and Volusia (78.8) have first Trimester Prenatal Care rates that are above Florida (75.9), however the trend for first trimester prenatal care is actually decreasing in Flagler County which is somewhat problematic. Volusia County's early entry into prenatal care has been improving since a low of 71.8 in 2007 however, our Service Delivery Area missed the 2017-2021 goal of 85% related to early entry into prenatal care. And although Volusia has a small percentage of women who get late or no prenatal care (3.2) it is still estimated that in 2019 almost 400 women in Volusia and Flagler counties did not receive any prenatal care at all. The Coalition also has significant concern that the COVID 19 pandemic may have had negative impact on women's accessing of healthcare in general and prenatal care in particular. Therefore we will continue to monitor and work on ensuring that women obtain the care they need.

Early Entry Into Prenatal Care

| Indicators/5-Year Goals | Adopted Strategies | |
|--|---|--|
| Increase the percentage of women who receive first trimester prenatal care to 85% or better | Promote broad-based awareness efforts/campaign(s) focused on early entry into prenatal care. Target specific messaging to priority communities and health equity zones Increase collaboration with community partners serving high risk | |
| Maintain a late/no prenatal care rate below 3.5% Reduce the number of women who receive no prenatal care to 280 or less | populations to: Coordinate and better serve high-risk women who are experiencing situations such as homelessness, domestic violence, etc. and also need prenatal care. Increase number and scope of consumers receiving educational information on the importance of early prenatal care. Explore issues of institutional racism and structural inequities that may be impacting women's ability and desire to access prenatal care early and regularly. Continue to review FIMR cases for insights and strategy recommendations to improve system level care for women. Disseminate findings Continue to operate Family Place DCF ACCESS sites to assist pregnant women in application for Medicaid, food stamps, WIC, TANF and other needed services. Provide wraparound supports for disadvantaged pregnant women to receive the care they need. Continue to develop and implement strategies to serve pregnant women and babies adversely impacted by the use of opiates/opioids, alcohol, tobacco and other drugs. Continue safety net options for the provision of clinical prenatal services for uninsured women (working poor) to include funding prenatal clients with no payer source. | |
| | Continue to survey providers and disseminate findings. | |

ADDITIONAL ORGANIZATIONAL PRIORITIES

Maternal Substance Use Disorder & Substance Exposed Newborns

As discussed in the 2020 Needs Assessment, maternal substance use disorder has become a significant challenge in Volusia County. The use of substances poses risk to the mother and fetus during pregnancy, and it often causes adverse impacts to the newborn.

At the same time, obtaining data on maternal substance use can be difficult, since there is no uniform diagnostic code used by OB/GYNs that is collected, and self-reporting information by pregnant or post-partum women is not considered consistently reliable. Prior to regular surveillance by the Florida Department of Health, our Coalition looked at data from the Agency for Health Care Administration to be able to review the scope of the issue for both mothers and infants. The data showed that rates of Volusia County newborns exhibiting symptoms associated with exposure to controlled substances and withdrawal was above the rate of Florida and continuing to increase. By 2016, Volusia County showed a rate of over 30 per 1,000 live births and that trend continues upward.

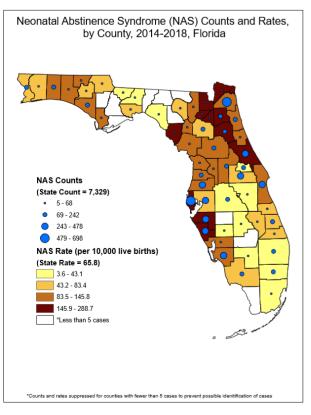
Neonatal Abstinence Syndrome

Neonatal Abstinence Syndrome (NAS) is a condition experienced by newborns exposed to alcohol, opioids or other substances that result in symptoms of withdrawal or discomfort such as excessive high-pitched crying, irritability feeding difficulties and gastrointestinal problems, sleep-wake disturbances, and in some cases hyperreflexia and seizures. Most infants will be observed and treated as needed in a Neonatal Intensive Care Unit (NICU).

In 2018, the rate of NAS according to the Department of Health, Birth Defects Surveillance, was at a rate of 107.2 per 1,000 live births. Figure II.14. shows comparisons across the state by county with a visual illustration of the high rate and count in Volusia County 2014-2018.

