



Linking Actions for Unmet Needs in Children's Health (Project LAUNCH)

Mid-Year Progress Report

Florida

Reporting Period:

October 1, 2016 – March 15, 2017

Mental Health Promotion Branch
Division of Prevention, Traumatic Stress and Special Programs
Center for Mental Health Services
Substance Abuse and Mental Health Services Administration
Department of Health and Human Services

Section 1. PROJECT IDENTIFICATION AND KEY CONTACTS

Project Identification Information

- A. Please note the year that your grant was awarded.
September 2012
- B. Grant Number: SM061297
Project Name: Florida Project LAUNCH
Grantee Organization: Florida Department of Children and Families

Grantee Staff Contact Information

- A. Project Director
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- B. Persons completing this form (if different from or in addition to the Project Director)
- Name/Title: Lily Wells, Grant Manager
Role (e.g. Expert, Local Coordinator, Local Evaluator): Expert
- Name/Title: Ji'Lynda Walls, Department of Health Liaison
Role (e.g. Local Coordinator, Local Evaluator): Partner
- Name/Title: Brenda Lydic
Role (e.g. Local Coordinator, Local Evaluator): Local Coordinator

Section 2, PART I: PROGRAM ACTIVITIES

In the tables below please provide information on services delivered in the first six months of the grant year (Oct, 2016 through March, 2017). Two to three bullets per section is recommended.

Table 1. Screening and Assessment in a Range of Child-serving Settings
List any NEW assessment tools being used since the last reporting period and individuals/ages with whom they are being used (e.g. pregnant women, children birth to 3, etc.): None
A. Major Activities and Accomplishments <ul style="list-style-type: none">• The Early Learning Coalition (ELC) of Pinellas hosts monthly community screening events. Suncoast Center (community mental health center) participates in these events, assisting in the delivery of assessments and referral to services for identified families.• Operation PAR, Inc (Operation PAR, substance abuse and supportive services provider) is continuing to provide training to local cross-disciplinary professionals in motivational interviewing to improve consumer engagement from assessment and referrals.• The Florida First 1000 Days website redesign, which LAUNCH funded, has been completed. The new site features new information for parents, including the importance of screening and links to additional resources like VROOM which teaches parents easy steps for increasing social

emotional and other developmental skills. The new blog includes important information for multiple audiences. The legislative priorities section also highlights the gap in Florida's provision of early intervention and promotes expanding screening and early intervention, including coverage for caregiver well-being. See website: <http://first1000daysfl.org>.

B. Challenges/Barriers

- Screenings performed with families at Community Health Centers of Pinellas (CHCP, federally qualified health center where Suncoast Center provides on-site, integrated behavioral health care) that do not enroll in Suncoast Center services are no longer reported to LAUNCH due to the lack of a shared electronic health record following the contract changes. Medical staff at CHCP are providing screening and assessment integrated into primary care, but LAUNCH is no longer capturing data for all families at CHCP.
- The Department of Health has identified a significant need for workforce development in screening and assessment, particularly to support behavioral health integration into primary care. LAUNCH will be working with the Title V Behavioral Health Initiative workgroup to increase capacity to provide appropriate screening through the Children's Medical Services (CMS) system and use lessons learned to expand further. See Table 2 for more information.

C. Lessons Learned

- Suncoast Center is working with the public school system to develop strategies for screening young children for behavioral health concerns in order to increase referrals for needed services.
- LAUNCH staff and the Screening and Early Intervention workgroup performed a survey to collect information about what providers are screening caregivers and young children and which tools are being used. The purpose of this survey was to identify providers offering screenings, whether validated instruments are being used, what training providers have to deliver screenings, and other information in order to establish a baseline to prepare for outreach, professional development, and other activities to support expanded early childhood and caregiver screenings. Forty-five agencies responded to the survey and 87% of the respondents perform developmental screenings and 77% are required to conduct such screening services. Regarding depression screenings, 42% (n= 18) of the responding organizations currently provide caregiver (mother, father, grandparent, etc.) depression screenings and most organizations screen fewer than 10 caregivers per month. Two programs screen over 200 caregivers per month, and three screen 20-50 caregivers per month. All responding programs that screen caregivers include mothers, five screen fathers, and three screen grandparents or others.

