

Implementation Report 2017-2019

Produced by the

Pinellas County Opioid Task Force
and the

Opioid Strategic Planning Committee

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Executive Summary

The Pinellas County Opioid Task Force is a collaboration of community partners that started in June 2017 in response to the sharp increase in opioid-related drug abuse and deaths in the county. In partnership with Operation PAR, the Florida Department of Health in Pinellas County (DOH-Pinellas) founded the Pinellas County Opioid Task Force (PCOTF). The purpose of the task force was to develop a strategic plan and recommendations that efficiently guides community members and resources to confront the opioid epidemic.

The PCOTF Strategic Plan was developed with the Mobilizing for Action through Planning and Partnerships (MAPP) framework as the guide. The strategic goals identified were:

- 1. Increase Education and Awareness
- 2. Reduce Opioid Deaths
- 3. Connect to Effective Treatment
- 4. Decrease the Supply of Opioids
- 5. Integrate and Collaborate Data Sources

Due to the urgency of the problem, an actionable work plan with recommendations was implemented in January 2018. Participants recruited for the task force were individuals from key organizations and the community that have a vested interest in the reduction of opioid misuse in the county. This includes, but is not limited to, community stakeholders, government agencies, non-governmental organizations, faith-based organizations, law enforcement and elected officials within Pinellas County.

IMPLEMENTATION

At initial planning meetings, PCOTF participants were asked to join a subcommittee based on where their expertise and resources would be most beneficial. Each subcommittee was assigned a DOH-Pinellas Facilitator and a Chair was named by each group.

At the subsequent meetings, the full group came together for updates and would then break out to work on their goals. The facilitators initially led the groups through a brainstorming process to determine the strategies needed to achieve their goal, then the subcommittees worked on specific and achievable tactics to complete the strategy. Each tactic was assigned a responsible party or parties to maintain accountability. Monthly meetings were held to provide updates on tactics, as well as discuss new recommendations, community resources, opportunities for fiscal requests and empower policy change. As other community members heard of the task force, membership increased. Strong support and ongoing participation from these individuals assisted with the implementation and completion of 43 tactics from 2017-2019.

Acknowledgements

The Pinellas County Opioid Task Force would like to acknowledge the significant contribution of all the members to the successful creation and implementation of the Strategic Plan and implementation of recommendations.

Pinellas County Opioid Task Force Participants

Alliance for Global Narcotics Training

Area Health Education Center

BayCare Health System

Bayfront Health
Catholic Charities

Central Florida Behavioral Health Network

Chief Empowerment City of St. Petersburg

Clearwater Police Department

Community Health Centers of Pinellas

Directions for Living

Drug Free America Foundation, Inc.

Florida Department of Children and Families Florida Department of Health in Pinellas County

Florida National Guard

Florida Perinatal Quality Collaborative

Florida Poison Control - Tampa

Gulf Coast Jewish Family Community Services Gulf Coast North Area Health Education Center

Healthy Start

Healthy Start Coalition Hope Alive Outreach

John Hopkins All Children's Hospital Juvenile Welfare Board of Pinellas County

Kinship

Lakewood United Methodist Church

Largo Medical Center

LiveFree!

Metro Inclusive Health

Morton Plant New Season NOPE of Pinellas

Novus Medical Detox Center

Operation PAR

PACE Center for Girls, Inc.

Parents as Teachers
Pinellas Alcohol Coalition

Pinellas County Board of County Commissioners
Pinellas County Business Technology Services
Pinellas County EMS / Fire Administration

Pinellas County Forensic Laboratory
Pinellas County Fusion Group
Pinellas County Human Services
Pinellas County Justice Coordination
Pinellas County Medical Association
Pinellas County Medical Examiner's Office
Pinellas County Osteopathic Medical Society

Pinellas County School Board Pinellas County Sheriff Office

Pinellas County Sheriff Office – Narcotics Pinellas County Substance Exposed Newborn

Pinellas County Safety and EMS Services

Taskforce

Pinellas Ex-Offender Re-entry Coalition Pinellas Homeless Leadership Board

Phoenix House Florida Precision Diagnostics

Real Recover

Recovery EpiCenter Foundation

Rivermend

St. Petersburg College

St. Petersburg Police Department

Sober Evolution
Spring Gardens Detox

Substance Exposed Newborns Task Force

Suncoast Center

Suncoast Health Council

Terra Nova

University of South Florida

WestCare

Progress of Goals

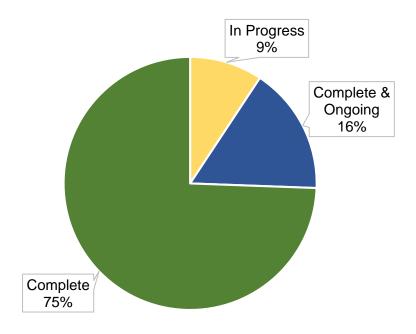
The Pinellas County Opioid Task Force assigned 43 tactics to the 5 agreed upon strategic goals. Of those tactics, 36 (84%) were completed and/or ongoing over the three-year period and 6 (16%) are in progress. The chart below indicates the progress made on the PCOTF tactics during the 2017-2019 operational period.

Complete Reached or surpassed objective target

Complete & Ongoing Objective target was completed and action is continuous

In Progress Some progress was made toward meeting the objective target

Strategic Activities



Report Card

Goal 1: Increase Education and Awareness		
Strategy 1: Inc	crease frequency and modality of information shared with the	ne public
Tactics	Summary of Activities	Status
1.1.a Provide a story map that provides education about the opioid epidemic in Pinellas County and lists additional resources such as Naloxone resources, addiction identification and mental health services within three months.	Created story map for general public with data, strategic plan and resources: http://egis.pinellascounty.org/apps/Opioid The story map has been viewed 5912 since it was published on March 1, 2018.	√
1.1.b Develop a marketing plan incorporating social media to increase awareness within the next six months.	Created digital toolkit for social media messaging with story map link and #ODNoMore hashtag. Opioid Task Force social media messages and infographics continue to be distributed.	✓
1.1.c Distribute the Drug Free America Foundation, Inc. Opioid Toolkit with all coordinating agency logos within one month.	Toolkit was made available to PCOTF and printed copies were distributed widely.	√
1.1.d Increase substance abuse education for women of childbearing age and those already pregnant through information at birthing hospitals, Federally Qualified Health Centers, Healthy Start and Healthy Families, Directions for Living and Lutheran starting within six months.	Keeping Baby Healthy guide available on the story map and partner websites. Printed copies distributed widely. Community Health Centers of Pinellas updated substance abuse screening process of all women (pregnant and nonpregnant) in April 2018 with guidance from Operation PAR. All positive patients are offered integrated case management services and referrals for counseling. Pregnant patients receive additional counseling and education (verbal, handouts, FAQs) by OB providers on-site. BayCare Healthy Families program held two Safe Sleep events in 2018. Local healthcare providers presented on Safe Sleep and substance abuse.	√

Goal 1: Increase Education and Awareness Strategy 2: Increase awareness/prevention messaging in schools and specialized groups targeting youth. Summary of Activities Status **Tactics** Requested PCSB to utilize relevant data and available resources to enhance 1.2.a Identify and select evidence-based education for youth within six months. curriculum. Identified Florida Youth Substance Abuse Survey (FYSAS) as a creditable source of info regarding youth and opioid use. Requested PCSB to investigate curricular supports. **1.2.b** Advocate for enhanced substance abuse curriculum in Pinellas County high schools during the 2018-19 school year. PCSB to compile methods to enhance curriculum development. 1.2.c Promote interventions at ten Poison Control Tampa participated in Largo PTA Health Fair on February 10, and 15 PCOTF infographics were distributed at the event. sponsored events annually such as Red Ribbon Week, Great American Teach-In, PTA meetings, health fairs, etc. during DFAF presents at the Pinellas County Courthouse's Juvenile Diversion Program the 2018 school year. on the dangers of synthetic drugs every other month to approx. 25-30 kids and five parents (yearly: approx. 180 youth and 30 parents). PCSB presented list of school-sponsored events at September meeting; task force members selected which events they will attend at October meeting. PCOTF member attended NOPE vigil on October 17 at 7PM at Largo Central Park. Gayle Guidash presented at the St. Pete City Council Youth & Family Services Committee on March 15, the Public Safety Coordinating Council meeting on May 7, the Hadassah expert panel on Nov. 14, 2018 to 45 attendees, and at the FOCUS Community Connections "Opioids and the Church" event on Feb. 21, 2019 to more than 200 first responders, social workers and faith-based leaders. 1.2.d Identify and promote age Sent PCSB approved infographics and received approval to distribute through "Peach Jar." appropriate infographics for elementary, middle, high school and college students respectively for distribution into Pinellas PCSB distributed middle school and high school infographic to 13,471 and County Schools during the 2018 school 19,261 parent/guardian emails, respectively. vear.

Infographic posters to be displayed at DOH-Pinellas School Based clinics.

	Sent infographics to Lakewood Health Squad facilitators to distribute.	
1.2.e Identify and promote age appropriate education in community-based youth groups such as before and after school care, faith-based programs, athletic programs, etc. within one year.	Daphne Lampley expanded Operation PAR's "Too good for drugs" campaign to include Task Force infographics. Operation PAR's summer 2018 presentations to 74 participants with the Boley Youth employment services included Opioid information. Operation PAR's 2018-19 school year presentations for middle and high school students included Task Force infographics. St. Pete Pet Project Coalition coordinated with the Task Force to provide avenues to reach the faith-based community. DOH-Pinellas attended FOCUS planning meeting on June 6, 2018 to discuss ways to reach youth at upcoming seminar on "Opioids and the Church" set for February 21, 2019. Rx Disposal infographics were distributed at this FOCUS planning meeting. Opioid Task Force hosted a table with information and resources at the "Opioids and the Church" event on Feb. 21, 2019.	

	Goal 1: Increase Education and Awareness	
Strategy 3: Increase training	for physicians, dentists, medical providers and healthcare	e students.
Tactics	Summary of Activities	Status
1.3.a Advocate for EFORCSE mandate by writing a letter to elected officials and lobbyists in support of legislation within one month.	DFAF presented a one pager on opioids to over 38 house and senate representatives on Prevention Advocacy Day. Every legislator received the proposed bill. Opioid Task Force attended PCMA Summit on Aug. 17, 2018.	√
1.3.b Provide substance abuse education to physicians to reduce the rates of neonatal abstinence syndrome in Pinellas County within one year.	SEN trained 15 community healthcare partners from BayCare Health Systems health care providers, John Hopkins All Children's Hospital, The Haven, Department of Health, Operation PAR, and Suncoast Mental Health during "Hand in Hand Train the Trainer: How to care for babies who are substance exposed" course. Participants were provided with a stipend to facilitate a training in the community, and three trainings were scheduled.	√

1.3.c Provide a one-page resource guide	Mike Osborn, Clinical Director of Operation PAR, provided Methadone 101 training for Countryside Hospital NICU nurses, and staff on Jan. 17, 2018. A Neonatal Abstinence Syndrome (NAS) Community Partner meeting was held on April 13, 2018 to identify barriers to obtaining services for mothers who are pregnant and substance using. Community partners were comprised of hospital staff nurses, OB-GYN's & pediatric doctors, mental health and substance abuse treatment providers and Healthy Start. SEN provided a "Hand in Hand" training at Child Welfare Summit on Sept. 5, 2018. SEN presented new toolkit/project with Florida Prenatal Quality Collaborative's Quality Improvement Initiative on NAS that will be offered at all hospitals in Florida to 18 state attorneys on June 22, 2018. SEN also distributed copies of the PCOTF Strategic Plan and Story Map. Toolkits and other information were distributed at 30th Annual Osteopathic Winter Seminar on Jan 23-26, 2019. Sent finalized version to PCOTF members to distribute.	
with information on key online resources that focus on the Opioid Epidemic (i.e. American Medical Association Safe Opioid prescribing, Chronic Pain Management) to be available for distribution at the beginning of 2018.	Drug Free America printed 1,000 infographics for PCOTF members to distribute. Distributed infographic at PCMA Summit on Aug. 17, 2018.	√
1.3.d Promote Pinellas County's safe storage and disposal programs year-round through multimedia outlets and community events (i.e. health fairs).	Sent finalized version to PCOTF members to distribute. Infographic was included on story map resource page. Drug Free America printed 1,000 infographics for PCOTF members to distribute. Poison Control distributed infographic at Largo PTA event on February 10, DOH-Pinellas distributed infographic to 721 staff members on April 27, and PCSB distributed infographic on April 27 to 49,716 parent/guardian emails via "Peach Jar". Infographic also distributed at all DOH-Pinellas locations, at September 6 Regional PIO meeting, and at Pinellas County Sheriff's Office Child Protection Investigation Division Community Services Fair on September 19.	√