Because of the significant rates in Volusia County, Healthy Start Coalition of Flagler and Volusia Counties has worked closely with our stakeholders to inventory unmet need, map the early intervention activities and leverage resources to respond to the challenge. The Coalition also believes that it is imperative that we continue to incorporate focus on and initiatives to address maternal substance use disorder and substance exposed newborns, particularly given the impact that these mental illnesses and associated behaviors can have on birth outcomes, maternal wellness, and the overall health of families with young children. We will also work with our partners to address the gaps and needs identified in the 2020 Needs Assessment, particularly:

- Lack of prenatal clinical providers on the west side of our county and no prenatal clinical providers other than the health department in Flagler County.
- Housing inadequacies for women who, during and immediately after pregnancy, cannot work full time and experience poverty-related social determinants of health.



- Stigma in our system of care regarding lack of understanding that substance use disorder is a chronic and progressive illness.
- Upon removal of an infant and order to residential treatment for the mother, the baby is often placed with a relative or foster home where caregivers are in need of instruction on how to minimize effects of NAS and care for challenging symptoms that put infants at risk for abuse such as shaken baby syndrome or neglect.

HEALTHY START SYSTEM GOALS

In addition to the maternal and child health indicators selected as priorities for 2021, the Healthy Start Coalition of Flagler and Volusia Counties also seeks to maintain strong performance within the maternal and child health system of care as well as make incremental improvements wherever possible.

Maintaining strong prenatal and infant screens is critical to effectively connecting vulnerable pregnant women and infants to care and support they need. Volusia and Flagler counties are very proud to have some of the highest screening rates in the state of Florida and to have maintained those rates through structural system changes as well as modifications to programs and data systems. However, we see maintaining our strong screening rates as critical to the ongoing success of the local maternal and child health system. Therefore, the following system screening goals have been selected:

| Prenatal & Infant Screening Rates | | |
|---|---|--|
| Indicators/5-Year Goals | Adopted Strategies | |
| Maintain Prenatal Screening Consent Rates at or above 94% | Continue community provider liaison contract to work with prenatal health providers on screening education and implementation. Maintain and possibly expand OB/GYN participation on the Healthy Start Coalition and Board of Directors. | |
| 2. Increase Prenatal Screening Rates to 84% or better | Conduct outreach to new OB service providers in the Flagler and Volusia communities to promote Healthy Start screening and services. Conduct regular visits (average two times/month) to all healthcare providers of OB services in Volusia and Flagler Counties to: Distribute educational materials to all to promote screening and acceptance of Healthy Start screen/services. Support administration of supplemental developmental and behavioral risk screens. Continue to implement public education and awareness campaigns to promote Healthy Start screening. Explore implementation of provider/consumer incentive and/or reward programs to maintain/increase screening rates. Invite OB/GYN providers to be more active in the FIMR process and develop mechanisms to share findings with providers on a regular basis. Continue to review screening data and coordinate with providers to accurately and consistently conduct Healthy Start Screening. Continue to survey providers regarding awareness of Healthy Start priorities, programs and screening liaison services. | |
| Increase the Infant Screening Rate to 96% or better | Coordinate with all birth centers in the service area to ensure rates are reviewed and strategies for improvement are developed in partnership. Continue to implement public education and awareness campaign to promote Healthy Start screening. Continue to implement provider and consumer incentive programs to increase screening rates. Wherever possible, provide CI&R/Connect staff in hospital and health care provider offices to support screening and referral mechanisms. | |

Prenatal & Infant Screening Rates

In addition to the maintenance of goals with respect to screening, the Healthy Start Coalition anticipates near future expansion of service capacity thanks to the generosity of state legislative leaders and the actions taken during the 2021 legislative session in support of maternal and child health. The state of Florida extended Medicaid benefits for women up to 12 months postpartum which has the potential to have significant positive impact on access to care. In addition, across the state and locally, Healthy Start Coalitions will have future opportunity to serve additional women and vulnerable families with young children through the Medicaid services provided under Healthy Start legislation.