The most frequently cited barriers to screening or effective screening for children and caregivers include:

- Time limitations;
- Lack of/inadequate compensation;
- Lack of staff to perform screening;
- Lack of training in assessing developmental or well-being problems;
- Lack of confidence in ability;
- Unfamiliarity with appropriate screening instruments;
- Belief that caregiver screening is inappropriate to the role of the program;
- Lack of available services to refer caregivers;
- Lack of knowledge about referral options;
- Lack of confidence in validity of instruments;
- Language barriers;

- Outside scope of service or not allowable under grant funding;
- Not a program priority;
- Staff turnover; and/or
- Engaging or locating clients.

Seventeen of responding organizations agreed that given adequate training and tools, their program would consider providing caregiver depression screenings for the families they serve, however ten disagreed, eight didn't know, and six stated that they do not screen caregivers but refer to other community providers or contracting agencies. See attached report for additional detail.

D. Activities Planned for the Next 6 Months

- Suncoast Center will continue working with 211 Tampa Bay Cares, CHCP, and other partners to improve data sharing.
- LAUNCH will be working with partners to increase training opportunities in evidence-based assessment tools and promote screening. The Screening and Early Intervention workgroup conducted a survey of many providers to determine barriers to screening. LAUNCH will be working to expand the responses received and using responses to determine next steps. Based on initial results, next steps will be developed to address:
 - Understanding of the importance of caregiver well-being to child development and prioritizing caregiver screenings;
 - Engagement and screening for co-parents, relatives, and other caregivers;
 - Funding streams available for caregiver screenings;
 - Knowledge of available screening instruments and validity; and
 - Knowledge of available referral options.

LAUNCH will work with Help Me Grow Florida and other partners to identify effective strategies for these.

Table 2. Integration of Behavioral Health into Primary Care Settings

Describe any changes to the evidence based practice (EBP)/program model being used since the last reporting period:

No changes.

A. Major Activities and Accomplishments

- Suncoast Center has secured federal, state, and local funding streams to sustain integrated behavioral health services and will be transitioning to these funding sources June 30, 2017. Planning for staff transition has begun, and staff and consumers will be incorporated into the extant Early Childhood Services program.
- Suncoast Center has been working with other physicians' offices, in addition to CHCP, during the last six months to increase referrals and screenings.
- Early Steps, the IDEA Part C provided through Children's Medical Services, is piloting a model to improve outcomes relating to social emotional development. This model incorporates an evaluation component to verify effectiveness. Upon successful completion, the pilot will be expanded statewide. LAUNCH will be engaging with Early Steps through this process to identify models and practices that can be shared with other health providers.
- LAUNCH is collaborating with the Department of Health Maternal Child Health Bureau on a Behavioral Health Initiative focusing on workforce development. This project is beginning with

the workforce serving CMS, which provides care to Title V Children with Special Health Care Needs. The workgroup is working to develop an integration model that can be piloted and then implemented statewide throughout the CMS network.

B. Challenges/Barriers

- Transportation barriers still exist for many consumers, but have been greatly reduced thanks to in-home services and extended office hours. The program changes were implemented by Suncoast Center to better meet the needs of LAUNCH families, as previously reported.
- The local providers have not yet been able to resolve their barriers to developing an integrated data system. LAUNCH is continuing to work with partners and the local and state level to resolve these barriers which continue to present challenges to integration.
- Delays in the carryover request have prevented the initiation of several new initiatives to address behavioral health integration at the state level.

