

1. Will there be flexibility to address the diversity of focus and approach in the coalitions?

As described in the one-page communication update from July 2011 posted on the website (<http://www.doh.state.fl.us/family/mch/hs/hs.html>) there are many Healthy Start stakeholders engaged in the redesign process. Those stakeholders will make the recommendation to the Florida Department of Health regarding the balance between standardization and flexibility based on community needs and desired impact.

2. What evidence-based practices will be required? Will we all have to adopt Nurse Family Partnership or Parents as Teachers?

As part of the redesign process, the stakeholders will identify evidence-based practices in many areas – smoking cessation, interconception care, home visiting, etc. – and then will determine to what extent a particular evidence-based practice will be included in the redesign process. Please also see question 1.

3. Will the revised allocation methodology be based on units or quality and what will be the source of data?

A special sub-committee with expertise in allocation will be recruited near the end of the redesign process (planned for November 2012) to provide a list of options – with each option’s benefits and drawbacks – for the Florida Department of Health. As those options will be informed by all the work done prior to that point, there is no additional information available at this time, but this concern will be discussed by the sub-committee. As specified in the Redesign process, the allocation options will focus on reimbursing program aspects that directly relate to effective implementation and operation of the proposed model.

4. How will coalitions develop the infrastructure – technology, training, etc. – and the dollars to implement any changes?

The issues of infrastructure will be part of the implementation plan (please see the Timeline on the website <http://www.doh.state.fl.us/family/mch/hs/hs.html>). The stakeholders involved in the redesign process include DOH and both service delivery staff and Healthy Start Coalition Executive Directors from a variety of coalitions; they will help develop the plan to ensure that the infrastructure necessary to be successful is included as well as a realistic assessment of what it will cost to both change and implement any new practices.

5. Will issues related to data – timeliness, availability, outcomes tracking, report writing – be addressed?

Yes! Many of the questions to date have been about data and the stakeholders will discuss those questions throughout the rest of the process. As noted, stakeholders involved in the redesign process include both service delivery staff and Healthy Start Coalition Executive Directors from a variety of coalitions. Per a suggestion from one stakeholder, DOH IT staff will also be asked to participate in the redesign process.

6. Some coalition staff and direct service staff have concerns about what the changes may mean to their jobs.

There are several strategies to address change and concerns. First, the Healthy Start Redesign (Steering) Committee has implemented an aggressive communication plan including frequent written and oral updates, FAQs, and facilitated sessions. The implementation plan (please see the Timeline on the website <http://www.doh.state.fl.us/family/mch/hs/hs.html>) will also explicitly address the change management process so that it is successful. In addition, the implementation plan – created by stakeholders – will result in a phased-in approach to minimize disruption and maximize the impact on those served. Our goal is to have open communication about these changes, please stay informed and continue to communicate with your staff.

7. People are frustrated with the timeline – how do we move forward with strategic plans when we know things will change?

As described in question 6, the implementation plan will be phased-in to minimize disruption and maximize the impact on those served. In addition, the Redesign (Steering) Committee has posted a timeline on the Healthy Start page (please see the Timeline on the website <http://www.doh.state.fl.us/family/mch/hs/hs.html>) so that everyone can see when tasks will be completed and that there are meaningful and workable changes coming. The Florida Department of Health recommendation is for the Healthy Start coalitions to continue doing business as always keeping in mind that there may be changes to the program beginning in 2013 or 2014. You will have time to make whatever changes are needed to your strategic plans. Also, this is a statewide effort and all Coalitions will be engaged and will have the time to adapt plans as needed.

8. Evidence-based practices can be expensive.

It is true that some evidence-based programs cost more than the average program. Investing in evidence-based programs eliminates the possibility of putting community resources into programs only to find later that there was little or no impact on children and families.

9. Will the redesign process impact our identity and our ability to impact birth outcomes?

By focusing on evidence-based programs – while respecting the individuality of communities - the redesign process should have a positive impact on your ability to impact birth outcomes and therefore, your identity as a valued community resource.

10. Question: Will the changes to HS, because of CS/HB 7101, be incorporated into the HS Redesign?

In the bill, CS/HB 7101, Healthy Start and MomCare are incorporated into the managed care process by requiring managed care organizations to contract/coordinate with HS coalitions. Currently, MomCare and this part of HS (for increased intensity and duration of services) are covered by the 1915b Waiver which has been temporarily extended by CMMS. The State is awaiting approval by the federal Center for Medicare and Medicaid Services (CMMS) to launch the new waiver. The Healthy Start Redesign (Steering) Committee, which provides oversight for the redesign process, is monitoring the waiver request and implementation of CS/HB 7101 in order to determine what impact, if any, it will have on the redesign process.

11. Will part of the review include training curriculum?

Yes, as part of the redesign proposal, curricula and training on curricula will be reviewed and possibly revised.

12. If our local HS Program and Coalition want to provide input in this process, what is the best way for that to happen?

There are a number of ways to be involved. (a) You can reach out to the Redesign (Steering) Committee members and let them know your thoughts and ideas. Committee rosters are posted on the website (<http://www.doh.state.fl.us/family/mch/hs/hs.html>.) (b) We will be disseminating deliverables such as the recommendation, proposal for redesign, and implementation plan widely for input and you can share with your program and Coalition members as you wish. (c) Send thoughts, comments, and questions to the website. (d) You and/or your staff can volunteer to be a member of the stakeholder group. We reach out to this group periodically for information needs and review.

13. I have reviewed your timeline and at this point I have no questions, it appears doable. Could you post the committee members on this site and are your meetings open to others to listen in, if so could you also post the meeting dates and times.

The committee rosters, project updates and meeting minutes are now posted on the website (<http://www.doh.state.fl.us/family/mch/hs/hs.html>).

Dates, times, WebEx link and audio conference information for Steering Committee and Subject Matter Experts meetings will be posted on the website (<http://www.doh.state.fl.us/family/mch/hs/hs.html>) and will also be posted on the public meeting notice website (<http://www.doh.state.fl.us/pubmeeting.htm>) as meetings are scheduled.

14. Our CHD has both a Healthy Start and Healthy Families program. Have you looked at the Healthy Families program components? Please consider how the programs can complement each other and not overlap or duplicate.

This suggestion will be provided to the Subject Matter Expert committee as they begin to review program components.

15. Is the document "Summary of Research Review" reason why the Healthy Start Redesign is in process? Is it the research that was conducted to realize that Healthy Start needs to be redesigned? It is a very lengthy document with a lot of interesting material.

In January 2010, representatives from the Florida Association of Healthy Start Coalitions and the Florida Department of Health discussed the need for the Healthy Start program to be an evidence-based / research informed program. During the fall of 2010, the Florida Department of Health issued a Request for Proposal to contract with a planning consultant. One of the tasks of the redesign process was to create the Research Review document to act as resource for the redesign effort.