

# RURAL COMMUNITIES OPIOID RESPONSE PLANNING WORKFORCE 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.

The Rural Communities Opioid Response Planning Grant is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) as part of an award totaling \$200,000 with 0 percentage financed with nongovernmental sources. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by HRSA, HHS or the U.S. Government.



**Workforce Plan**  
**Nassau County Care Connect (NC3)**  
**Nassau County, Florida**  
**January, 2020**

Grantee Organization	Health Planning Council of Northeast Florida, Inc.	
Grant Number	HRSA-19-081	
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.	
Project Director	Name:	Joyce Case
	Title:	Program Director
	Phone number:	904-762-8600
	Email address:	joyce_case@hpcnef.org
Contributing Consortium Members and Stakeholders	Starting Point Behavioral Healthcare	
	FDOH Nassau - County Health Department	
	St. John's River Rural Health Network	
	Health Planning Council of Northeast Florida	
	Baptist Medical Center Nassau	
	Community Coalition Alliance	
	North Florida High Intensity Drug Trafficking Area (HIDTA)	
	Congressman John Rutherford's Office	
	Nassau County Chamber of Commerce	
	Nassau County School Board	
	Northeast Florida Area Health Education Center (AHEC)	

## Workforce Strategic Plan

### Assessment Summary

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 (ESOOS Non-Fatal Opioid Overdose Surveillance Report). Florida reported almost 6,000 opioid-related deaths in 2016 that was a 35 percent increase from 2015. In 2017, the Nassau County Sheriff's Office made 706 drug arrests compared to 659 in 2016. In key informant interviews and focus groups, residents emphasized that the lack of availability of behavioral health resources in Nassau County is a widespread problem.

For the 2019 County Health Rankings, the score reflected 55 drug overdose deaths in Nassau County, equaling a drug overdose mortality rate of 23 per 100,000 population. (Source (CHNA): Robert Wood Johnson Foundation. (2016). *Ranking System*. Retrieved from County Health Rankings and Roadmaps:

<https://www.countyhealthrankings.org/app/florida/2019/measure/factors/138/data>

Currently, there are only three physicians with the ability to prescribe Buprenorphine and Vivitrol in Nassau County. All three providers work for SPBH Starting Point Behavioral and provide MAT (Medication-Assisted Treatment) wrap around services, specifically for individuals with OUD/SUD. They have a total capacity of 230 and are currently serving a total of 54 clients. There are nine physicians with the ability to prescribe Buprenorphine only.

Psychoses is the top behavioral/mental health diagnosis of Nassau County residents discharged from any Florida hospital in 2018, followed by alcohol/drug abuse or dependence without rehabilitation therapy without major complication/comorbidity. Behavioral/mental health visits account for 6.7% of total inpatient visits by Nassau County residents.

Starting Point Behavioral Health (SPBH) is the sole provider for Medication Assisted Treatment (MAT) in Nassau County. Starting Point Behavioral Health (SPBH) admitted 209 clients with an opioid use related diagnosis in 2017 and 265 clients in 2018. In 2017, Nassau County residents made 515 visits to the hospital with a primary diagnosis related to substance abuse or poisoning; 375 of these visits were outpatient emergency room (ER) visits and 140 were inpatient hospital visits, with 115 admitted via the ER.

The community identified existing efforts for prevention, treatment, and recovery, emphasizing the need to strengthen resources through the workforce. Examples include opportunities for first responders, community at large, partnership with law enforcement, substance use education, peer recovery services, faith based treatment facilities, support groups, and substance abuse counselors and mental health treatment by local providers.

The methodology used to conduct the Rural Communities Opioid Response Planning Needs Assessment included an analysis of primary and secondary data. Primary data collection utilized input from thirteen community member interviews to gain insight into perceived community strengths, weaknesses, opportunities, and trends to determine needs and severity of the OUD problem. Secondary data collected from online databases as well as from community partners included population characteristics, health status, health behaviors, healthcare utilization, and local secondary data recommendations.

## **Problem Statement**

Nassau County struggles with work force stability, limited access and availability of behavioral health resources, while facing an increased demand for OUD/SUD services.

