

SUMMARY OF SERVICES

Activities for July to September 2024

Presented for Baker, Clay, Duval, Flagler, Nassau, St. Johns, and Volusia Boards of County Commissioners

I. **Community Impact**

We at the Health Planning Council of Northeast Florida, Inc. (HPCNEF) serve the community in numerous ways. Some of the programs, projects, services, and impacts in our seven-county service area are listed below:

PRODUCTS

Health Needs Assessments

Community Health Assessments (CHA)

In our Community Health Assessments (CHAs). we use a modified Mobilizing for Action through Planning and Partnerships (MAPP) model to identify priority community health and quality of life issues using primary and secondary data from a variety of existing sources.

Community Health Needs Assessments (CHNA)

Non-profit hospitals must conduct a Community Health Needs Assessment (CHNA) of the local populations they serve, involving the community to identify and analyze health needs. This process enables communities to prioritize and address their unmet health needs effectively.

Community/Organizational Needs Assessments

A Community Needs Assessment is conducted to understand the health status and needs of a community served. This assessment can analyze a specific area of health in a single county service area or in a multi-county region. An Organizational Needs Assessment determines an organization's needs and capabilities. This assessment can help identify the current status of an organization and areas for improvement. Both assessments can be combined into a Community/Organizational Needs Assessment, which analyzes the impact an organization has on the population served.

County Health Improvement Plans (CHIP)

A Community Health Improvement Plan (CHIP) is a structured, county-level, multi-year plan to improve community health and quality of life using data from CHAs. These plans are typically updated every three to five years to ensure relevance and effectiveness.

Protocol for Assessing Community Excellence in Environmental Health (PACE EH)

This Protocol is a community involvement tool developed by the National Association of County and City Health Officials (NACCHO) and the Centers for Disease Control and Prevention (CDC). It enables communities to identify health concerns related to environmental issues, take action to address them, and improve overall health. PACE EHs utilizes community collaboration to involve the public and stakeholders in identifying local environmental health issues, setting priorities, targeting at-risk populations, and addressing the identified concerns.



Health Equity (HE) Plans

The Health Equity (HE) Plan serves as a roadmap for counties to develop and enhance strategies, focusing on system improvements and increasing opportunities for optimal health. By addressing social determinants of health and establishing inclusive partnerships, the plan aims to foster health equity.

Disparity Impact Statements

A Disparity Impact Statement (DIS) is a deliverable of grants funded by entities such as the Substance Abuse and Mental Health Services Administration (SAMHSA). These statements are part of a datadriven, quality improvement approach to advance equity for all, to identify racial, ethnic, sexual and gender minority populations at highest risk for experiencing behavioral health disparities.

Health Impact Assessments (HIA)

Health Impact Assessments (HIA) are used to influence project, program, or policy decisions by evaluating their potential health impacts before implementation. This cross-sector approach provides practical recommendations to increase positive health outcomes and minimize negative health effects.

County Health Profiles

The County Health Profiles, published annually for a seven-county region representing 10.3% of Florida's population, provide an overview of each county's health status in comparison to the state. They include data on demographics, socioeconomic factors, health rankings, disease and death rates, maternal and child health, healthcare access, and healthcare utilization. This comprehensive snapshot aids in understanding health disparities and trends within the region.

SERVICES

Fiscal Administration

We assist local organizations with administrative, operational, and financial management with the ability to act as fiscal intermediary between subcontractors.

Community Outreach

We engage and connect with the community to understand their needs and involve them in decision-making processes. Our outreach includes leading focus groups, facilitating community surveys, and conducting key stakeholder interviews.

Program Management

Our program management services are allinclusive. Our organization has demonstrated successful contract and grant administration at the federal, state, and private level.

Strategic Planning

Our role involves guiding organizations in defining their strategic goals and effectively allocating resources to develop a comprehensive blueprint for their future endeavors.