	Take Back Day flyer distributed to Task Force members on October 16, to more than 700 DOH-Pinellas staff members on October 26, and via Twitter. Distributed 2,000 DisposeRx packets for safe disposal of prescription drugs to homeless and transitional housing organizations, and at the FOCUS Community Connections "Opioids and the Church" event on Feb. 21, 2019 Supported DEA takeback day on Saturday, April 27 with social media and distributed Deterra kits to employees to provide to the community.	
1.3.e Promote educational resources on evidenced based prescribing and treatment to Pinellas County healthcare providers within the next six months.	Distributed infographic at PCMA Summit on Aug. 17, 2018. Operation PAR proposed a grant for BayCare "Town Hall Meetings" for the next three years. Opioid Task Force hosted a table at PC Osteopathic Society Meeting January 23-26, 2019. Linda Thielmann of Healthy Start Coalition of Pinellas County shared additional Grand Rounds to participate in. John Essenburg presented to 80 people at JHAC's Grand Rounds on Jan. 5, 2018. DOH-Pinellas in St. Pete staff presented Opioid Task Force overview to DOH-Pinellas in Pinellas Park medical services staff on May 23, 2018. Gayle Guidash presented Opioid Task Force overview at DOH-Pinellas in Mid County to medical services staff on Sept. 14, 2018. Dr. Choe presented a Task Force update to the Pinellas County Administrative Forum on January 23, 2019.	

Otrata and Andrews and the second	Goal 2: Reduce Opioid Deaths	
	availability of drug overdose treatment kits throughout the	
Tactics	Summary of Activities	Status
2.1.a Identify and explore location of naloxone kits in relation to high risk population and overdose location to target additional points of dispensing within six months.	Shared information from DCF to non-profit organizations on how to obtain Narcan. DCF created a map: https://isavefl.com/locator.shtml with locations of free Narcan as well as an email for naloxone: HQW.SAMH@MyFIFamilies.com	√
	EMS/Fire administration tracks Narcan administration monthly.	
2.1.b Assist community partners to apply for free naloxone within three months.	Shared information from DCF to non-profit organizations on how to obtain Narcan as well as substantial community partners such as HIV provides and Maternal and Child Health organizations.	√
2.1.c Advocate to establish a location with a needle exchange program which also provides a naloxone kit within two years.	Legislation was passed during the 2019 session and the pilot remains in Miami-Dade County. PCOTF will monitor the progress of the pilot to share with elected officials, including a decision packet.	

	Goal 2: Reduce Opioid Deaths	
Strategy 2: Increase promotion / awareness of universal prescription, especially for friends and		
	family.	
Tactics	Summary of Activities	Status
2.2.a Provide naloxone, a standardized support packet and training for family members of opioid users within six months.	Operation PAR working on this with Facilitator. They currently pass out a tri-fold brochure and have access to a 7-minute training video.	√

2.2.b Engage large pharmacy chains to promote awareness messaging within six months.	Continuing to contact local pharmacies for procedures on Narcan. Asking for their marketing strategies. Share information on Good Rx and other cost saving opportunities.	√
2.2.c Establish an advocacy program; find family, former addicts and possible celebrities to put a face to the epidemic within six months.	Testimonial seen at a DFAF gala. Contact has been initiated. Promote real recovery stories through the Story Map. Touch base with Jackie Siegal; author of Victoria's Voice.	√

Goal 2: Reduce Opioid Deaths		
Strat	Strategy 3: Increase training of First Responders.	
Tactics	Summary of Activities	Status
2.3.a Provide training to law enforcement officers on naloxone administration within one year to include.	Florida Department of Health Program Office is providing first responder Naloxone to the County. Process is called the HEROS program.	
i. Injection vs. nasal ii. Standardize naloxone administration with all agencies	The EMS Medical Director was successful in training all EMS/ Fire first responders as well as a large number of Law Enforcement Officials.	\checkmark
	Deployment of Narcan use is tracked monthly.	
2.3.b Provide training on the signs and symptoms of opioid use and misuse	Widely distributed the Opioid Toolkit and the Signs / Symptoms infographic.	
within three months.	All EMS/Paramedics as well as a large number of Law Enforcement Officials were trained in the signs and symptoms.	√