## **Workforce Objectives**

- By December 31, 2020, create a Speaker's Bureau
- By December 31, 2022, recruit Nassau County's healthcare providers to utilize Screening, Brief Intervention, and Referral to Treatment
- By December 31, 2022, recruit and retain SUD/OUD providers by providing 1 workforce development training and 1 recruitment incentive
- By December 31, 2023, train employees at 2 different organizations in culturally sensitive and competent care as defined by Culturally and Linguistically Appropriate Services standards
- By December 31, 2023, train 3 providers in infectious disease treatment and prevention
- By December 31, 2021, recruit 1 local NC3 Coordinator
- By December 31, 2022, increase naloxone trainings from 14 to 16
- By December 31, 2021, recruit 5 support staff among Community Stakeholders
- By December 31, 2022, train health and social service professionals in how to optimize virtual services to expand the use of telehealth for SUD services in Nassau County
- By December 31, 2022, identify and implement 1 mobile phone application that connects users to resources
- By December 31, 2021, expand current workforce by 1 individual to facilitate the creation of the Recovery Community Organization

## **Goal**

- Increase SUD/OUD workforce
- Enhance competencies of current SUD/OUD workforce
- Collaborate with Community Stakeholders to reduce SUD/OUD overdoses and stigma
- Increase Medication Assistance Treatment (MAT) workforce
- Enhance the use of technology in Nassau County
- Create a Recovery Community Organization in Nassau County as part of NEFL

### **Long-Term Outcome**

Nassau County will have an increase in its SUD/ODD and MAT workforce as well as an increase in the knowledge/skills/abilities of its current SUD/ODD workforce to address the needs as defined in the problem statement of the population in Nassau County.

### **Long-Term Outcome Indicators**

- Number of speakers, number of trained speakers, number of trainings, NC3 Coordinator hired
- Number of assessments, number of organizations trained, number of persons trained, number of evaluations, number of providers identified, number of infectious disease trainings identified, number of providers trained
- Number of trainers recruited, number of naloxone trainings conducted
- Number of MAT therapeutic staff recruited, DEA waived provider recruited, MAT Peer Specialist recruited, driver for Mobile MAT recruited
- Number of telehealth trainings, number of established MOA's
- Number of power users trained, IT technical support specialist hired, Mobile phone application identified
- RCO Liaison hired and trained

Priority Area: Prevention/ Treatment/ Recovery						
Goal 1: Increase SUD/ODU workforce.						
Objective 1.1: By December 31, 2020, create a Speakers Bureau.						
Strategy						
Activities	Timeline		Who Is Responsible?	External Partners	Cost and Possible Funding Source	Track Progress (metrics/ indicators)
	Start Date	End Date				
Identify the speakers.	Imminent	Ongoing	SPBH Outreach Committee	Sober Living House, SPBH, Set Free By Sea, AHEC	in-kind	Number of speakers
Train the speakers to become effective communicators and meeting facilitators.	Imminent	Ongoing	SPBH Outreach Committee	AHEC, SPBH, Toast Masters	Leveraging existing resources/HRSA grant.	Number of trained speakers
Recruit and hire NC3 coordinator.	Year 1	Year 1	SPBH	SPBH Executive Leadership	\$60,000/HRSA grant.	NC3 Coordinator hired
Objective 1.2: By December 31, 2022, recruit Nassau County healthcare providers to utilize Screening, Brief Intervention, and Referral to Treatment (SBIRT) from 0 to 2.						
Strategy						
Activities	Timeline		Who Is Responsible?	External Partners	Cost and Possible Funding Source	Track Progress (metrics/ indicators)
	Start Date	End Date				
Train providers, leadership, administrative staff, and other relevant stakeholders on SBIRT.	Year 1	Ongoing	AHEC	Healthy Start Coalition, Nassau County Medical Association, DOH Nassau	Leveraging existing resources/HRSA grant.	Number of trainings
Train administrative staff and leadership to maximize reimbursement for SBIRT through proper coding and billing across insurance types.	Year 2	Ongoing	SPBH Outreach Coordinator	SAMHSA, Barnabas, Baptist Medical Center Nassau	Leveraging existing resources/HRSA grant.	Number of trainings

Objective 1.3: By December 31, 2022, recruit and retain SUD/OD providers by providing 1 workforce development training and 1 recruitment incentive.