Evaluation Services

Systematic evaluation processes are employed to collect, analyze, and report on the outcomes of programs or interventions. Granting agencies demand measurement and outcomes to assess the effectiveness of funds invested in local communities, programs, and projects, aiding in planning and implementing new initiatives, making grant decisions, and demonstrating accountability to the public.

Public Health Training

We support organizations from diverse sectors in Northeast Florida by developing and delivering educational modules. We provide materials and



training for public health education based on the social determinants of health.

Grant Writing

With a proven history of accomplishments, we excel in crafting grant proposals. Our proficient team adeptly navigates the grant life cycle, which includes identification of funding prospects, compilation of essential documentation, program design, and coordinating potential partners.

Data Collection

Hospital, Nursing Home, and Hospice **Utilization Reports**

We collect and report utilization data for hospital, nursing home, and hospice services, including statistics on hospital inpatient stays, emergency department visits, and ambulatory surgeries.

Custom Data Collection

We specialize in gathering, interpreting, and reporting health data for health agencies and affiliated industries.

Mapping Technologies GIS

Dynamic mapping technologies and Geographic Information Systems (GIS) play a pivotal role in visually representing health data, enabling informed and data-driven decision-making processes. By effectively displaying health-related information on interactive maps, stakeholders can gain valuable insights into spatial patterns, distribution, and trends, enhancing the efficacy of strategic planning and resource allocation.

Current Program & Product Highlights

ACA "Navigator" Health Insurance Outreach and 1. **Enrollment**

As a trusted leader in strategic and community-based planning across Northeast Florida, HPCNEF was awarded the Affordable Care Act (ACA) Navigator Program in 2013. This program supports underinsured and uninsured residents in our seven-county region by helping them obtain affordable health insurance. Through federally certified Navigators, individuals facing language, literacy, or economic barriers receive free, personalized guidance on selecting a health insurance plan that best meets their unique needs.

Navigators engage the community at various events and designated locations throughout Northeast Florida. For those who face transportation or mobility challenges, assistance is also available via a tollfree Navigator hotline and video conference. The program's primary goal is to help individuals secure health insurance, improving their access to healthcare services.

In addition to the Navigator Program, HPCNEF convenes quarterly meetings for the Northeast Florida Coalition for Access to Health Care (NEFCAH). The coalition's mission is to foster collaboration among local healthcare providers and partners, ensuring resources are aligned to address healthcare access challenges in the region.



On June 10, 2024, the Centers for Medicare & Medicaid Services (CMS) announced the availability of \$500 million in grants over the next five years to increase the number of organizations that help people enroll in health coverage through the Federally Facilitated Marketplace (FFM) on HealthCare.gov. This is the largest funding allocation CMS has made available for Navigator grants to date, and it is the first time the grants have been awarded for a period of more than three years. With the additional funding, applicants are encouraged to focus on adding smaller, community-based organizations as part of CMS's effort to reach people in underserved and diverse communities. Florida Covering Kids & Families (FL-CKF) at the University of South Florida submitted a proposal for the Cooperative Agreement to Support Navigators in Federally Facilitated Exchanges for 2024–2025.

On August 26, 2024, the U.S. Department of Health and Human Services (HHS), through the Centers for Medicare & Medicaid Services (CMS), announced the 2024 Navigator cooperative agreement awards for a five-year period of performance, which runs from August 27, 2024 through August 26, 2029. The cooperative agreement award amounts cover the first 12-month budget period (August 27, 2024 to August 26, 2025). Funding resources for the State of Florida are \$13.8M per one-year budget period with an anticipated 60-month period of performance from the initial date of award.

St. Johns River Rural Health Network (SJRRHN) 2.

The St. Johns River Rural Health Network is a 501(c)(3) organization that HPCNEF administers and operates through the Florida Department of Health Bureau of Emergency Medical Oversight (BEMO).

In Q1 under the new Florida Department of Health rural health network contract. SJRRHN completed and submitted annual deliverables, including the Annual Service Plan, the Board of Director roster, and Network member list.

