## **Risk Pool Funding Application SFY 2021-2022**

Please complete all items, sign and date the application, consult with your Regional Managing Director, and submit electronically to the Barney Ray, Director of Revenue Management & Partner Compliance at Barney.Ray@myflfamilies.com

Lead Agency Name: FamiliesFirst Network of Lakeview Center, Inc.									
Region: Northwest	Contract No.: AJ495								
Address: 1221 W Lakeview Avenue, Pensacola, FL 32501									
Lead Agency Contact: Mark Jones	Phone No.: 850-516-9519								
Contract Manager: Lisa Carden	Phone No.: 850-483-6676								
This request is being submitted in response to a projected deficit at 6/30/2022 inclusive of all									

Financials:

currently available funding.

 State the amount of funding requested from Risk Pool funds and the amount of the projected deficit at the end of Fiscal Year 2021-2022: Projected Deficit: \$3,348,316

Amount of Risk Pool Funds Requested: \$2,420,000

- 2) Confirm that the amount of funding requested would be fully expended during Fiscal Year 2021-2022: 

  ☐ Yes ☐ No
- 3) State specifically how the Lead Agency would qualify for Risk Pool funds based upon the requirements in s. 409.990(7)(c), F.S. (Appendix A):
  FamiliesFirst Network saw a significant increase in children entering the foster care system with significant mental health challenges. Many of these children, as young as five years old, had very restrictive child placing agreements that made it very difficult to find a placement that was safe for them and others around them. FFN witnessed children as young as five years old having to be placed in crisis stabilization due to significant trauma prior to entering into care.

Additionally, over the summer months we saw a significant increase with children coming into care through lockout. Over a three-week period, we were involved in ten lockout staffings, whereas seven of those children entered the foster care system while three were diverted at the time. Those seven children either had significant delinquency histories where they presented significant aggression towards others, or they had acute mental health histories where they were not able to be maintained in the home

environment. These children presented significant placement challenges whereas local and statewide efforts were exhausted in attempts to find appropriate placements for these children. The primary consideration for these children was not only a placement for their own safety but placing them where others around them would be safe as well. This challenge led us to opening up an emergency shelter in order to serve these children. There was no available staffing for these children through our Lakeview partners, therefore the program had to be staffed by FamiliesFirst Network personnel around the clock. This staffing pattern led to unexpected overtime expense that were not previously budgeted. The staffing of the emergency shelter continues as of this day. We are in the process of hiring additional staff through Lakeview Center, Inc. in order to fulfill the staffing requirements in the future.

We also saw an increase in teens coming into care with human trafficking indications under Child Placing Agreements. Currently we have been serving six individuals that meet these criteria in settings that average around \$450.00 daily (refer to attachment).

The final category of children we saw an increase is regarding children with developmental disabilities more commonly referred to as APD service youth. These youth are typically referred for APD services shortly after coming into care. The long-term challenges that the APD waiting list for services is often years long resulting in the CBC's having to carry the cost of care for these children. The cost for these children can range from \$288 to \$508 daily. We have been working with APD in order to determine if we can cost share for some of these children for some waiver services, however at this point this effort has not caught any traction.

4) Please attach a narrative explaining how the deficit occurred, what steps have been taken to address the cause(s), and how the Lead Agency will work within its allocated core funding in the future. The narrative should not exceed five pages.

The cause of the deficit has been explained in section three above. FamiliesFirst Network is also significantly below the adequacy formula for funding compared to other CBC's statewide. This funding inequity continues to challenge us in operating with a balanced budget each year. The additional expenses outlined above has further challenged our ability to achieve and maintain financial viability. We have a very detailed financial viability plan that we are working closely on with our DCF partners. We meet monthly to review progress and challenges on the plan and continue to look for opportunities for cost efficiencies where appropriate.

We have taken additional steps beyond what is outlined in the Financial Viability Plan. These steps include:

- a) Opening up an emergency shelter to serve children with significant mental health or delinquency challenges in order to provide crisis stabilization in order to place them in more traditional settings in the future. Otherwise, these children would be in cost prohibitive high-end placements as they enter care.
- b) We continue to focus on recruitment of traditional foster homes, enhanced foster homes and therapeutic placements in order to serve challenging