As a result, the Healthy Start Coalition of Flagler & Volusia Counties is taking proactive action from a planning perspective and incorporating goals and metrics to measure our effectiveness at responding to the actions of the 2021 Legislature. System goals and strategies related to increased service provision are being incorporated into our Service Delivery Plan and are outlined below.

| System Services | |
|---|--|
| Indicators/5-Year Goals | Adopted/Proposed Strategies |
| Increase completed Initial Intakes – Prenatal to 50% or better | Maintain and expand Cl&R/Connect staff in hospital and health care provider offices to support screening and referral mechanisms. Develop and implement mechanisms for data tracking with respect to service delivery metrics. |
| Increase completed Initial Intakes – Infant to 70% or better | Proactively expand CI&R/Connect Staffing to allow for expansion of services after hours, increased engagement and completion of Initial Intakes. Implement and evaluate success of new service delivery mechanisms |
| Increase number of prenatal cases referred to services to 30% or better | Implement and evaluate success of new service derivery mechanisms (ex: proposed Momcare light). Maintain and expand partnership and work with MCOs to serve pregnant plan participants and participant families with young children. Continue to implement public education and awareness campaigns to |
| Increase number of infant cases referred to services to 40% or better | promote Healthy Start screening and programs. Expand current neonatal outreach and women's intervention services to allow for seamless integration with nurse home visiting services and further clinical integration. |

ALLOCATION PLAN FOR SERVICE DOLLARS FOR FY 2021-25

The Healthy Start Coalition of Flagler & Volusia Counties currently contracts with the following entities for the provision of Healthy Start services and the required administrative components of the Healthy Start service delivery process: Children's Home Society, Florida Department of Health in Volusia County, Florida Department of Health in Flagler County, and Healthy Communities. The FY2021/22 allocation plan for Healthy Start service delivery includes service dollars from the DOH Base contract, HSMN Medicaid contract, and other leveraged state and local funds to support critical service gaps not funded by the Base and Medicaid contracts.

Each fiscal year, an allocation plan for Healthy Start funds is developed by reviewing priorities established in the Service Delivery Plan, progress in meeting the prior year's agency and contractual objectives, and the performance of subcontracted providers. Coalition staff develops proposed allocations based upon this information within the parameters established by the availability of resources. The proposed plan is then presented as part of the organization's overall budget to the Coalition's Finance and Audit Committee for review and recommendations. The committee finalizes a recommendation for consideration by the full Healthy Start Coalition of Flagler & Volusia Counties, Inc. Board of Directors. Based on the final budget and allocation plan approved by the Board, staff then completes contract preparations, conducts contract negotiations and facilitates execution of new contracts and/or extensions to existing contracts. Copies of all executed contracts are provided to the Department of Health on an annual basis. The budget and allocation plan is reviewed on a quarterly basis and modified as necessary to maximize the effectiveness with which resources are utilized in order to achieve established goals.

Throughout the 2021-25 Service Delivery Plan cycle the Healthy Start Coalition will continue to review and revise allocations based on identified needs, gaps in services, performance of programs, and availability of funding/resources.

QUALITY ASSURANCE/IMPROVEMENT PLAN

This section of the Service Delivery Plan outlines the systematic approach that is utilized by the Healthy Start Coalition as a means by which to accomplish the above objectives and work toward Continuous Quality Improvement.

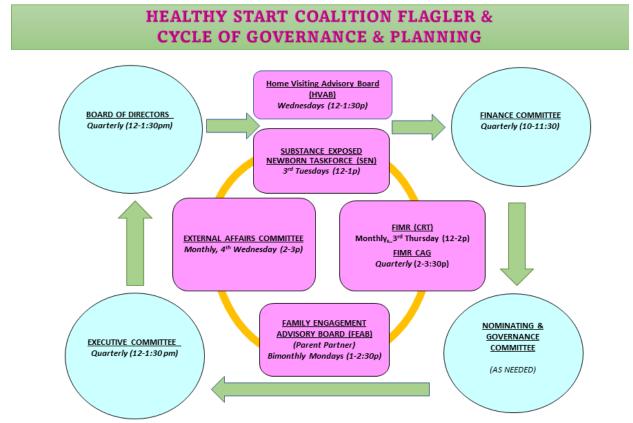
Since the development and implementation of the 2017-2021 Service Delivery Plan, additional activities have been put in place to improve the Quality Monitoring conducted by the Healthy Start Coalition to support contract compliance and continuous quality improvement (CQI) by agencies subcontracted to provide the range of Healthy Start services. Healthy Start utilizes the Well Family System (WFS) and the Health Management Information System (HMS) to assist administration and direct service supervisory staff in monitoring outcomes and identifying areas for further evaluation. Healthy Start staff are trained in use of HMS and WFS and quality controls have been integrated into the policies and procedures related to our Quality Management Plan.