<b>Strategy</b>						
Activities	Timeline		Who Is Responsible?	External Partners	Cost and Possible Funding Source	Track Progress (metrics/ indicators)
	Start Date	End Date				
Identify 1 workforce development training (formal and/or coaching) to enhance retention, promotion, and recruitment of SUD/OD staff.	Year 1	Ongoing	NC3 partners	AHEC, SPBH, Baptist Medical Center Nassau, LSF, SJRRHN	Leveraging existing resources.	Workforce Development Training identified
Provide 1 workforce development training (formal training and/or coaching) to enhance retention/recruitment of SUD/OD providers, staff, and leadership.	Year 2	Ongoing	NC3 partners	AHEC, SPBH, Baptist Medical Center Nassau, LSF, SJRRHN	Leveraging existing resources/HRSA grant.	Workforce Development Training completed
Identify 1 recruitment incentive strategy to attract providers, students seeking internships, and new graduates to work in Nassau County (i.e. student loan repayment, competitive benefits package, rural quality of life, work/life balance).	Year 1	Ongoing	SPBH	NHSC	Leveraging existing resources.	Recruitment Incentive identified
Apply for 1 recruitment incentive such as NHSC program to help with recruitment and loan repayments.	Year 2	Ongoing	SPBH	NHSC	Leveraging existing resources.	Recruitment Incentive application submitted

Priority Area: Prevention/ Recovery/ Treatment

Goal 2: Enhance knowledge/skills/abilities of current SUD/ODU workforce.

Objective 2.1: By December 31, 2023, train 4 employees at 2 different organizations in culturally sensitive and competent care as defined by Culturally and Linguistically Appropriate Services (CLAS) standards.

**Strategy**

Activities	Timeline		Who Is Responsible?	External Partners	Cost and Possible Funding Source	Track Progress (metrics/ indicators)
	Start Date	End Date				
Assess organizational readiness.	Year 1	Ongoing	NC3 partners	HHS, OMH, HRSA	Leveraging existing resources/ HRSA grant	Number of assessments
Identify 2 organizations that will be trained.	Year 1	Ongoing	NC3 partners	HHS, OMH, HRSA	Leveraging existing resources/ HRSA grant	Number of identified organizations (2)
Train and distribute CLAS standards to SUD/ODU workforce.	Year 2	Ongoing	SJRRHN	HHS, OMH, HRSA	Leveraging existing resources/ HRSA grant	Number of people trained (4)
Evaluate workforce on CLAS standards annually.	Year 3	Ongoing	NC3 partners	HHS, OMH, HRSA	Leveraging existing resources/ HRSA grant	Number of evaluations



Objective 2.2: By December 31, 2023, train 3 providers in infectious disease treatment and prevention.

<i>Strategy</i>						
Activities	Timeline		Who Is Responsible?	External Partners	Cost and Possible Funding Source	Track Progress (metrics/ indicators)
	Start Date	End Date				
Identify 3 local providers to be trained in infectious disease treatment and prevention to develop knowledge, skills, and abilities to deal with SUD/ODU risky behaviors that may lead to infectious diseases such as HIV and Hepatitis A, B, and C.	Year 1	Ongoing	NC3 partner	DOH Nassau	Leveraging existing resources/ HRSA grant	3 providers identified
Identify infectious disease trainings available.	Year 1	Ongoing	DOH Nassau	FL DOH	Leveraging existing resources/ HRSA grant	Number of infectious disease trainings identified
Train providers.	Year 2	Ongoing	DOH Nassau	FL DOH	Leveraging existing resources/ HRSA grant	Number of providers trained

Priority Area: Prevention						
Goal 3: Collaborate with Community Stakeholders to reduce SUD/ODU overdose and stigma (NC3/LSF/CCA).						
Objective 3.1: By December 31, 2021, recruit 1 local NC3 Coordinator.						
Strategy						
Activities	Timeline		Who Is Responsible?	External Partners	Cost and Possible Funding Source	Track Progress (metrics/ indicators)
	Start Date	End Date				
Hire NC3 Coordinator (same as Goal 1).	Year 1	Ongoing	SPBH	NC3, LSF, CCA	\$60,000/ HRSA implementation grant and seek other grant opportunities.	NC3 Coordinator hired
Train NC3 Coordinator.	Year 1	Ongoing	SPBH	AHEC, LSF, CCA	Leveraging existing resources/ HRSA grant	NC3 Coordinator trained
Objective 3.2: By December 31, 2022, increase naloxone trainings from 14 to 16.						
Strategy						
Activities	Timeline		Who Is Responsible?	External Partners	Cost and Possible Funding Source	Track Progress (metrics/ indicators)
	Start Date	End Date				
Recruit a trainer to conduct naloxone training.	Imminent	Ongoing	AHEC, CCA, SPBH, FBPD	-	Leveraging existing resources/ HRSA grant	Numbers of trainers recruited
Identify populations/stakeholders to be trained.	Imminent	Ongoing	AHEC, CCA, SPBH, FBPD	Nassau County Fire Rescue, Fernandina Beach Fire Department	Leveraging existing resources	Populations identified
Conduct trainings.	Imminent	Ongoing	AHEC, CCA, SPBH, FBPD	-	Leveraging existing resources/ HRSA grant	Number of trainings conducted

Priority Area: Treatment

Goal 4: Increase Medication Assisted Treatment (MAT) workforce.

