

Circle of Care, Inc.  
Community Health Needs Assessment  
Implementation Plan  
2022-2024



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# Community Health Needs Assessment

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Circles of Care, Inc. participated with both Central Florida Cares Health System (CFCHS) and the Space Coast Health Foundation (SCHF) to prepare a Community Health Needs Assessment (CHNA). Published in 2022, both reports entail a systematic, data-driven approach to determining the health status, behaviors and needs of residents in Brevard County to inform decisions and guide efforts to improve community health and wellness. The CFCHS concentrated on the specific behavioral health needs of the community whereas the SCHF focused on the broader umbrella of all community health needs. Additionally, Circles of Care also relied on the 2022 CHNA produced by Parrish Medical Center.

The SCHF project incorporates data from primary research, through the PRC Community Health Survey. PRC is a nationally recognized health care consulting firm with extensive experience conducting Community Health Needs Assessments in hundreds of communities across the United States since 1994. <sup>i</sup>

The goals of the study were:

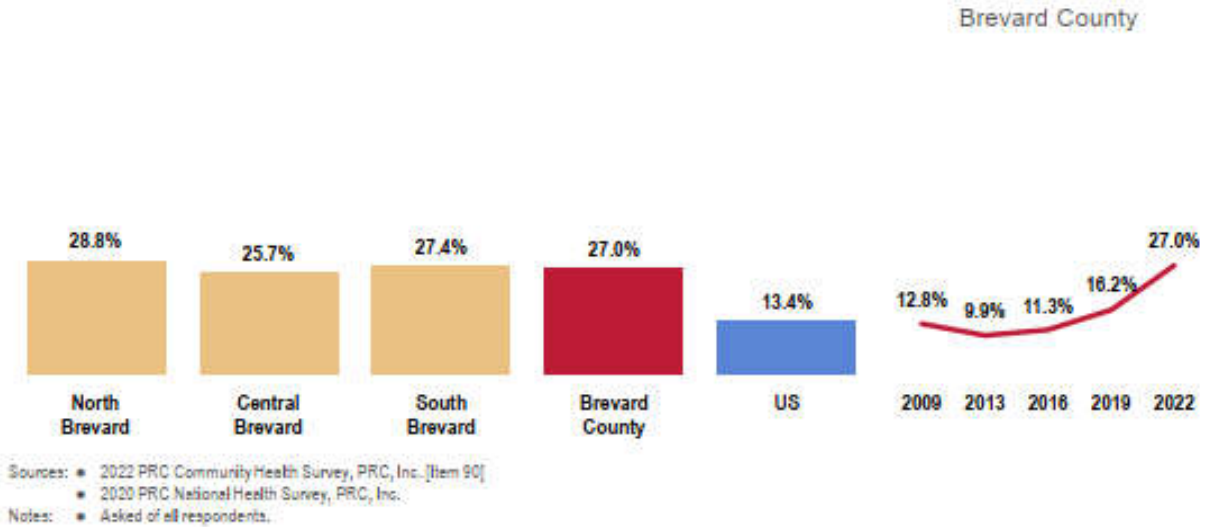
- **To develop a comprehensive understanding of healthcare needs and gaps for Brevard County residents.**
- **To identify healthcare priorities and build an implementation plan to address those priorities.**
- **To build upon prior studies of key health indicators.**
- **To improve residents' health status, increase their life spans, and elevate their overall quality of life.** A healthy community is not only one where its residents suffer little from physical and mental illness, but also one where its residents enjoy a high quality of life.
- **To reduce the health disparities among residents.** By gathering demographic information along with health status and behavior data, it will be possible to identify population segments that are most at-risk for various diseases and injuries. Intervention plans aimed at targeting these individuals may then be developed to combat some of the socio-economic factors which have historically had a negative impact on residents' health.
- **To increase accessibility to preventive services for all community residents.** More accessible preventive services will prove beneficial in accomplishing the first goal (improving health status, increasing life spans, and elevating the quality of life), as well as lowering the costs associated with caring for late-stage diseases resulting from a lack of preventive care.
- **To serve as a resource for individuals and agencies to identify community health needs.**

- **To fulfill the community health benefit requirements as outlined in Section 5007 of the Patient Protection and Affordable Care Act (PPACA).**

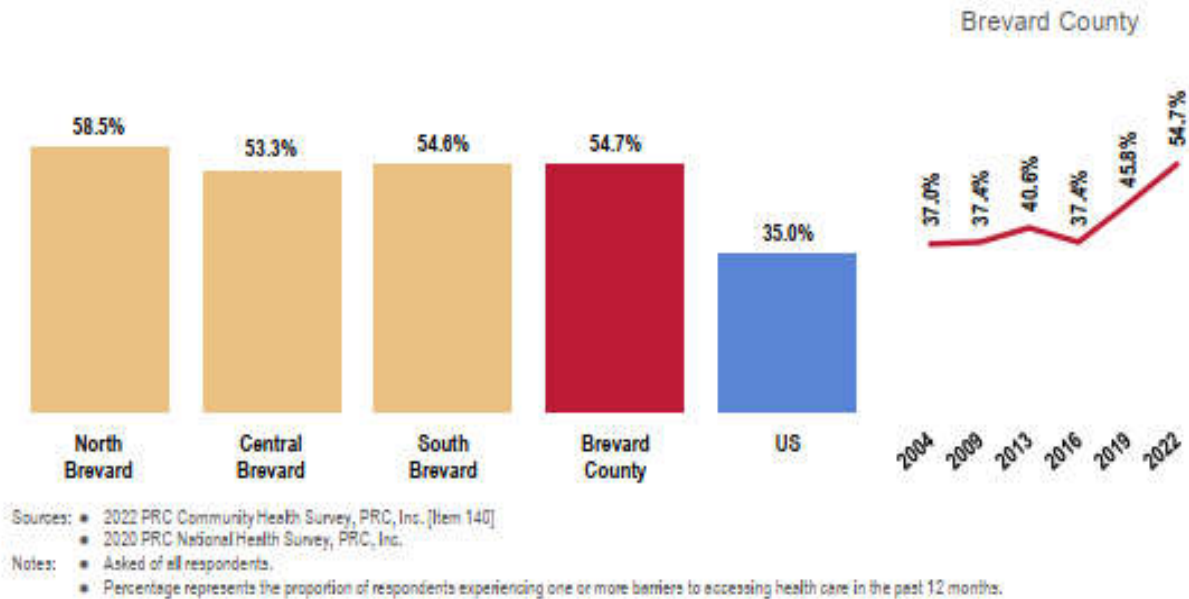
To achieve these goals the assessments incorporated data from primary research (the PRC Community Health Survey) and secondary research (vital statistics and other existing health-related data), allowing for trending and comparison to benchmark data at the state and national levels.

## CHNA HIGHLIGHTS

### Experience “Fair” or “Poor” Mental Health



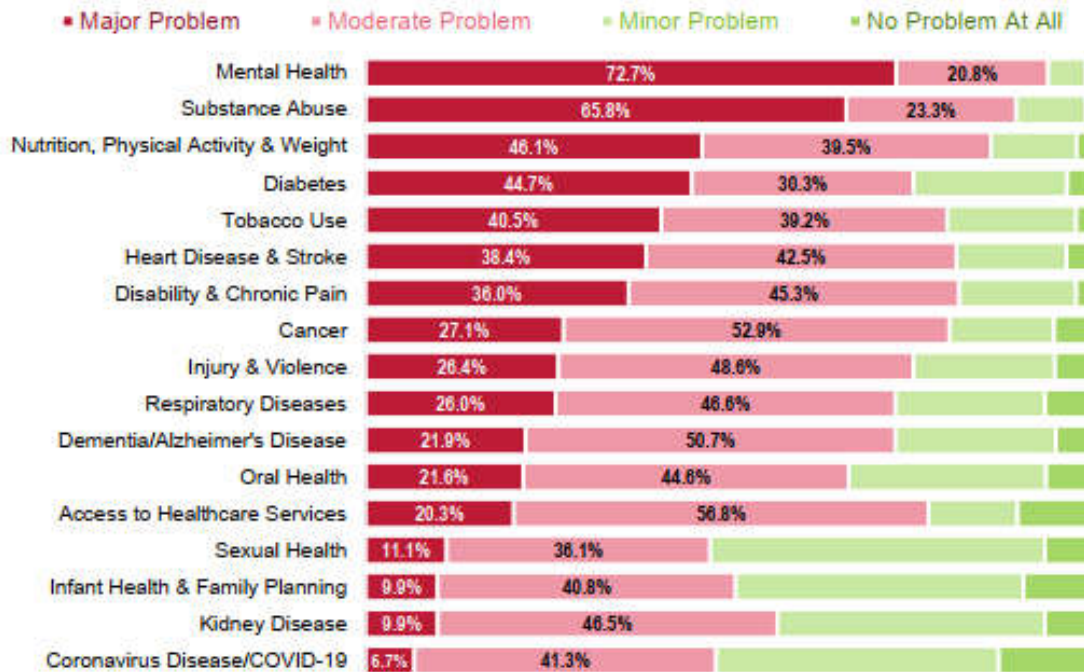
### Experienced Difficulties or Delays of Some Kind in Receiving Needed Health Care in the Past Year



