

State Health  
Improvement Plan

# STATE HEALTH IMPROVEMENT PLAN

## PROGRESS MEETING

January 28, 2025

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# Welcome

Mirine Richey, MPH, IBCLC  
Meeting Facilitator



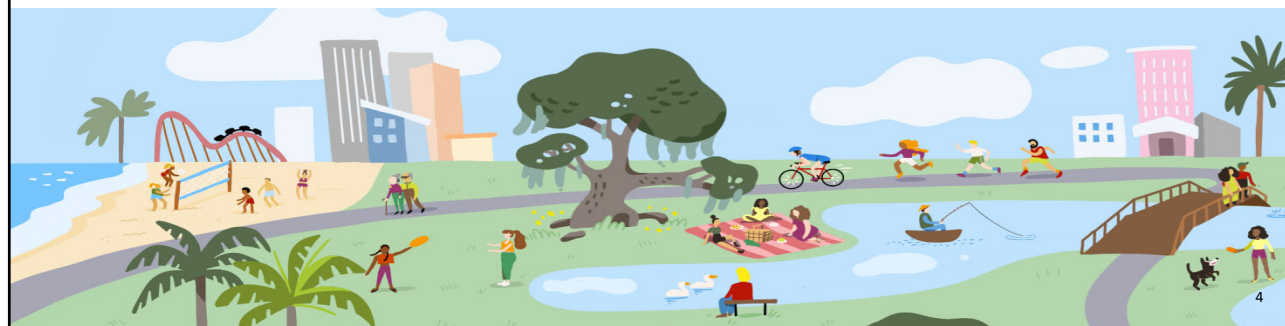
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# Steering Committee Partners



# Opening Remarks

Joseph A. Ladapo, MD, PhD  
State Surgeon General  
Florida Department of Health



# State Health Improvement Plan Updates



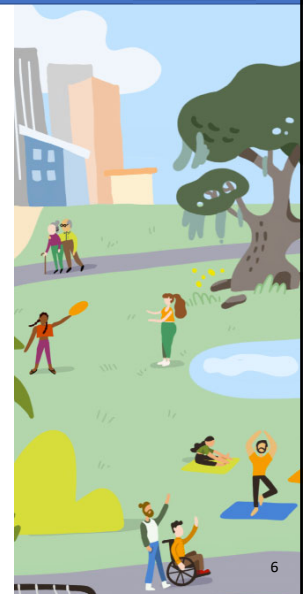
Emma Spencer, PhD, MPH  
Director, Division of Public Health Statistics  
and Performance Management  
Florida Department of Health



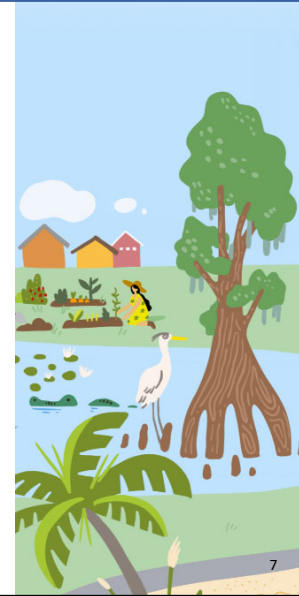
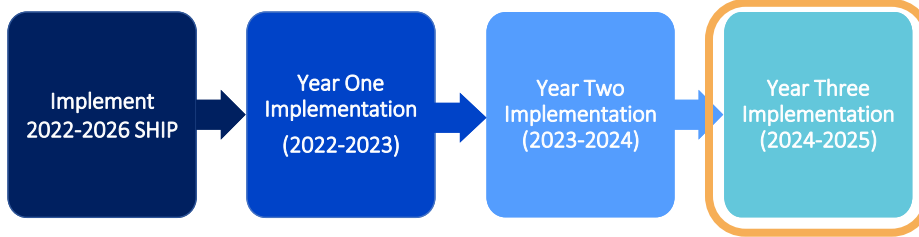
## State Health Improvement Plan (SHIP) Resources



- SHIP Progress Meeting Presentation
- SHIP Proposed Goals and Objectives Document
- SHIP Data Source Reference Document
- Data Subcommittee One-Pager
- SHIP Steering Committee Charter
- [FloridaSHIP.org](http://FloridaSHIP.org)



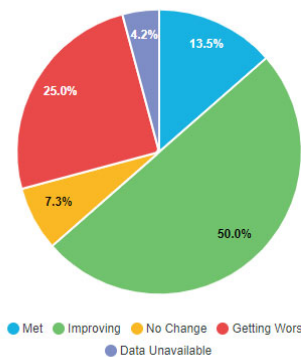
# SHIP Implementation Cycle Review



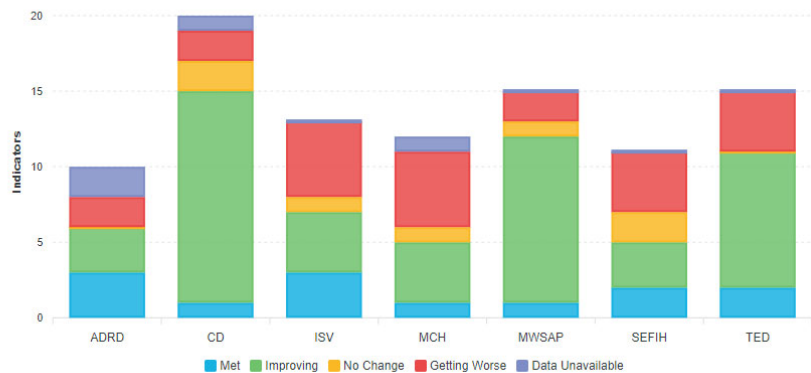
# Overall SHIP Objective Performance



The SHIP Indicator Performance pie chart provides an overall SHIP performance status across all of the Priority Areas.



The SHIP Indicator Performance bar chart presents a detailed view of progress across each Priority Area, with individual bars divided into segments that show the proportion of indicators within that Priority Area.



# SHIP Data Subcommittee

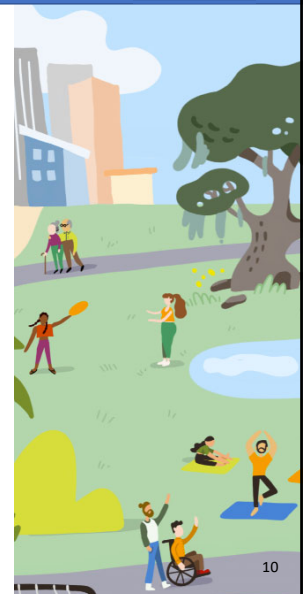


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# SHIP Website Updates



- [FloridaSHIP.org](http://FloridaSHIP.org)
  - Priority Area Member Highlights
  - SHIP News and Events
  - SHIP Data Dashboard
  - SHIP Member Portal



## State and Local Alignment



- Create alignment of priorities between state plans and community plans. For example:
  - Human trafficking efforts
  - Youth-health initiatives
- Strengthen programmatic real-time reporting for health risks and outcomes.
- Encourage partnerships and identify any joint funding opportunities for local community-based organizations.



## Next Steps



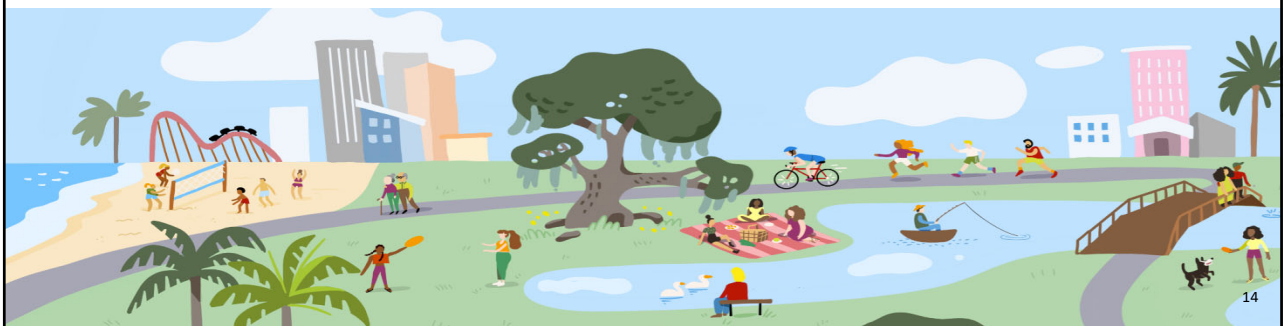
- Create a communication plan to increase local stakeholder awareness of the SHIP.
- Strategically align state and local efforts to better address access to resources.
- Provide statewide training to SHIP partners to improve efforts in community assessments and planning.
- Coordinate efforts to improve data sharing and reporting as recommended by the SHIP Data Subcommittee.