C. Lessons Learned

- Suncoast Center has been creative in working with families with a history of abuse or discord. They have consumers who have no contact orders and have been able to work within the boundaries of those orders to coordinate parent agreement on goals and strategies.
- As detailed above, one of the major challenges to integration of behavioral health practices, particularly screenings, into primary care is a lack of knowledge of available referral options. LAUNCH is working with the Florida Perinatal Mental Health Coalition to devise strategies that will assist in enhancing existing referral resource clearinghouses and develop approaches for communities that are underserved by these organizations. This will dovetail with our partnership with Help Me Grow Florida, which is enhancing outreach by 211 and other warmline providers to establish comprehensive databases of local behavioral health providers.

D. Activities Planned for the Next 6 Months

- Suncoast Center will continue training medical staff at CHCP and other local medical clinics on behavioral health integration.
- The Title V Behavioral Health Initiative workgroup is planning a summit to provide training to medical and behavioral health professionals to promote integration efforts. LAUNCH will support this summit by planning sessions and panels. We will be working with the LAUNCH TA to investigate leveraging this resource for summit presentations.

Table 3. Enhanced Home Visiting Through Increased Focus on Social and Emotional Well-being

Describe any changes to the EBP/program models being used since the last reporting period:

No changes.

A. Major Activities and Accomplishments

- PAT+ discontinued provision of licensed mental health counselor services in order to comply with Florida MIECHV (federally-funded Maternal, Infant, Early Childhood Home Visiting program coalition) requirements. PAT+ has shifted quickly to engage with Suncoast Center to ensure that consumers can maintain access to this care. Because Suncoast Center can provide in-home services, fewer additional barriers have resulted from the transition.
- PAT+ continues to provide families with in-home medical screenings and inter-conception care through the on-staff Registered Nurse. PAT+ partners with the Pinellas County Health Department

and the CHCP to ensure mothers receive well care checkups.

- LAUNCH has been participating in the Mental Health in Home Visiting Community of Practice initiative which is part of an award Florida MIECHV received for technical assistance.

B. Challenges/Barriers

- PAT+ has not yet been able to secure alternate funding streams for the LAUNCH-funded parent educators. LAUNCH will be including PAT+ in the request for an extension of funding in order to ease the transition while PAT+ seeks additional funding. The local coordinator is assisting PAT+ in identifying and applying for grants. State LAUNCH staff will be working with the Managing Entity and others to identify additional opportunities that may meet the need.
- Enrollment and retention has been a challenge for PAT+. During this time period, PAT+ has changed referral processing and has doubled enrollment over the last two months.
- Access to transportation continues to be a barrier for families seeking to access additional services to which their parent educator has referred them. PAT+ has sought to minimize these barriers through programs such as the community health worker services that bring these into the home.

C. Lessons Learned

- PAT+ has been participating in a continuous quality improvement initiative led by Florida MIECHV since 2015. Through this project, PAT+ has been able to understand reasons consumers do not connect with the parent educator for initial appointments and been able to strengthen intake through frequent early visits and other steps, increasing enrollment and retention.
- PAT+ has continued their collaboration with PAR Village (women’s residential substance abuse treatment program) and the Operation PAR Methadone Clinic, providing both in-home parent education and recently expanding the existing community health worker services to provide medical screenings and interconception care for women in these treatment settings.
- Due to funding constraints, current capacity is insufficient to meet the need for home visiting services in Florida, particularly for substance abusing parents. State LAUNCH staff are developing a white paper on the potential impact of early childhood programs such as home visiting on substance abuse across the lifespan. This document will include a detailed timeline for engagement with local partners and funders.

D. Activities Planned for the Next 6 Months

- PAT+ is refining their collaboration with Operation PAR and Alpha House of Pinellas, a residential maternity program for homeless women and teens and others in crisis. These collaborations will provide a model for other communities seeking to advance supportive care and better outcomes for consumers in substance abuse treatment.
- The PAT+ CQI Team will work to improve family engagement outcomes, specifically enrollment and retention.
- LAUNCH will work with local partners to plan expansion of the Hand in Hand training which PAT+ and Operation PAR have developed with local neonatal intensive care nurses in Pinellas. This training focuses on ensuring home visitors are sharing accurate information on infant care for substance exposed newborns. LAUNCH will seek to expand this training for home visitors and early child care providers across the state.

