Palm Beach County: Strategic Planning and Performance Management

Moving from Outstanding to Excellent!

SUBSTANCE USE AND BEHAVIOR DISORDERS CROSS-DEPARTMENTAL TEAM

December 15, 2020
“Addressing substance use and behavior disorders by providing evidence-based prevention, medication-assisted treatment, and recovery support services.”

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Primary Sources of the County Budget Allocated to Substance Use and Behavior Disorders

Over $8.4M have been appropriated for behavioral health and substance use disorders in the past two fiscal years.

**FY20:**
- Financially Assisted Agencies (FAA) = $5,732,391*
- Opioid Response Plan** = $2,618,751
- TOTAL = $8,351,142

**FY21:**
- Financially Assisted Agencies = $5,806,415
- Opioid Response Plan** = $2,623,516
- TOTAL = $8,430,032

*FY19 and FY20 were under the same contract cycle. New contract cycle commenced FY21.

**The Opioid Response Plan now encompasses other substances along with opioids.

County FAA
Funding for
Behavioral
Health

FY17 $5,481,408
FY18 $5,773,991
FY19 $5,732,391*

* FY19 and FY20 were under the same contract cycle. New contract cycle commenced FY21.

** The Opioid Response Plan now encompasses other substances along with opioids.
Mission: “Addressing substance use and behavior disorders by providing evidence-based prevention, medication-assisted treatment, and recovery support services.”

- **Goal 1:** Establishing a readily accessible, integrated and coordinated recovery-oriented system of care that is integrated with the County Addiction Stabilization Facility

- **Goal 2:** Promoting best practices and innovative strategies and programming to reduce:
  - drug-related deaths and overdoses
  - crime related to substance use and behavior disorders
  - drug-related infectious diseases and medical complications

- **Goal 3:** Promoting responsible prescription use of opioid pain relievers

- **Goal 4:** Promoting effective substance use and mental health prevention/education programs, sound public policy and commitment to quality, evidence-based addiction and mental health services

Treating the Whole Person
Goal 1: Establishing a readily accessible, integrated and coordinated recovery-oriented system of care that is integrated with the County Addiction Stabilization Facility

Examples of Recovery-Oriented Activities

- Prevention
  - Early screening before onset
  - Collaborate with other systems, e.g., Child welfare, VA
  - Stigma reduction activities
  - Refer to intervention treatment services
- Intervention
  - Screening
  - Early intervention
  - Pre-treatment
  - Recovery support services
  - Outreach services
- Treatment
  - Menu of treatment services
  - Recovery support services
  - Alternative services and therapies
  - Prevention for families and siblings of individuals in treatment
- Post-Treatment
  - Continuing care
  - Recovery support services
  - Check-ups
  - Self-monitoring

Data Source: D. Whitesock, Founder, Commonly Well and Facilitator for Deployment of the RCI® for PBC
Goal 2: Promoting best practices and innovative strategies and programming to reduce drug-related deaths & overdoses

<table>
<thead>
<tr>
<th></th>
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<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Cases</td>
<td>1708</td>
<td>2036</td>
<td>2134</td>
<td>1984</td>
<td>2106</td>
<td>3386</td>
<td>78%</td>
</tr>
<tr>
<td>Drug Related Deaths</td>
<td>410</td>
<td>754</td>
<td>817</td>
<td>498</td>
<td>519</td>
<td>622</td>
<td>33%</td>
</tr>
<tr>
<td>Opioid Related Deaths</td>
<td>304</td>
<td>608</td>
<td>626</td>
<td>402</td>
<td>446</td>
<td>468</td>
<td>16%</td>
</tr>
<tr>
<td>Suicides</td>
<td>238</td>
<td>245</td>
<td>202</td>
<td>254</td>
<td>241</td>
<td>153</td>
<td>-30%</td>
</tr>
<tr>
<td>COVID-19 Cases</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1170</td>
<td></td>
</tr>
</tbody>
</table>

Data Source: PBC Medical Examiner’s Office
Goal 2: Promoting best practices and innovative strategies and programming to reduce drug-related deaths & overdoses