In addition to adherence to the Healthy Start Standards and Guidelines, local quality indicators are established and monitored quarterly. Results of the monitoring process provide an opportunity to conduct teambuilding activities and outline a course of action and staff development needs that may be required. As stated in the Standards and Guidelines, the "quality improvement process is necessary to assure that services are:

- Provided in a manner that meets the needs of participants
- Accessible and acceptable to the community and the participants
- Delivered in a timely manner.

This section of the 2021-2025 Service Delivery Plan outlines the systematic approach that is utilized by the Healthy Start Coalition as a means by which to accomplish the above objectives and work toward Continuous Quality Improvement.

Methodology

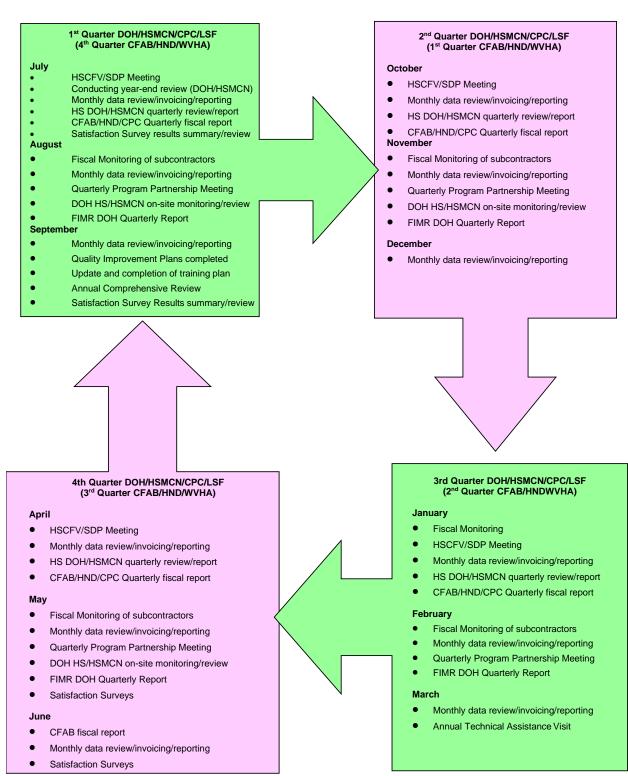


Monitoring the quality of service delivery and fiscal accountability among sub recipients and vendors is approached from several directions, and utilizes multiple methods. Monitoring tools are regularly reviewed to guide the Contract Manager in determining if the Standards and Guidelines and outcome measures have been met or exceeded. These tools calculate values using an Excel program, which makes the process more accurate and efficient. These tools are utilized during chart reviews and the calculations assist with follow-up performance development. The Healthy Start Coalition also utilizes an observation component to the site review process, which includes shadowing home visitation, assessment, and supervision activities.

The Healthy Start Contract Manager meets monthly with the supervisors of the programs to provide ongoing technical assistance in between monitoring periods. The Contract Manager is also available for onsite Technical Assistance immediately following a monitoring to provide follow up and support successful accomplishment of the Quality Improvement Plan and implementation of corrective action if necessary. The leadership in each agency is kept apprised of the results of the monitoring activities and participates in active development of strategies for improvement by attending the quarterly Coalition meetings and presenting their quarterly outcomes.

Minimum training requirements are verified by comparing the program's staff development plan to actual training attended or educational levels achieved by service delivery staff and supervisors. Feedback and evaluation from training events are reviewed and utilized for continuous quality improvement in staff training activities and outcomes.

HEALTHY START SYSTEM OF CARE QUALITY MONITORING SCHEDULE



CONCLUSION

The Healthy Start Coalition of Flagler & Volusia Counties has developed this Service Delivery Plan with the support and consensus from our board and our community partners. Our priority health and system indicators align directly with Healthy Start Florida's overarching purpose to reduce infant mortality, reduce the number of babies born low birthweight and to improve maternal and child health outcomes. With this purpose as well as our driving mission to unite people and resources at the local level and serve the needs of pregnant women, infants, young children and their families in mind, our Coalition anticipates successful implementation of the 2021-2025 Service Delivery Plan and accomplishment of our stated strategies and endeavors. We look forward to strong productivity and outcomes in the upcoming years.

The Healthy Start Coalition of Flagler & Volusia Counties, Inc. programs and services are supported by:









BB&I

Now Truist







Paul B. Hunter and Constance D. Hunter Charitable Foundation, Inc.

Healthy Start is also a proud affiliate of:



