

Rapid Response Emergency Addiction and Crisis Team (RREACT) project overview:

RREACT is a first responder opioid intervention operated by the Columbus Division of Fire (CDF) and Southeast, Inc., a non-profit substance abuse and mental health provider. When first responders are dispatched to the scene of an overdose, they administer naloxone. When individuals are revived, they are offered transport to a clinical facility with staff trained in working with overdose patients. At the clinical facility, overdose patients are paired with a member of the Southeast RREACT support team for connection to treatment, counseling and case management. In 2017, 1,251 (23%) of individuals revived by RREACT EMS refused transport to clinical services and were not connected with addiction or social service supports. In response, CDF took on the responsibility of following up with individuals in the community after a non-fatal overdose. CDF hired an addiction case manager who joined them on overdose runs and follow up visits with overdose survivors.

Services provided through this sole source contract will enhance and expand RREACT to meet the needs of children and family members present at the site of overdose and/or impacted by drug use in the home. Services will be provided by Franklin County Family and Children First Council (FCFCFC). FCFCFC will dedicate two staff members to RREACT outreach. FCFCFC staff will:

- Provide rapid response intervention services for children and/or family members who witness a parent or loved one suffer an overdose. Services are designed to help individuals work through traumatic incidents and develop strategies for managing impact of trauma going forward i.e. regulation exercises and de-escalation tactics.
- Provide immediate and long-term support, resources, and services to children and families impacted by overdose.
- Provide case management and service coordination for children and families accessing multiple systems.
- Provide Trauma Informed Care training to first responders, victim service providers, and child protective services professionals.
- Guide development of Trauma Informed Care protocols for first responders to follow when interacting with children affected by overdose and/or by substance use in the home.

Contract services will not exceed **\$378,000** over the two-year grant cycle. Funds will support the addition of two FCFCFC Trauma Specialists to RREACT outreach activities and dedication of one Trauma Informed Care Trainer to the project. Franklin County Family and Children First Council will invoice Columbus Division of Fire quarterly. Invoices to reflect actual staff expenses incurred in the previous three months.

Franklin County Family and Children First Council project staff will fully integrate into RREACT activities. The project team will have an office at Columbus Division of Fire and work side by side with first responders. The multi-disciplinary team will work collaboratively to develop and implement comprehensive case plans and trauma strategies for addicts, children and family members to ensure quality service and continuity of care for the full family unit.

Uniqueness of items or services to be procured from the proposed contractor or vendor:

Franklin County Family and Children First Council is the only Franklin County-based agency that offers the unique combination of services required to fulfill this role on the RREACT team. Services include, but are not limited to:

- Use of validated tools to assess mental health and behavioral health.

- Provision of trauma screening, trauma counseling and trauma case planning.
- Provision of comprehensive case planning and service/care coordination for children and families accessing (or needing to access) multiple systems.
- Facilitation of Trauma Informed Care (TIC) trainings and TIC coaching for educators, service providers and frontline public safety staff (i.e. EMS, firefighters and police).

How the agency determined that the item or service is only available from one source:

The RREACT project team reached out to Franklin County Children Services to learn what organizations could help first responders effectively support the needs of children and family members impacted by overdose. Children Services referred the project team to Franklin County Family and Children First Council. Franklin County Family and Children First Council specializes in trauma management and resource coordination for children and families engaged in multiple systems. Franklin County Family and Children First Council is the organization to which Children Services refers complex cases involving trauma and requiring multi-system service coordination. Franklin County Family and Children First Council also provides Trauma Informed Care training to Franklin County Children Services staff, Franklin County Juvenile Court Staff, local public school teachers and school administration, and other providers working directly with high-risk populations.

Franklin County Family and Children First Council receives levy funding, TANF funding, Ohio Department of Mental Health Funding, Franklin County Children Services Funding and private foundation money to support and sustain their unique services in central Ohio.

Explanation of need for contractor's expertise linked to the current project

As stated earlier, the unique combination of 1) resource coordination, 2) multi-system case management, 3) trauma screening, 4) immediate and ongoing trauma support for children and adults, and 5) skilled Trauma Informed Care training staff is not available through another, single, organization in Franklin County, Ohio.

Franklin County Family and Children First Council will dedicate two Trauma Specialists to RREACT outreach and a Lead Trauma Informed Care Trainer to provide hands on training and ongoing coaching for first responders. Trauma Specialist I, Eva Fitch, has extensive experience working directly with law enforcement and fire department Crisis Intervention Teams. This experience is invaluable. It validates and connects FCFCFC contract staff with RREACT EMS and police staff in a deep and fraternal manner. The Lead Trauma Specialist, Carol Taylor, is a certified Child Trauma Academy fellow and has successfully trained over 8,000 direct service professionals in the Trauma Informed Care concepts and implementation tactics. Trauma Specialist II will be named once the sole source contract is approved.

Independent review of service providers in Franklin County, Ohio would reveal/substantiate Franklin County Family and Children First Council's unique niche in the social service market related to multi-system care coordination, trauma services and trauma training.

Conflict of Interest/Suitability/Procurement Standards

- No conflict of interest exists between the City of Columbus and Franklin County Family and Children First Council.

Sole Source Justification: C1 COAP First Responder, 2018-MU-MU-K070

- Franklin County Family and Children First Council is not on Excluded Parties List nor has Franklin County Family and Children First Council been debarred from receiving federal funds.
- Local and federal procurement processes for Sole Source contracts will be followed. Locally, Sole Source procurement decisions are approved through legislation submitted to Columbus City Council. Federally, a Sole Source justification is submitted as a Grant Adjustment Notification through the OJP Grant Management System for review and approval.

Entering into a sole source contract with Franklin County Family and Children First Council is in the best interest of RREACT, Columbus Public Safety and the greater Columbus community.

Attached:

- Sole source check list
- Contract scope of services including project activities, deliverables and payment schedule
- Trauma Specialist job description
- Resume/CV- Eva Fitch
- Resume/CV- Carol Taylor
- Franklin County Children First Council organizational chart



Sole Source Review Checklist

Tool to assess the merits of a sole source approval request

A *Sole Source Approval* Grant Adjustment Notice (GAN) in the Office of Justice (OJP) Grants Management System (GMS) must be initiated to request approval to enter into a noncompetitive contractual relationship, with a contractor under an award, where the contracted cost exceeds the Simplified Acquisition Threshold of \$150,000. The sole source justification should include adequate information to address the elements below. In addition, a copy of the itemized budget for the contract amount should be attached to the *Sole Source Approval* GAN.

Below is a checklist intended to help evaluate sole source requests. The sole source approval request only needs to meet one of the qualifying situations listed on this checklist. ***All the conflict of interest of interest items must be addressed in the justification.***

Item Only Available Through a Single Source

- ☐ Does independent research through internet searches or discussions with subject matter experts corroborate that the item is available only from a single source?
- ☐ Does the request demonstrate the uniqueness of items or services to be procured from the proposed contractor or vendor (e.g., compatibility or patent issues, etc.)?
- ☐ Does the request demonstrate and support how it determined that the item or service is only available from one source (e.g., market survey results, independent agency research, patented or proprietary system)?
- ☐ Does the request demonstrate a significant need for contractor's expertise linked to the current project (e.g., knowledge of project management, responsiveness, experience of contractor personnel, and/or prior work on earlier phases of project)?

Public Emergency

- ☐ Is there a public emergency such as a natural disaster or catastrophic event?
- ☐ Has there been a declared state of emergency in which these goods and services will be needed?
- ☐ Is there an immediate health or safety concern?

Inadequate Competition

- ☐ Does the request adequately describe the efforts to competitively contract for this item? For example, were requests for proposals or bids conducted and what was the nature of the responses?
- ☐ Does the request adequately describe the efforts to ensure the contract pricing is fair and reasonable?
- ☐ Does the request provide results of a market survey to determine competition availability or explained why no survey was conducted?

Conflict of Interest/Suitability/Procurement Standards *(justification must address all items)*

- ☐ Does the request ensure there is no conflict of interest with the proposed vendor?
- ☐ Does the request indicate that the Excluded Parties List was checked and that the proposed vendor has not been debarred from receiving federal funds?
- ☐ Does the request include evidence that the procurement will be competed in compliance with the organization's procurement policies and the procurement standards outlined in the DOJ Grants Financial Guide and the Uniform Guidance, including the required contract provisions?



RREACT Scope of Work: Franklin County Family and Children First Council

Goal: Work with RREACT team to improve outcomes for children and family members present at an overdose scene and/or impacted by drug use in the home.

RREACT Project Overview: RREACT is a first responder opioid intervention operated by the Columbus Division of Fire (CDF) and Southeast, Inc., a non-profit substance abuse and mental health provider. When first responders are dispatched to the scene of an overdose, they administer naloxone. When individuals are revived, they are offered transport to a clinical facility with staff trained in working with overdose patients. At the clinical facility, overdose patients are paired with a member of the Southeast RREACT support team for connection to treatment, counseling and case management. In 2017, 1,251 (23%) of individuals revived by RREACT refused transport to clinical services and were not connected with addiction or social service supports. In response, CDF took on the responsibility of following up with individuals in the community after a non-fatal overdose. CDF hired an addiction case manager who joined them on overdose runs and follow up visits with overdose survivors.

Services provided through this contract will enhance and expand RREACT to meet the needs of children and family members present at the site of overdose and/or impacted by drug use in the home. Services will be provided by Franklin County Family and Children First Council (FCFCFC). FCFCFC will dedicate two staff members to RREACT outreach.

Franklin County Family and Children First Council project staff will work directly with RREACT first responders. The multi-disciplinary team will work collaboratively to develop and implement comprehensive case plans and trauma strategies for addicts, children and family members to assure quality service and continuity of care.

Project Timeline: November 2018 through September 2020

Contract amount over two years: \$378,000

Reimbursement payment model: Franklin County Family and Children First Council will invoice Columbus Division of Fire quarterly. Invoices to reflect actual staff expenses incurred in the previous three months.

Project Activities:

- **Daily-** Provide rapid response intervention services for children and/or family members who witness a parent or loved one suffer an overdose. Services are designed to help individuals work through traumatic incidents and develop strategies for managing impact of trauma going forward i.e. regulation exercises and de-escalation tactics.
- **Daily-** Provide immediate and long-term support, resources, and services to children and families impacted by overdose.
- **Daily-** Provide case management and service coordination for children and families accessing multiple systems.
- **Bi-monthly with ongoing coaching-** Provide Trauma Informed Care training to first responders, victim service providers, and child protective services professionals.
- **Over first 10 months of contract period-** Review existing first responders protocols for interacting with families and children affected by overdose and/or by substance use in the home; make recommendations for how protocols could be updated to reflect Trauma Informed Care principles.

Project Deliverables:

- **Completion date TBD-** Written recommendations for how first responder protocols could be updated to align with Trauma Informed Care principles.
- **Report delivery dates TBD-** Monthly program reports to RREACT Project Manager.

Franklin County Family and Children First Council

Position Title: RREACT Trauma Specialist (RTS)

Purpose: To work with RREACT team to assist with planning coordinated services for families in order to assure trauma informed care and supports for children and families impacted by opioid overdose.

Primary Duties and Responsibilities

1. Educates family and teams regarding brain development and the impact on behavior and engagement with services
 - Attends conferences and trainings to stay relevant with the latest services/strategies
 - Educates families and teams about the impact of trauma and neglect on childhood development
 - Assesses for evidence of trauma
 - Is able to engage and communicate with families and teams about best strategies for mitigating impact of trauma
2. When a family with children is identified by CFD RTS will facilitate intersystem planning for children and families impacted by opioid overdose including CFD, Children Services, community resources
 - Organizes team meetings and related materials
 - Facilitates discussion to identify strengths and needs of the family
 - Leads creative decision-making and planning process
 - Follows up to insure linkage to needed services and supports
 - Monitors progress and insures plans are updated
3. Completes, monitors, and tracks key documents and data maintained in case files for all identified families
 - Referral Information
 - Assessment Data
 - Service Plan
 - Quarterly Review Data
 - Meeting Minutes
 - Progress Notes and/or Reports
4. Researches funding streams, eligibility requirements, and community resources to insure a strong knowledge of available programs, services, and supports for children and families

Qualifications

A bachelor degree in social services or related field and a minimum of 5 years of experience coordinating services for children and families. Experience with the implementation of trauma informed care, mental health system and Master degree preferred.

Skills and Abilities

1. Must have the ability to establish rapport with families, children, systems in crisis
2. Must be detail oriented with exceptional organizational skills
3. Must have the ability to establish priorities, identify resources and manage multiple tasks within a deadline oriented environment
4. Needs strong verbal and written communication skills
5. Demonstrated proficiency with Microsoft Office products including the ability to create professional documents and materials
6. Ability to work effectively with diverse stakeholders, staff and families

Evadna M. Fitch

Experience

3/2010 to present Family and Children's First Council Columbus, Ohio

Director of Multisystem Services

- Manage Service Coordinators who facilitate intersystem planning and linkage to services for children and families involved with Children Services, Mental Health, Board of Developmental Delays, Job and Family Services, and Juvenile Court.
- Manage contracts and budgets for service providers that Family and Children's First fund.
- Participate in community planning and development of services for families in Franklin County.
- Educate community regarding Family and Children's First Council.
- Consult with youth serving systems regarding trauma informed care

Deputy Director Building Better Lives Service Coordination

- Manage Service Coordinators who work with students identified by school administration to assist with keeping students in the classroom
- Helping schools and families to understand the impact of trauma and neglect on early childhood brain development
- Giving schools, students, and families resources to mitigate the impact of early childhood neglect and trauma

3/2008 to 3/2010 Alcohol, Drug and Mental Health Board Columbus, Ohio

Network Manager for Family and Youth Services

- Managed and developed programs that provide mental health and alcohol and other drug treatment and recovery support services to children, youth and families so they may live with their families and participate in their communities.
- Managed state and federal grants.
- Responsible for providing community education regarding mental health through radio and television interviews.

2/2005-2/2008 Nationwide Children's Hospital Columbus, Ohio

Clinical Coordinator

- Managed Crisis Support Services which included youth suicide prevention project and four staff providing mental health and screening in high schools and primary care settings.
- Managed Crisis Team of two staff providing crisis assessment and linkage services to the hospital system in collaboration with Netcare Services and Ohio State Hospital for Adolescent/Child Psychiatry.
- Provided risk assessment training for emergency room social workers.
- Managed Community Treatment Services comprised of four teams
 1. Community Support Team – 13 staff providing direct counseling service to youth with significant mental health needs.
 2. Home Based Team – 7 staff providing direct services to families impacted by neglect and dependency needs using a family preservation model.

Evadna M. Fitch

3. Multisystem Therapy Team – 5 staff providing direct service to youth with juvenile justice concerns following an evidence-based treatment model of care.
4. Consultation, Assessment, Linkage, and Liaison (CALL) Team- 5 staff providing assessment and linkage service to Franklin County Children Services.

11/2000-2/2005

Netcare Access

Columbus, Ohio

Manager

- Managed Crisis and Assessment Services from 5/2003 – 2/2005 supervising 35 staff which provided 24/7 mental health crisis services using a multi-disciplinary approach.
- Manage Youth Services Team from 11/2000 – 5/2003 supervising 11 staff providing mental health crisis and assessment services to children and families in Franklin County.
- Implemented training course for new recruits.
- Member of the Community Crisis Response team

2/1996-11/2000

Huckleberry House

Columbus, Ohio

Team Leader

- Crisis Team Leader from 5/1997-11/2000 responsible for coordination of daily crisis stabilization activities; development and monitoring of direct service staff; maintain residential facility needs.
- Resource Specialist from 5/1996-5/1997 responsible for the referral and assessment of potential clients; coordination of a transitional living program; providing general support to case managers.
- Aftercare Specialist from 2/1996-5/1996 provided mental health case management and crisis intervention with parents and youth.

Education

1995

The Ohio State University

Columbus, Ohio

Master of Social Work

- Licensed Independent Social Worker since 1/1996

Selected Experiences

Adjunct Professor at Columbus State Community College

Adjunct Professor at The Ohio State University, College of Social Work

“Understanding Trauma Reactions” Attorney General’s Three Days in May Annual Conference (2011)

“Suicide Intervention with Children and Teens” Public Children’s Association of Ohio Annual Conference (2007)

“Youth Crisis and Risk Assessment Planning” six regional trainings for the state of Georgia

614-578-8070•evefitch@yahoo.com

Evadna M. Fitch

Division of Mental Health (2007)

“Youth Crisis Intervention” Columbus Police Department (2004 – 2010)

Member of the Mid-Ohio Critical Incident Stress Management Police Team (2000 to present)

CAROL B. TAYLOR

1724 Audrey Rd. • Columbus, OH 43224 • taylor.carolb@gmail.com • 419-722-9084

Expert public speaker and trainer with extensive experience in adult education. Experienced facilitator, focused on helping people reach their fullest potential. Areas of expertise include:

- | | | |
|--------------------------------|--------------------------|------------------------|
| • Public Speaking/Training | • Curriculum Development | • Program Development |
| • Stakeholder Relations | • Team Building | • Employee Development |
| • Problem-solving Facilitation | • Volunteer Coordination | • Grant Writing |

PROFESSIONAL EXPERIENCE

FRANKLIN COUNTY FAMILY AND CHILDREN FIRST COUNCIL, Columbus, OH

Deputy Director—Building Better Lives (7/2017-present)

Supervise employees responsible for providing coaching in schools and community social service agencies. Develop employees to grow in skills to provide coaching and training. Provide training on Neurosequential Model™ as requested in community. Prepare grant reports. Monitor budget. Collect and analyze program data.

