

RURAL COMMUNITIES OPIOID RESPONSE PLANNING STRATEGIC PLAN

Produced by The Health Planning Council of Northeast Florida, in partnership with Starting Point Behavioral Healthcare, the St. John's River Rural Health Network and the Florida Department of Health in Nassau County

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Strategic Plan
Nassau County Care Connect (NC3)
NASSAU COUNTY, FLORIDA
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Address	4201 Baymeadows Road, Suite 2, Jacksonville, FL 32207	
Service Area	Adults in Census Tracts 501.01, 501.02, 502.01, 502.02, 502.03, and 503.01 within zip codes 32041, 32046, 32034 and 32035 in Nassau County, Florida.	
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Contributing Consortium Members and Stakeholders	Starting Point Behavioral Healthcare	
	Baptist Medical Center Nassau	
	State Attorney's Office	
	St. Johns River Rural Health Network	
	Health Planning Council of Northeast Florida	
	Community Coalition Alliance	
	North Florida High Intensity Drug Trafficking Area (HIDTA)	
	FDOH Nassau - County Health Department	
	Nassau Sober Living	
	LSF Health Systems	
	Pastor/Churches	

Strategic Plan

Complete a plan for each problem statement and related goal your initiative proposes to address. Complete an objective worksheet for each objective in your project. See Attachment E for a sample strategic plan.

A. Assessment Summary

Briefly summarize the relevant data regarding the overall problem identified in your needs assessment.

In 2019, Nassau County ranked 36th out of the 67 Florida counties in length of life and quality of life health outcomes. Nassau County shows a 62.5% increase in deaths due to substance abuse among those experiencing a mental or behavioral disorder from 2010 (0.8 deaths per 100,000) to 2018 (1.3 deaths per 100,000). These rates peaked in 2012 (3.7 per 100,000) and 2017 (3.1 per 100,000). In key stakeholder interviews, many Nassau County residents have indicated significant need for improvement among various mental and behavioral health factors. For example, in Nassau County, almost 30% of adults felt they were limited in any activities because of physical, mental, or emotional problems (BRFSS, 2016) and in 2018 there were almost 33 deaths per 100,000 individuals due to mental health related factors.

A key issue pertaining to mental health and substance abuse in this region is the rise of opioid-related abuse and overdose cases. This problem has been increasing across the state of Florida, though Nassau County is particularly vulnerable, as there is a drug overdose mortality rate of 23 per 100,000 population. Moreover, Nassau County ranked fourth in the State of Florida for the number of opioid-involved non-fatal overdoses, with a rate of 138.6 overdoses per 100,000 population in 2016.

In Nassau County, there are more drug and opioid overdoses for the population in the 25-34 age range compared to any other age group in Florida from 2016 to 2017. The majority of deaths related to substance abuse were among white males, with 90% of deaths occurring from the ages of 20s to 50s.

Nassau County: Number and Rate per 100,000 population for deaths where “Opioids” were the cause of death

Year	Total population	Number of Deaths	Rate per 100,000 population
2015	77,891	3	3.85
2016	79,922	9	11.26
2017	82,721	8	9.67

Source: Special data request from the Florida Medical Examiner Office, 2015-2017.

Interviews with the community indicated health services to treat opioid use disorder and substance use disorder in this region have been underutilized due to inaccessibility or lack of awareness, while opioid overdoses and arrests have been increasing. Opioid and substance use disorders are consistently present in Nassau County while health care costs are increasing for residents experiencing physical and behavioral health problems. Low-income residents particularly face limited access or perceived availability to care options, which creates disparities among this population.

B. Problem Statement

Concisely describe the priority problem based on your assessment data.

There is an overall gap in OUD prevention, treatment, and recovery in Nassau County. Data demonstrates that Nassau County fares worse compared to the state of Florida on almost all mental and behavioral health indicators and there is a limited availability of OUD/SUD and psychosocial support resources in Nassau County.

Nassau County experienced a decrease in adults reporting “good” to “excellent” overall health (80.1% to 76.9%), as well as adults reporting good mental health (90.9% to 85.6%) from 2013 to 2016. Additionally, almost 17% of adults in Nassau County could not see a doctor at least once in the past year due to cost in 2016.