Number of overdoses and naloxone deployments

<table>
<thead>
<tr>
<th></th>
<th>Opioid Related Disorder</th>
<th>Narcan administered</th>
</tr>
</thead>
<tbody>
<tr>
<td>FY17</td>
<td>2965</td>
<td>2752</td>
</tr>
<tr>
<td>FY18</td>
<td>1723</td>
<td>1658</td>
</tr>
<tr>
<td>FY19</td>
<td>1328</td>
<td>792</td>
</tr>
<tr>
<td>FY20 YTD</td>
<td>1852</td>
<td>792*</td>
</tr>
</tbody>
</table>

Data Source: PBC Fire Rescue

NOTE: EMS Protocols were changed in November 2018 resulting in less usage of Narcan by EMS. * FY20 and FY19 data are coincidentally the same (not an error). In FY20, there were a total of 1116 Narcan deployments, of which 792 were solely for opioid-related overdoses.
Goal 2: Promoting best practices and innovative strategies and programming to reduce drug-related deaths & overdoses

Opioid-related 911 Calls by Location

Heat maps assist in determining where mitigating efforts and programming should be focused. This particular example illustrates the use of opioids, but these maps are used for all types of substance use disorders to assist in pinpointing intervention needs.
Goal 2: Promoting best practices and innovative strategies and programming to reduce drug-related deaths & overdoses

- Implementing Syringe Access Program under the County Ordinance for the Infectious Disease Elimination Act and utilizing as a bridge to treatment, recovery support and other social services for Intravenous Drug Users (IDUs)
- Received responses to FY 2019 FAA’s Notice of Funding Opportunity (NOFO) and are working with SEFBHN as the lead entity
- Opened two (2) Recovery Community Organizations and two (2) Recovery Community Centers
- Continuing to monitor monthly, quarterly, and annual metrics for program success
- On-going tracking of clients served by the County’s Ryan White Program (3,744 clients in calendar year 2019)
Goal 2: Promoting best practices and innovative strategies and programming to reduce drug-related deaths & overdoses

PBC Fire Rescue Mobile Integrated Health Addiction Program

Vision: To save lives and help connect patients to ethical Medically Assisted Treatment providers, risk reduction programs, along with mental health and substance/alcohol use disorder education and resources.

The multidisciplinary MIH team manages the Addiction Program, and is staffed by PBCFR Community Paramedics and Clinical Social Workers.

Data over the past 3.5 years of this program consistently shows a 75-78% rate of acceptance of the provision of resources via the telehealth contact with the patient.
Goal 2: Promoting best practices and innovative strategies and programming to reduce drug-related deaths & overdoses

Fire Rescue Addiction Telehealth Program Outcomes

Number of Follow-up & Intervention Contacts to 911 Patients

<table>
<thead>
<tr>
<th>Fiscal Year</th>
<th>Number of follow-up and intervention contacts</th>
</tr>
</thead>
<tbody>
<tr>
<td>2017</td>
<td>418</td>
</tr>
<tr>
<td>2018</td>
<td>471</td>
</tr>
<tr>
<td>2019</td>
<td>508</td>
</tr>
<tr>
<td>2020</td>
<td>463</td>
</tr>
</tbody>
</table>

Year to Year Reduction in EMS Use by Participants

- 48% 2017
- 45% 2018
- 45% 2019
- TBD-2020

Data Source: PBC Fire Rescue
Goal 2: Promoting best practices and innovative strategies and programming to reduce drug-related deaths & overdoses

PBC Fire Rescue & JFK North Addiction Stabilization Unit

Goal: To ensure patients get to specialized emergency care for their substance/alcohol use disorder, and are able to connect to Medication Assisted Treatment if they are open to it.

Patients presenting without insurance are able to be immediately transitioned to the Health Care District for enrollment in their addiction, medical, mental health, and/or dental programs.
Goal 2: Promoting best practices and innovative strategies and programming to reduce drug-related deaths & overdoses

Crimes related to substance use and behavior disorders

Case Filing for Drug Possession by Drug Type

Note: “Possession Other” includes marijuana, amphetamines, synthetic narcotics, hallucinogens, barbiturates, and others. Year 2020 includes January 1, 2020 to September 30, 2020.