Table 4. Mental Health Consultation in Early Care and Education

Describe any changes to the EBP/program models being used since the last reporting period:

No changes.
<p>A. Major Activities and Accomplishments</p> <ul style="list-style-type: none"> • Suncoast Center provided outreach to elementary schools and child care centers to increase requests for Infant/Early Childhood Mental Health Consultation (I/ECMHC). • LAUNCH staff have continued to support the I/ECMHC Learning Collaborative. The consultants report benefitting greatly from the coaching and are beginning to exercise their skills in offering peer support to one another. The on-site wrap-up train-the-trainer at the end of summer 2017 will prepare the consultants to move forward in offering support to others learning this service. • Florida MIECHV is implementing an I/ECMHC pilot, engaging consultants to increase understanding and skills for home visitors in perinatal and infant mental health.
<p>B. Challenges/Barriers</p> <ul style="list-style-type: none"> • Florida was not awarded the Center for Excellence technical assistance grant, but will be seeking further opportunities to expand the Learning Collaborative. • Delay in the carryover request process has presented the need to reevaluate existing funding in order to ensure allocation is available for the Endorsement for Culturally Sensitive, Relationship-Focused Practice Promoting Infant Mental Health (IMH-E) licensing. This is essential to the continued implementation of professional development strategies in Florida.
<p>C. Lessons Learned</p> <ul style="list-style-type: none"> • Lack of knowledge about I/ECMHC is a barrier to service delivery. Suncoast Center and other partners have been working to increase understanding of the service. At the state level, the I/ECMHC Learning Collaborative implementation team is working with The Office of Early Learning to develop an outreach campaign to inform and motivate child care center leadership to seek consultation services in response to classroom needs. • The Guidance Document designed to provide a comprehensive understanding of I/ECMHC to providers and Managing Entities is being revised to meet Department standards. This will be reviewed by select stakeholders for accuracy and usability and routed for SAMH Program Office approval. It will be provided to Managing Entities and their provider networks through the Regional Offices upon approval.
<p>D. Activities Planned for the Next 6 Months</p> <ul style="list-style-type: none"> • I/ECMHC Learning Collaborative will continue, with a final on-site train-the-trainer occurring in August or September. • Suncoast Center and ELC will continue coordinating efforts to expand delivery of I/ECMHC. • I/ECMHC is currently listed as an allowable in-home or on-site service in the SAMH Financial Rule. LAUNCH staff have identified a need to add some clarifying language to the listed item to assist in ensuring that Managing Entities contracting for I/ECMHC services reimbursed under this item are able to ensure the service is consistent with best practices. This revision has been drafted and is currently being reviewed by SAMH Program Office rulemaking staff. Following this review, the revision will be routed for approval by SAMH Program Office leadership.

Table 5. Family Strengthening and Parent Skills Training
<p>Describe any changes to the EBP/program models being used since the last reporting period: No significant changes.</p>