C. Target Population

Describe the individuals or groups most affected by the problems in your problem statement above.

Individuals in Nassau County with an increased risk for opioid abuse, behavioral and mental health problems. The focus will be on adults living in six rural census tracts within the county. The priority includes low-income residents, including those who experience unemployment, have minimal health care resources, lack insurance, live below the federal poverty level, hold a minimal education level, or with one or more disabilities.

D. Goal

State the major changes in behavior that need to occur within your identified target population to achieve your vision.

Reduce the morbidity and mortality associated with opioid overdoses using multi-sector consortiums to strengthen organizational and infrastructural capacity to address prevention, treatment, and recovery of substance use disorder, including OUD in Nassau County.

E. Long-Term Outcome

Define the change you are seeking to make in problems or behaviors.

By December 31, 2022, implement and expand access by increasing number of providers, including MAT providers (training)

By December 31, 2022 increase recovery capacity through wrap around services for recovery, care coordination, recovery residences and peer specialist to support ongoing recovery

By December 31, 2022, increase the number of primary and urgent care facilities that utilize SBIRT

By December 31, 2021, promote facilitated referrals for infectious disease treatment and prevention for patients with SUD/OUD

F. Long-Term Outcome Indicators

List the indicators that will demonstrate you are making progress toward your goal.

By December 31, 2022, increase the number of support staff from 3 to 5 FTE in underserved areas from 0 to 1 location to provide services to complement MAT (Medication assisted training)

By December 31, 2022, create a web-based platform resource list of evidence based and/or best practices for affordable treatment and recovery support services for SUD/ODD

By December 31, 2022 increase the number of primary care and urgent care facilities that utilize SBIRT from 0 to 2.

By December 31, 2021, promote facilitated referrals for infectious disease treatment and prevention for patients with SUD/ODD through trainings of 3 providers (SPBH, Methadone Clinic, and Amelia Island Outpatient).

Strategic Plan Objective Worksheet

Priority Area: Prevention/Treatment/Recovery						
Goal 1: Reduce Stigma.						
Objective 1.1: By Dec 31, 2020, create and deploy a speakers bureau.					Anticipated Completion Date:	31-Dec-20
Strategies	Resources	Lead Person/ Organization	Measure	Current Performance Level	Target	
Recruit & train (In) speakers bureau (members & leaders).	Recovery support groups, SPBH	Sober Living Lead	# recruitment touchpoints with support groups & # speakers recruited	0	20 & 10	
In alignment with Obj 1.2, assure speakers bureau has cultural and linguistic appropriate (CLA) members and resources to match priority populations.	Training Resources	NC3 & Sober Living Lead	CLA speakers matrix (matching speakers to priority groups) & CLA specific training/presentation materials	0	1	
Promote education and awareness including live presentations and recorded testimonial PSAs to general and priority populations.	Gatekeeper and/or champions & community	NC3 & Sober Living Lead	# Speakers Bureau presentations and/or (recorded) PSAs	0	2	
Collaborate with the community and faith-based organizations to disseminate identified evidence-based messages on prevention, treatment, and recovery.	Faith-based organizations able to provide venue and messaging promotion	NC3 & Sober Living Lead	# of evidence-based messages identified	0	3	