Note: All drug cases here include sales, trafficking, etc. for a total greater than just possession cases of 6,118 depicted in the adjacent chart.
Goal 2: Promoting best practices and innovative strategies and programming to reduce drug-related deaths & overdoses

Behavioral Health Intersecting with the Criminal Justice System

**STRATEGIES:**

- **Advance the Cross-Systems Mapping:**
  - Assist in transforming fragmented systems
  - Identify gaps and resources
  - Implement priority areas, and
  - Identify where to begin or coordinate existing interventions

- **Develop a Cross-Systems Action Plan around top priorities.**

- **Implement promising alternative programs, such as PalmFUSE, as successful options.**
Goal 2: Promoting best practices and innovative strategies and programming to reduce drug-related deaths & overdoses

Behavioral Health Intersecting with the Criminal Justice System

PalmFUSE Pilot (example)

Estimates:

- Incarceration Costs: $50,000 annually, $4,200 monthly
- Treatment/Housing Costs: $20,000 annually, $1,700 monthly

It costs LESS to provide Treatment & Housing than to incarcerate!

<table>
<thead>
<tr>
<th></th>
<th>Pre-FUSE</th>
<th>Post-FUSE</th>
<th>Pre-FUSE</th>
<th>Post-FUSE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bookings</td>
<td>64</td>
<td>0</td>
<td>702</td>
<td>0</td>
</tr>
<tr>
<td>Total Jail Bed Days</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Pretrial Jail Admissions (Bookings) by Felony and Misdemeanor

- Total Admissions by Calendar Month and Year

NOTE: PBSO BIRS movement file by SPSS as of 30-SEP-2020.
Goal 3: Promoting responsible prescription use of opioid pain relievers

Unique Opioid Prescriptions

<table>
<thead>
<tr>
<th>Year</th>
<th>Prescriptions</th>
</tr>
</thead>
<tbody>
<tr>
<td>2015</td>
<td>278,421</td>
</tr>
<tr>
<td>2016</td>
<td>268,188</td>
</tr>
<tr>
<td>2017</td>
<td>254,684</td>
</tr>
<tr>
<td>2018</td>
<td>226,831</td>
</tr>
<tr>
<td>2019</td>
<td>205,407</td>
</tr>
<tr>
<td>2020</td>
<td>120,587</td>
</tr>
</tbody>
</table>

Number of prescriptions fell by 43% from 2015

Data Source: Florida Department of Health, Bureau of Community Health Assessment, Division of Public Health Statistics and Performance Management (Opioid Use Dashboard – Palm Beach County) (2020)
Goal 3: Promoting responsible prescription use of opioid pain relievers

<table>
<thead>
<tr>
<th>Year</th>
<th>Number of Pounds of Pills</th>
</tr>
</thead>
<tbody>
<tr>
<td>2015</td>
<td>8,193</td>
</tr>
<tr>
<td>2016</td>
<td>8,446</td>
</tr>
<tr>
<td>2017</td>
<td>7,949</td>
</tr>
<tr>
<td>2018</td>
<td>7,140</td>
</tr>
<tr>
<td>2019</td>
<td>9,357</td>
</tr>
</tbody>
</table>

Amount of prescription drugs disposed through County pill drop program

32% increase FY 18 to FY 19

Data Source: PBC Sheriff’s Office
Goal 4: Promoting effective substance use and mental health prevention and education programs, sound public policy, and commitment to quality, evidence-based addiction and mental health services

Impact of Education and Training per Fiscal Year

Number of People Trained by Youth Services Department

<table>
<thead>
<tr>
<th>Year</th>
<th>People Trained</th>
</tr>
</thead>
<tbody>
<tr>
<td>2015</td>
<td>1152</td>
</tr>
<tr>
<td>2016</td>
<td>1754</td>
</tr>
<tr>
<td>2017</td>
<td>1850</td>
</tr>
<tr>
<td>2018</td>
<td>1737</td>
</tr>
<tr>
<td>2019</td>
<td>2188</td>
</tr>
<tr>
<td>2020</td>
<td>4455</td>
</tr>
</tbody>
</table>

