

Broward County's  
Health, Education and  
Human Service Resources  
2001



"The CCB: Working Together"

The Coordinating Council of Broward

# The Coordinating Council of Broward

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## **The Coordinating Council of Broward (CCB)**

### **Broward County's Health, Education and Human Service Resources 2001**

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## Introduction

The community assessment methodology adopted by The Coordinating Council of Broward (CCB) in mid-1997 identifies the need for a countywide resource inventory as an integral part of the community assessment process. The role of the inventory is to provide an information base to complement quality-of-life indicators and goals in the identification of critical issues and priorities for action by The CCB, the network of service funders and providers, and the community. **The assessment of how resources currently are allocated to health, public safety, education, economic and human services in Broward County is essential to the development of strategies to address priority needs identified by the periodic review of progress toward the County's goals.**

The creation of a consistent, comprehensive source for information about which services are provided, by whom, when and where in Broward County, subject to what eligibility criteria, ensures that funders and providers alike will be able to target scarce resources at high-priority needs. In addition, **by gathering this data through a single, coordinated survey, in conjunction with the county's information and referral service, and making the information available to meet the needs of a broad user base, there will be a substantial reduction in duplication of effort by providers and funders in filling out forms with this information.**

As proposed in the *Countywide Resource Inventory Methodology* (1998), key features of the resource inventory are:

- use of standardized organizational profiles for both funders and providers to collect information annually about services and the resources allocated to those services;
- integration of the resource inventory with the directory of services maintained by Broward County's information and referral service, First Call For Help, the designated host agency;
- a memorandum of understanding among CCB members strongly encouraging funders and providers to complete the standardized organizational profiles as a pre-requisite for funding, and to accept the profiles in fulfillment of similar information required for each grant application, survey and monitoring report;
- use of a common classification system (taxonomy) for services as the "common language" for both the inventory and The CCB's shared information system;
- integration with the resource inventories and asset mapping undertaken as part of The CCB's neighborhood pilot projects; and
- integration with the Broward Information Network (BIN) as it is implemented.

At the end of the third year of implementation, The CCB's Community Resource Inventory provides information on 26 funders of health, public safety, education, economic and human services in Broward County responsible for \$181 million in funding, and 232 providers accounting for approximately \$1,786 million dollars in services in 2000-01. The providers identified 1,035 service delivery locations and 1,822 programs. This planning information is available in a searchable database that includes a set of standard reporting capabilities. In addition, The CCB has developed a simplified geographic information system for displaying selected data on a map of Broward County. Both the database and the map application will be distributed on a CD-ROM to participating funders and providers of services.

Equally important, First Call For Help of Broward uses information drawn from the CRI survey to (1) maintain its 24-hour helplines that, in 2001, fielded a total of 87,380 calls; of these, 46,093 calls resulted in 65,573 referrals to programs belonging to organizations that completed the 2000-01 Provider Organizational Profile; (2) publish a hard-copy directory; and (3) maintain Pathfinder OnLine, a database of programs and services in Broward County that is available online, 24 hours a day, and is updated monthly ([www.467-need.com/frame.pathfinder.html](http://www.467-need.com/frame.pathfinder.html)).

### **Year Three of the Community Resource Inventory – Successes and Challenges**

The principal activities undertaken by The CCB's Community Resource Inventory Committee (CRIC) and the host agency in 2000-01, and the results, are described below.

**Revision of the design and distribution of the organizational profiles** - The provider profile was modified to include a new section in Part III to collect information about the target populations for each program. In addition, users were referred to *The Broward Benchmarks 2000* for the selection of the indicators that programs were considered to impact most directly, with a corresponding update in the database table. Some minor changes were made to the collection of information about the languages spoken by staff (limited now to program staff) and the specification of the age range restrictions for clients in Part IV. Instructions were revised accordingly. Provider profiles (see Attachment A-1) were mailed to 317 organizations in December, 2000. Funder profiles (see Attachment A-2) were mailed to 97 organizations about the same time. Six open training sessions targeted at agency staff responsible for filling out the form were offered to providers at the time of survey distribution. Revised and improved “forms” versions of the profiles were made available to enable the forms to be filled out on a computer; the same forms were posted on The CCB web site ([www.sfrpc.com/ccb.htm](http://www.sfrpc.com/ccb.htm)).

