Application Form

Introduction

A Word version you may use to draft your application is available here. You must submit your final application through this portal.

The rubric that will be used to score your proposal is available for download.

A brief webinar giving an overview of this application can be viewed here.

Project Name*
Please give your proposal a short, descriptive title. This is how your request will appear throughout the PCF grant portal.

Coordinated Intake & Referral (CI&R) - Clearwater

Mission Statement*
Please write your organization’s mission statement below. This should be no longer than one or two sentences.

The mission of the Healthy Start Coalition of Pinellas, Inc. is to promote healthy pregnancies, babies, and families by providing services and facilitating access to resources through community partnerships while advancing racial equity and cultural responsiveness.

Is your organization headquartered in Clearwater?
Why PCF asks this: Given that the City of Clearwater is the funding source for this grant program, PCF may prioritize organizations headquartered in Clearwater or those that have a strong presence in the City.

No

Grant Start Date*
PCF expects to issue a contract to approved organizations in September 2023. If awarded with a contract issuance date of September 1, 2023, when would your organization begin to spend funds?

10/01/2023

Grant End Date*
PCF expects the grant period to be between 12 and 24 months for this process. Given this range, when would your organization expect to finish expending funds if awarded?

09/30/2025
Annual Operating Budget*
Please provide the amount of your annual operating budget, (expenditures only) for your entire organization.
$4,839,307.00

Amount Requested*
The minimum grant request for this process is $50,000.
The maximum grant request for this process is $325,000.
If you request the full $325,000, your organization should be able to demonstrate a significant impact to be made from these funds.

Please be sure that your grant request is proportional to your annual operating budget. If you have any questions about how much funding to request, please contact Jocelyn Howard at jhoward@pinellascf.org.
$140,420.00

Programming
Programming Background*
Please describe the program that this grant would support and how it relates to your mission.

Example
Peer Counseling Services Inc. offers after-school support groups for middle schoolers and high schoolers. Below, Peer Counseling Services Inc. would describe what its programming is, how its programming works, and who is served.

Why PCF asks this: PCF wants to learn about what your organization does and how this work is related to carrying out your mission.

Healthy Start Coalition of Pinellas (HSCP or Coalition) is the lead maternal and child health organization in Pinellas dedicated to reducing the county’s infant mortality rate and improving the health of pregnant women since 1992.

CI&R is a social service system of the Coalition that connects pregnant people, inter-conception people (between pregnancies) and families with children under the age of three to educational and support services to offset risk factors that may lead to poor pregnancy and poor developmental outcomes. The statewide universal Healthy Start Risk Screen identifies high-risk factors that are linked to poor birth outcomes such as Low Birth Weight (<2500grams/5.5lbs) and pre-term birth (<37 weeks). All pregnant people in Pinellas County, regardless of age, ethnic background, income levels or disabilities, receive the screen at all OB/GYN practices and clinics. Any pregnant person that scores a 6 or higher on the Healthy Start Risk Screen is considered at risk for poor birth outcomes. Under state guidelines the Healthy Start Coalition (HSC) is only required to contact pregnant people who meet the threshold score of 6 and only send a notification letter to those pregnant people under the score of 6. The CI&R program goes above and beyond our state contractual requirements and contacts clients based on the mother/family choice – not based solely on medical provider referral or due to high score on the Healthy Start screen. We extended our reach into certain communities to prioritize Black and families of color, Medicaid recipients, and others who have been historically marginalized
with less access to community support and services. All pregnant people and/or new parents receive a trauma-informed Initial Intake. As a result of this system change, and HSC honoring and prioritizing families' request for services of their choice, not based on a medical provider's referral, more families are contacted, supported, empowered, and connected to services. CI&R intake staff make at least 3 phone/text attempts to contact individuals referred to CI&R in Pinellas County to complete an initial intake interview to offer connections to one of five home visiting partners or supportive services to help them access medical services, housing, education, employment, all with a goal to lower risk factors associated with preterm birth, low birth weight, infant and maternal mortality, and poor developmental outcomes.

**Urgency**

Please describe how the proposed programming is addressing a time-sensitive community need. You may cite data sources.

*Why PCF asks this: The City of Clearwater has indicated that this funding should be directed to programming addressing urgent needs.*

Based on data from FL CHARTS (2012 - 2021) which provides health statistics from the state of Florida with segmented data in Pinellas County by zip code, there has been an increase in infant deaths in the zip code areas that we are targeting in Clearwater for this grant request. Between 2012-2020 the average number of infant deaths in Clearwater Zip Codes (33755, 33756, 33757, 33759, 33760, 33761, 33762, 33763, 33764, 33765, 33767, 33770) was 13 deaths per year, with about 3 of those deaths to Black infants. In 2021, in those same zip codes, the number of infant deaths jumped to 19 with 8 of those deaths being Black infants. We are seeing a rise in infant mortality that needs our services and support. These deaths are preventable if families are connected through CI&R to resources to help educate and inform their decisions in caring for their infant.

**History in Clearwater**

Please describe how long you've been providing services in the City of Clearwater, and the nature of such services.

*Why PCF asks this: Given that the City of Clearwater is the funding source for this grant program, PCF may prioritize organizations headquartered in Clearwater or those that have a strong presence in the City.*

Because the Coalition serves all of Pinellas County, there is a concentration of clients in Clearwater. In our Fiscal Year 2021-2022, the Coalition served a total of 5,225 clients overall through the CI&R program, with 1,062 or 20% of the total clients served through CI&R living in Clearwater. Our focus has been to prioritize those who identify as Black families of color, or Hispanic who need services but may not be referred through a Healthy Start Screening. The clients in Clearwater receive the following through the CI&R program:
- A coordinated process to help families connect to best services for their needs and preferences.
- A coordinated effort to recruit/enroll for home visiting services.
- One point of referral service for families and providers.
- The ability to track and share what happens to referrals among partner programs.
- Offers access to services beyond home visiting services.
- A hub for coordination and development of early childhood-based systems/family services.
- A strategy for maximizing resources and minimizing duplication of efforts, including outreach, support, information, and program services.
- An approach that allows home visiting staff to focus on providing the direct services they are trained to provide.
- A key part of locally driven systems of care that are responsive to changing needs of families and the communities they serve.

**Zip Codes Served:**

City of Clearwater ARPA - Emergency Housing & Social Services
Top three zip codes: 33755, 33756, 33760
Additional zip codes:
33764
33759
33765
33763
33761
33762
33767
33758
33757
33766

The diversity of the residents in Clearwater includes a higher concentration of Spanish speaking families. To remove language barriers to care we purposely employ multiple Spanish speaking staff members. Greater comfort in primary language, word of mouth about programming shows a trusted and valuable program.

**Language Capacity**

To what extent will your organization provide the proposed programming in languages other than English? Be specific as to written/digital materials and staff capabilities.

*Why PCF asks this:* Approximately 20% of Clearwater residents speak a language other than English in their homes (ACS Community Survey, 2021 1-yr Estimates). PCF is interested in your ability to reach these residents.

The Coalition is sensitive to the language preference of individuals and the comfort they take when knowing a service provider can communicate on their level. The majority of languages that we find in Clearwater in our CI&R program and from Healthy Start referrals are English, Spanish, and Portuguese. The number of individuals that we serve whose native language is not English continues to rise. In response the Coalition already has multilingual staff in place to communicate with individuals and has materials created that are multilingual including letters, handouts, and resources, both printed and digital to better connect with families.

**Outcomes**

Define one to two outcomes already being measured by your organization in relation to the programming this grant would support. This should be the outcome of the overall programming itself. Outcomes are not the number of people you will serve, but how they or their situation will change.

"Outcomes - are specific, measurable statements that let you know when you have reached your goals. Outcome statements describe specific changes in your knowledge, attitudes, skills, and behaviors you expect to occur as a result of your actions. Good outcome statements are specific, measurable, and realistic."

(W.K. Kellogg Foundation Logic Model Development Guide)

**Example**

80% of youth involved in peer counseling will show increased emotional intelligence after six months of participation.

*Why PCF asks this:* PCF considers measurable outcomes to be a cornerstone of effective social service
programming. Tracking outcomes allows both an organization and its supporters to know how effective its programming is and helps an organization improve its programming over time.

Outcome 1: 75% of pregnant people that identify as Black or Hispanic who did not score a 6 on the Healthy Start Risk Screen will now be eligible and prioritized to receive 3 attempts to contact. These pregnant people will receive access to healthcare education during their initial intake interview in the following areas: safe sleep education (to avoid infant death); prenatal care; WIC benefits, finding a medical home and pediatrician, navigating their Medicaid and health plan.

Outcome 2: 50% of the pregnant people who identify as Black or Hispanic who complete the intake interview in outcome 1 will be referred to one of five home visiting programs where they will receive specialized services and assistance with parenting and childbirth education, mental health counseling, breastfeeding education, infant safety, newborn care instruction, school readiness, help to quit smoking and family planning services.

**Measurements***

Explain what measurement tools you will use to evaluate the stated outcome(s) above. That is, how will your organization know it is achieving or not achieving the outcome(s) stated above? Stronger requests will use a validated tool or method of data collection.

**Example**

Peer Counseling Services administers the Schutte Self Report Emotional Intelligence Test before counseling begins, and in six-month intervals thereafter.

*Why PCF asks this: PCF would like to know how the outcome(s) you’ve specified are measured, and if you used a validated tool that has been proven in usage outside your organization. If you’ve developed your own tool, please describe how it was made.*

Measurement Tools:

1. We will use the statewide Healthy Start database to track the number and percentage of Black and Hispanic pregnant people who were referred from the Healthy Start Screen, who reside in the Clearwater zip codes listed earlier in the application, for services based on their choice not based on their score. The Healthy Start reports generated by the Florida Department of Health will identify the number/percentage of those women who received the education through our CI&R initial intake interview.

2. Through the Healthy Start database and Florida Department of Health Healthy Start reports we will track the number/percentage of people who are referred to a Home Visiting Program.

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**Grant Specifics**

**Grant Impact***

How would this grant help your organization and its clients achieve the outcomes stated above? That is, what would you be able to do with this funding that you otherwise could not?

*This has been copied from your LOI. Please expand in this question to describe how this grant expands services.*

*Why PCF asks this: The intention of this grant is to fund organizations providing support for individuals and families*
in Clearwater with emergency housing and social services needs. How that support happens, and how this grant could help, differs from organization to organization. PCF would like to know specifically how this grant would help your organization and the clients you serve.

Healthy Start Coalition has built a strong connection with prenatal care providers in Pinellas, offering screening education, assistance and quality assurance, while ensuring the maximum number of pregnant people are screened. In the last FY, 84% of all pregnant people were offered the Screen and 96% of all newborns were assessed with the Healthy Start Infant Screen. Women who receive at least 6 visits by Healthy Start home visitors are more likely to have a baby born full-term and at a healthy birthweight, preventing the leading causes of infant death! Healthy Start has reduced infant mortality in Pinellas by 38% during our three decades of service.

According to Pinellas County Maternal and Child Health Care Indicators (2019-2021) data shows racial health disparities between Black, Hispanic, and White individuals. Low Birth Weight (<2500grams/5.5lbs) and pre-term birth (<37 weeks) is twice as high in black individuals than their white and hispanic counterparts.

CI&R prioritizes pregnant people, living in Pinellas County, enrolled in Medicaid or Pregnancy Medicaid (191% of the federal poverty limits). The program also prioritizes Black and families of color, Medicaid recipients, and others who have been historically marginalized with less access to community support and services. The majority (70%) of women we serve at 185% FPL or below; The majority (78%) of babies we serve are at 205% FPL or below. Any pre/post pregnancy people, regardless of income can access the CI&R referral program.

With this support, CI&R will be able to fund a FTE (Full Time Employee) to serve clients in Clearwater for 24 months, focusing our efforts on prioritizing services for marginalized populations, underserved communities, people of color, Spanish speaking residents, and individuals who need help regardless of score or by choice, not dependent on a physician referral.

Reduction in Funding*
Due to limited funding, your request amount may not be fully awarded if it is moved forward in the grant process. How would reduced/partial funding impact your proposed program?

*Why PCF asks this: The review committee that ultimately recommends proposals for funding may consider partial funding. PCF would like to know upfront what impact this would have on your proposal.

If we receive partial funding we may be able to consider a partially funded position or hours that supports services in Clearwater. This would not reduce the current impact that we have in Clearwater, but will slow any growth to serve needs in the Clearwater community.

Sustainability*
Given that this funding is time-limited, how does your organization plan to sustain the programming expansion? If there is no sustainability plan, how would your organization effectively wind down the expansion when this funding ends?

*Why PCF asks this: Due to the size and potential impact of this grant, PCF would like to know how clients would be supported after the grant period ends.
The Coalition would sustain this program with Medicaid Waiver earnings. The Medicaid Waiver earnings currently provides support for the Coalitions to provide additional resources and outreach. If we are able to provide increased support in Clearwater, our Medicaid Waiver earnings will also rise to help sustain the growth in Clearwater.

**Governance/Financials**

**Board List**
Please upload a current list of your organization’s Board of Directors.

PDF and Word formats are accepted.
BOARD MEMBERS FY 2023-2024.pdf

**Organization Budget**
Please upload your most recent, board-approved organizational budget. You may add any notes regarding your budget below.

PDF and Excel files are acceptable.
HSCPinellas FY 23-24 Budget.xlsx

**Project Budget**
Please use this template to describe expenses for this program. You should use this template to provide a budget narrative as well, explaining the purpose of each expense and how it relates to the program.

The more specific your line items, the better. Any staff member(s) that would not be 100% funded by this grant should be shown with the time and effort that would be allocated to this grant.

Clearwater-Budget-Detail HSC Pinellas.xlsx
This project budget reflects the total CI&R budget for the agency for 24 months and the ARPA Grant request is reflected for a 24 month period.

**Capital Purchases**
Capital expenses in your proposal should be shown to remove barriers to expanding services. Please describe below:

1. What percentage of your request is capital?
2. Describe why capital purchases are needed, and how they *directly* support the programming described in this proposal.

If your request does not include capital purchases, write "N/A" below.
Why PCF asks this: Unlike other local opportunities using ARPA funding, this grant opportunity is not meant to primarily fund capital needs. While capital purchases are permitted, the acquisition must be connected to your programming and should be helping unlock operational resources.

N/A

Additional Upload

If you have additional documents to support your application, you may upload them here. Please limit your upload to five pages. PDF files are accepted.

CIR Espanol.pdf
File Attachment Summary

**Applicant File Uploads**

- BOARD MEMBERS FY 2023-2024.pdf
- HSCPinellas FY 23-24 Budget.xlsx
- Clearwater-Budget-Detail HSC Pinellas.xlsx
- CIR Espanol.pdf
HEALTHY START COALITION OF PINELLAS, INC.
BOARD OF DIRECTORS FY 2023 - 2024

BOARD MEMBERS

Elena Gustin, RN, Chair
Sharon Crowe, MSN, MPH, RNC-OB, Vice Chair
Richard Kiracofe, CPA, MBA, Treasurer
Kimberly Brown-Williams, Secretary
Mike Allison, MD
Sharmane Andrews, MSN, RN, CPEC
Anthony Capella
Jenna Dodge, MS, CHES
Ellie Ferro, MSW
Connie Going
LaTora Heath, MBA
Megan McCommon, RN
Melissa Meshil
Treasure Montana
Bridget Narvaez, MBA, RN
Mary O’Meara, CNM
Wendy Shellhorn, PhD, MPH, M.ED
Barbara Williams

EX OFFICIO BOARD MEMBERS

Ray Hensley
Michael Nelson
Alyssa Bedard
## Budget Revenue

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<th>Description</th>
<th>Operations &amp; Subcontracted Services</th>
<th>Coordinated Health &amp; Referral</th>
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<th>Parent &amp; Infant Health Start Services</th>
<th>Medicaid Services</th>
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### Notes

- The table above represents the budget revenue for various services and departments, including payroll, operations, and various health start services.
- The total revenue is calculated and presented for each category.
**Budget Detail**

