

Florida Health and Human Services Board, Inc.

A Not-for-Profit Organization founded in 2001 for putting "Community" into Community Based Care

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David L. Fairbanks
Assistant Secretary for Programs.
Department of Children and Families
1317 Winewood Blvd.
Tallahassee, Florida 32399-0700

Subject: Community Alliances in Child Welfare

Dear David:

Thanks so much for your letter of January 8 responding to my letter to Secretary Sheldon of December 31. It is so good to know that you are still there despite the many different occupants of the secretary's chair.

You may not remember me, but I was active in the district and statewide health and human services boards when you came on board during the tremendous changes that accompanied the Bush administration – the break-up of HRS and the privatization of so many of its services. Our role then was to be the voice of local communities, and I am still at it, though without any official recognition or support, by chairing the Florida Health and Human Services Board, the not-for-profit corporation that we "alumni" of those earlier boards founded for this purpose – to try to ensure that communities are really involved in community-based care.

While you seem very positive that communities are adequately involved, your statements are very abstract and general. You speak of CBCs, a term the Department uses to refer to the corporate "lead agency" that holds the contract for foster care and related services in a local area. But those contractors are clearly not the "community alliances" specifically called for in the Florida Statutes 20.19(6).

Our concern is not with the CBCs -- the contracting lead agencies – but it is with the fact that the Department ignores the community alliances that the legislature called for in 2000. Those local bodies were to do the following:

1. Joint planning for resource utilization in the community, including resources appropriated to the department and any funds that local funding sources choose to provide.
2. Needs assessment and establishment of community priorities for service delivery.
3. Determining community outcome goals to supplement state-required outcomes.
4. Serving as a catalyst for community resource development.
5. Providing for community education and advocacy on issues related to delivery of services.
6. Promoting prevention and early intervention services.

You asked for concrete examples of our concerns: Given those statutory requirements, the fact that the Department's official Long Range Program Plan fails to make any mention of local community alliances is a very obvious, if not "concrete," example of our concern.

As I wrote to Secretary Sheldon: "The main concern of the Florida Health and Human Services Board, Inc., is that all the children in our Florida communities be protected and cared for. The 2000 Legislature must have hoped they could improve that protection and those services by going to 'community-based care.' Unfortunately, the Department implemented only that part of the legislation that calls for contracting out the services, but failed to implement the part that calls for community planning and evaluation."

Because of legislative term limits there may be no legislators active now who actually voted for "community alliances" to replace the district health and human services boards. Still, some of our current legislators must share some of the concern about community involvement. That is why I copied my original letter to legislators who serve on the relevant committees and councils. And that is why I am also copying this letter to those and possibly other legislators.

David, I am grateful to you for responding, but I am looking for a more active response.

Alvin W. Wolfe, Ph.D.
Chair, Florida Health and Human Services Board, Inc.

Copies to:
Governor Crist
Senators Justice, Pruitt, and Storms
Representatives Aubuchon, Holder, Homan, Roberson, and Zapata

Members of the FHHSB Board of Directors: David Buby, D.O.; L. David de la Parte, Esq.; Marietta Mischia, E.D.