**Modifications to the database structure and reporting capabilities** - The existing information and referral database (IRis) used by the host agency, which was adapted in the first year to accommodate the additional data collected for the Community Resource Inventory, was further modified to accommodate the changes to the forms carried out this year. Staff at First Call For Help updated routines to extract the data from IRis and make it available in a Microsoft Access database, suitable for use by members of The CCB and other participating agencies. New reports were developed to make use of the age range of clients and newly defined “target populations.” The reports for the Community Assessment Information Clearinghouse also were incorporated into the database.

**Engaging the Funders and Implementation of the Memorandum of Understanding among Members of the CCB** - Many funders made filling out the provider profile in 2000-01 a requirement for the 2001-02 funding cycle. In addition, representatives of the funders took an active role in identifying the entities they fund and monitoring their completion of the profiles. This approach was very successful, and resulted in much better rates of return overall. It also led to a better understanding of the value of the effort on the part of the funder agencies, which in turn were able to pass on that understanding to the providers. First Call For Help staff provided technical assistance by phone to respondents who called with questions.

**Get timely responses from Providers and Funders** - Initial expectations for a 3- to 6-month response cycle proved to be unrealistic. Profiles continued to be accepted throughout the year, and updates were allowed in order to correct or complete information. Follow-up letters and contacts were made on an on-going basis throughout the year in an effort to increase the response rate. At the end of September, 2001, there were 232 provider profiles in the database, with information on 1,822 funded programs, and funding of \$1,786 million in 2000-01 (see Attachment B-9b). Although the profiles returned do not represent the entire universe of potential respondents, it is believed that these organizations are responsible for a substantial part of all service delivery in Broward County. In addition, 26 funder profiles were available, accounting for approximately \$181 million in resources distributed to service providers in 2000-01 (see Attachment B-8).

**Cross-check providers and funders to ensure coverage** - The resource inventory builds an automatic cross-referencing mechanism into its design, by making it possible to compare funder information about programs funded for each provider with the provider information about programs by each source of funding. A printed report was given to each funder to review with the service providers they fund to ensure consistency. In future cycles, funding information needs to be reviewed to identify double counting whenever organizations receive local funds and pass them on to other local service providers.

**Quality assurance for the data provided** - Profiles are reviewed for both completeness and consistency. Completeness considers not only whether all organizations have responded, but also whether the information provided is complete. Among the profiles in the database, there are incomplete responses. Consistency concerns whether the information provided is accurate and "makes sense." A small number of consistency checks was applied during review of the data received this year. Additional consistency checks need to be built into the data entry cycle in subsequent years.

**Address concerns about ways in which the data is gathered and used** - In year one, concerns about the collection of funding information, especially from non-public sources, were addressed by agreeing that non-public funding sources will be identified only in generic categories. In year two, the host agency (First Call For Help) also raised issues with regard to the distribution of the resource inventory in a database format, which would allow access to the data for individual organizations and could compromise its revenue generation from the sale of directories. The CCB has committed to ensuring that any revenue losses by First Call For Help resulting from reduced directory sales will be replaced by other community resources. In addition, efforts will be made to speed integration with BIN to enable real-time access to the resource inventory.

### **Community Assessment Information Clearinghouse**

If your agency would benefit from the type of data obtained through community needs assessments, but your agency does not currently have the resources to conduct its own needs assessments, the Community Assessment Information Clearinghouse (CAIC) can prove valuable to you. The CAIC is a component of the resource inventory compiled from responses to Part V of the Organizational Profiles, which focuses on the needs assessment activities undertaken by the various funder and provider agencies. The timely sharing of information

about such efforts recently completed, those currently underway, and those planned for the future creates opportunities for improved collaboration among agencies.