Key Achievements:

- Doubled size of department in one year

Program Coordinator/Lead Trainer (9/2013 to 6/2017)

Coordinate community-wide initiative to address the issue of complex developmental trauma in Franklin County. Provide training on concepts of Neurosequential Model™ and facilitate follow up discussions in community settings. Engage school districts in training process to increase understanding of complex developmental trauma. Monitor contract with community partners to ensure efficient and effective implementation of programming in social service systems.

Key Achievements:

- Named as NME Fellow for ChildTrauma Academy, Houston, TX
- Selected as speaker at Neurosequential Model International Symposium 2016 & 2018
- Trained over 8,000 professionals in the concepts of trauma-informed care

FINDLAY HOPE HOUSE FOR THE HOMELESS, INC., Findlay, OH

Bridges Coordinator (4/2010 to 9/2013)

Led community-wide initiative to address the issue of poverty in Hancock County. Provided training in community settings and oversaw implementation of class for consumers in poverty. Created programming and developed curriculum to accelerate learning and support for consumers moving out of poverty. Created effective collaborations with businesses, churches, non-profit organizations, government leaders and Bridges Leadership Team to ensure increased awareness and commitment to social change. Engaged, trained and retained short and long-term volunteers. Measured, tracked and reported milestones and results. Recommended improvement opportunities.

Key Achievements:

- Contributing author in "From Vision To Action: Best Practice to Reduce the Impact of Poverty in Communities, Education, Healthcare, and More" (aha! Process, Inc. 2012)
- Certified Bridges Out of Poverty Trainer
- Certified trainer for Framework for Understanding Poverty

SELF-EMPLOYED, Findlay, OH

Independent Consultant (1/2004-2014)

Facilitated strategic planning for several local agencies and businesses. Led experiential learning sessions to facilitate team building and problem solving for work teams. Identify appropriate grant funding sources for local non-profit organizations and assist with grant writing.

Key Achievements

- Developed and implemented cross-system training curriculum in response to HB276 and HB1 requirements for Educators

FAMILY RESOURCE CENTERS, Findlay, OH

Prevention Coordinator (1/2002-4/2010)

Developed top-producing team through coaching, training and mentoring. Directed team in strategic planning, project management, curriculum implementation, team-building and change management. Provided training throughout county and state on Prevention topics. Managed budgets and reporting. Assisted in Quality Improvement activities for 2 years, including during Agency initial COA Accrediting process.

Key Achievements

- Developed training curriculum for all new staff members that prepared them for Prevention certification
- Accepted Ohio Department of Alcohol and Drug Addiction Services "Mentor of the Year" award in 2007

FAMILY RESOURCE CENTERS, cont'd.

Prevention Specialist (1/1997-1/2002)

Implemented Prevention curricula in schools as requested including bullying prevention, violence prevention, drug and alcohol prevention and social skills development.

Key Achievements

- Recognized for superior performance: named "Employee of the Month" in 1998 and accepted the "Professional of the Year" Award in 2001
- Served as one of two internal facilitators for Employee Involvement initiative

EDUCATION

UNIVERSITY OF FINDLAY, Findlay, OH

Master of Arts in Education, focus on HR Training & Development

Expected completion: 5/2019

WINEBRENNER THEOLOGICAL SEMINARY, Findlay, OH

Master of Arts with core concentration in Leadership

Attended 2009-2012

UNIVERSITY OF FINDLAY, Findlay, OH

Bachelor of Arts in Math, Minors in Spanish and Bilingual/Multicultural Studies

Degree obtained 1994

ADDITIONAL QUALIFICATIONS

Activity/Affiliations

- | | |
|--|--------------|
| • Franklin County Resilience Task Force | 2017-present |
| • Franklin County Opiate Task Force | 2017 |
| • Growing Healthy Kids Coalition | 2016-present |
| • Focus On Friends Mental Health drop-in center Board Member | 2010-2012 |
| • Mental Illness Awareness Committee Chair | 2006-2009 |
| • National Alliance on Mental Illness Walk Co-chair | 2009 |
| • Suicide Prevention Task Force Co-Chair | 2007 |
| • United Way of Hancock Co. Board Member | 2002-2006 |