A. Major Activities and Accomplishments

- Operation PAR has provided a Nurturing Parenting Support Groups (NPSG) at a church in Lealman. The parents as well as the Sunday school teachers found the program very useful and continue to reach out to the Prevention Specialist when challenges arise.
- Operation PAR has continued implementing *I Can Problem Solve* (ICPS), adding another local child care center which collaborates informally with LAUNCH. Working with 3 and 4-year-old classrooms, Operation PAR staff are helping children internalize and use these skills.
- The State Office of Early Learning (OEL) has a grant allowing them to provide promotional materials for VROOM, an app-based tool designed to help parents incorporate brain-building activities into their day. ELC has been using these materials and introducing the app to parents at events and also delivered trainings and materials to partner agencies including Florida First Start, the Juvenile Welfare Board of Pinellas, Early Steps and HIPPIY. Statewide, LAUNCH is working with OEL to promote VROOM and other resources that will help parents enhance early development.
- The local coordinator has scheduled the Community Café training to be held in Lealman. This training has been rescheduled twice, but staff and partners are working hard to keep interest and energy high. Food and childcare will be provided thanks to local partners.
- State-level LAUNCH staff have collaborated with the Family Friendly Workplace Taskforce in Tallahassee, which has designed a survey and recognition program for employers. This presents an opportunity to recognize employers who have benefits, policies, and other practices in place that support employees in their role as family members and caregivers as well as establishing an infrastructure for businesses to mentor others in augmenting their family friendly practices. In addition to expanding understanding of family needs with employers, this recognition program enables caregivers to identify employers and businesses to patronize that prioritize family well-being. LAUNCH will work with local partners to identify similar opportunities to increase private sector engagement on early childhood topics in ways that empower families to engage with and support businesses that support families. LAUNCH will identify other business community partnerships in Florida and promote these strategies statewide in the coming months.

B. Challenges/Barriers

- Parents have difficulty committing to the NPSG due to limited time and other life challenges. Effective means for mitigating barriers are discussed below.
- Lack of designated locations and designated staff for recruitment also present a barrier to services.
- Operation PAR has had difficulty recruiting families for local council engagement following changes in Suncoast Center services in 2015.

C. Lessons Learned

- Parents are most likely to attend NPSG when:
 - Parents are required to attend;
 - Parents have a friend who already attended and found it beneficial; and/or
 - When another provider with whom the parent has bonded recommends it.
- Prioritizing referrals from providers; changing the time of training to match group needs; shortening the number of sessions (and increasing each session's length) have increased parent attendance. Parents also respond to incentives, when funding permits.
- Working with local faith centers has been rewarding. Operation PAR will continue reaching out to new nontraditional partners who may benefit from NPSG and ICPS.
- The local coordinator is working with ELC to apply for funding to continue stipends for parents to

support their new engagement services after LAUNCH is ended.

- Local partners are adept at resolving needs for childcare, food, and other needs that cannot be funded by the grant. Staff will be working with local partners to highlight this resourcefulness to encourage continued local council work after the end of the grant.

D. Activities Planned for the Next 6 Months

- Operation PAR will continue working with ELC sites and others for implementation of ICPS and NPSG.
- Community Café training will be held and local coordinator will work with parents and partners to develop next steps.
- LAUNCH is collaborating with the Recovery-Oriented Systems of Care initiative and the SOC Grant team to plan a series of listening sessions in local communities around the state. These peer-facilitated sessions will invite consumers, caregivers, and others to discuss what is working within the system and what can be improved. These sessions will help reinforce the perception of DCF’s eagerness to engage with consumer and family leadership while also providing an opportunity to solicit consumer experiences and recommendations for service systems statewide.

Table 6. Teaching Pyramid with Positive Behavior Supports

Describe any changes to the EBP/program models being used since the last reporting period:
No significant changes.

A. Major Activities and Accomplishments

- ELC is currently providing the Looking Beyond Behavior (LBB) program to their fifth cohort with twenty-five teachers and administrators from seven sites.
- The parent events have been successful, integrating parent engagement into the program expectations for child care centers. The stipends provide for food, childcare, and materials at these events, increasing parent participation.
- ELC is delivering community trainings on trauma and challenging behavior. They have teamed up with a number of partners to plan a community event/expo to increase public education. They have a growing partnership with a local recreation center and will be expanding collaboration with Parks and Recreation activities.
- LAUNCH staff have been collaborating with OEL on their performance improvement initiative. These efforts are focused on enhancing child care provider policies, practices, teacher qualifications, and other objectives. LAUNCH is helping prioritize social emotional learning and trauma-informed practices through this process.