The CAIC includes the names of organizations that have recently conducted needs assessments that can potentially provide community data your agency could use. It also identifies the type of needs assessments planned by agencies in the past and in the future. Please refer to Attachment B-11 of this report that provides contact information to enable you to collaborate with these organizations.. One example of an opportunity for collaboration is the possibility that questions your agency requires might be added to another organization's survey, focus group, or other needs assessment instrument.

It is interesting to see how far have we come since the inception of The CBB in 1995 by comparing the number of survey responses to this year's Profile Part V Community Assessment Activities of 2000-01 to the original United Way survey administered as part of the 1995 Broward County Needs Assessment. There were only 172 respondents to the 1995 survey, compared to the 240 in the year 2001, an increase of about 40 percent. Apparently, an outcome of The CCB has been a growth in the number of agencies that are participating in activities that promote the sharing of information.

Since the questions in the current Organizational Profile have changed significantly since the survey in 1995, not many other comparisons can be made between 2001 and 1995. Currently, in addition to asking whether an agency conducts its own formal needs assessment, questions have been added including whether they use a needs assessment prepared by another organization and whether they collaborate with another agency to conduct a needs assessment. Seventy-eight agencies, or about 33 percent of the 240 total survey respondents in the year 2000-01, conduct a formal needs assessment (Figure 1). Over half of the survey respondents (132) use some type of needs assessment, whether it is self-generated, supplied by another organization, or a result of collaboration with another agency (Figure 2).

Figure 1

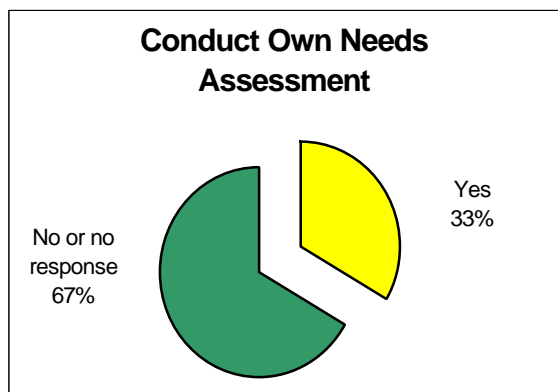
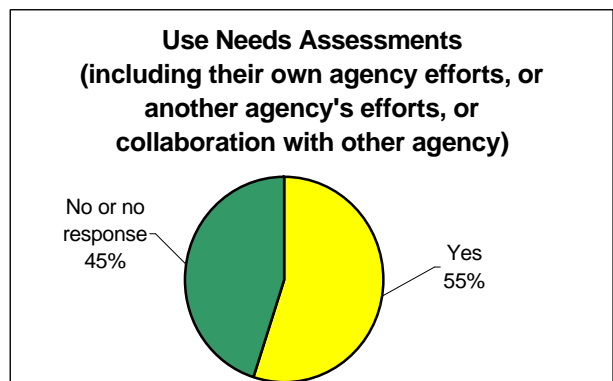


Figure 2





A major purpose of the Community Assessment Information Clearinghouse is to save precious agency resources by facilitating collaboration among agencies in obtaining information. Several agencies emerge as noteworthy because they are listed by several other organizations as collaborators on conducting needs assessments, and/or providers of data from their own needs assessments for use by other organizations. These include the following:

Agency	Number of Other Agencies that Listed Them as a Collaborator	Number of Other Agencies that Indicated That They Use Their Needs Assessments
Area Agency on Aging (AAA)	3	9
Broward Coalition for the Homeless	3	3
Broward Regional Health Planning Council <i>(Includes HIV Planning Council, Healthy Start Coalition, Healthy Families)</i>	2	9
Florida Department of Children and Families (DCF)	3	3
Division of DCF: Alcohol Drug Abuse & Mental Health (ADM) <i>(includes listings of Adult Substance Abuse &amp; Special Populations Sub-Committee since the sub-committee is under ADM)</i>	3	2
Jewish Federation of Broward County	1	3
The Coordinating Council of Broward (CCB)	3	13
United Way of Broward County	2	3
Workforce One - formerly Broward Employment and Training Administration (BETA)	1	2