Impact:

Mental Health

- There is a negative relationship between racial microaggressions and mental health.
- More likely to exhibit negative mental health symptoms, such as depression, anxiety, negative affect, and lack of behavioral control (Due et al., 2009).
- After controlling for SES, Black and Latino children are more likely to be diagnosed with significant diagnoses such as Attention Deficit Disorder or Conduct Disorders than white peers (Hingtgen et al., 2007).

Microaggressions are “micro” because they often happen in small, private situations, yet their effects often impact us in massive and dangerous ways.

Workplace

- Combined effects of microaggressions in the workplace can lead to:
  1. Increased turnover/deserted commitment
  2. Decreased productivity
  3. Less of work time avoided the instigator
  4. Less diverse workforce.
  5. A hostile and intimidating work environment

(Williams, 2010)
Goal 4: Promoting effective substance use and mental health prevention and education programs, sound public policy, and commitment to quality, evidence-based addiction and mental health services

Outreach Classes Related to Substance Use and Mental Health

<table>
<thead>
<tr>
<th></th>
<th>FY16</th>
<th>FY17</th>
<th>FY18</th>
<th>FY19</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parks &amp; Rec</td>
<td>39</td>
<td>55</td>
<td>54</td>
<td>61</td>
</tr>
<tr>
<td>Youth Services</td>
<td>54</td>
<td>54</td>
<td>85</td>
<td>70</td>
</tr>
<tr>
<td>TOTAL</td>
<td>94</td>
<td>108</td>
<td>144</td>
<td>131</td>
</tr>
</tbody>
</table>

Data Sources: YSD and Parks and Recreation
Goal 4: Promoting effective substance use and mental health prevention and education programs, sound public policy, and commitment to quality, evidence-based addiction and mental health services

![COVID-19 Impact on Direct Service Hours](image1)

![COVID-19 Impact on Families Served](image2)

Data Source: YSD
Goal 4: Promoting effective substance use and mental health prevention and education programs, sound public policy, and commitment to quality, evidence-based addiction and mental health services

COVID Impact and Innovations by Youth Services, Parks & Recreation and the Employee Assistance Program

- 442 virtual recreational activities, videos and creative check-in e-mails
- Mindfulness Meditation Workshop
- Development of 137 nature center virtual recreation, meditation, yoga, exercise, and educational videos
Goal 4: Promoting effective substance use and mental health prevention and education programs, sound public policy, and commitment to quality, evidence-based addiction and mental health services

Creating meaning out of chaos
Creating a positive state of mind and safe outlets to process social unrest and racial injustice

Juneteenth, Drum Circles, and Black Heroes

Listening to the community’s concerns and addressing social unrest as it impacts mental health and equity.
Goal 4: Promoting effective substance use and mental health prevention and education programs, sound public policy, and commitment to quality, evidence-based addiction and mental health services

Creating meaning out of chaos

COVID Impact and Innovations Continued

County Employees Receiving Mental Health Services

<table>
<thead>
<tr>
<th>Fiscal Year</th>
<th>Number of Employees</th>
</tr>
</thead>
<tbody>
<tr>
<td>2017</td>
<td>212</td>
</tr>
<tr>
<td>2018</td>
<td>225</td>
</tr>
<tr>
<td>2019</td>
<td>253</td>
</tr>
<tr>
<td>2020</td>
<td>295</td>
</tr>
</tbody>
</table>

In 2020 EAP incorporated tele-mental health services in order to continue seeing clients.