B. Challenges/Barriers

- Child care directors have difficulty maintaining consistency in staffing amongst all levels of child care workers across the county. LAUNCH provider support specialists work closely with other professional development staff within the agency to provide technical support to centers that face such challenges.
- ELC is transitioning to a new Professional Development Institute model which will transform the coaching provided. The cohort beginning in July will follow this model with 6 beginner classes and 6 advanced classes, shortening the current model and hopefully encouraging better recruitment.
- Industry concerns have presented a challenge to efforts to address early childhood well-being

through child care licensing requirements. LAUNCH staff continue to advocate for licensing standards that will reflect children’s needs for emotional safety and nurturing of social emotional development as essential public health concerns.

- Decentralization and local environmental factors present challenges to efforts to work with school districts to enhance social emotional learning and trauma-informed practices among teachers and other staff in these settings. While LAUNCH has been successful at providing this training for health staff, enhancing integration for these primary health care providers, broader adoption has been very slow. LAUNCH will be working with the Department of Education to identify districts that have been successful and work with those districts to develop strategies to promote adoption of these practices in other communities.

C. Lessons Learned

- ELC runs a Facebook group for child care instructors. This has been very helpful in creating a community of practice that provides ongoing coaching to former participants and allows those participants to offer peer support and guidance to new participants. The group has provided a platform to share successes that motivate participants to continue the program and keep their skills sharp after completion.
- The ability to offer incentives for participation, family engagement activities, and materials has supported program retention. Four current sites have been previous participants.
- The quarterly family engagement incentive has enabled child care center directors to bring in speakers on relevant topics such as responding to trauma and the importance of social/emotional well-being. These events have been opened to relatives and family friends, increasing the knowledge of these principles and decreasing developmentally inappropriate expectations of children among families’ informal social support networks.
- In seeking to meet ongoing needs for sharable materials after LAUNCH ends, ELC has added Sanford Harmony from National University Sanford Education Programs to their curricula for Voluntary Pre-Kindergarten. This social emotional learning curriculum offers free materials for participants, reducing costs for ongoing support.
- Two ELC staff members have become Mind in the Making trainers, using a community learning model to increase engagement with parents and the broader community.

D. Activities Planned for the Next 6 Months

- ELC will continue providing cohort coaching through the end of LAUNCH.
- Following LAUNCH, ELC will complete the transition to the Professional Development Institute model.
- ELC is working to increase community interest and advocacy for public policy change. The community activities are geared toward public solutions for families experiencing poverty and for expanding early education.
- LAUNCH staff will work with OEL to identify comparable models for nurturing social emotional development in early learning settings. LAUNCH will work to promote these models to child care providers, especially those who are hesitant to take on full participation in the OEL performance improvement initiative. LAUNCH will also continue working to build relationships with elementary school leadership to promote similar methods in those classrooms.

Section 2, PART II: INFRASTRUCTURE & SYSTEMS CHANGE ACTIVITIES

1. Briefly describe (bullets are fine) highlights of your workforce development activities during the past

six months:

- Operation PAR is a key partner in a local initiative to improve services among providers serving families with substance exposed newborns. Through this initiative, called *Hand in Hand*, training is provided by neonatal intensive care nurses on infant care and partners carry out collaborative planning for system improvement.
- ELC delivered the *Difficult Children need Different Responses* training on February 9, 2017 and March 9, 2016 to 40 total participants.