The above table includes only names of agencies that were specified as a collaborator and/or a sharer of data a minimum of three times. Agencies that collaborate and share assessments with several other organizations will not be found in the table if survey respondents did not specify their names. In addition to those listed, it should be pointed out that various Broward County Government Departments and Divisions were acknowledged, including Substance Abuse and Health Care Services Division, Human Services, Family Success Administration, Community Development, Elderly and Veteran Services, and the Broward County Planning Council.

The fact that a majority of agencies focus their needs assessments activities on the same geographic area, i.e. "all of Broward County," allows great opportunity for agencies to collaborate on their needs assessments. Those that need targeted information on specific geographic areas in Broward have the opportunity to "piggyback" with the county-wide survey administered every two years by Professional Research Consultants, Inc., (PRC). This telephone survey based on random sampling of 2,400 individuals is an initiative of The Coordinating Council of Broward. Memorial Healthcare System is one example of an organization that utilized the option of "over-sampling" of a particular area on the basis of ZIP codes or census

tracts. Consequently, needs assessment reports are available from Memorial Healthcare System for several Broward communities, including targeted neighborhoods of Carver Ranches in South Broward, Hallandale Beach (Community Redevelopment Area), Davie (Driftwood area), Dania Beach (Modello Park), and most recently, Hollywood (South Central).

Comparing an "over-sampled" area to Broward County can highlight areas with a high degree of deficiency and need. Such data can provide valuable justification needed to win a grant application. Over-sampling also can be done on criteria other than geography, such as age. Over-sampling utilizes the same questions as the main survey but interviews more people in a particular category.

[The Broward Benchmarks 2000](#) includes some of the basic data compiled from the PRC surveys along with existing secondary data. For more information on how to "piggyback" with the next PRC survey for Broward scheduled for the year 2002, contact The Coordinating Council of Broward.

Consistency is enhanced when agencies use the same source of population estimates and projections. A majority (65 percent) of those who indicated their source of population estimates and projections depend upon the US Census, and about 50 percent use Broward County estimates/projections. Forty-two percent use both the Census and Broward County data, and another forty-two percent use State of Florida as a source of estimates and projections. A smaller percentage (about 27 percent) use self-generated or "other" sources (about 29 percent). The three most utilized sources of socio-economic data among respondents are (in descending order) Broward County, the US Census, and tabulations of client characteristics.

The more agencies using the same geographic level for population estimates projections, and socio-economic characteristics, the greater the potential for collaboration and sharing of information. Broward County is the most widely used geographic level for population estimates, projections, and socio-economic characteristics of the population, utilized by a majority (78 percent) of the 72 agencies that answered this question. The other geographic levels used most frequently this year are ZIP codes, municipalities, and census tracts. However, this year, unlike in the previous two years, the municipality level is used slightly more than ZIP codes and census tracts. Few agencies (only seven percent of the 72 respondents answering the question) use Traffic Analysis Zones (TAZs). Only four agencies, or six percent, use census block groups and three agencies, or four percent, use census blocks.

Fifty-six of the 113 agencies that plan to initiate or complete a needs assessment during the next twelve months answered that they did not conduct needs assessments previously. Attachment B-14 identifies the type of needs assessments planned for the future by named agencies. The potential exists for coordinating your agency's efforts with theirs. Contact information is provided in Attachment B-11.

Since the Children's Services Council of Broward (CSC) is newly created, needs assessments activities associated with the CSC will not be found in the current CAIC database. The Children's Services Council will support ongoing children strategic planning efforts and processes, including associated community needs assessments and environmental scans. Agencies providing children's services will want to contact the CSC to optimize collaboration.