Objective 1.2: By Sept 30, 2020, identify priority populations based on needs assessment (such as pregnant & postpartum women, west Nassau County & other geographic locations, senior citizens).				Anticipated Completion Date: 30-Sep-20	
Strategies	Resources	Lead Person/ Organization	Measure	Current Performance Level	Target
Select top 3-5 subgroups of new and at-risk populations - consider stakeholder or community wide web survey.	Nassau Opioid Needs Assessment & Survey results	NC3 Lead/Facilitator	Completion of prioritization discussion and selection at initial action plan implementation meeting.	0	1
Identify gatekeeper and/or champions of priority populations to review and support CLA communication tools and resources including Speakers Bureau.	NC3 members	NC3 subcommittee	Communication plan (targeted & general) including supporting partners & messaging resources.	0	1
Objective 1.3: By Dec 31, 2020, vet 5 applicable anti-stigma teen program grants/projects and apply for 1 funding opportunity.				Anticipated Completion Date: 31-Dec-20	
Strategies	Resources	Lead Person/ Organization	Measure	Current Performance Level	Target
Explore school and community evidence based anti-stigma teen programs that are appropriate for local adoption.	CCA, School District, other youth-focused community partners, Born this way foundation, TMHFA, #bethedifference	CCA	Presentation of at least 3 evidence based programs to CCA and NC3 for potential adoption to Implementation Plan.	0	3
Identify potential funding sources to support best-fit anti-stigma teen campaign.	Grants	CCA/NC3	Apply for at least 2 funding opportunities	0	2

Priority Area: Prevention

Goal 2: Increasing prevention activities and efforts to reduce SUD/OD overdose and stigma by increasing education/training and harm reduction for new and at-risk users.

Objective 2.1: By Dec 31, 2022, expand and sustain naloxone distribution and training by increasing the number of trainings from 14 to 16. Anticipated Completion Date: 31-Dec-22

Strategies	Resources	Lead Person/ Organization	Measure	Current Performance Level	Target
Expand upon current Naloxone training from professionals (school and first-responder personnel training) to the community at large especially to priority populations identified in Obj 1.2.	Naloxone administration Trainers from SBPH, AHEC, CCA	SPBH/CCA	# of trainings held	0	1
Identify and apply for grants to obtain Naloxone for distribution.	Grants	SPBH/CCA	# of grants applied for	0	1

Objective 2.2: By Dec 31, 2022 increase the number of primary care and urgent care facilities that utilize SBIRT from 0 to 2. (Best practices/ project ECHO) Anticipated Completion Date: 31-Dec-22

Strategies	Resources	Lead Person/ Organization	Measure	Current Performance Level	Target
Promote SBIRT/ACES/Trauma Informed Care model to primary and urgent care providers especially those identified to be serving priority populations.	SPBH, AHEC, NEFL Healthy Start Coalition, SAMHSA, National Council, NW ATTC	Behavioral Health Consortium ACES subcommittee, SPBH	# of trainings held	0	3
Link interested providers to enabling and supportive technology/resources to encourage SBIRT/other screening.	Telehealth (virtual screening) & OUD/SUD/mental health (web) resources and billing reimbursement support.	NC3	# providers aware of and using web resource platform (Obj 4.1)	1	3
Seek partners and funding for virtual SBIRT/other screening pilot.	SBPH, Barnabas, Health Department	NC3	Creation of one virtual (telehealth) screening pilot.	0	1

Objective 2.3: By Dec 31, 2021 , promote facilitated referrals for infectious disease treatment and prevention for patients with SUD/ODU through trainings of 3 providers (SPBH, Methadone Clinic, Outpatient Island).				Anticipated Completion Date: 31-Dec-21	
Strategies	Resources	Lead Person/ Organization	Measure	Current Performance Level	Target
Raise awareness by SUD/ODU treatment providers, first responders and recovery support groups of infectious disease co-morbidities (HIV, Hepatitis, endocarditis).	National, state best and promising practices	DOH Nassau	# of events	1 Hep A specific to SUD/ODU Tx providers & 1 Recovery residential	4
Develop a facilitated referral for access to screening, prevention (PrEP, vaccinations), harm reduction & treatment.	National, state best and promising practices	DOH Nassau	# of referral forms received by DOH Nassau	0	1
To increase harm reduction by current and new users by exploring feasibility of syringe exchange program if supported by local leaders and partners.	Treatment providers, advocates	SPBH, DOH Nassau	# of discussions with decision makers and stakeholders	0	5