County EAP Comparison in relation to COVID-19 (2019 vs. 2020)

3/2019 to 10/2019 → 41 new clients
3/2020 to 10/2020 → 65 new clients

59% from increase in new clients...we’re here for you!
Next Steps

- Implement neutral care coordination
- Ensure coordination of efforts across organizations
- Better utilize data to identify where to target services
- Continue to identify roles and responsibilities of each department
- Work to build better data on costs, drug usage other than opioids, and infectious diseases
- Evaluate effectiveness of: Interventions, Education, and Prevention Activities

- Continue to broaden the reach of peer support services across the continuum
- Continue to support the PBC Healthcare District’s efforts to have the ASF serve as the central point of intake/triage center for all overdose cases.
- Develop methods to leverage interdepartmental resources
- Broaden the scope of the team to adopt:
  - A trauma informed approach
  - Address impact of ACEs and community trauma
  - Build resiliency & overcome adversity
Questions and Answers
Backup and Additional Information
County Services and Programs Offered Related to Substance Use and Behavior Disorders
(This list is a sample and not comprehensive)

• Financially Assisted Agency funding
• Substance Use and Behavior Disorder Strategic Plan
  • Steering Committee
  • Increased treatment capacity resources
  • Countywide coordinated planning
• Fire Rescue Mobile Integrated Health Programs
• Fire Rescue Addiction Program (education and referrals)
• Education and prevention classes
• Family, residential, youth and marriage counseling
• Drug Court for juveniles and adults
• Ex-offender Reentry for juveniles and adults from prison and jail
• Family Violence Intervention Program
• Youth Empowerment Centers
• Summer Camps and Summer Food Service Program
• My Brother’s Keeper
• Victim Services
• Parks for Rx Program
• County Employee Assistance Program
• Ryan White Program
• Homeless Resource Centers and wrap-around-services
• Outdoor activities in natural areas, sports, and culture
• Senior and Veteran services
• Palm FUSE
CARE COORDINATION
A non-conflicted, neutral body, “Care Management Organization,” which delivers a comprehensive care coordination model of referral and care management services oriented toward individualized service plans unique to the individuals’ needs and consideration of their choice. The CMO is a single-point of care coordination; incorporating best practice measures, considers the needs and strengths of the clients, achieves optimal outcomes, moves clients cost-effectively along a continuum of care, and emphasizes wellness, recovery, and self-sufficiency as the primary goals. The CMO is an accountable behavioral health system that also achieves the goal of quality care, accessibility of care, and cost effectiveness to best meet the overall needs of the clients through utilization and continued services reviews to ensure appropriate delivery and collaboration of healthcare services.

CARE PROVIDERS NETWORK
A Recovery-Oriented Systems of Care (ROSC) is a coordinated network of community-based services and supports that is person-centered and builds on the strengths and resilience of individuals, families, and communities to achieve abstinence and improved health, wellness, and quality of life for those with or at risk of alcohol and drug problems. ROSC will require developing supports and services through a Care Providers Network (CPN) that will provide self-directed approaches which respect the role of personal choice and commitment in pursuit of health and wellness.

PEER SUPPORT / RECOVERY CAPITAL
Peer support services are delivered by individuals who have common life experiences with the people they are serving and a unique capacity to help based on a shared affiliation and a deep understanding of this experience. Research indicates peer support facilitates recovery and reduces health care costs. Peer support is often coupled with recovery support services which include access to evidence-based practices such as supported employment, education, and housing; assertive community treatment; illness management; and peer-operated services. These services have been shown to: reduce expensive inpatient service use, reduce psychiatric hospitalizations, better engage individuals in care, and increase individuals’ abilities to manage their symptoms and reduce their reliance on formal services while achieving positive recovery outcomes.

A recovery capital instrument will measure and monitor addiction wellness using three domains (social, personal and cultural) and twenty-two components that will provide a comprehensive baseline and assessment of intervention effectiveness to allow for the tracking of client progress and tailored support.
ACE Resources

Academy on Violence and Abuse
CDC-Kaiser Permanente ACE Study Preview
shorturl.at/kwCF0

The Lifetime Effects of Adverse Childhood Experiences
Dr. Nadine Burke Harris
shorturl.at/bxAO8

ACE questionnaire
shorturl.at/cmtQW

For the full report and supporting materials visit: https://osg.ca.gov/sg-report/.