# SHIP Steering Committee Meeting Cycle Timeline



## Guest Presentations Cutting Edge Youth Health Initiatives





# Spotlight

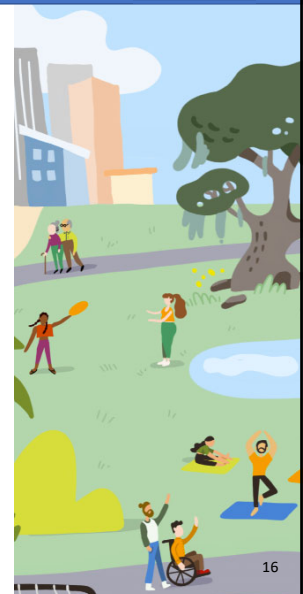
William Hardin  
Director of Services, Policy, and Contracts  
Office of Substance Abuse And Mental Health  
Department of Children and Families



## Overview

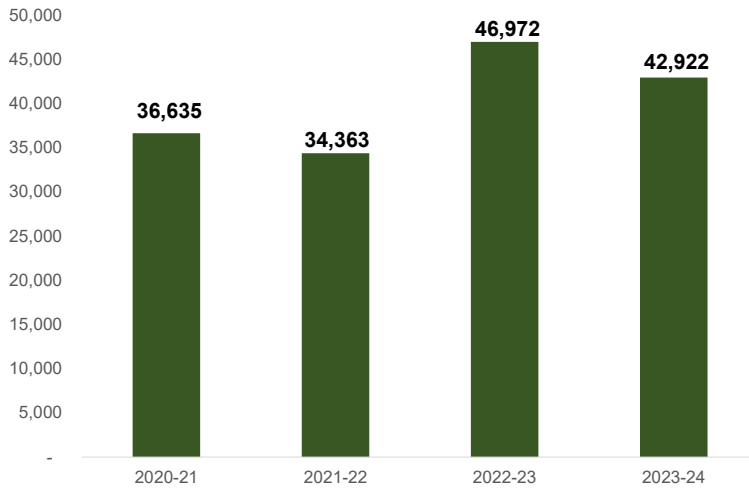
As the single state agency for substance abuse, mental health, and opioid treatment, the Department of Children and Families is responsible for:

- Administering a statewide behavioral health system of care;
- Laying the foundation for the behavioral health system of care through policy development; and
- Serving as the state's behavioral health strategist and think-tank.



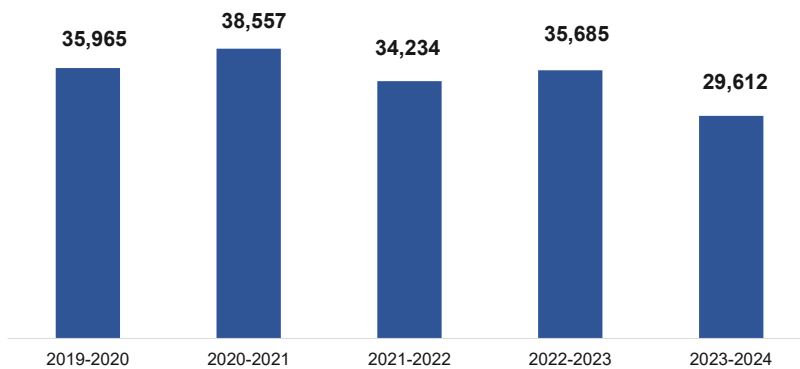


## Youth Served in Substance Abuse And Mental Health



- 17% increase in the past four fiscal years
- Normal fluctuations in the number of individuals served

## Youth Involuntary Baker Act Examinations



- 17% decrease in the past five fiscal years
- 23% decrease in the past four fiscal years

## The Facts. Your Future.



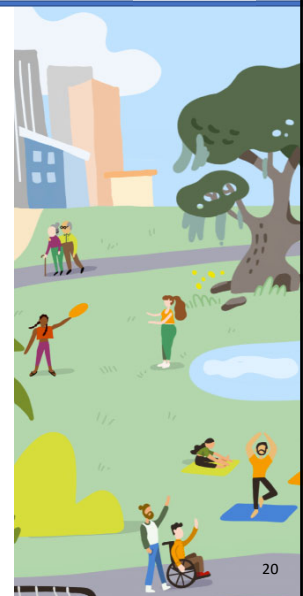
- *The Facts. Your Future.* provides an interactive space for schools to educate their students on the consequential impacts of substance abuse.
- Schools statewide were provided the necessary resources to host their own assemblies, alongside collateral campaign materials to continue essential conversations throughout the school year.
- **FY 2023-2024 Highlights**
  - At least one school assembly was hosted in each county.
  - A total of 48,749 students were impacted.



## Community Action Treatment



- Community Action Treatment (CAT) teams are an integrated service delivery approach that comprehensively address the needs of young persons (and their family) with a mental health diagnosis and complex needs such as a history of hospitalizations, involvement with juvenile justice, or school challenges.
- **FY 2023-2024 Highlights**
  - 69 CAT Teams
  - 3,444 individuals served
  - 98% diverted from juvenile justice involvement



## Family Intensive Treatment (FIT)



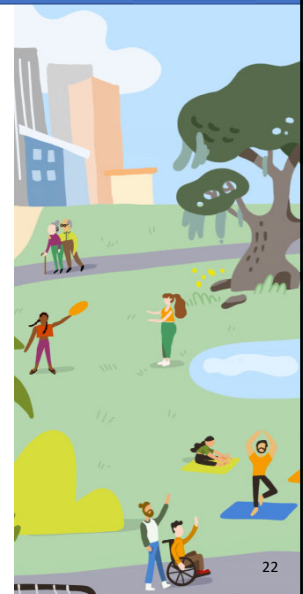
- Through the integration of child welfare and behavioral health practice models, FIT is designed to collaboratively engage and assess the entire family at an intense customized level; integrate care to the entire family unit and provide immediate access to services to treat behavioral health needs.
- **FY 2023-2024 Highlights**
  - 1,689 individuals served
  - 76% individuals enrolled in the program engaged in treatment for 90 days or longer.



## Mobile Response Teams



- Mobile Response Teams (MRT) are available 24 hours a day, 7 days a week and provide clinical and peer professionals to respond during a crisis and remain in contact until the individual is connected to other supports and services.
- **FY 2023-2024 Highlights**
  - 31,509 calls received
  - 5,550 calls originating from schools (12% decrease from FY 2020-2021)
  - 80% diversion rate from involuntary Baker Act.



## Children's Short-Term Residential Treatment



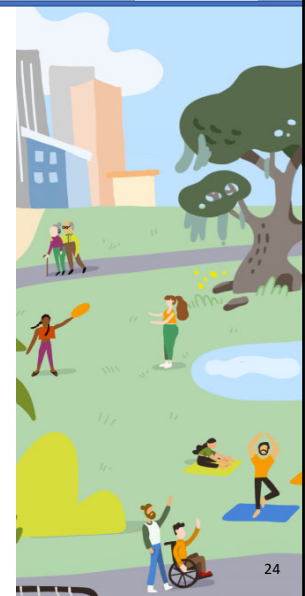
- Short-term Residential Treatment (SRT) facilities offer high level of care for those who are no longer experiencing a psychiatric emergency but who are still in need of additional around-the-clock inpatient treatment prior to community placement.
- In 2024, the first children's SRT opened in the Southern Region.
- **Highlights**
  - 38 admissions since inception
  - 2.6% 30-day readmission rate



## Office Of Children's Behavioral Health Ombudsman



- HB 7021 (2024) created the Office of Children's Behavioral Health Ombudsman to:
- Be a resource to identify and explain relevant policies or procedures to children, young adults, and their caregivers.
- Receive complaints from children and young adults about placement, care, and services and assist in mediating such concerns.
- Provide recommendations to the Department to address systemic problems that are leading to complaints from children and young adults.
- The Office consists of two staff:
  - Ombudsman
  - Case Manager



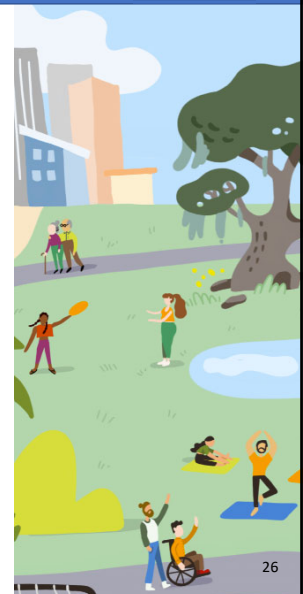
# Spotlight

Peggy Aune, EdD  
Vice Chancellor for Strategic Improvement  
Florida Department of Education (FDOE)



## School Health Services Purpose

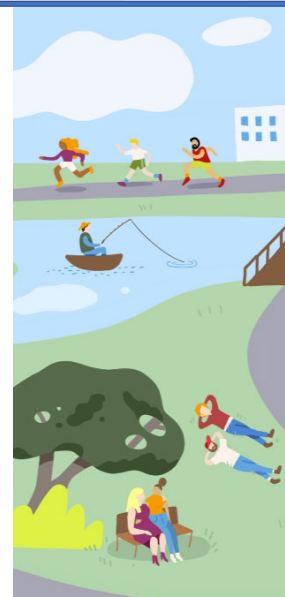
- [Section 381.0056, F.S.](#), and [Chapter 64F-6, Florida Administrative Code \(F.A.C.\)](#) – provide the statutory authority and rules to plan, implement and monitor school health services provided in Florida schools.
  - School health services are intended to minimize health barriers to learning.
  - Services are provided in accordance with a local school health services plan, [s. 381.0056\(4\)\(a\), F.S.](#), and jointly developed by the county health department (CHD), school district, school health advisory committee (SHAC) and public/private partners.



## School Health Services Plan



- “School Health Services Plan” – the document that describes the services to be provided, the responsibility for the provision of the services, the anticipated expenditures to provide the services and evidence of cooperative planning by local school districts and CHDs.
- The plan includes, at a minimum, a plan for the delivery of school services; accountability and outcome indicators; strategies for assessing and blending financial resources (both public and private); and establishment of a data system.

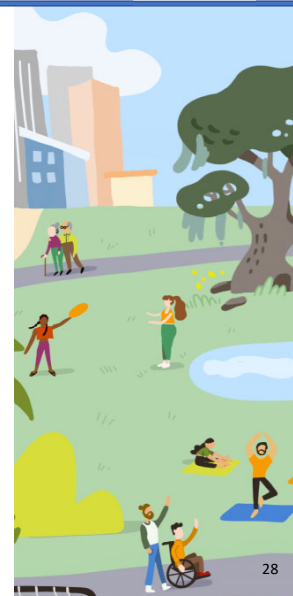


## Local School Health Services Plan



The local school health services plans include, at a minimum, the following components:

- A plan for the delivery of those services listed in ss. [381.0056\(4\)\(a\)-\(b\)](#), [381.0057](#), and [402.3026](#), F.S.
- Budget and staffing information
- Number and levels of public and non-public schools and number of students served
- Communicable disease policies
- Immunization policies that, at a minimum, include immunization requirements for schools



## Local School Health Services Plan, cont.



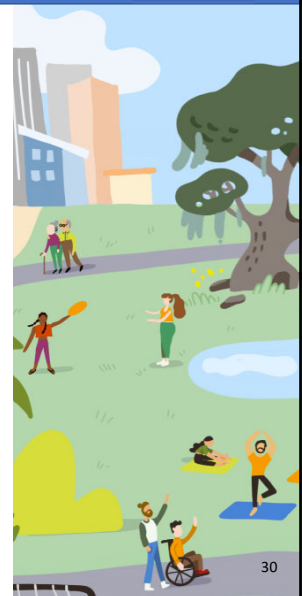
- Initial school entry health examination policy
- Health services reporting procedures
- Advisory committee activities and membership
- School district and county public health unit personnel responsible for coordinating health services
- Describe employing or contracting for all health-related staff and the supervision of all school health services personnel regardless of funding source.



## Mental Health Assistance Programs (MHAP)



- [Section \(s.\) 1006.041, F.S.](#) – Each school district must implement a school-based mental health assistance program that includes:
  - Training classroom teachers and other school staff in detecting and responding to mental health issues.
  - Connecting children, youth and families who may experience behavioral health issues with appropriate services.





## MHAP Plan



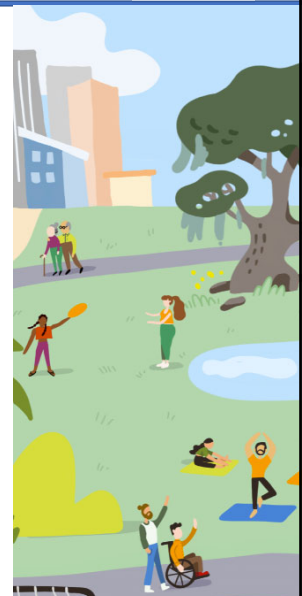
- Plans must be focused on delivering evidence-based mental health care treatment to children and include:
- A multi-tiered system of supports to deliver evidence-based mental health care assessment, diagnosis, intervention, treatment and recovery services to students with one or more mental health or co-occurring substance abuse diagnoses and students at high risk of such diagnoses.
- The provision of services must be coordinated with a student's primary mental health care provider and other mental health providers involved in the student's care.



## MHAP Plan, cont.



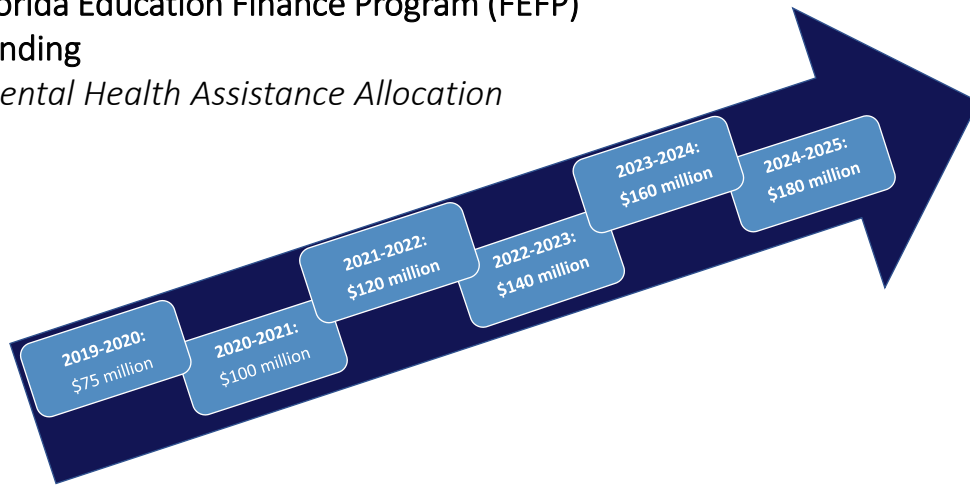
- Direct employment of school-based mental health services providers to expand and enhance school-based student services and reduce the student-to-staff ratio to better align with nationally recommended ratio models.
- The providers shall include, but are not limited to, certified school counselors, school psychologists, school social workers and other licensed mental health professionals.



## Significant Investments in Mental Health



Florida Education Finance Program (FEFP)  
funding  
*Mental Health Assistance Allocation*



## Significant Investments in Mental Health



# Significant Investments in Mental Health



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# Significant Investments in Mental Health

# HOPEFLORIDA

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# FDOE Hope Florida – A Pathway to Prosperity



*Uniting communities through Hope Navigators to guide Floridians on an individualized path to prosperity, economic self-sufficiency and hope.*

Who benefits from A Pathway to Prosperity?	Services offered by Hope Navigators
<ul style="list-style-type: none"><li>• Public benefit to customers statewide</li><li>• Children aging out of foster care</li><li>• Pregnant mothers contending with substance use disorders</li><li>• Parents and families who need assistance</li></ul>	Identifying goals and barriers Referrals to local, community-based partners One-on-one support to develop a plan to achieve economic-self sufficiency



## Connect with a Hope Navigator

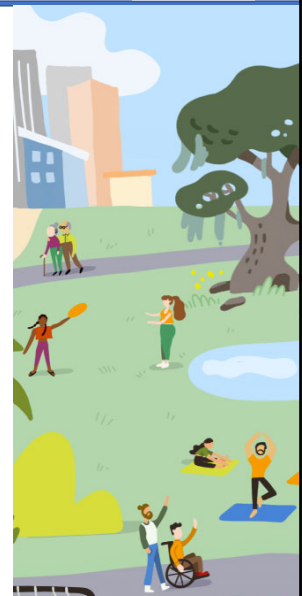


Hope Navigators in the Bureau of Exceptional Education and Student Services (BEES)

850-245-0475

Hope Navigator:

833-GET-HOPE (438-4673)



# Spotlight

Tracy L. Shelby, Ph.D.  
Director of Mental Health/Substance Abuse  
Florida Department of Juvenile Justice



## Spotlight: Department of Juvenile Justice

- The Department of Juvenile Justice (DJJ) has established positions within the Office of Health Services (OHS) to oversee medical and mental health services for youth committed to DJJ custody.
- These positions provide clinical technical assistance and training to the contracted medical and mental health staff providing services to our youth.
- We partner with our providers to ensure necessary and appropriate services are provided.

## Spotlight: Department of Juvenile Justice



### The population we serve:

DJJ youth in custody frequently present with an unknown history initially. Youth in care frequently have many complex issues that come to awareness over time to include:

- Complex trauma (e.g., physical abuse, sexual abuse, neglect, loss of parent, familial addiction(s), witnessing violence/death, DV)
- Low SES
- Learning disabilities or other ESE needs

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## Spotlight: Department of Juvenile Justice



### The population we serve continued:

- Mild to severe mental illness (e.g., ADHD, PTSD, DMDD, Bipolar Disorder, psychotic disorders, SUD)
- Developmental Disability, primarily mild intellectual disability or Autism Spectrum Disorder

**Note:** Many DJJ youth have not been properly diagnosed/treated prior to DJJ contact.

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## Spotlight: Department of Juvenile Justice



- Mental Health and Substance Abuse (MHSA) services are offered throughout the DJJ continuum of care: prevention, detention, probation, and residential services.
  - Includes developmental disability and Juvenile Sexual Offender (JSO) treatment services.
- Screening, assessment, evaluation, individual therapy, group therapy, family therapy, crisis intervention, suicide prevention and supportive services are offered at various levels of care.
- Psychiatric services are provided to youth as needed.

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## Spotlight: Department of Juvenile Justice



### DETENTION CENTERS

What do they look like?

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## Spotlight: Department of Juvenile Justice



Residential Specialized Treatment Services include the following:

- Mental Health Overlay Services (MHOS);
- Substance Abuse Overlay Services (SAOS);
- Juvenile Sexual Offender Treatment Services (JSO);
- Intensive Mental Health Programs (IMH);
- Comprehensive Services – Dual Diagnosis Programs (Comprehensive);
- Borderline Developmental Disability programs (BDD/BIF); and
- Developmental Disability Programs (DD).

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## Spotlight: Department of Juvenile Justice



### Residential Commitment Programs

What do they  
look like?



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## Spotlight: Department of Juvenile Justice



### Probation

- To receive services through probation, the youth must be under the Department's jurisdiction as disposed by the court.
- When a treatment need exists, youth who are under supervision by Probation receive mental health and substance abuse treatment from outpatient DJJ Providers in the youth's community.