Goal 3: Connect to Effective Treatment

Strategy 1: Increase the availability and access to treatment services to include places such as jails, primary care offices and emergency rooms.

	primary sais emess and emergency reemer	
Tactics	Summary of Activities	Status
3.1.a Research opportunities to implement Medication Assisted Treatment and psychosocial treatments in jails/correctional facilities within the next six months.	Operation PAR and PEMHS received a grant through DCF to do GAIN SS on all Marchman Act clients brought to the jail. They are connected to treatment and can then transfer to detox programs. Over 60% of inmates referred to this program received services following the initial screening.	√
3.1.b Research opportunities to increase the amount of effective treatments available to the community in various locations within the next six months. Engage 12-step programs to push program information to increase attendance rates.	Operation PAR and St. Anthony's hospital are working together to help individuals brought to the ER with substance use and/or overdose episodes. Operation PAR has staff at St. Anthony's that will work with these individuals to connect them to effective treatment. Community Health Centers of Pinellas (CHCP) is working closely with Operation PAR to increase access to substance abuse treatment for CHCP patients. CHCP has a dedicated Integrated Care Case Manager who provides warm hand-offs for the highest priority patients, including those who are pregnant and need inpatient care.	√
3.1.c Write a letter and set up a meeting with social services at Pinellas County jail to discuss the implementation of Medication Assisted Treatment services within three months.	A letter was sent to social services within the jail with the request to set up a meeting. New Seasons offers MAT services in the jail for pregnant women.	√
3.1.d Advocate for support to increase utilization of the Marchman Act for qualifying individuals within the next six months.	Members worked to develop a training to educate community partners on the Marchman Act policy and procedures. It was determined that the only Marchman Act facility in Pinellas is the jail.	√

Goal 3: Connect to Effective Treatment

Strategy 2: Establish meaningful connections to treatments for opioid users in various places; hospitals, primary care offices, courtrooms, jails, etc.

Tactics	Summary of Activities	Status
		Sialus
3.2.a Write a letter to stakeholders, such as drug court judges, to explain the efforts of the task force and ask for continued assistance in establishing meaningful connections to treatment within three months.	A letter was drafted and sent to the drug court asking for support and continued assistance in establishing meaningful connections to treatment.	
3.2.b Distribute an infographic about the availability and effectiveness of treatment options for both the opioid users and their families in health care settings with the next six months.	Infographics were identified from various outlets including CDC. The team distributed them widely.	✓

Goal 3: Connect to Effective Treatment

Strategy 3: Maintain current funding and seek new funding opportunities to support opioid addiction services.

Services.		
Tactics	Summary of Activities	Status
3.3.a Research funding and opportunities for additional treatment opportunities and/or additional beds at treatment facilities that can provide services for those who are underinsured within the next year.	WestCare has a grant, the Recovery Project, in partnership with the Public Defender. There have been 148 people referred to the Turning Point program through this project. After the Turning Point program, they are referred to transitional housing. WestCare is in the first year of a three-year grant for this project.	✓
3.3.b Create a transportation program (using lessons learned) that provides free transportation from ERs to treatment/assessment programs within one year.	Operation PAR has a staff member coming on board who will be working at Baycare to connect individuals to treatment directly from the ER.	√

Goal 4: Decrease the Supply of Opioids Strategy 1: Establish a pilot program based off the current model of mental health workers partnering with law enforcement.					
			Tactics	Summary of Activities	Status
			4.1.a Research funding opportunities for the pilot program within six months.	The Sheriff's Office researched funding opportunities and the group met with the Sherriff's Office mental health project to identify how the program functions, funded and how deliverables are met. Grants nor funding opportunities were identified and the group will revisit if an opportunity becomes available.	√
4.1.b Establish a community wide database to assist with follow up of overdose patients after hospital discharge within one year after the pilot program is established.	Database ideas were discussed however; due to the pilot project not being functional, the database was tabled until the pilot project begins.				