Priority Area: Treatment					
Goal 3: Implement and expand access by increasing number of providers, including MAT providers (training), reducing barriers (transportation, telehealth), collaboration with law enforcement and first responders.					
Objective 3.1: By Dec 31, 2022, increase the number of support staff from 3 to 5 FTE in underserved areas from 0 to 1 location to provide services to complement MAT.				Anticipated Completion Date: 31-Dec-22	
Strategies	Resources	Lead Person/Organization	Measure	Current Performance Level	Target
Identify geographic location of need and priority populations to expand MAT.	OUR Needs Assessment, EMS Data, current MAT providers	SPBH	Identified location	0	1
Identify sustainable funding source.	HRSA loan forgiveness, SAMHSA, CDC, RWJF, academic institutions	SPBH, HPCNEF	# of funding sources applied for	0	1
Objective 3.2: By Dec 31, 2022, research outpatient treatment opportunities and increase capacity by 2 services (such as telehealth).				Anticipated Completion Date: 31-Dec-22	
Strategies	Resources	Lead Person/Organization	Measure	Current Performance Level	Target
Research telehealth models and platforms for behavioral health services.	Project ECHO, SETRC, CTCR	SPBH, HPCNEF	# of identified platforms	0	1
Develop logistics workplan including billing codes, contract amendment, EMR, equipment, HIPPA compliance, provider training.	Project ECHO, SETRC, CTCR	SPBH, HPCNEF	Workplan complete	0	1
Objective 3.3: By Dec 31, 2020, identify gaps in the law enforcement and first responders capability of responding and/or providing emergency treatment to those with SUD/OUR through the creation of a gap analysis.				Anticipated Completion Date: 31-Dec-20	
Strategies	Resources	Lead Person/Organization	Measure	Current Performance Level	Target
Conduct gap analysis with first responders to identify opportunities to increase timely & effective emergency treatment.	Law enforcement, EMS/Fire Rescue	HPCNEF/NC3	Completion of Gap Analysis within 6 months of beginning implementation plan	0	1
Utilize first responder ongoing input in targeting high need areas for community education & distribution of Naloxone (objective 2.1 - who/where?).	Law enforcement, EMS/Fire Rescue	NC3	Data Sharing Agreement	0	1
Seek support and funding for community Para medicine program with expanded scope to provide targeted education, naloxone distribution, facilitated referrals for OUR/SUD treatment by specialized EMS.	Law enforcement, EMS/Fire Rescue, Fenix Program	NC3	Community Para medicine Pilot - Year 3	0	1

Priority Area: Recovery					
Goal 4: Increase recovery capacity through wrap around services for recovery, care coordination, recovery residences and peer specialist to support ongoing recovery.					
Objective 4.1: By Dec 31, 2022, create a web-based platform resource list of evidence based and/or best practices for affordable treatment and recovery support services for SUD/OD.				Anticipated Completion Date:	31-Dec-22
Strategies	Resources	Lead Person/ Organization	Measure	Current Performance Level	Target
Research web-based platforms.	SJRRHN, CUREO, HPCNEF	SJRRHN	One platform identified	0	1
Implement web-based platform for resource development and sharing.	SJRRHN, CUREO, HPCNEF	SJRRHN	One platform implemented	0	1
Objective 4.2: By Dec 31, 2020, implement a Recovery Community Organization (RCO) in Nassau County.				Anticipated Completion Date:	31-Dec-20
Strategies	Resources	Lead Person/Organization	Measure	Current Performance Level	Target
Engage with FADAA on becoming part of the NEFL recovery community organizations.	FADAA	NC3, NF HIDTA	Listening session with FADAA	0	1
Develop RCO implementation plan (including gathering community stakeholders for buy in).	FADAA	SPBH, NC3	Creation of RCO	0	1
Objective 4.3: By Dec 31, 2021, connect and expand wrap around service categories from 2 to 4.				Anticipated Completion Date:	31-Dec-21
Strategies	Resources	Lead Person/Organization	Measure	Current Performance Level	Target
Identify gaps in current continuum of care.	HPCNEF, SJRRHN, NC3	NC3	Updated gap analysis	0	1
Identify funding source to fill gaps.	HRSA, SAMHSA, GRANTS.GOV, Foundation Grants	NC3	# of funding sources applied for	0	1
Increase discharge coordination capacity.	SPBH	SPBH	# of FTEs	1 FTE	2 FTE