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## Spotlight: Department of Juvenile Justice



### Examples of outpatient treatment services include:

- Mental health and substance abuse assessment and treatment (individual, group and family therapy)
- Psychosexual Evaluation and Juvenile Sexual Offender Treatment Services (PEJSOT)
- Comprehensive Evaluations (completed by contracted mental health providers for youth pending residential commitment)
- SNAP Youth Justice and Community-Based Day Treatment (low risk commitment programs)
- Redirections Therapy (FFT, CBT, Parenting with Love and Limits)
- An array of other delinquency programs that offer MH/SA referral services

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## Spotlight: Department of Juvenile Justice



### Innovation - OHSMH Staffing Pattern:

- We have had licensed mental health staff to provide support to our 21 detention facilities since OHS was created, 2005 or so.
- In 2020 we were given licensed mental health staff to provide support to residential facilities.
- In 2024 we were given two licensed mental health staff positions to provide support to our probation staff and clinical providers.

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## Spotlight: Department of Juvenile Justice



### Innovation - OHSMH Staffing Pattern:

- Probation is our largest area within the department.
- We have over 250 contracts for services.
- We have many HQ and statewide probation staff who act as case manager as well the gatekeeper to treatment services.
- With the two new positions we look forward to expanding our clinical support of the numerous probation staff and providers. We also hope to spearhead the development of a statewide Autism Protocol for youth on the spectrum.

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## Spotlight: Department of Juvenile Justice



### What is Autism?

- Persistent deficits in social communication and social interaction across multiple contexts: social-emotional reciprocity, nonverbal communicative behaviors, developing, maintaining, and understanding relationships.
- Restricted, repetitive patterns of behavior, interests, or activities: (2) Insistence on sameness, inflexible adherence to routines, or ritualized patterns or verbal nonverbal behavior; Highly restricted, fixated interests that are abnormal in intensity or focus; and Hyper- or hypo-reactivity to sensory input or unusual interests in sensory aspects of the environment.

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## Spotlight: Department of Juvenile Justice



### Innovation: Establishing a Statewide Autism Protocol for Courts – Why This is Important

- Definition of Autism – A lifelong neurological, developmental disability that causes a variety of challenges with communication, socialization, behavior and learning.
- ASD behaviors present themselves on a spectrum from significant communication, socialization, behavior challenges to displaying highly adaptive academic and functional skills.
- Range from mild to severe and debilitating (high or low functioning).

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## Spotlight: Department of Juvenile Justice



### Establishing an Autism Protocol for Courts:

- With the assistance of Retired Judge Ross Goodman, Santa Rosa County in Florida's 1st Circuit implemented a Diversion Program for youth on the ASD spectrum who have been charged with a crime.
- Children may require alternative services with a goal of preventing further involvement into the judicial system.
- Implement a system, on a case-by-case basis, that promotes children with autism to participate fully in an appropriate court proceeding.

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## Spotlight: Department of Juvenile Justice



### Establishing an Autism Protocol:

- With cooperation of State Attorney, PD, school district, community service provider, local law enforcement agencies and local community autism resources a diversion system was devised. Developed MOU.
- State Attorney and PD consult with others engaged and develop an appropriate remedy for a specific child for a specific case.
- If child completed the remedy, charges were dropped if not, back to court to fashion an appropriate remedy.

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## Spotlight: Department of Juvenile Justice



### Autism Case Example from Retired Judge Ross Goodman:

- Youth charged with battery of another youth at school with no apparent reason. Suddenly lashed out at a student sitting beside him.
- Sudden flashing of incandescent lights.
- Mother reported he was especially sensitive to lights and lighting.
- Is this a misdemeanor battery? Yes. Was the youth competent? Yes. Was bx inappropriate? Yes. Was bx illegal? Yes.
- Special approach for youth on the spectrum – Diversion.

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## Spotlight: Department of Juvenile Justice



### DJJ Autism Case Example - James (Level II ASD)

- 15 y/o youth admitted to a detention center with noticeable symptoms of Autism Spectrum Disorder (ASD) that was undiagnosed.
- Most charges were various forms of battery or assault (autism tantrums) that were not recognized as classic ASD symptomology.
- Department of Children and Families and Agency for Persons with Disabilities services were attempted. However, the youth's behaviors were too severe for him to be accepted into a non-DJJ placement.

*Note: Pseudonyms and certain specific protected health information have been altered to protect the privacy of this individual.*

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## Spotlight: Department of Juvenile Justice



### Why is Establishing an Autism Protocol Important?

Our numbers - FY 24/25 = 43, FY 23/24 = 99, FY 22/23 = 78,  
FY 21/22 = 21, FY 20/21 = 22, FY 19/20 = 16, 12/2018 - 6/2019 = 21

**\*Grand total December 2018 to December 2024 = 303**

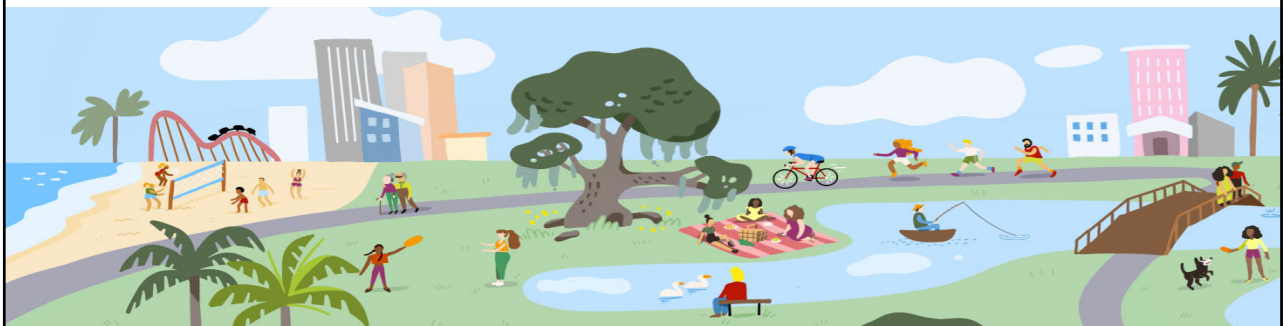
*\*Note: Some youth have repeated admissions/entries.*

- OHS to champion expansion of Autism Protocol and Diversion Program with the assistance of our Probation and Community Intervention unit. New positions are paramount.

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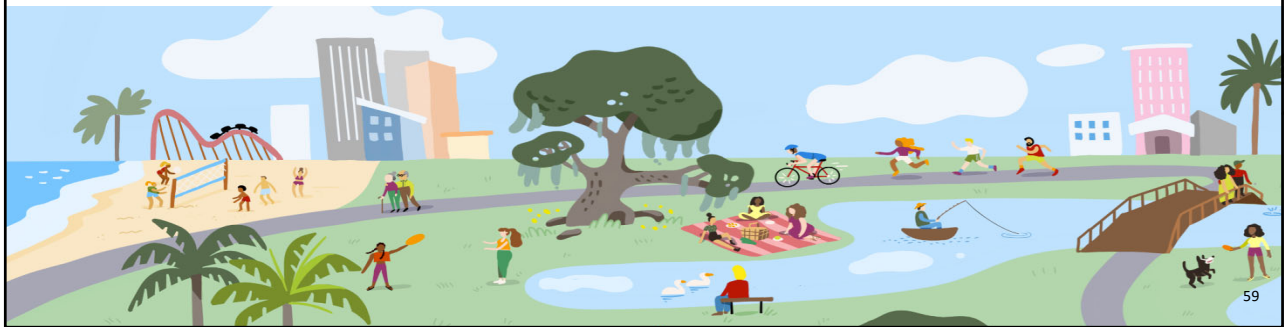


## Questions?

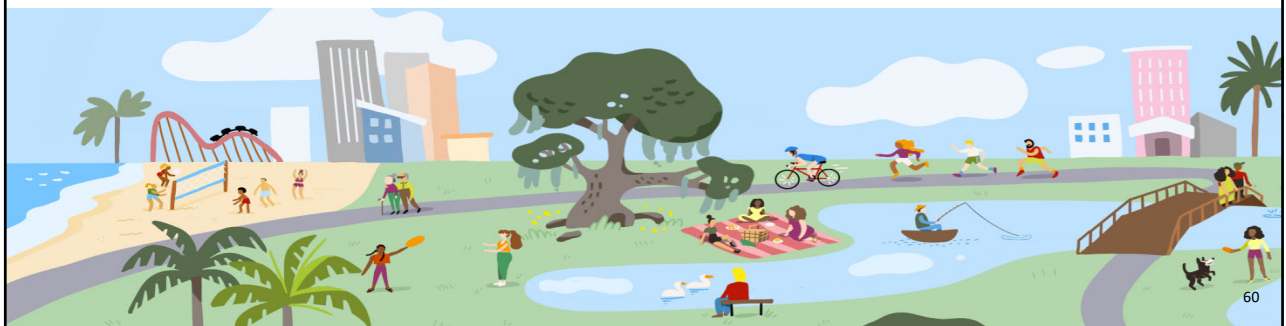




# Break



## 2022-2026 State Health Improvement Plan Priority Area Workgroup (PAW) Progress



# SHIP Priority Area Workgroups



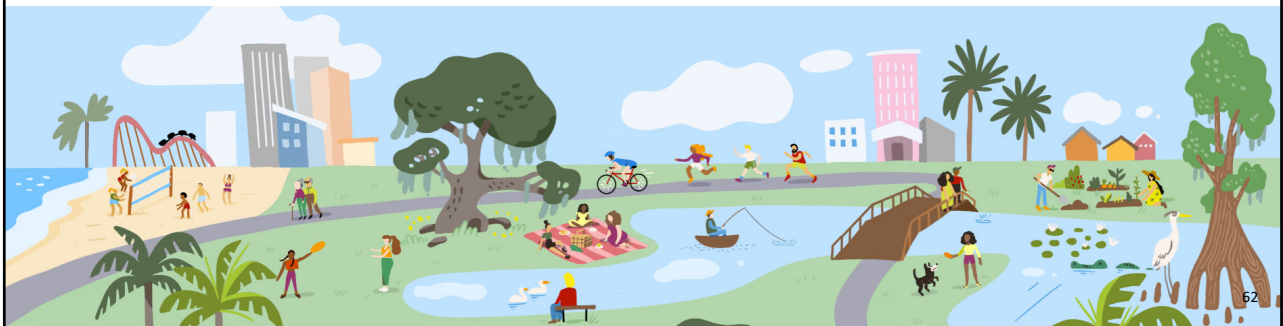
# Alzheimer's Disease and Related Dementias (ADRD) Priority Area Workgroup Chairs



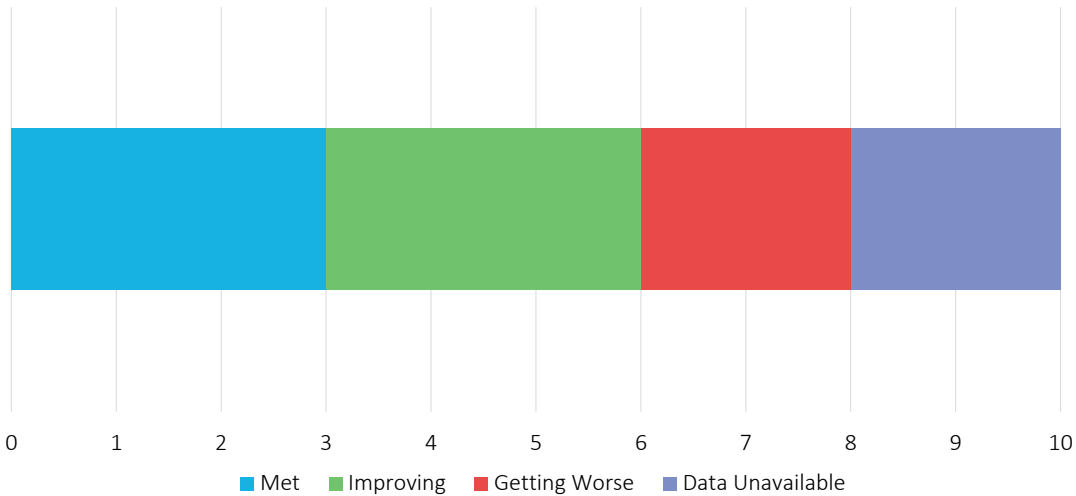
Myasha Graham  
SHIP and ADAC Coordinator  
Florida Department of Elder Affairs



Jennifer Braisted  
Director of Government Affairs  
Alzheimer's Association



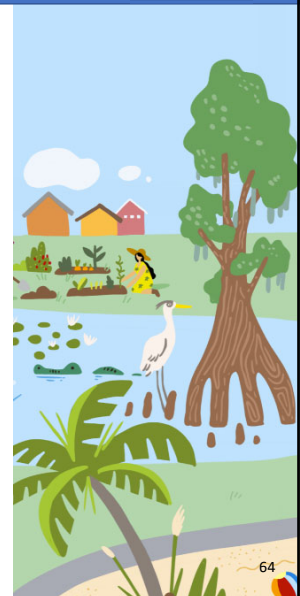
# Alzheimer's Disease and Related Dementias



# Alzheimer's Disease and Related Dementias

## Major Successes

- Finalized the ADRD Resource Guide and Caregiver Toolkit.
- Began development of multilingual versions of resources and virtual symposiums.
- Expanded and diversified distribution lists, integrating new partners such as disability organizations, to enhance resource accessibility and reach.
- Secured significant funding and legislative support, including the Health Resources and Services Administration Grant for workforce training and the passage of House Bill 801 (2024) for law enforcement training.
- Developed comprehensive training libraries and strategic collaborations with Dementia Care and Cure Initiatives (DCCI) to support healthcare professionals and caregivers.
- Enhanced the tracking and monitoring of training efforts through a clearinghouse, improving data collection and evaluation post-training.



# Alzheimer's Disease and Related Dementias

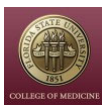


## Next Steps

- Finalize and launch the ADRD Resource Guide and Caregiver Toolkit with comprehensive distribution plans and multilingual versions.
- Advance training and education initiatives, including collaborations with DCCI, and strengthen local and regional partnerships.
- Refine and implement strategies for community awareness, business education, and respite programs, adapting based on feedback and developments.



# Alzheimer's Disease and Related Dementias



**Nicolette Castagna, LMHC, MPH, CDP**  
GWEP Community Engagement Lead  
Department of Geriatrics  
Florida State University  
College of Medicine



# Chronic Diseases and Conditions Priority Area Workgroup Chairs

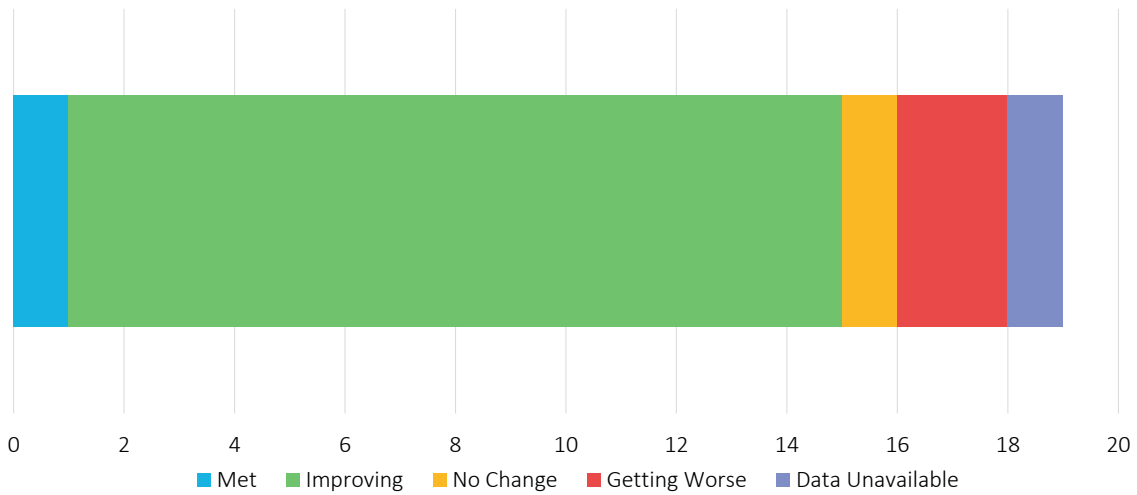


Christopher R. Cogle, MD  
Chief Medical Officer  
Agency for Health Care Administration

Tara Hylton, MPH  
Chief, Bureau of Chronic Disease Prevention  
Florida Department of Health



# Chronic Diseases and Conditions

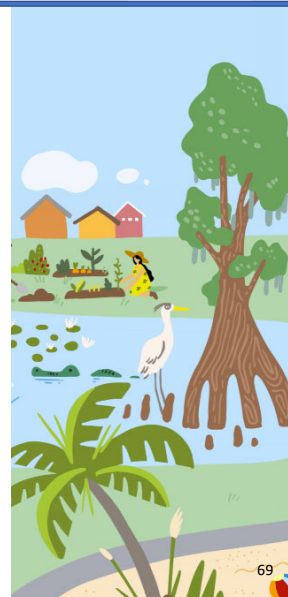


# Chronic Diseases and Conditions



## Major Successes

- Tobacco Free Florida promoted Quitline via Healthline, resulting in 450 new enrollments.
- The Healthy Heart Ambassador Program was implemented in 15 county health departments, improving referrals and enrollment for better blood pressure control.
- Live Healthy Legislation, s. 381.4019, Florida Statutes
- Nova Southeastern University received funding to place dental residents and a faculty member in Suwannee and Lafayette county health departments.
- The School-Based Sealant Program expanded to 25 schools with new funding.
- In June 2024, Brevard, Leon, and Volusia counties enhanced breast cancer screening with three Mobile Mammography Van (MMV) events, screening 83 women.



# Chronic Diseases and Conditions



## Next Steps

- Integrate SHIP data into workgroup meetings.
- Recruit advisory council chairs to form a Cardiovascular Advisory Council addressing treatment and prevention gaps in cardiovascular disease and hypertension.
- Implement Chronic Disease Management Programs and Performance Improvement Projects in new Statewide Medicaid Managed Care plans beginning 2025.
- Develop a “Dear Provider” letter to reengage health systems and identify new referral coordination staff at primary care centers.
- Extend the Florida Breast and Cervical program’s Statewide MMV Provider Pilot Project into the upcoming fiscal year.