Florida Department of Health - Local Health Council 3.

As a Local Health Council, HPCNEF hosts health improvement and promotion activities, provides technical assistance, conducts community meetings and events, and supports the Agency for Health Care Administration (AHCA). HPCNEF quarterly tasks are to:

- 1) No later than August 15 of each year, establish and update a Board of Directors in accordance with Section 408.033(1)a.
- 2) At least once annually, conduct a public meeting to review the quality and effectiveness of services provided.
- 3) No later than June 30 of each year, develop and submit a summary of all services provided by the Council to the local Board of County Commissioners (BOCC), to include data support, planning support, status of work plans and status update. The updates must be posted on the LHCs website at least once per year.
- 4) Each quarter, provide an inventory of services that the LHC has provided or coordinated within the community.
- 5) At least once per quarter, conduct a meeting with the Board of Directors (a quorum is required), to present and discuss the general business of the LHC.
- 6) Provide Technical Assistance (TA) to the community to support state, regional and local health priorities. Document TA date, agency, person who requested data and assistance category in the



Quarterly Progress Report. Each LHC must participate in at least two-thirds of the monthly virtual meetings of the Statewide Rural Health Planning Consortium convened by the Department.

- 7) Complete the following activities as requested by AHCA to support the AHCA CON process.
- 8) Complete the Quarterly Progress Report that includes the information specified in the tasks above, as well as any other relevant activities completed during that quarter.
- 9) Document and report all travel to be reimbursed pursuant to Section 112.061, Florida Statutes.

A new contract for this fiscal year has been executed by the Florida Department of Health.

Healthcare Facility Reporting 4.

Reports submitted to the Florida Agency for Health Care Administration (AHCA), per the requirements of Florida Statute 408.033, continue to meet deadlines and requirements. Effective June 30, 2021, AHCA no longer requires hospital utilization data; however, our regional hospitals continue to submit their data as they have found the subsequent aggregate data reporting to be valuable. Nursing homes continue to submit data quarterly.

The AHCA Nursing Home Utilization Report Q1 was completed and sent on August 7, 2024. Nursing home and hospital utilization reports continue to be distributed to subscribers.

Florida Department of Health in Volusia County: HRSA **5**. Ryan White HIV/AIDS Program and HUD HOPWA **Program Payment Processing**

HPCNEF provides payment processing for the Ryan White and HUD (Housing and Urban Development) HOPWA (Housing Opportunities for Persons with AIDS) programs in Volusia County. Both contracts have been renewed for an additional year through 2025.

6. Florida Department of Health in Baker County: **Community Health Assessment (CHA) and Community Health Improvement Plan (CHIP)**

HPCNEF responded to a request for proposals to facilitate the comprehensive Community Health Assessment (CHA) with the Baker County community. HPCNEF uses the National Association of City and County Health Officials' (NACCHO) Mobilizing for Action through Planning and Partnerships (MAPP) framework to guide the assessment process. Local public health departments are required to identify health priorities every three years. The findings from the CHA will inform the development of Baker County's Community Health Improvement Plan (CHIP).

In Q4 of the last fiscal year, HPCNEF worked with the funder to finalize the CHIP document and action plans. The workgroups met one last time during the week of April 15 to approve the work plans for the next three years. The final CHIP document was sent to the funder on May 13. Additional edits requested by the funder were made by HPCNEF. This project is now complete and closed out.



7. CDC-RFA-OT21-2103: Department of Health in Duval County PPI (Protect, Promote, and Improve) Project

The Consolidated Appropriations Act, 2021 (P.L. 116-260), which contained P.L. 116-260, Section 2, Division M, provided, in part, funding for strategies to improve testing capabilities and other infectious disease response activities in populations that are at high-risk and underserved, including racial and ethnic minority groups and people living in rural communities. Strategies also include developing or identifying best practices for states and public health officials to use for contact tracing. The Centers for Disease Control and Prevention (CDC) announced the non-competitive grant CDC-RFA-OT21-2103 to achieve these purposes. This grant provided funding to address infectious diseases and advance health equity (e.g., through strategies, interventions, and services that consider systemic barriers and potentially discriminatory practices that have put certain groups at higher risk for infectious diseases) in racial and ethnic minority groups and rural populations within state, local, US territorial, and freely associated state health jurisdictions.