Speaking Engagements

- | | |
|--|------------|
| • Keynote Speaker, Whitehall City Schools PD Conference | 2017 |
| • Keynote Speaker, Columbus City Schools PD Conference | 2017 |
| • Keynote Speaker, ESC of Central Ohio opening day conference | 2017 |
| • Selected Speaker, TEDx Yearling Road Conference | 2017 |
| • Breakout Speaker, Re-Imagine Conference, Columbus, Ohio | 2017 |
| • Breakout Speaker, Opiate Task Force Summit | 2017 |
| • Keynote Speaker, Opiate Task Force—Trauma Informed Care | 2017 |
| • Breakout Speaker, NM International Symposium, Banff, Canada | 2016 |
| • Keynote Speaker, ESC of Central Ohio—Opening Day | 2016 |
| • Keynote Speaker, CDC Head Start Child Safety Conference | 2016 |
| • Keynote Speaker, Building Better Lives Community Conference | 2015 |
| • Keynote Speaker, Columbus City Schools PD Conference | 2015 |
| • Keynote & Breakout Session Speaker, Fairfield County EC Conference | 2014 |
| • Keynote Speaker, Hardin County Safety Council | 2013 |
| • Keynote Speaker, Findlay Area Human Resource Association | 2013 |
| • Guest Speaker, Housing and Urban Development State Conference | 2011 |
| • Guest Speaker, Bridges Out of Poverty National Conference | 2011 |
| • Keynote Speaker, Greater Findlay, Inc. Safety Council | 2010, 2012 |
| • Keynote Speaker, Auglaize County Safety Council | 2010 |
| • Guest Speaker, Ohio Prevention and Education Conference | 2007 |

Family & Children First Council

Children's Cabinet

Help Me Grow

Program for children birth up to age 3 and their families

Care Coordination

Program for children
0-21 receiving services
from multiple child
serving systems

Community Planning

Coordinated planning
pertaining to services for
children and families

Teen Pregnancy Prevention

Contracts for services
that are designed to
prevent teen pregnancy

Ohio Children's Trust Fund

Contracts for services
designed to assist in
reducing child abuse &
neglect

Cross Systems Initiatives

Programs involving more than one system to address a specific community need among multiple systems

Newborn Home Visits

Service Coordination

At-Risk

Part C (IDEIA) Children with DevDelays

Parent Education (typical child dev)

HMG allocation: Federal
Part C, TANF, and State
GRF funding

Nurse Family Partnership
TANF Funded independent of HMG allocation

TANF Funded independent
of HMG allocation

Multi-System
Pooled Funding from local levy dollars

--

FAST
State Funding through ODMH to help meet the unique needs of children and families

[illegible]

Needs Assessment

Research & Best Practice

Resource Mapping

Training

These administrative services are supported by local dollars and a \$20,000 grant from Ohio FCFC

5 community based contracts
TANF funded

--	--

4 community based contracts
State allocation from a surcharge on copies of birth & death certificates and a fee on divorce & dissolution filings

<p>Behavioral Health / Juvenile Justice</p>
<p>Funded through a grant from the Robert Wood Johnson Foundation</p>

--

<p>Multi-Systemic Therapy</p> <p>Program supported by pooled funding from FCCS, Juvenile Court, ADAMH Board, & FCFC</p>
--