Objective 4.1: By December 31, 2021, recruit 5 support staff among Community Stakeholders by providing/offering workforce development opportunities and recruiting/retention incentives as mentioned in Goal 1.

**Strategy**

Activities	Timeline		Who Is Responsible?	External Partners	Cost and Possible Funding Source	Track Progress (metrics/ indicators)
	Start Date	End Date				
Recruit 1 individual with DEA waiver to provide MAT services.	Imminent	Ongoing	SPBH	National Health Services Corp	HRSA grant and other grant opportunities as they become available.	1 DEA waived provider recruited
Recruit 2 MAT therapeutic staff.	Imminent	Ongoing	SPBH	National Health Services Corp	HRSA grant and other grant opportunities as they become available.	2 MAT therapeutic staff recruited
Recruit 1 MAT Peer Specialist.	Imminent	Ongoing	SPBH	LSF	HRSA grant and other grant opportunities as they become available.	1 MAT Peer Specialist recruited
Recruit 1 driver for mobile MAT unit.	Year 1	Ongoing	SPBH	FDOT	HRSA grant and other grant opportunities as they become available.	1 driver recruited

Priority Area: Treatment

Goal 5: Enhance the use of technology in Nassau County.

Objective 5.1: By December 31, 2022, train health and social service professionals in how to optimize virtual services to expand the use of telehealth for SUD services in Nassau County.

**Strategy**

Activities	Timeline		Who Is Responsible?	External Partners	Cost and Possible Funding Source	Track Progress (metrics/ indicators)
	Start Date	End Date				
Hire consultation services to engage telehealth services.	Year 1	Ongoing	NC3 partners	SJRRHN, CTRC, SETRC, MHTTC, Project ECHO	Leveraging existing resources/ HRSA grant.	Consultation service engaged (MOU/MOA)
Enhance workforce (mental health, SUD/ODU/MAT providers, leadership, and front line staff) on telehealth knowledge, skills, and abilities (KSAs) to develop technology use as a tool to provide telehealth services to residents that are unable to attend traditional style appointments at the office.	Imminent	Ongoing	NC3 partners	SJRRHN, CTRC, SETRC, MHTTC, Project ECHO	Leveraging existing resources/ HRSA grant.	Number of trainings
Establish MOAs with IT telehealth experts.	Year 1	Ongoing	NC3 partners	SJRRHN, CTRC, SETRC, MHTTC, Project ECHO	Leveraging existing resources/ HRSA grant.	Number of established MOAs

Objective 5.2: By December 31, 2022, identify and implement 1 mobile phone application that connects users to resources.						
<i>Strategy</i>						
Activities	Timeline		Who Is Responsible?	External Partners	Cost and Possible Funding Source	Track Progress (metrics/ indicators)
	Start Date	End Date				
Identify 1 mobile phone application for resource identification.	Year 1	Ongoing	SJRRHN	Platform Consultant	Contractual Service Cost/ HRSA grant.	Mobile phone application identified
Train power users.	Year 1	Ongoing	SJRRHN	Platform Consultant	Contractual Service Cost/ HRSA grant.	Number of power users trained
Hire IT technical support specialist.	Year 1	Ongoing	SJRRHN	Platform Consultant	Contractual Service Cost/ HRSA grant.	IT technical support specialist hired

Priority Area: Recovery						
Goal 6: Create a Recovery Community Organization (RCO) in Nassau County or as part of NEFL Regional RCO.						
Objective 6.1: By December 31, 2021, expand current workforce by 1 individual to facilitate the creation of the RCO (or as a member of the regional RCO representing Nassau to allow pilot the RCO).						
<i>Strategy</i>						
Activities	Timeline		Who Is Responsible?	External Partners	Cost and Possible Funding Source	Track Progress (metrics/ indicators)
	Start Date	End Date				
Hire RCO Liaison (in recovery) with the guidance of Staring Point Behavioral Health.	Year 1	Ongoing	SPBH	FADAA, FBHA, Sober Living House	Leverage existing resources/ HRSA grant	RCO Liaison hired
Train RCO Liaison.	Year 1	Ongoing	SPBH	FADAA, FBHA, LSF	Leverage existing resources/ HRSA grant.	RCO Liaison trained