**ORGANIZATION NAME:** Healthy Start Coalition of Pinellas, Inc.

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<th>EXPENSES</th>
<th>Total Project Cost</th>
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<td><strong>1 Salaries</strong></td>
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<td>Show your calculations. Include any project staff that will be paid a percentage of time from ARPA funds. Explain what will they do, how many hours will they work on the project.</td>
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<td>1 FTE: Full Time Family Partner to work to prioritize residents over the next 24 months to receive trauma informed intake with education, referrals to home visiting and other community services. Total Project Cost includes 6.2 FTE, and that includes 4 FTE Family Partners</td>
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<td><strong>Salaries Sub-Total</strong></td>
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<tr>
<td>Show your calculations. Includes such items as FICA, medical, dental, life insurance, etc.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Benefits calculated at 18.543%, on average, per FTE, and includes FICA (7.65%), workmen's comp (1.3%), unemployment (.25%), dental, vision, life and short and long term disability, and HR company payroll fees of $30 per payroll (9.343%).</td>
<td>$ 108,760.00</td>
<td>$ 17,520.00</td>
</tr>
<tr>
<td><strong>Fringe Benefits Sub-Total</strong></td>
<td>$ 108,760.00</td>
<td>$ 17,520.00</td>
</tr>
<tr>
<td><strong>3 Contractual</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Show calculations for reimbursement. Include: funds to hire someone for the project who is not a member of the agency's staff; Name of person/company, if known; What will they do?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Managed IT Solutions provided by Innova (formerly ACS) is included below, in &quot;Other&quot;</td>
<td>$ -</td>
<td></td>
</tr>
<tr>
<td>Professional Employer Organization Engage PEO, payroll fees are included in benefits</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Contractual Sub-Total</strong></td>
<td>$ -</td>
<td>$ -</td>
</tr>
<tr>
<td><strong>4 Equipment</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>This is the category requesting to purchase a major piece of equipment such as a computer or copy machine and during the grant period, must be used primarily for the project. Explain: What is the specific item and how did you determine its cost? Why is this needed for the project? Please show any calculations.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>N/A</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Equipment Sub-Total</strong></td>
<td>$ -</td>
<td>$ -</td>
</tr>
<tr>
<td><strong>5 Travel</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Provide any travel costs and calculations. Include, for example, if you plan to reimburse project staff for local travel and/or to send for out of town training/conference. Show calculations.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Travel is paid at state rate of .445 per mile, and is estimated to be approximately 125 miles a week for 52 weeks per FTE, for a total of 6.2 FTE.</td>
<td>$ 17,856.00</td>
<td>$ 2,880.00</td>
</tr>
<tr>
<td><strong>Travel Sub-Total</strong></td>
<td>$ 17,856.00</td>
<td>$ 2,880.00</td>
</tr>
<tr>
<td><strong>6 Supplies</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>What specific items, how many, unit and extended cost? Include expendable items, including office supplies necessary for day to day project activities.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Office Supplies estimated at $83.33 per FTE/month, 6.2 FTE total</td>
<td>$ 12,400.00</td>
<td>$ 2,000.00</td>
</tr>
<tr>
<td>Educational Materials, to include safe sleep education, resource information, health care resources. Average of $41.67/ month per Family Partner, 4 FTE total</td>
<td>$ 4,000.00</td>
<td>$ 1,000.00</td>
</tr>
</tbody>
</table>
### Postage
- To clients, estimated at $75/month per Family Partner, 4 FTE total: $7,200.00
- **Supplies Sub-Total**: $41,456.00
- **Total Expenses** including ARPA grant: $865,110.00

### Cellphone, Telephone, Internet
- ($50/month) / (55/month) / ($15/month), total $120/month per FTE, 6.2 FTE total: $17,856.00
- **Cellphone** ($50/month) / **Telephone** ($55/month) / **Internet** ($15/month), total $120/month per FTE, 6.2 FTE total: $17,856.00
- **Supplies Sub-Total**: $41,456.00
- **Total Expenses** including ARPA grant: $865,110.00

### Supplies Sub-Total
- **Total Expenses** including ARPA grant: $865,110.00

### Other
- Includes miscellaneous items that do not fit into any other category such as, but not limited to, costs for printing, duplication of project-related materials. Provide details. Emergency Relief fits here.

<table>
<thead>
<tr>
<th>Item</th>
<th>Cost</th>
<th>ARPA Grant</th>
</tr>
</thead>
<tbody>
<tr>
<td>Copying / Printing, correspondence to clients, estimated at $50/month per FTE, 6.2 FTE total</td>
<td>$7,440.00</td>
<td>$1,200.00</td>
</tr>
<tr>
<td>Insurance, Portion of annual general and professional liability, theft, Cyber and other insurance, estimated at $400/year per FTE, 6.2 FTE total</td>
<td>$4,960.00</td>
<td>$800.00</td>
</tr>
<tr>
<td>Rent, office lease estimated at $250/year per FTE, 6.2 FTE total</td>
<td>$37,200.00</td>
<td>$6,000.00</td>
</tr>
<tr>
<td>IT Support, managed IT support, estimated at $120/year per FTE, 6.2 FTE total</td>
<td>$17,856.00</td>
<td>$2,880.00</td>
</tr>
<tr>
<td>Conference / Training Fees local public health/maternal child health trainings, estimated at $150/year, 6.2 FTE total</td>
<td>$1,860.00</td>
<td>$300.00</td>
</tr>
<tr>
<td>Admin / Indirect (5%)</td>
<td>$41,196.00</td>
<td>$6,680.00</td>
</tr>
<tr>
<td><strong>Other Expenses Subtotal</strong></td>
<td>$110,512.00</td>
<td>$17,860.00</td>
</tr>
<tr>
<td><strong>TOTAL EXPENSES</strong></td>
<td>$865,110.00</td>
<td>$140,420.00</td>
</tr>
</tbody>
</table>

