

Pinellas County CHIP: 2016-17  
Behavioral Health

Goal	Strategy	Objective	Activity 2016-17	Process Measure 2016-17	Coordinating Agency	Partner Agencies	Outcome Measure(s)	July - September 2016	October - December 2016
BH 1: Increase access to behavioral health services	1.1: Strengthen the integration of behavioral and primary health care service delivery.	1.1.1: By Dec 31, 2016, increase the percentage of Pinellas adults who always or usually receive the social and emotional support they need from 81.3% (2010) to 89.4%.	1. Continue implementation of pilot program to engage and provide services to the top 33 utilizers of Pinellas County's public Baker Act and jail facilities.	1 a. #/% Clients engaged and enrolled in pilot b. #/% of clients who receive therapy indicated in treatment plan	Pinellas County Human Services; Administrative Forum	Local Behavioral Health providers	Increased integration among behavioral healthcare providers.	1. 26 patients have been enrolled in the pilot. Therapy information is not available at this time, but the evaluator will be reviewing the information.	1. 26 patients remain enrolled. Therapy information will be available sometime in the new year.
	1.2: Integrate trauma-informed care practices across care settings with emphasis on Adverse Childhood Experiences (ACEs).	1.2.1: By Dec 31, 2017, reduce the rate of non-fatal hospitalizations for self-inflicted injuries from 82.0 per 100,000 (2008-2010) to 65.6 per 100,000 among Pinellas youth 12-18.	1. Promote provider and agency education on trauma-informed approaches and practices.	1. Hold two trainings for providers in Pinellas County.	1. Peace4Tarpon,	1. National Center for Trauma-Informed Care, DOH-Pinellas	200 health professionals educated on trauma-informed care principles  4 new organizations distributing Trauma-Informed Care materials	1. S.A.F.E. Training held this quarter by Peace4Tarpon for parents, with aim of trying to lessen ACE scores for kids. Suncoast First Responder's summit held in September, with aim of addressing stress and secondary trauma in our first responders. Three additional trainings held in September. Total attendees of trainings for this quarter: 165.	Three trainings held in October-December, including at the P4T Forum. Total attendees: 88.
	1.3: Engage targeted at-risk populations to better understand behavioral health care needs and prevent barriers to access	1.3.1: By Dec 31, 2017, decrease the suicide age-adjusted death rate in Pinellas from 17.7 per 100,000 (2010-2012) to 16.2 per 100,000.	1. Examine Pinellas County suicide data to identify additional trends or areas of concern.	1. Analyze data and determine the need for an in-depth report.	1. Pinellas County	1. BayCare, DOH-Pinellas	Identify gaps in behavioral healthcare access.	1. Pinellas County completed an initial review of the data to identify surface-level correlations and areas of note. BayCare, Pinellas, and DOH-Pinellas will determine next steps during Q4.	1. Presentation made to the Admin Forum regarding suicides. Baycare to lead a project starting in 2017; more information to follow next quarter.
	2.1: Advocate for changes in policy and practices related to substance abuse, including more stringent regulations for prescription drugs classified as controlled substances.	2.1.1: By Dec 31, 2017, reduce the number of accidental drug or toxin related deaths in Pinellas from 201 (2012) to 181.	Objective met. Accidental drug-related deaths for 2014 was 166, and for 2015 was 179. DOH-Pinellas will maintain connection with Administrative Forum and Regional Council and track their work on policy-related advocacy.						

BH 2: Reduce substance abuse among children and adults	2.2: Raise awareness among providers, parents, youth, and businesses on emerging substance abuse trends to improve and inform practices.	2.2.1: By Dec 31, 2016, reduce the number of Pinellas youth who report lifetime drug use from 31.1% (2012) to 27.9%.	1. Implement a campaign to educate <b>parents, businesses, and youth</b> on medical marijuana and the dangers of emerging designer drugs and prescription drugs	1. Educational materials distributed/parents educated 2. Number of businesses educated 3. Number of youth led groups who receive campaign materials	LiveFree/Pinellas County Justice & Consumer Services	LiveFree! Coalition members	Improved understanding of emerging designer drugs among youth and adults.		
	2.3: Increase access to substance abuse services for prenatal and postpartum women.	2.3.1: By Dec 31, 2017, reduce the rate of Neonatal Abstinence Syndrome in Pinellas from 27.1 per 1,000 births (2009-2011) to per 24.4 per 1,000 births.	1. Work with OB-GYNs to provide warnings to their patients on the dangers of substance use/abuse while pregnant and provide supports to address underlying issues. 2. Collect current data on drugs to which newborns are most frequently exposed.	1. Offer education and materials to all 32 OB providers in Pinellas County. 2. Produce a 2015-16 report on trends of substance exposure to newborns.	1. Healthy Start Coalition 2. Substance Exposed Newborns task force; USFSP (Amanda Moore-Krummerich, PEMHS)	1. Operation PAR, Healthy Start Coalition, Birth Hospitals, BayCare, DOH-Pinellas, Motivating New Moms 2. Healthy Families	More information available on NAS in Pinellas County.	1. HSC continues to provide materials to all 32 OB offices. 2. SEN is in the process of reviewing the raw numbers for 2015-2016 as of August 2016, and will share the report when completed.	1. HSC continues to provide materials to all 32 OB offices. 2. SEN is in the process of reviewing the raw numbers for 2015-2016, and will share the report when completed.
BH 3: Reduce violence among children and families	3.1: Promote community programs that maximize healthy development and interaction among children, families, schools, and communities.	3.1.1: By Dec 31, 2017, reduce the rate of Pinellas children under 18 experiencing child abuse from 24.0 per 1,000 (2012) to 16.9 per 1,000.	1. Promote JWB's Prevent Needless Deaths campaign. 2. Hold trauma informed care trainings for local MCH care providers.	1. Distribute booklets to local birthing hospitals (St. Pete General; Bayfront Baby Place; Morton Plant Hospital - CLW; & Mease Countryside) and at least ten daycare providers. 2. At least three trainings held in Pinellas (one at DOH-Pinellas)	1. JWB 2. USFSP	1. Hillsborough Children's Board; Local MCH providers and agencies 2. MCH providers	Common screening policies/practices for violence and trauma	1. Pending. 2. Transitional quarter - no updates.	1. Pending. 2. 8 TIC trainings conducted this quarter by USFSP

	<p>3.2: Promote awareness, training, and advocacy to improve and inform practices related to domestic violence.</p>	<p>3.2.1.: By December 31, 2017, reduce the domestic violence rate in Pinellas from 772.8 per 100,000 (2009-2011) to 695.5 per 100,000</p>	<p>1. Educate community healthcare providers on domestic violence policies and preventive practices.</p>	<p>1. Hold at least two Being a Better Bystander trainings countywide.</p>	<p>1. Domestic Violence Task Force</p>	<p>1. DVTF partners</p>	<p>Greater number of DOH-Pinellas staff educated on DV prevention and preventive practices.</p>	<p>1. No training scheduled yet; reached out to DVTF to begin process.</p>	<p>1. DOH-Pinellas connected with DVTF and will schedule a BBB training for early 2017.</p>
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