- youth in lower cost settings. These efforts have been primarily focused through the Fostering through Faith Ministry.
- c) We are currently developing a Level II foster home model whereas caregivers receive additional training and an enhanced stipend to care for teenagers with delinquency histories. These homes will be used as a step down for youth coming out of delinquency programs rather than placing them in more cost prohibitive placements.
- d) We are continuing to work with our APD providers to determine more appropriate and cost effective rates to serve our children with developmental disabilities.
- e) We are developing a more comprehensive Integrated Practice Teams (IPT) process in order to divert future lockout situations by teaming up with local community resources including DJJ, APD, Lakeview Mental Health, Managing Entity, DCF CPI partners, and other related service providers as needed. This effort is spearheaded through the Lakeview Center Care Coordination team. This effort has already significantly reduced the frequency of lockout cases, which will certainly reduce costs of high-end future placements.
- 5) Please provide a detailed proposal that addresses how you will use these funds to address or correct the underlying cause of the shortfall? These funds will be used to target the underlying causes of the challenges listed above. Efforts will include but not limited to:
  - a) Increasing efforts to the recruitment and retention of therapeutic and behaviorally based foster homes to serve children with significant needs. The funding will be used to provide enhanced board rates and wraparound services for children served in these homes.
  - b) Increased services through Care Coordination for staff to identify, track, and intervene with youth earlier in the system of care to avoid costly placements as a result of lockout.
  - c) To fund emergency shelter staff and operations to assist with these typically high cost youth in order to serve them in a stabilization setting in order to avoid high cost placements in the future.
  - d) Investigate opportunities in our community to expand both community based and residential services for children with developmental disabilities in order to try to maintain them in their biological homes and divert them from foster care.
- 6) Please provide a detailed budget projection for FY 2021-2022 using the template provided with this application.

- 7) Please include a detailed narrative budget for the proposal presented in #5 and expected Return on Investment (ROI) for the funds requested.
  - a) Recruitment and retention of therapeutic/enhanced foster care settings including enhanced stipends to include but not limited to the addition of specialized personnel to oversee the initiative \$300,000.00
  - b) Increased services through Care Coordination to avoid high cost placements to include but not limited to the addition of two full-time personnel and community based wraparound services to maintain children in the least restrictive environment -\$500,000.00
  - c) Fund emergency shelter to stabilize children with significant mental health histories and/or delinquency histories that require assessment stabilization (to include personnel, building and operational expenses) \$916,000
  - d) Expand community base and residential services for children with developmental disabilities to include enhanced in-home behavioral intervention services as well as community based respite for this population \$700,000.00

Lead Agency Name: FamiliesFirst Network of Lakevie	ew Center, Inc.	
Region: Northwest Region	Contract No.: AJ495	
Lead Agency CEO/ED Name: Allison Hill		
Please confirm the following:		
The Lead Agency is actively working its SFY 2021-2022 Fi	inancial Viability Plan. ⊠ Yes □ No	
Did the Lead Agency receive Risk Pool funding in SFY 202	20-2021? □ Yes ⊠ No	
If Yes, please attach a status update on the recommon Committee.		
Malusm Hill	10-15-2021	
Lead Agency CEO/ED Signature	Date	

#### Attachment

# **Human Trafficking children**

Child	Ave	rage daily cost	July	- September cost	Expected cost for October - June			Annual cost		
Child 1	\$	400.00	\$	36,800.00	\$	109,200.00	\$	146,000.00		
Child 2	\$	400.00	\$	31,600.00	\$	109,200.00	\$	140,800.00		
Child 3	\$	503.42	\$	21,647.06	\$	137,433.66	\$	159,080.72		
Child 4	\$	470.00	\$	43,240.00	\$	128,310.00	\$	171,550.00		
Child 5	\$	470.00	\$	42,770.00	\$	128,310.00	\$	171,080.00		
Child 6	\$	400.00	\$	36,400.00	\$	109,200.00	\$	145,600.00		
			\$	212,457.06	\$	721,653.66	\$	934,110.72		

### **APD Placements**

Child	Aver	rage daily cost	Jul	y - September cost	E	Expected cost for October - June	<b>Annual cost</b>	
Child 1	\$	480.00	\$	44,160.00	\$	131,040.00	\$ 175,200.00	
Child 2	\$	400.00	\$	36,800.00	\$	109,200.00	\$ 146,000.00	
Child 3	\$	296.44	\$	27,272.48	\$	80,928.12	\$ 108,200.60	
Child 4	\$	288.00	\$	26,496.00	\$	78,624.00	\$ 105,120.00	
Child 5	\$	508.00	\$	46,736.00	\$	138,684.00	\$ 185,420.00	
Child 6	\$	450.00	\$	41,400.00	\$	122,850.00	\$ 164,250.00	
Child 7	\$	300.00	\$	27,600.00	\$	81,900.00	\$ 109,500.00	
Child 8	\$	400.00	\$	36,800.00	\$	109,200.00	\$ 146,000.00	
			\$	287,264.48	\$	852,426.12	\$ 1,139,690.60	

### **Residential Treatment Services**

Child	Average (	daily cost	July -	- September cost	Ex	pected cost for Oct	st for October - June		Annual cost
Child 1	\$	365.82	\$	5,487.30	\$		99,868.86	\$	105,356.16
Child 2	\$	185.82	\$	17,095.44	\$		50,728.86	\$	67,824.30
Child 3	\$	185.82	\$	17,095.44	\$		50,728.86	\$	67,824.30
Child 4	\$	115.00	\$	10,580.00	\$		31,395.00	\$	41,975.00
Child 5	\$	210.00	\$	6,090.00	\$		57,330.00	\$	63,420.00
			\$	56,348.18	\$		290,051.58	\$	346,399.76
						Total		\$	2,420,201.08