## Parrish Medical Center Priority Community Health Needs

1. Mental Health
2. Substance Abuse
3. Heart Disease & Stroke
4. Access to Health Care Services
5. Nutrition, Physical Activity & Weight
6. Diabetes
7. Cancer
8. Infant Health
9. Tobacco Use
10. Respiratory Disease
11. Potentially Disabling Conditions
12. Injury & Violence

### Key Informants: Relative Position of Health Topics as Problems in the Community



## PRIORITY HEALTHCARE NEEDS:

Two priority areas were identified by Circles from the CHNA. These priority areas are outlined below and are the basis for activities that Circles has and will implement to improve the health status of Brevard County.

- 1) Access to Behavioral Health Services: The uninsured/underinsured have greater barriers to care than those with third-party payer insurance, particularly with specialty services such as psychiatry. In the chart below, rankings between 1-13 indicate a lower prevalence rate of mental illness and higher rates of access to care. Conversely states ranked 39-51 indicated that adults had a higher prevalence of mental illness and lower rates of access to care.

| Ranking Indicator   | FLORIDA |      |      |      | 2022 Highest Ranked State (1) | 2022 Lowest Ranked State (51) |
|---|---------|------|------|------|-------------------------------|-------------------------------|
|   | 2019    | 2020 | 2021 | 2022 |                               |                               |
| Overall (includes all 15 measures)  | 32      | 32   | 35   | 28   | Massachusetts                 | Nevada                        |
| Overall Adult (includes 7 measures)   | 26      | 24   | 25   | 25   | New Jersey                    | Colorado                      |
| Overall Youth (includes 7 measures)   | 32      | 36   | 38   | 30   | Pennsylvania                  | Nevada                        |
| Overall Prevalence of Mental Illness (includes 6 measures)                          | 9       | 12   | 8    | 2    | New Jersey                    | Oregon                        |
| Access to Care (includes 9 measures)  | 45      | 40   | 48   | 49   | Vermont                       | Texas                         |
| Adult Prevalence of Mental Health   | 8       | 6    | 5    | 3    | New Jersey                    | Utah                          |
| Adults with Substance Use Disorder in Past Year                                     | 14      | 11   | 3    | 1    | Florida                       | DC                            |
| Adults with Serious Thoughts of Suicide   | 1       | 2    | 4    | 6    | New Jersey                    | Utah                          |
| Youth Prevalence of Mental Illness  | 26      | 22   | 14   | 5    | DC                            | Oregon                        |
| Youth with Substance Use Disorder in Past Year                                      | 17      | 33   | 37   | 14   | Alabama                       | Oregon                        |
| Youth with Severe Major Depression Episode  | 28      | 32   | 20   | 11   | DC                            | Wyoming                       |
| Adults with AMI Who Did Not Receive Treatment                                       | 45      | 37   | 46   | 49   | Vermont                       | Hawaii                        |
| Adults with AMI Reporting Unmet Need  | 9       | 23   | 11   | 10   | Hawaii                        | DC                            |
| Adults with AMI Who Are Uninsured   | 48      | 45   | 45   | 46   | Massachusetts                 | Texas                         |
| Adults with Cognitive Disability Who Could Not See A Doctor Due to Cost             | 47      | 43   | 49   | 47   | Rhode Island                  | Texas                         |
| Youth with MDE Who Did Not Receive MH Services                                      | 28      | 26   | 44   | 45   | Maine                         | Texas                         |
| Youth with Severe MDE Who Received Some Consistent Treatment                        | 37      | 39   | 47   | 46   | Maine                         | Tennessee                     |
| Children with Private Insurance That Did Not Cover Mental or Emotional Problems     | 42      | 30   | 38   | 43   | Massachusetts                 | Arkansas                      |
| Students Identified with Emotional Disturbance for an Individualized Education Plan | 33      | 38   | 38   | 40   | Vermont                       | Alabama                       |
| Mental Health Workforce Availability  | 42      | 42   | 42   | 42   | Massachusetts                 | Alabama                       |