Also not reflected in the current CAIC database is the Elder Analysis of Broward County, a project of the Elderly and Veterans Services Division of the Broward County Human Services Department, in conjunction with the Florida International University Center on Aging. Conducted during the months of July through September 2001, the comprehensive analysis includes:

- Broward County aging population data and trends
- Elder service needs
- Current inventory of home and community-based services
- Innovative programming that targets service needs and gaps

The study includes ethnic/cultural sub-populations and special populations such as those that are homeless, psychiatrically disabled, have substance abuse issues, involved with the criminal justice system and/or are diagnosed with HIV/AIDS. The final product will be a Model Action Plan for Long-Term Care Services for Broward County's elders and their families.

### **An Annotated List of Current CRI Reporting Capabilities**

First Call For Help staff and members of the CRIC have designed a set of standard output tables intended to make the basic information in the resource inventory useful to The CCB and other users. Additional tables will be developed as the project progresses. The standard reports available at this time from the Community Resource Inventory are described below, and samples are included in the attachments to this report. This and other related reports are available at [www.sfrpc.com/ccb/publish.htm](http://www.sfrpc.com/ccb/publish.htm).

**Programs by Provider (Attachment B-1)** - This 94-page report presents an alphabetical listing of all providers in the database, and, for each provider, a listing of all funded programs and service delivery locations.

**Provider and Program Locations by City (Attachment B-2)** - This 96-page report presents a list of the service delivery locations for programs reported by providers in an alphabetical listing by municipality. Users also may select specific municipalities for any report. Each program is identified, and address information is included for each service delivery location.

**Provider and Program Locations by ZIP Code (Attachment B-3)** - This 97-page report presents a list of the service delivery locations for programs reported by providers in a listing by ZIP Code. Users also may select specific ZIP Codes for any report. Each program is identified, and address information is included for each service delivery location.

**Programs by Age Range (Attachments B-4a and B-4b)** - This new report enables users to identify programs that target clients of specific age ranges. Report options include selecting "No Restriction," for programs that accept all clients regardless of age (Attachment B-4a, 120 pages), and selecting any specific age range (Attachment B-4b, 219 pages, shows programs for clients under the age of 18). Age ranges are inclusive, meaning that programs targeted at clients of a specific age range (and all those with no age restrictions) will be listed in a report if any of the years requested for the report are among those served by the program.

**Programs by Target Population (Attachment B-5)** - This new 1,546-page report takes advantage of the target populations identified for each program, using a list of 63 pre-classified targets in 10 categories. Providers identified as many target populations as applied, which means that programs appear multiple times in the complete listing. This report is one of the most flexible in the database - users may define a report by selecting specific target populations, municipalities or ZIP Codes, and the age range.

**Index of Benchmark Indicators (Attachment B-6a)** - This 6-page report lists all indicators in the seven sections of *The Broward Benchmarks 2000* report.

**Programs Associated with Benchmark Indicators (Attachments B-6b)** - This 133-page report lists the individual indicators in *The Broward Benchmarks* report that have been identified by one or more organizations as being affected by the program services they provide. Users also may select specific indicators of interest for any given report. For each indicator, the provider and any programs believed to affect the county's performance on that indicator are listed. This information is drawn from the section of the provider profile that asks each organization to identify, for each program they execute, up to four indicators they believe the program affects.

**Index of Taxonomy Codes (Attachments B-7a and B-7b)** - These reports provide (a) a one-page summary of the major categories of InfoLine Taxonomy of Human Services codes used in the CRI, in hierarchical order; and (b) a 12-page list of more detailed Taxonomy codes used, with a brief description, to facilitate locating codes to select services.