**Difference between requested ARPA grant and project cost**: $724,690.00
Conexiones Familiares de Pinellas

07/14/2023

Estimada:

He tratado de localizarla para compartir información sobre los recursos de la comunidad como seguimiento del formulario de evaluación de Healthy Start que completo durante su visita prenatal o durante el tiempo que estuvo en un hospital. Por favor contácteme al (727) 507-4260 dentro de los próximos siete días hábiles.

Para acceder nuestro Manual de Recursos, así como nuestro sitio web de Comienzo Saludable, busque los códigos QR a continuación. Si decide llamar en una fecha posterior para explorar los servicios disponibles para usted y su familia, aun puede contactarme.

Espero su llamada.

Gracias,

Valerie Velez

Escanear el código QR para acceder:
Manual de Recursos de Comienzo Saludable
Sitio web de Comienzo Saludable

*Para teléfonos IPhone y Android descargue una aplicación gratuita. Si no tiene acceso a aplicaciones (apps) llámenos y le enviaremos por correo una copia del manual de recursos.
Conectar

Conectando familias de Pinellas a servicios comunitarios

¡Ya sea que esté esperando su primer bebé, agregando otro miembro a su familia o ya tenga un bebé, podemos ayudarla a elegir un programa de crianza perfecto para su familia! Hay un programa para cada familia que necesita orientación o tiene preguntas en este momento tan emocionante.

Los futuros padres en el Condado de Pinellas tienen muchas opciones para los programas de visitas domiciliarias. Cada programa tiene sus beneficios únicos para mamás, papás y otros familiares envueltos en el cuidado del recién nacido.

Los visitantes de programa pueden reunirse con usted y su familia en su hogar o ubicación de su elección. Todos los programas cuentan con personal capacitado que ofrece opciones flexibles y una variedad de servicios y apoyo. Los programas pueden ayudar con:

- Apoyo durante el embarazo
- Paternidad y la interacción padre-hijo
- Educación y apoyo a la lactancia materna
- Detección de la depresión y referencias
- Asesoramiento y servicios de enfermería
- Examen de Desarrollo infantil y referencias
- Autocuidado y salud reproductiva de la Mamá
- Servicios para padres
- Cuidado de la mujer y planificación familiar
- Cuidado del bebé
- Conexiones a recursos para las necesidades familiares

Además, cada programa de visitas domiciliarias en el Condado de Pinellas tienen características únicas para ayudar con los muchos factores de riesgo que podrían afectarle a usted y a su embarazo. Cada programa tiene requisitos de elegibilidad, pero nuestros Socios Familiares pueden guiarla a través de cada programa y ayudarla a tomar la decisión correcta. ¡Para ti, tú bebé y tú familia!

¡Llámenos hoy para obtener más información y encontrar la mejor opción para ti!

(727) 507-4260

Connect is a community service of the Healthy Start Coalition of Pinellas, Inc.
4000 Gateway Centre Blvd. • Suite 200 • Pinellas Park, FL • 33782
Medicaid por 1 año después de dar a luz a su bebe!
¡Después de tener a su bebe, puede inscribirse para obtener cobertura médica gratuita con Medicaid por 1 año!

¡Dos años de Servicios de Planificación Familiar Gratis!
Cuando termina la cobertura postparto de 12 meses, las mujeres se inscriben automáticamente en el Programa de exención Panificación Familiar de Medicaid por otros 12 meses. Cuando estos 2 años terminen, las mujeres recibirán notificación del Departamento de Niños y Familias y tener la oportunidad de solicitar por este servicio un año más. Este servicio de Planificación Familiar es para mujeres de edad 14-55 años con cierto nivel Federal económico de un máximo del 185% y no tiene Medicaid completo.