the 1990s, the number of people in the United States who are 65 years of age or older has increased by 50 percent. The number of people 75 years of age or older has increased by 100 percent. The number of people 85 years of age or older has increased by 200 percent. The number of people 95 years of age or older has increased by 400 percent. The number of people 100 years of age or older has increased by 800 percent. The number of people 105 years of age or older has increased by 1,600 percent. The number of people 110 years of age or older has increased by 3,200 percent. The number of people 115 years of age or older has increased by 6,400 percent. The number of people 120 years of age or older has increased by 12,800 percent. The number of people 125 years of age or older has increased by 25,600 percent. The number of people 130 years of age or older has increased by 51,200 percent. The number of people 135 years of age or older has increased by 102,400 percent. The number of people 140 years of age or older has increased by 204,800 percent. The number of people 145 years of age or older has increased by 409,600 percent. The number of people 150 years of age or older has increased by 819,200 percent. The number of people 155 years of age or older has increased by 1,638,400 percent. The number of people 160 years of age or older has increased by 3,276,800 percent. The number of people 165 years of age or older has increased by 6,553,600 percent. The number of people 170 years of age or older has increased by 13,107,200 percent. The number of people 175 years of age or older has increased by 26,214,400 percent. The number of people 180 years of age or older has increased by 52,428,800 percent. The number of people 185 years of age or older has increased by 104,857,600 percent. The number of people 190 years of age or older has increased by 209,715,200 percent. The number of people 195 years of age or older has increased by 419,430,400 percent. The number of people 200 years of age or older has increased by 838,860,800 percent. The number of people 205 years of age or older has increased by 1,677,721,600 percent. The number of people 210 years of age or older has increased by 3,355,443,200 percent. The number of people 215 years of age or older has increased by 6,710,886,400 percent. The number of people 220 years of age or older has increased by 13,421,772,800 percent. The number of people 225 years of age or older has increased by 26,843,545,600 percent. The number of people 230 years of age or older has increased by 53,687,091,200 percent. The number of people 235 years of age or older has increased by 107,374,182,400 percent. The number of people 240 years of age or older has increased by 214,748,364,800 percent. The number of people 245 years of age or older has increased by 429,496,729,600 percent. The number of people 250 years of age or older has increased by 858,993,459,200 percent. The number of people 255 years of age or older has increased by 1,717,986,918,400 percent. The number of people 260 years of age or older has increased by 3,435,973,836,800 percent. The number of people 265 years of age or older has increased by 6,871,947,673,600 percent. The number of people 270 years of age or older has increased by 13,743,895,347,200 percent. The number of people 275 years of age or older has increased by 27,487,790,694,400 percent. The number of people 280 years of age or older has increased by 54,975,581,388,800 percent. The number of people 285 years of age or older has increased by 109,951,162,777,600 percent. The number of people 290 years of age or older has increased by 219,902,325,555,200 percent. The number of people 295 years of age or older has increased by 439,804,651,110,400 percent. The number of people 300 years of age or older has increased by 879,609,302,220,800 percent. The number of people 305 years of age or older has increased by 1,759,218,604,441,600 percent. The number of people 310 years of age or older has increased by 3,518,437,208,883,200 percent. The number of people 315 years of age or older has increased by 7,036,874,417,766,400 percent. The number of people 320 years of age or older has increased by 14,073,748,835,532,800 percent. The number of people 325 years of age or older has increased by 28,147,497,671,065,600 percent. The number of people 330 years of age or older has increased by 56,294,995,342,131,200 percent. The number of people 335 years of age or older has increased by 112,589,990,684,262,400 percent. The number of people 340 years of age or older has increased by 225,179,981,368,524,800 percent. The number of people 345 years of age or older has increased by 450,359,962,737,049,600 percent. The number of people 350 years of age or older has increased by 900,719,925,474,099,200 percent. The number of people 355 years of age or older has increased by 1,801,439,850,948,198,400 percent. The number of people 360 years of age or older has increased by 3,602,879,701,896,396,800 percent. The number of people 365 years of age or older has increased by 7,205,759,403,792,793,600 percent. The number of people 370 years of age or older has increased by 14,411,518,807,585,587,200 percent. The number of people 375 years of age or older has increased by 28,823,037,615,171,174,400 percent. The number of people 380 years of age or older has increased by 57,646,075,230,342,348,800 percent. The number of people 385 years of age or older has increased by 115,292,150,460,684,697,600 percent. The number of people 390 years of age or older has increased by 230,584,300,921,369,395,200 percent. The number of people 395 years of age or older has increased by 461,168,601,842,738,790,400 percent. The number of people 400 years of age or older has increased by 922,337,203,685,477,580,800 percent. The number of people 405 years of age or older has increased by 1,844,674,407,370,955,161,600 percent. The number of people 410 years of age or older has increased by 3,689,348,814,741,910,323,200 percent. The number of people 415 years of age or older has increased by 7,378,697,629,483,820,646,400 percent. The number of people 420 years of age or older has increased by 14,757,395,258,967,641,292,800 percent. The number of people 425 years of age or older has increased by 29,514,790,517,935,282,585,600 percent. The number of people 430 years of age or older has increased by 59,029,581,035,870,565,171,200 percent. The number of people 435 years of age or older has increased by 118,059,162,071,741,130,342,400 percent. The number of people 440 years of age or older has increased by 236,118,324,143,482,260,684,800 percent. The number of people 445 years of age or older has increased by 472,236,648,286,964,521,369,600 percent. The number of people 450 years of age or older has increased by 944,473,296,573,929,042,739,200 percent. The number of people 455 years of age or older has increased by 1,888,946,593,147,858,085,478,400 percent. The number of people 460 years of age or older has increased by 3,777,893,186,295,716,170,956,800 percent. The number of people 465 years of age or older has increased by 7,555,786,372,591,432,341,913,600 percent. The number of people 470 years of age or older has increased by 15,111,572,745,182,864,683,827,200 percent. The number of people 475 years of age or older has increased by 30,223,145,490,365,729,367,654,400 percent. The number of people 480 years of age or older has increased by 60,446,290,980,731,458,735,308,800 percent. The number of people 485 years of age or older has increased by 120,892,581,961,462,917,470,617,600 percent. The number of people 490 years of age or older has increased by 241,785,163,922,925,834,941,235,200 percent. The number of people 495 years of age or older has increased by 483,570,327,845,851,669,882,470,400 percent. The number of people 500 years of age or older has increased by 967,140,655,691,703,339,764,940,800 percent. The number of people 505 years of age or older has increased by 1,934,281,311,383,406,679,529,881,600 percent. The number of people 510 years of age or older has increased by 3,868,562,622,766,813,359,059,763,200 percent. The number of people 515 years of age or older has increased by 7,737,125,245,533,626,718,119,526,400 percent. The number of people 520 years of age or older has increased by 15,474,250,491,067,253,436,239,052,800 percent. The number of people 525 years of age or older has increased by 30,948,500,982,134,506,872,478,105,600 percent. The number of people 530 years of age or older has increased by 61,897,001,964,269,013,744,956,211,200 percent. The number of people 535 years of age or older has increased by 123,794,003,928,538,027,489,912,422,400 percent. The number of people 540 years of age or older has increased by 247,588,007,857,076,054,979,824,844,800 percent. The number of people 545 years of age or older has increased by 495,176,015,714,152,109,959,649,689,600 percent. The number of people 550 years of age or older has increased by 990,352,031,428,304,219,919,299,379,200 percent. The number of people 555 years of age or older has increased by 1,980,704,062,856,608,439,838,598,758,400 percent. The number of people 560 years of age or older has increased by 3,961,408,125,713,216,879,677,197,516,800 percent. The number of people 565 years of age or older has increased by 7,922,816,251,426,433,759,354,395,033,600 percent. The number of people 570 years of age or older has increased by 15,845,632,502,852,867,518,708,790,067,200 percent. The number of people 575