Goal 4: Decrease the Supply of Opioids		
Strategy 2: Continue efforts to decrease illicit distribution of opioids.		
Tactics	Summary of Activities	Status
4.2.a Target identified high risk areas based on available data within six months.	The group identified high risk areas and routinely patrol. Directions for Living targets these same areas for mental health and substance abuse.	1
4.2.b Establish a data sharing process for standard seizure and arrest reports across jurisdictions within six months.	Municipalities implemented daily phone calls regarding seizure and arrest reports to identify high risk areas. Additionally, the Medical Examiner's office provides information to law enforcement regarding the analysis of the drugs that are seized and this information is disseminated.	√

Goal 4: Decrease the Supply of Opioids		
Strategy 3: Reduce the demand for opioids.		
Tactics	Summary of Activities	Status
4.3.a Write a letter to elected officials and lobbyists in support of legislation to encourage prescribing of the lowest possible dose of opioid for the shortest amount of time within one month	A letter was drafted, approved by the team and sent to elected officials.	√

Goal 4: Decrease the Supply of Opioids		
Strategy 4: Continue to coordinate reduction strategies amongst law enforcement		
	agencies.	
Tactics	Summary of Activities	Status
4.4.a Identify best practices from each municipality within one year.	Best practices were identified from most municipalities and implemented county wide.	\checkmark
4.4.b Develop a public service announcement on how to report drug activity to tip lines within three months.	PSA was created by St. Petersburg Police Department and disseminated on August 31, 2018.	√
4.4.c Engage Drug Court to enroll first time offenders in intensive case management to reduce recidivism within six months.	A letter was drafted, approved by the team and sent to drug court.	√

Goal 5: Integrate and Collaborate on Data Sources		
Strategy 1: Inventory data sources needed for the Opioid Task Force		
Tactics	Summary of Activities	Status
5.1.a Create a matrix of data resources with contact information within six months.	Pinellas County Human Services received a Strategic Information Partnership grant that would be able to maintain resources. (see additional initiative section)	√
5.1.b Continue quarterly coordination with the Pinellas County Fusion Group.	PCOTF meeting updates provided at quarterly Fusion Group meetings.	1
5.1.c Identify an agency to serve as the data liaison to assist with the facilitation of data collection within Pinellas County within one month.	Pinellas County Human Services received a Strategic Information Partnership grant that would enhance data sharing. (see additional initiative section)	√

Goal 5: Integrate and Collaborate on Data Sources		
Strategy 2: Promote the use of standardized data		
Tactics	Summary of Activities	Status
5.2.a Ensure distributed data sets will include source and limitations within six months.	PCOTF members have distributed available data sets to other teams to assist with their goals. Ongoing communication and updated data sets have been provided on a request basis.	√
5.2.b Reinforce data sharing instructions to maintain data integrity within six months.	Ongoing data discussion among PCOTF members as data is shared.	

Status Indicators are as follows:



= Some progress towards meeting objective target



= Reached or surpassed objective target



= Reached objective target, ongoing

Additional Initiatives:

The following is a listing of initiatives directly or indirectly related to mental health and substance abuse and considered "best practices".

Opioid State Targeted Response (STR) Hospital-Based Pilot Program:

Overview: Florida's Opioid STR grant implemented pilot projects utilizing peer specialists to link opioid-related overdose victims to treatment. The concept is to use time spent in the emergency room/hospital to initiate buprenorphine induction and engage the individual in on-going treatment and recovery support.

The Central Florida Behavioral Health Network and Operation PAR will work with St. Anthony's Hospital to provide a physician to do medication-assisted treatment (with a DATA2000-waivered physician able to prescribe buprenorphine) to partner on this pilot.

Health Care for the Homeless CARE Team:

Overview: This program uses the model above and provides Medication Assisted Treatment, psychiatric medication evaluation, detox, short-term residential treatment and Behavioral Health and Nursing Case Management for those that have been diagnosed with co-occurring mental health and substance use conditions who are also currently experiencing homelessness.

Homeless Overdose Mitigation & Engagement (HOME) Program:

Overview: The Homeless Overdose Mitigation & Engagement (HOME) program will utilize a data driven approach to target specific locations throughout the community with high concentrations of overdoses. Many of these sites were identified as homeless shelters, transient housing, and other public locations such as bus stops where homeless individuals in Pinellas County frequent. The program will provide a street team consisting of a substance use case manager, public health coordinator, and other volunteers to conduct outreach, distribute and train on the use of naloxone, and seek engagement in treatment from individuals identified as at risk for overdose.

There is a multi-disciplinary steering committee that includes law enforcement, EMS, and others not directly funded by this program.