Puedes llamar a la línea de salud familiar 1-800-451-2229 para ayuda.

Los servicios incluyen:
* Visitas iniciales y anuales al consultorio de planificación familiar
* Exámenes de laboratorio y papanicolaou requeridos
* Visitas de consejería y planificación familiar
* Visitas de suministro de anticonceptivos
* Esterilización voluntaria incluyendo ligadura de trompas
* Detección de VIH
* Diagnóstico y tratamiento limitados para infección de transmisión sexual y otros problemas ginecológicos, incluida la colposcopia.

Pregúntele a su proveedor de atención prenatal si proporcional estos servicios de planificación familiar en su consultorio.

Dónde recibir servicios:
Evara: 727-824-8181 – Clearwater, Pinellas Park, & St. Petersburg
Pinellas County Health Department: 727-824-6900 – Clearwater, Largo, Tarpon Springs & St. Petersburg
Turley Family Health Center: 727-467-2500 – Clearwater
Ladies & Babies: 727-781-3448 – Palm Harbor
Bayfront Family Health Center: 727-893-6198 – St. Petersburg

Embarazo con 2 años de diferencia es saludable ¡
Para mas información contacte la Coalición de Comienzo Saludable Inc. 727-507-4260

Sponsored by HEALTHY START MOMCARE NETWORK, INC. and the State of Florida,
Agency for Health Care Administration.
The Healthy Start Coalition of Pinellas
www.healthystartpinellas.org
4000 Gateway Centre Boulevard, Suite 200
Pinellas Park, FL 33782
https://www.facebook.com/HealthyStartofpinellascounty
https://www.instagram.com/healthystartofpinellascounty/
ABC’s of safe sleep: Babies sleep safest ALONE, on their BACK and in a CRIB.

Los bebes duermen mejor A solas, de Boca Arriba y en su propia Cuna.

Beds for Babies: Providing a safe place for babies to sleep.

Programa Camas para Bebes: proveyendo un sitio seguro para su bebe dormir.

Are you in need of a safe place for your baby to sleep?

¿Necesita un sitio seguro para su bebe dormir?

Who can participate?

- Pinellas County residents who are unable to provide a safe place for baby to sleep.
- Those not already participating in a program that could supply a safe place for the baby to sleep.
- Pregnant women 2 months before baby is due.
- Infants weighing less than 25 lbs.
  - Able to participate in a sleep baby safely educational session.

Quien puede participar?

- Residentes de Pinellas que no pueden proveer un sitio seguro para el bebe dormir.
- Aquellos no participando en otro programa que pueda ayudar con esta necesidad.
- Mujeres embarazadas 2 meses antes de parir.
- Infantares de menos de 25 libras.
- Participar en una sesión de educación de sueno seguro.

Healthy Start Coalition of Pinellas at
Contact/contacte #727-512-3740
Or info@healthystartpinellas.org
HEALTHY FOOD. HEALTHY KID. HAPPY MOM.

WIC IS HERE & READY TO HELP YOU!

WIC clinics are open and ready to serve Florida residents during the COVID-19 pandemic. We are serving clients by telephone and in-person.

Call today!
727-824-6913
or 727-824-6914

WIC is a federally funded nutrition program for Women, Infants and Children. WIC provides at no cost: healthy foods, nutrition education and counseling, breastfeeding support and referrals for health care and community services.

COMIDA SALUDABLE. NIÑO/A SALUDABLE. MAMÁ FELIZ.

¡WIC ESTÁ AQUÍ Y LISTO PARA AYUDARLE!

Las clínicas de WIC están abiertas y listas para atender a los residentes de Florida durante la pandemia de COVID-19. Estamos atendiendo a los clientes por teléfono y en persona.

¡Llame hoy!
727-824-6913
o 727-824-6914

WIC es un programa de nutrición financiado por el gobierno federal para mujeres, bebés y niños. WIC provee sin costo alguno: alimentos saludables, educación y asesoramiento sobre nutrición, apoyo a la lactancia materna y referencias para atención médica y servicios comunitarios.

Florida HEALTH
WIC Florida

This institution is an equal opportunity provider.
Esta institución es un proveedor de igualdad de oportunidades.