2. Briefly describe (bullets are fine) highlights of your public education/social marketing activities over the last six months:

- The Screening and Early Intervention Workgroup has been developing materials for May for Children's Mental Health Month. Through partnership with the System of Care grant, a Governor's Proclamation has been developed and is in the approval process.
- State-level LAUNCH staff have served on the Family Friendly Workplace Taskforce in Tallahassee, which has designed a survey and recognition program for area employers. This presents an opportunity to recognize employers who have benefits, policies, and other practices in place that support employees in their role as family members and caregivers as well as establishing an infrastructure for businesses to mentor others in augmenting their family friendly practices. The recognition program gives other businesses and opportunity to learn more about practices that support families in raising young children. Over 100 businesses participated in the initial release of the survey, and over half were eligible for recognition. See the website and survey <http://familyfriendlytlh.org> as well as the promotion page with the local newspaper which is partnering on the project <http://www.tallahassee.com/topic/d811c038-f5ff-4161-bb68-c20edd08a89b/tallahassee-family-friendly-workplace-initiative/>.
- PAT+ participated in the Annual Child Advocacy Expo hosted by Angels Against Abuse in October 2016. This event provided a forum for hundreds of service providers to engage with the public.
- Operation PAR staff have visited over twenty-five sites to introduce services to consumers and other providers. They also regularly attend parent group meetings hosted by a local child care provider.

3. Briefly describe your efforts to collaborate with substance abuse prevention and substance abuse treatment providers or experts in your community if any have been undertaken in the last six months:

- PAT+ collaboration with Operation PAR through the PAR Village residential program and the Methadone Clinic have been successful at increasing delivery of various support services to women and other parents in treatment.
- State-level LAUNCH staff are working with the multiple partners to develop strategies to encourage providers to increase focus on early childhood prevention as a response to Florida's substance abuse challenges. Staff are developing a white paper and will develop a detailed timeline to engage with local partners on the potential impact of alternative programs.

4. Briefly describe your 2-3 **greatest accomplishments** in creating improvements to the early childhood system in your state/tribe/territory/community in the last six months:

- As a result of LAUNCH efforts, the SAMH Program Office has recognized the need to sustain an Infant Mental Health Analyst position, and has transferred the Young Child Wellness Expert into that position. The responsibilities for this role include completion of LAUNCH activities as well as multiagency collaboration to accomplish concrete advancement of the extant Florida Strategic Plan for Infant Mental Health.

- A new local coordinator was hired and has transitioned very quickly to help providers and other local stakeholders to develop plans for sustained activities and organization.

5. Briefly describe your 2-3 **greatest challenges** in creating improvements to the early childhood system in your state/tribe/territory/community in the last six months and what you have done or will do to overcome these challenges:

- Florida legislative priorities as well as federal changes are contributing to an environment of uncertainty about the future of children’s access to health care and other services. There are multiple efforts underway, including the Florida First 1000 Days campaign, to increase community engagement in advocacy. As these efforts mature, they will hopefully have an impact on the stability and availability of services.
- Recent turnover of Department staff and partner organizations continue to present a challenge to the accomplishment of various strategic goals. LAUNCH staff have worked to rapidly orient the local coordinator and new representatives from partner organizations in order to minimize the disruption of progress.

6. Briefly describe any NEW ways in which successful LAUNCH strategies or practices have been replicated, expanded or implemented in other communities in the last six months as a result of this grant:

- LAUNCH staff are continuing to work with school health staff to expand adoption of trauma-informed care and youth mental health first aid practices. Following the Department of Education Summer Academy in 2016, more school administrators have expressed interest in these practices and their potential to improve student experiences and achievement. LAUNCH will work to foster this interest in partnership with the Department of Education and Project AWARE.
- LAUNCH has been working with the SAMH Program Office Prevention Specialist to incorporate LAUNCH priorities into the state prevention plan, which is updated every five years. This plan has traditionally focused on youth and adult substance abuse prevention. LAUNCH staff have provided expertise and information to guide the incorporation of early childhood concerns and programs into this planning process. The anticipated completion date of this plan is December 2017.
- LAUNCH has been working with the Chief Child Advocate to coordinate data collection and align state child abuse prevention goals to existing measurements and priorities of effort to streamline reporting and also ensure that these goals are achievable based on current and developing strategies across disparate agencies.

Section 3: EVALUATION UPDATE

If your evaluation plan has changed in any significant ways in the last six months, please describe in the relevant portion(s) of the table below:

No significant changes.