**Programs by Taxonomy Code (Attachment B-7c)** - This 253- page report produces a list of all programs and services classified in accordance with the InfoLine Taxonomy of Human Services. The user also may select services from the taxonomy, specific providers, ZIP Codes and combinations of five languages spoken by program staff (English, Spanish, Haitian Creole, American Sign Language and other). Information in the report includes the taxonomy code and service name, the provider name, the program name, number of clients served, capacity for that service at that location, ZIP Code of the location and languages spoken by program staff.

**Funders' List of Funded Providers and Programs (Attachment B-8)** - This 26-page report presents a summary of program funding based on information submitted by funders. For each funder that returned an organizational profile, it includes an alphabetical listing of providers funded, and, for each provider, the programs funded and the funding amount for Fiscal Year 2000-01. A total of 26 funder organizations are included in the report, which also identifies approximately 500 funded programs for a total of over \$181 million in 2000-01.

**Funder List by Funder Group (Attachment B-9a)** - This 4-page list identifies which funders were included in each of the Funder Groups used to summarize the funding information in the following two reports.

**Provider Funding by Funder Group (Attachment B-9b)** - This 12-page report presents an alphabetical listing of providers with funding summarized in the following categories of funders: Federal, State, County, Municipal, Private and Other. The providers that submitted organizational profiles identified total funding of \$1,786 million in 2000-01, of which \$126 million from federal sources, \$1,283 million from the State, \$131 million from Broward County, \$8 million from municipalities, \$120 million from private sources, and \$114 million from other sources. However, 12 of the responding providers failed to identify

any funding at all. The difference between this total and the amount identified by the funders in the previous report (B-8), is due to (1) inability to compel many federal, state, municipal and private funders to fill out a Funder Organizational Profile; and (2) possible double-counting of funding whenever a specific provider actually serves as a “pass-through” for funds that are also reported by another provider.

**Funded Programs by Funder Group (Attachment B-9c)** - This 46-page report is identical to the previous report, except that it includes detail for each funded program.

**Funding by Target Population (Attachment 10)** - This new 308-page report lists each target population and the providers and programs associated with them. The user can select specific target populations if desired. Since more than one target population may be specified for each program, the cumulative funding includes multiples of actual funding.

**Community Assessment Contact Information (Attachment 11)** - This 10-page report lists the funders and providers in alphabetical order, and identifies the name and phone number of a contact for information about any community assessment activities undertaken by the agency.

**Frequency of Needs Assessments (Attachment 12)** - This 10-page report lists the funders and providers in alphabetical order, and informs the frequency with which the agency conducts a needs assessment, the date of the most recent needs assessment and a contact to obtain a copy of the product.

**Community Assessment Methods Utilized (Attachment 13)** - This 15-page report lists the funders and providers in alphabetical order, and informs the community assessment methods utilized in the most recent needs assessment, including such techniques as issue-scanning, asset-mapping, secondary data compilation, key informant interviews, focus groups, resource and service gap analysis, surveys (population, clients, providers), program monitoring and evaluation and indicator development.

**Community Assessment Activities Planned for the Future (Attachment 14)** - This 16-page report is identical to the previous report except that it provides information about the specific community assessment activities funders and providers have planned for the next 12 months.

**Map of Service Delivery Locations (Attachment B-15)** - This map of Broward County shows a dot for each of the 1,035 service delivery locations identified by the 232 respondents to the survey. The map was generated by a geographic information system (GIS) that uses the address of each service delivery location to place a dot on the map through a process known as geo-coding. Once any service delivery address is successfully geo-coded, it is possible to link the dot on the map to information about the service delivery location, including the organization, programs, the services available, clients served, capacity, days and hours of service, and many other types of information. The usefulness of this information will be available to those who have access to the database and to GIS software. The CD-ROM containing the 2000-01 Community Resource Inventory offers two data layers that can be searched: one enables the user to identify programs by the funder, while the other makes it possible to select programs by the target populations they serve.

## Recommended Next Steps for the Community Resource Inventory

As we finalize the 2000-01 Community Resource Inventory, it is important to identify the key aspects of the work to be undertaken during the execution of the CRI in 2001-02. Recommendations are presented below.