The Florida Department of Health in Duval County and HPCNEF executed Amendment 3 on April 16, 2024, extending the PPI Project for six months with the new end date on November 30, 2024. As a result of this extension, HPCNEF has executed Amendment 1 with community partners to continue providing outreach and much-needed services in the community until October 31, 2024.

The partners will continue to provide specific services aimed at outreach and education to communities with the goal of reducing health disparities and increasing trustworthy and equity-enhancing health information to disproportionately affected populations.

8. HRSA 23-094: Neonatal Abstinence Syndrome Grant (RCORP-NAS)

The purpose of this program is to reduce the incidence and impact of neonatal abstinence syndrome (NAS) in rural communities by improving systems of care, family support, and social determinants of health. The chosen target service area is Nassau County.

On August 30, 2023, SJRRHN, the lead applicant, received a Notice of Award. SJRRHN is one of 41 grantees for this fiscal year. The program officially began on September 1, 2023, and SJRRHN has secured executed agreements with HPCNEF and other grant partners.

Over the past quarter, SJRRHN has met programmatic funding obligations and deliverables. The Project Director and Learning Collaborative Point of Contact provided technical assistance for data collection to partners for inclusion in our Non-Competitive Continuation report. The Non-Competitive Continuation report deliverable was submitted and accepted. The Learning Collaborative Point of Contact has been sending weekly emails to our consortium partners detailing upcoming training from various resources. Working with our partners, the team has been able to implement and track consumer usage weekly with data analysis to determine the impact of our networking activities. Our community partners have continued attending the monthly HRSA technical assistance virtual meetings. The programmatic and financial reporting, both monthly and quarterly, remain on schedule. Our Learning Collaborative, Project Director, and Data Coordinator representatives continue to represent and advocate for community



members impacted by NAS in Nassau County through our continued approach and attendance at community-based meetings.

9. Investing In Kids (INK!) Comprehensive Needs Assessment

An education non-profit based in St. Augustine that supports the St. Johns County School District contracted with HPCNEF to conduct their Comprehensive Needs Assessment. As with Community Health Assessments (CHAs), HPCNEF will use the National Association of City and County Health Officials' (NACCHO) Mobilizing for Action through Planning and Partnerships (MAPP) framework to guide the assessment process.

The Comprehensive Needs Assessment report has been submitted to the funder in September 2024. This project is now complete and closed out.

10. Florida Department of Health in St. Johns County Community Health Assessment (CHA) and Community Health Improvement Plan (CHIP)

HPCNEF responded to a request for proposals to facilitate the comprehensive Community Health Assessment (CHA) with the St. Johns County community. HPCNEF uses the National Association of City and County Health Officials' (NACCHO) Mobilizing for Action through Planning and Partnerships (MAPP) framework to guide the assessment process. Local public health departments are required to identify health priorities every three years. The findings from the CHA will inform the development of St. Johns County's Community Health Improvement Plan (CHIP).

In Q1, HPCNEF completed the final draft of the St. Johns CHA. The team underwent an extensive internal review before delivering the document to the funder for the final review. All edits that could be made were made throughout the document, and the final PDF version and working draft (without logos) were sent to the funder on August 23, 2024. Workgroups for the three priority areas for the CHIP were established and first met on August 27, 2024. During these meetings, the workgroup attendees brainstormed potential goals and strategies for each priority area. HPCNEF, alongside the funder, met with the identified workgroup leads a couple of weeks later to fine-tune goals and strategies. The three CHIP workgroups met again on September 23, 2024. During these meetings, the workgroup attendees brainstormed potential activities they could work on over the next five years to make progress on the identified goals and strategies for each priority area. The CHIP workgroups will continue to meet a couple more times in Q2 to finalize the CHIP action plans before HPCNEF moves into the internal review process for the overall CHIP document.