Pinellas County Strategic Implementation Sharing Partnership (SIP):

Overview: The goals of the program include real-time/timely data collection from key stakeholders to better articulate the current state of the problem, and improve communication for targeted outreach, enforcement, and education; cross system planning and data evaluation to better inform policy makers on targeted interventions; and to leverage resources for improved performance. Final outcomes and deliverables of the project will include an enhanced data-sharing infrastructure with key community stakeholders and partners that provide data sets on a regular, automated, and timely basis to better inform community stakeholders. Better, more timely information, will lead to enhanced education and outreach efforts, targeted law enforcement initiatives, and better coordination of services.

Intensive Training and Technical Assistance:

Overview: The Institute for Intergovernmental Research (IIR) released an opportunity on behalf of the U.S. Department of Justice, Bureau of Justice Assistance (BJA) Comprehensive Opioid Abuse Program (COAP)in partnership with the National Association of Counties (NACo) to support an eight month intensive training and technical assistance initiative designed for current COAP grantees that seek to more strongly align existing opioid initiatives in their communities and develop comprehensive and multidisciplinary approaches to more effectively respond to OUD and other emerging drug threats. The team is in the midst of strategizing on best practices and evidence-based programs.

Drug Court/Jail Diversion:

Overview: Pinellas County Adult Drug Court consists of a community partnership forged between the Sixth Judicial Circuit, State Attorney's Office, Public Defender's Office, Sheriffs' Offices, Florida Department of Corrections, local law enforcement, community substance abuse providers, and the Pinellas Board of County Commissioners. Successful completion of the 18- to 24-month Adult Drug Treatment Court plan may result in the dismissal of charges against defendants entering the program through Pre-Trial Intervention (defendants facing a first-time, non-violent, third-degree felony charge and admitted to Drug Court at the discretion of the State Attorney).

For defendants entering the Drug Court as a condition of probation (post-plea drug court), successful completion may result in adjudication being withheld and/or a reduced length of probation.

The Drug Courts exist to provide participants the opportunity to become productive, drug free members of the community. All participants are required to appear in court every 30 to 45 days for a review by the Drug Court judge.

After completion, persons who have completed treatment, remained drug free for at least one year and completed all of their requirements of Pre-Trial Intervention or probation may petition the court for a dismissal of the charges (Pre-Trial Intervention) or early termination of probation (post-plea drug court).

Project Recovery; the Endocarditis Project:

Overview: Endocarditis occurs when infectious organisms, such as bacteria or fungi, enter the bloodstream and settle in the heart. Intravenous (IV) drug users are at very high risk of acute endocarditis, because numerous needle punctures give aggressive staph bacteria many opportunities to enter the blood through broken skin. The treatment for this condition requires 6-8 weeks of antibiotics given intravenously. A person with active substance abuse should not be treated in an outpatient fashion due to the use of a peripherally inserted central catheter (PICC) line.

The Baycare Health System and Operation PAR conducts a program where an IV drug user with Acute Endocarditis is stabilized in the hospital setting for 2-4 weeks. They are then released to Op PAR's residential program where Baycare Home Health provides infusions as needed and a physician visit 2x per week. While in the residential program, the individual has access to drug treatment group sessions and other services not

typically done in the hospital. After the end of the antibiotic treatment, the client is evaluated for possible longer-term care and MAT. The cost savings to the hospital system are enormous, while the individual starts drug treatment during the medical treatment.

Overdose Data to Action Grant:

Overview: The Overdose Data to Action (OD2A) grant from the Centers for Disease Control and Prevention (CDC) is an opportunity for state and local public health partners to improve how surveillance and prevention efforts are mobilized to address the opioid and all-drug overdose crisis. The grant will fund projects focused on increasing timeliness of surveillance data, building state and local capacity to implement evidence-based research, and adds new work focused on linkages to care and innovative strategies such as pilot studies focusing on community paramedicine and school health.

Pinellas CHD proposes to hire a full-time strategic planner to focus solely and exclusively on this project. The strategic planner will ensure community and broad-based work is directed to best practices and evidence-based models seen throughout the country.

Cooperative Agreement to Benefit Homeless Individuals (CABHI)

Overview: This collaboration between providers such as Westcare, Operation PAR and Directions looks at individuals with a history of chronic illness, as well as serious mental illness, serious emotional disturbance, substance use disorders (co-occurring included) and allows for in home counseling and treatment. The case management is intensive and brings the care to the client.