**Distribute products of the inventory that will benefit those who responded** – The Community Resource Inventory Committee (CRIC) has emphasized the theoretical benefits of a systematic and comprehensive source of information about how Broward County allocates its resources to address health, education and human services. These include not only making available quality information for referrals, gaps analysis and service delivery planning, but also reducing the amount of redundant surveying of both funders and providers. This document and all of the major reports listed above are posted on The CCB web site as viewable, printable files. In addition, copies of the CD-ROM containing the 1999-2000 CRI database, a mapping application and assorted reports were distributed in early 2001. The updated and improved 2000-01 CRI database and mapping application on CD-ROM will be distributed in early 2002. As a result, funders and providers that completed the organizational profiles have had an opportunity to see the benefits of their efforts in concrete terms. An additional step will be to encourage funders and agencies that conduct needs assessments to use the profiles as the basis for gathering the information they require, so that providers will see a real reduction in the number of different surveys they must return. The CRIC should continue to encourage funders to participate in revisions to the profile forms to ensure that their needs are accommodated. Finally, targeted training for funder agency staff may be necessary to enhance the use of the database and mapping applications.

**Continue to enhance response rates and improve the quality of responses by further strengthening the relationship between funders and providers in support of the inventory** – Funders are in a privileged position both to take advantage of the information the resource inventory generates and to ensure that the information is accurate and complete. The multi-lateral relationship between each funder and the agencies it funds offers the greatest potential for extending the collaborative efforts of The CCB to the next level. The resource inventory benefited significantly in its second and third years from the active participation of funders. The response rate and the completeness and accuracy of the information will improve even more to the extent that those who respond obtain tangible benefits from doing so. Sharing results of the inventory and ensuring that both funders and providers find the information to be useful for their own purposes is essential. Additional quality assurance mechanisms also should be built into the data entry routines of the software. Particular emphasis this year should be placed on ensuring that programs and their funding are correctly and completely identified, and on developing a mechanism for identifying duplicate funding streams. First Call For Help should provide copies of the profiles, as included in the database, to both funders and providers during the quality assurance phase of data input, to ensure that they have the opportunity to review the data for completeness and correctness. Training sessions should concentrate on promoting the relationship between funders and providers and on building a mutual understanding of the information required by the survey and how to take advantage of the results.

**Develop integrated online data collection and access for both information and referral and the resource inventory on the Broward Information Network (BIN)** - In 2000-01, organizational profiles continued to be distributed in hard copy and as word processing "forms." Funders and providers that responded in prior years received a printout of their profile, which they were encouraged to use for hard-copy editing. New funders and providers, and those that needed to include new service delivery locations or programs, could choose between using the blank hard-copy profiles and using the "forms" version of the word processing file, all of which were posted on The CCB web site and made available by e-mail or diskette, as needed. The same approach has been used for the 2001-02 Community Resource Inventory, which is scheduled for completion in June, 2002. With support from local funders, development of an online version of a unified data collection database has begun. When fully implemented on the Broward Information Network, this new approach will allow providers to update their profiles online, and will enable diverse users to access the data they need for information and referral (First Call For Help/211, Broward County Human Services, other providers) and the resource inventory (The CCB).

**Develop new features and capabilities to further enhance the usefulness of the resource inventory** - The organization, program, funding and service information collected in the resource inventory can support many additional uses. Possible future features that could be accomplished with the information currently available include the ability to print (1) an agency profile that would be suitable for inclusion in a grant application or response to a request for proposal; and (2) an agency program and service listing suitable for monitoring visits by funders. Other possibilities would require changes to the data collection process currently in place. Interest has been expressed in developing the ability to keep specific capacity and "slots available" information online so that clients could be referred to specific providers based on known availability of capacity to serve, and, in the most ambitious implementation, even schedule appointments online. These capabilities will depend on first completing the transition to an online system and then reviewing the agency requirements for data collection and upkeep.