# Chronic Diseases and Conditions



**Catherine Bridges, DMD**  
Executive Director  
Public Health Dental Program  
Florida Department of Health



**Florida Cancer Control  
& Research Advisory Council**



**Carolina Gutierrez, PhD**  
Associate Director of the Florida  
Stroke Registry  
University of Miami



# Injury, Safety, and Violence (ISV) Priority Area Workgroup Chairs



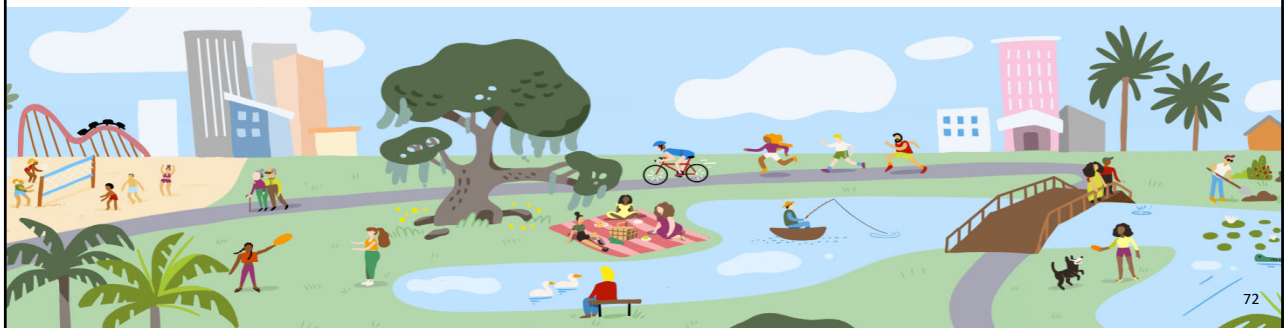
**Joseph D. Pepe, EdD, MSA**  
Health Officer

Florida Department of Health in Charlotte County

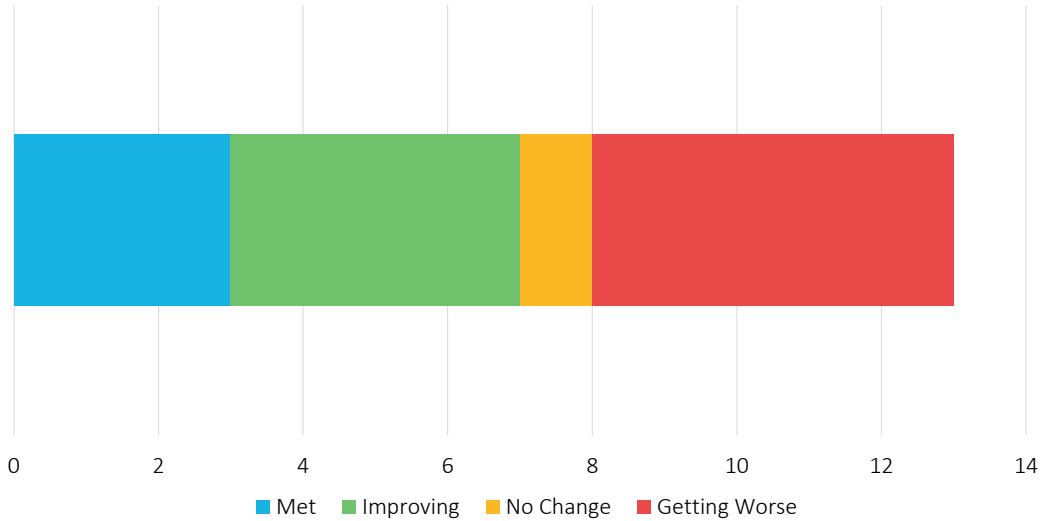


**Robert D. Karch, MD, MPH, FAAP**  
Health Officer

Florida Department of Health in Orange County



# Injury, Safety, and Violence



# Injury, Safety, and Violence



## Major Successes

- The Florida Occupant Protection Coalition and Safe Kids Florida certified 466 technicians, through the provision of 46 courses by June 2024, exceeding the goal of 450 technicians.
- Safe Kids Treasure Coast completed the Sports Safety Program and distributed 37,010 bicycle helmets statewide in partnership with the Pedestrian and Bicycle Safety Coalition.
- Water Safety education reached 161,274 Floridians through classroom education, community events, virtual videos, and swim lessons.
- The Florida Falls Prevention Coalition expanded education and interventions to reduce falls among older adults.
- The Florida Council Against Sexual Violence trained 84 nurses in basic and advanced sexual assault through the Sexual Assault Nurse Examiner courses.



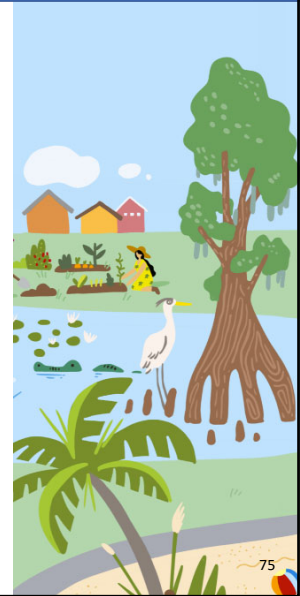


# Injury, Safety, and Violence



## Next Steps

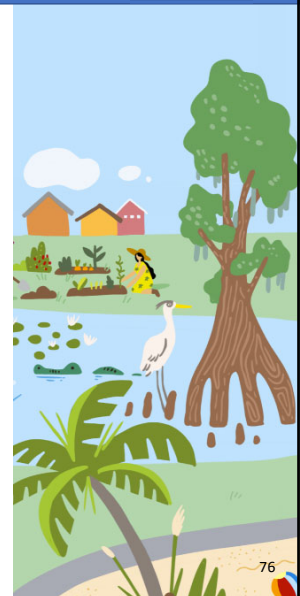
- Safe Kids Coalition Coordinators and partners will develop a statewide social media campaign to expand caregiver education for the Sudden Unexpected Infant Death (SUID) Campaign.
- The ISV workgroup will create mockups of Adverse Childhood Experiences (ACEs) infographics targeting professionals, policymakers, parents, and youth.
- The Florida Falls Prevention Coalition will seek first responders' participation to replicate Pinellas County's "Prevent the Fall, Prevent the Call" program statewide.
- The Department of Health, Violence and Injury Prevention Section will provide mini-grants for human trafficking prevention activities, including partnerships with local law enforcement.
- The ISV workgroup will recruit partners to enhance traumatic brain injury data collection and expand the FL Health CHARTS profile.



# Injury, Safety, and Violence



**Ronda Cerulli**  
Director of the Safe Kids Treasure Coast Program  
Florida Department of Health in St. Lucie County



# Maternal and Child Health Priority Area Workgroup Chair

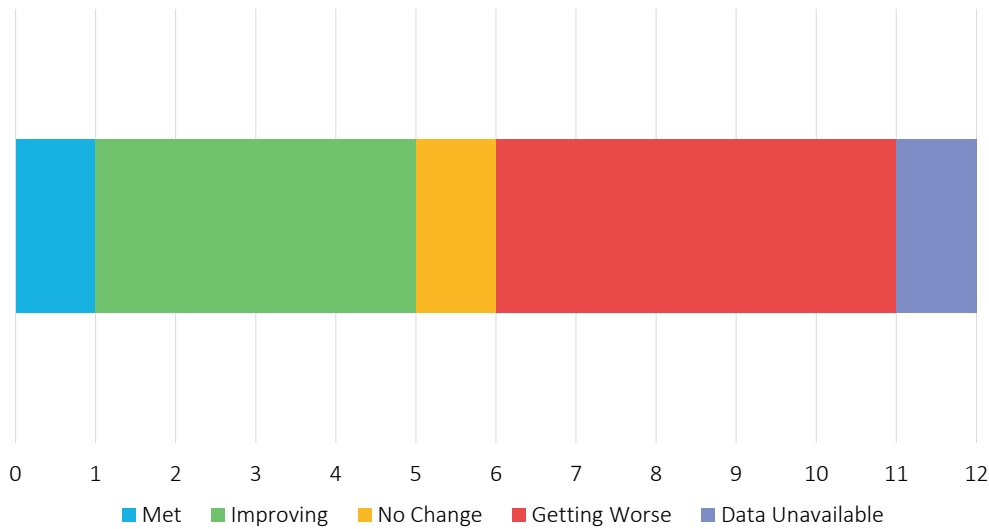


Joni Hollis MSN, RN, CNL, CCM  
Bureau Chief, Specialty Programs  
Division of Children's Medical Services

Miguel Venereo MD, FACOG, CPP  
Sr. Vice President, CMO  
Community Care Plan



# Maternal and Child Health

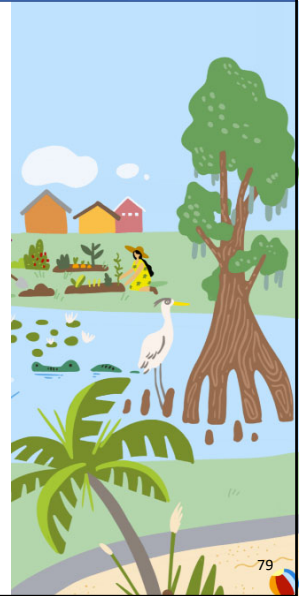


# Maternal and Child Health



## Major Successes

- The University of Central Florida - Advancing Resources to Change Healthcare (HealthARCH) advanced healthcare transformation through key initiatives and pilot programs in FY 2023-24.
- The Florida Department of Health's Children and Youth with Special Health Care Needs (CYSHCN) Program held Family Focus Workgroups to promote equal access to medical care for underserved populations.
- The Florida Pediatric Mental Health Collaborative began implementing a collaborative care model for behavioral health.
- Over 40% of births in Florida occurred at hospitals verified by The Joint Commission and American College of Obstetricians and Gynecologists, Levels of Maternal Care program in partnership with the Florida Perinatal Quality Collaborative (FPQC).