Family & Children First Council

Children's Cabinet

Help Me Grow

Program for children birth
up to age 3 and their
families

Care Coordination

Program for children
0-21 receiving services
from multiple child
serving systems

Community Planning

Coordinated planning
pertaining to services for
children and families

Family and Civic Engagement

HB1 Initiative requiring school districts to submit plans to FCFC's so they can be integrated into the county wide plan

**Ohio Children's
Trust Fund**

Contracts for services designed to assist in reducing child abuse & neglect

Cross Systems Initiatives

Programs involving more than one system to address a specific community need among multiple systems

Service Coordination
Home Visiting
Part C (IDEIA) Children with DevDelays

Part C (IDEIA) Children with DevDelays
--

Multi-System
Pooled Funding from local levy dollars

Needs Assessment

Research & Best Practice

Pilot: 3 school districts
(South Western,
Whitehall & Bexley)
participating in the
"learning community"

State allocation from a surcharge on copies of birth & death certificates and a fee on divorce & dissolution filings

**Behavioral Health /
Juvenile Justice**

Funded through a grant
from the Robert Wood
Johnson Foundation

<p>Home Visiting (typical child dev)</p>
<p>HMG allocation: Federal Part C, TANF, and State GRF funding</p>

Nurse Family Partnership (HV)

<p>Family Centered Service & Supports</p>
<p>State Funding through ODMH to help meet the unique needs of children and families</p>

Resource Mapping

Training

All 16 districts will be submitting plans that will be integrated into a countywide plan due in June 2011

Newborn Home Visits

<p>Multi-Systemic Therapy</p>
<p>Program supported by pooled funding from FCCS, Juvenile Court, ADAMH Board, & FCFC</p>

These administrative services are supported by local dollars and a \$16,500 grant from Ohio FCFC