11. Consumer Assistance Coordination Hub (CACH) with the Center on Budget and Policy Priorities

The Center on Budget and Policy Priorities (CBPP) in Washington, D.C., has contracted with HPCNEF to provide expertise to inform the development of resources for assister groups, monitor and alert CACH to health insurance application process barriers, and participate in monthly virtual meetings. During the past quarter, the CACH officially welcomed members to the Consumer Assistance Coordination Hub 2024–2025 season, discussed the Fall Beyond the Basics virtual Navigator training series, DACA (Deferred Action for Childhood Arrivals) Updates, and Medicaid Unwinding.

12. CDC-RFA-CE-23-0003: Overdose Data to Action: Limiting Overdose through Collaborative Actions in Localities (OD2A LOCAL)

Overdose Data to Action: Limiting Overdose through Collaborative Actions in Localities (OD2A: LOCAL) will support city or county local health departments (CHDs), special district health departments, and territories to use data to drive actions that reduce overdose morbidity and mortality in communities, with a primary focus on opioids and/or stimulants.

Within the grant term of five years, recipients will:

- Decrease nonfatal and fatal drug overdoses overall, and especially among disproportionately
 affected and underserved populations, with a primary focus on overdoses involving opioids and/or
 stimulants, including polysubstance use
- · Reduce health inequities related to overdose by closing gaps in access to care and services
- Integrate harm reduction strategies and principles
- Improve linkage to and re-engagement and retention in services, care, treatment, and recovery, with a focus on opioid use disorder (OUD) and stimulant use disorder (StUD)
- Build overdose surveillance infrastructure
- · Track and address emerging drug threats
- Track linkage to and retention in care

The funder received the notice of award on September 1, 2023, and executed a contract with HPCNEF on February 7, 2024. The renewed and amended contract was signed by both parties on August 12, 2024. This renewal is active from September 1, 2024 through August 31, 2025.

During this quarter, annual programmatic monitoring was completed for both subcontractors. Due to the efforts of the subcontractors, all deliverables were above 98% by Year 1 closeout on August 31, 2024. Gateway Community Service also completed all Year 1 deliverables. Actions were taken to review, update, and complete workplans and deliverables for the upcoming renewal and amendments for Year 2 of OD2A Local. Meetings were held with program management staff from the funder to ensure all contract deliverables were reviewed and updated. All subcontracts, including updated attachments, were completed before the Year 2 September 1, 2024 start date. The HPCNEF Program Manager attended a North Florida Poly Drug Task Force Meeting, two Drug Epidemiology Meetings, and a Quarterly Partner meeting hosted by the funder during this period. The funder has initiated an evaluation component with



FSU involving HPCNEF and their subcontractors. HPCNEF has met with all parties to ensure we comply with all terms of the current Year 2 contract.

Flagler & Volusia Community Health Needs Assessment **13**.

HPCNEF was contacted to facilitate a Community Health Needs Assessment (CHNA) for Flagler and Volusia counties. HPCNEF completed the primary data collection through the community survey, focus groups, and key stakeholder interviews. Data review and analysis were completed for all areas and added to the report. The Forces of Change Assessment was completed during a meeting on July 15. HPCNEF completed the analysis and narrative for the assessment. On September 11, HPCNEF staff presented the intersecting themes and supporting data to stakeholders. Following the presentation, the stakeholders completed a prioritization activity to determine the three areas of focus for the three-year CHIP plan. The final draft of the CHNA document was completed, and HPCNEF began the internal review process. In Q2, the final CHNA document will be sent to the partners.

For more information, visit hpcnef.org.