# Maternal and Child Health



## Major Successes, cont.

- FPQC's Postpartum Access and Continuity of Care (PACC) Initiative improved Maternal Discharge Risk Assessments to 85%, post-birth warning sign education to 91%, and early postpartum visits to 61%.
- FPQC's Pregnancy-Related Optimal Management of Hypertension (PROMPT) initiative launched in October 2024, focusing on evidence-based hypertension management in pregnancy.

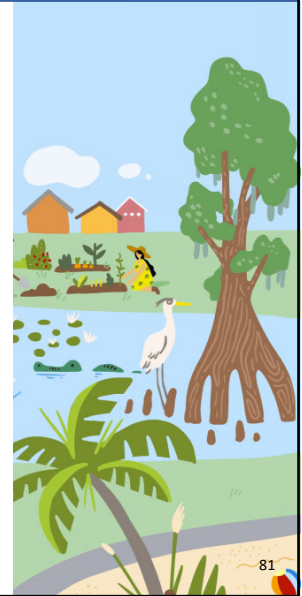


# Maternal and Child Health



## Next Steps

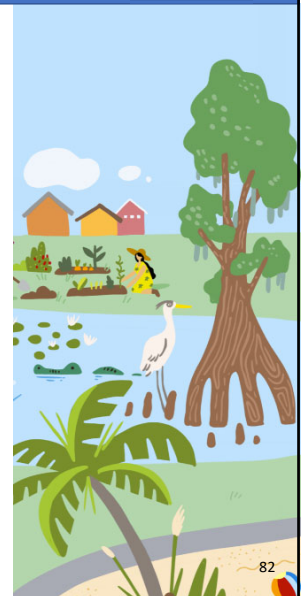
- Continue collaborations with University of Central Florida-HealthARCH to create and recruit a pipeline of providers for patient-centered medical home (PCMH) transformation.
- Continue on-going efforts to identify and recruit PCMH and primary care providers to increase access to care for CYSHCN in underserved areas.
- Continue to build out the model of integrated collaborative care support through implementation of additional Behavioral Health Hubs.
- Engage with dental health professional networks and make presentations at relevant events.
- Complete the comprehensive needs assessment for the Title V Maternal and Child Health Block Grant.



# Maternal and Child Health



## Florida Perinatal Quality Collaborative



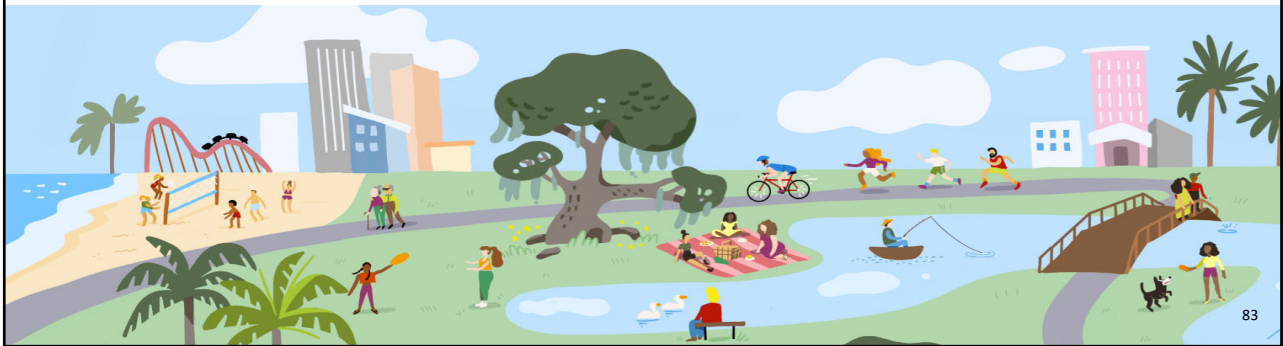
# Mental Well-being and Substance Abuse Prevention Priority Area Workgroup Chairs



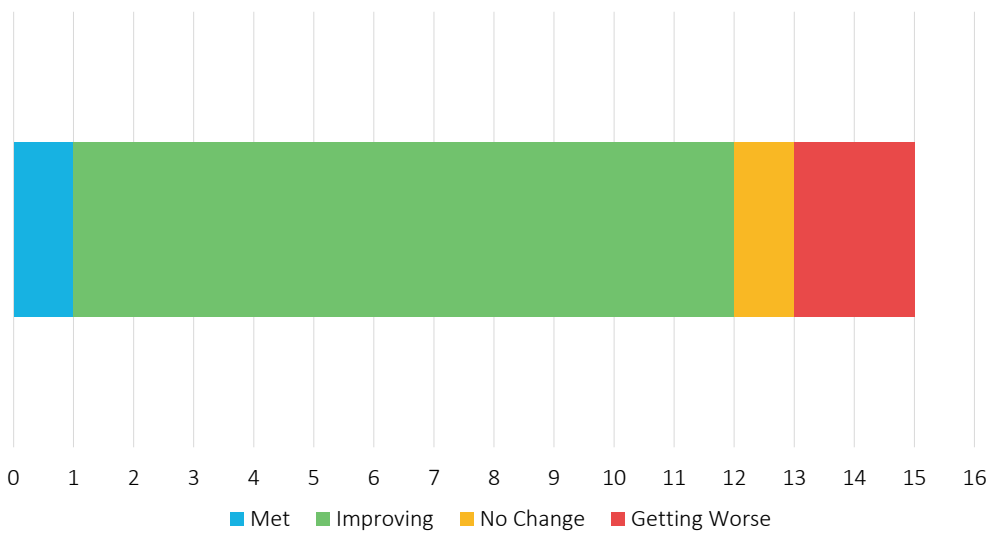
Jennifer Johnson, MPH  
Senior Director, Public Policy  
Florida Behavioral Health Association



Lisa Spector, MD, FAAP  
Developmental Behavioral Pediatrician  
Nemours Children's Health



# Mental Well-being and Substance Abuse Prevention

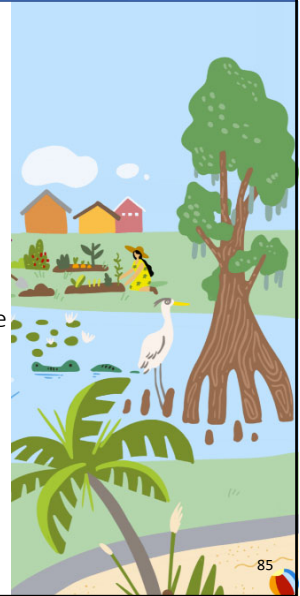


# Mental Well-being and Substance Abuse Prevention



## Major Successes

- Bridge funding for Certified Community Behavioral Health Clinics (CCBHC) to strengthen the behavioral health system.
- 2024 legislation strengthens the crisis response system and supports the behavioral health workforce.
- Expanded the Florida Pediatric Behavioral Health Collaborative to improve mental health services for children.
- Distributed naloxone kits through the Department of Children and Families, Overdose Prevention Program, resulting in reported overdose reversals.
- Continued Coordinated Opioid Recovery (CORE) Network implementation in additional Florida counties to expand access to recovery services.
- Held statewide suicide prevention and intervention training for thousands of Floridians to enhance community mental health support.



# Mental Well-being and Substance Abuse Prevention



## Major Successes, cont.

- 80% or more school personnel in all 67 school districts are annually certified on youth mental health awareness training
- Awareness and training on Florida's behavioral health crisis system of care
- Collaboration between school district mental health coordinators and school safety specialists



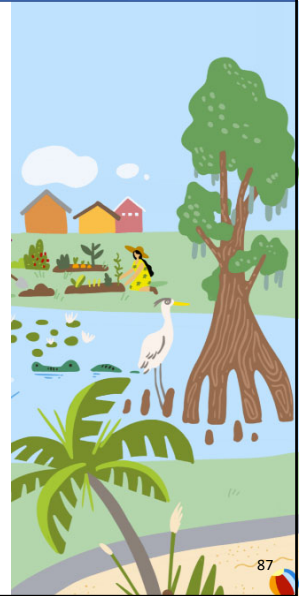


# Mental Well-being and Substance Abuse Prevention



## Next Steps

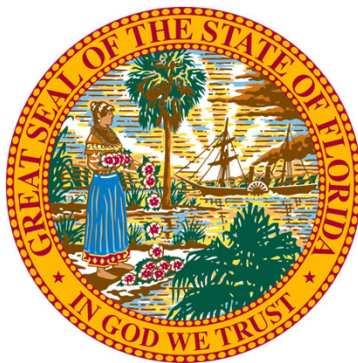
- Continue efforts and partnerships with key stakeholders.
- Align strategies with recommendations from the Commission on Mental Health and Substance Use.
- Goal groups are meeting monthly.



# Mental Well-being and Substance Abuse Prevention



## Commission on Mental Health and Substance Use Disorders



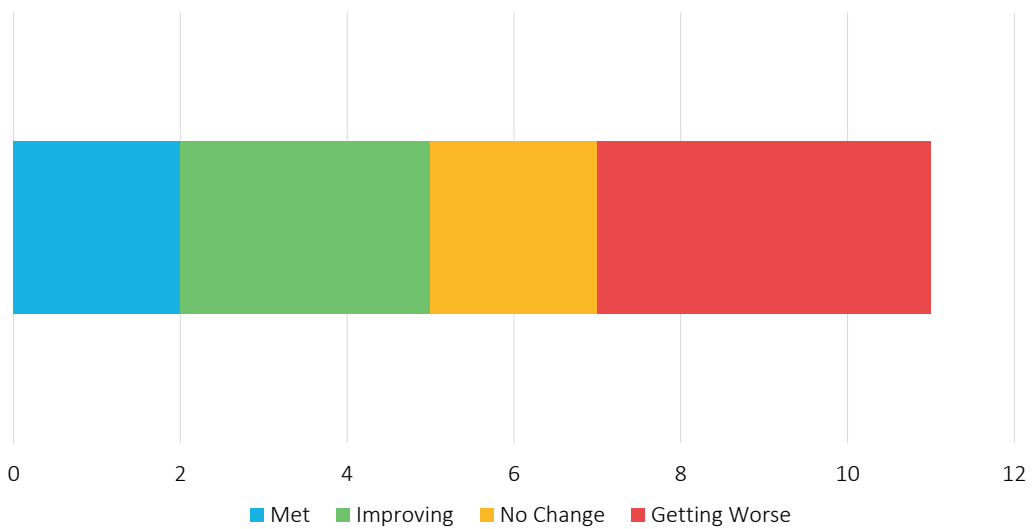
# Social and Economic Factors Contributing to Health (SEFCH) Priority Area Workgroup Chairs



Jessica De Leon, PhD  
Associate in Research, Assistant Professor  
Florida State University College of Medicine



## Social and Economic Factors Contributing to Health





## Social and Economic Factors Contributing to Health



### Major Successes

- SEFCH PAW welcomed new leadership.
- Met and exceeded Objective SEF 1.2 and Objective 3.4.
- Florida Department of Transportation developed Safe Mobility for Life to educate planners and engineers on the benefits, features, and services that support the Transportation Domain.
- Established a Feeding Florida Food Banks and Supplemental Nutrition Assistance Program (SNAP), Nutrition Education Contract in all food banks across Florida.
- Fresh Access Bucks provided over 3.6 million meals with SNAP through Farm Direct Partners, and over 2 million meals with SNAP at retail partners.



## Social and Economic Factors Contributing to Health



### Next Steps

- Recruit a new PAW Co-Chair.
- Establish relationships with identified potential partners.
- Align objective-level strategies and activities with current initiatives of workgroup members.
- The PAW will continue individual goal group meetings.
- Upcoming workgroup meeting will occur quarterly on the first Thursday, with the next one being February 6, 2025, from 3 p.m. to 4 p.m.



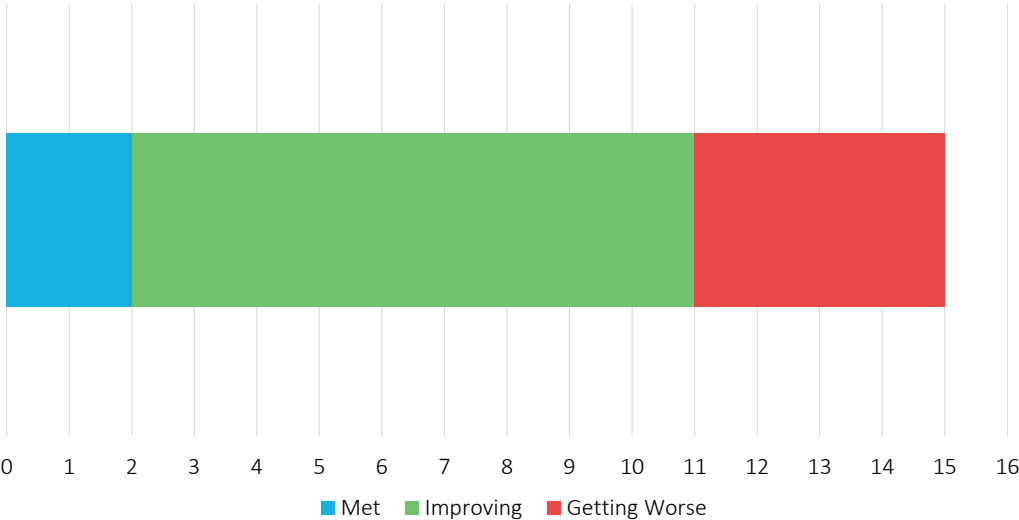
# Transmissible and Emerging Diseases Priority Area Workgroup Chair



Alaina McCorvey, MPH  
HIV Section, Bureau of Communicable Diseases  
Florida Department of Health



# Transmissible and Emerging Diseases

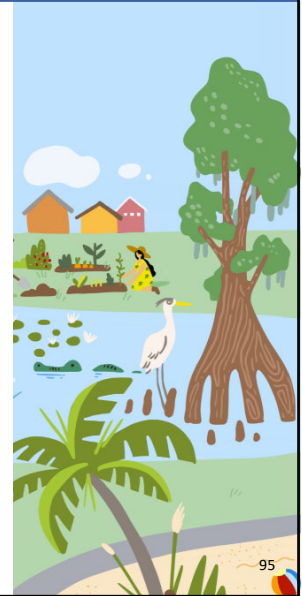


# Transmissible and Emerging Diseases



## Major Successes

- The Health Care Associated Infections Prevention Program and the Agency for Health Care Administration hosted *Candida auris* workgroup meetings and developed a statewide action plan.
- 30 active Frontlines of Communities in the United States (FOCUS) partners, with 27 fully operationalized.
- Florida Department of Health mapped syphilis cases in Duval and Orange counties to improve tracking and monitor disease prevalence.
- The injectable Pre-exposure prophylaxis (PrEP) Pilot Program expanded from three to seven counties, serving 161 clients as of August 2024.
- The Florida Department of Health renewed contracts with 13 community-based organizations to increase PrEP awareness, education, and referrals.



# Transmissible and Emerging Diseases



## Next Steps

- Revise rule 64D-3.029, F.A.C., to include *Candida auris* as a reportable disease.
- Develop an HIV prevention toolkit for AIDS drug assistance program counselors, case managers, peer navigators, and medical providers.
- State leadership will meet with hospital and clinical executives to operationalize FOCUS to address multiple public health epidemics.
- The Department of Health will expand mapping of syphilis cases to Hillsborough and Miami-Dade counties.



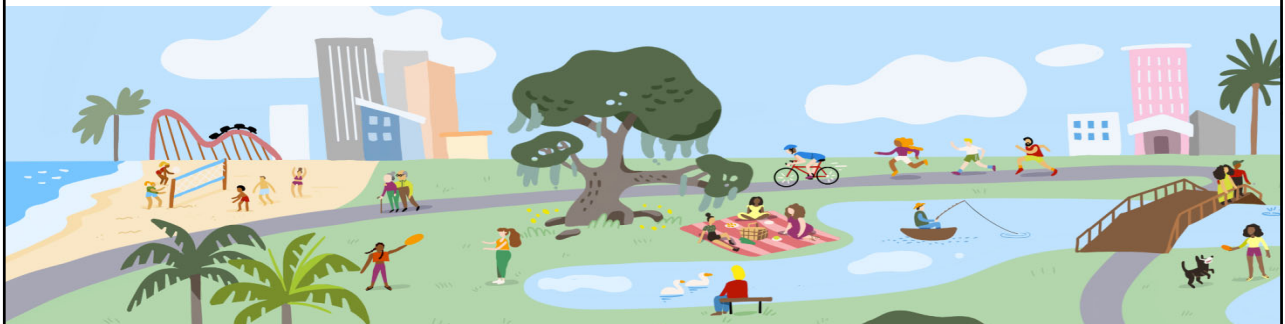
# Transmissible and Emerging Diseases



**Neryda Greene, MD, MPH, MHA**  
Viral Hepatitis and Outbreak  
Response Section Administrator  
Florida Department of Health



## Questions?



# 2022-2026 State Health Improvement Plan Steering Committee Highlights and Discussion



## Discussion Question

What other youth-health initiatives or models, similar to those discussed, could be explored or adapted to advance the goals outlined in the State Health Improvement Plan?

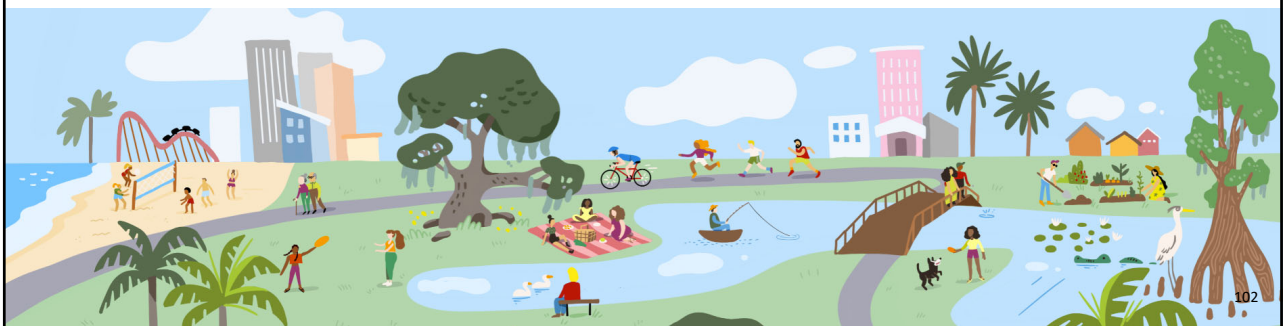
## Discussion Question



How can the Steering Committee and Priority Area Workgroups effectively use partnerships and data to guide decision-making and assess the progress of the State Health Improvement Plan within local communities?

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## Public Comment



# Closing Remarks

Joseph A. Ladapo, MD, PhD  
State Surgeon General  
Florida Department of Health



# Thank you!