The chart above indicates that Florida is poorly ranked for:

|  |                  |
|--|------------------|
| Access to Care   | 49 <sup>th</sup> |
| Adults with Any Mental Illness (AMI) Who Did Not Receive Treatment | 49 <sup>th</sup> |
| Adults with Any Mental Illness Who Are Uninsured                   | 46 <sup>th</sup> |

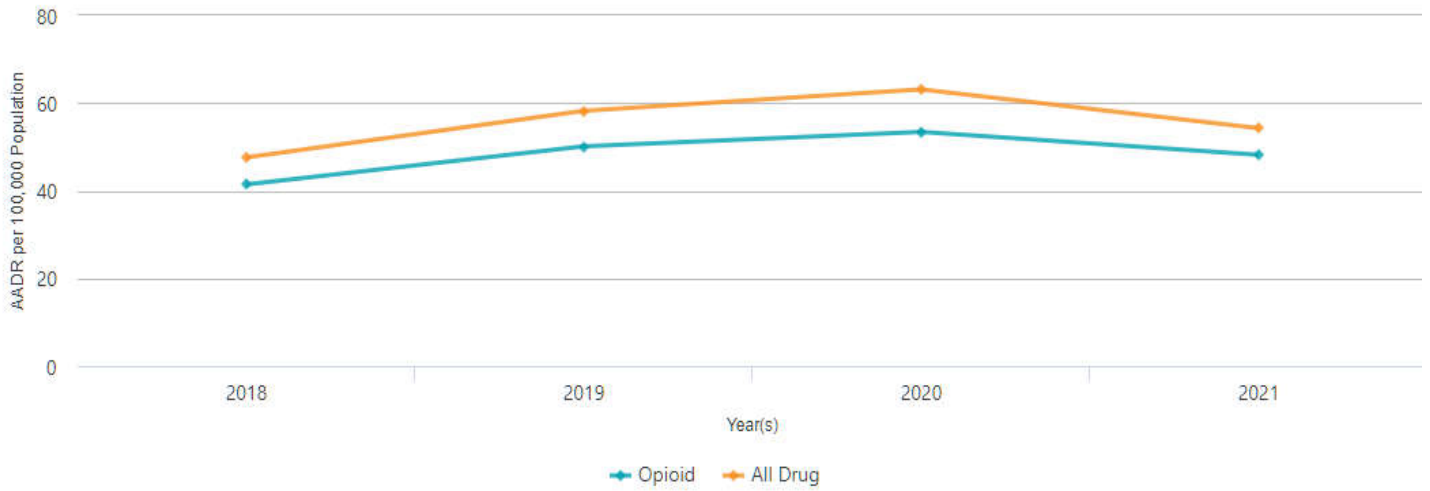
To address this priority area, Circles will investigate opportunities to

- Increase availability of substance use disorder detoxification and treatment
  - Designate additional inpatient beds for detoxification
  - Increase capacity for opiate disorder treatment
    - Medication Assisted Treatment
    - Treatment of families in the Child Welfare system
- Emphasize a ‘no wrong door’ aspect to care
  - Universal scheduling available at all agency entry points
  - Warm hand-offs to appropriate department scheduling
- Reduce the travel barriers associated with a 72 mile long county
  - Transportation vouchers
  - State funding for transportation

2) Opioid Overdose Rate: The accumulated sources note a rising increase in opioid-related fatal and non-fatal overdoses year over year. The charts below indicate these rates.

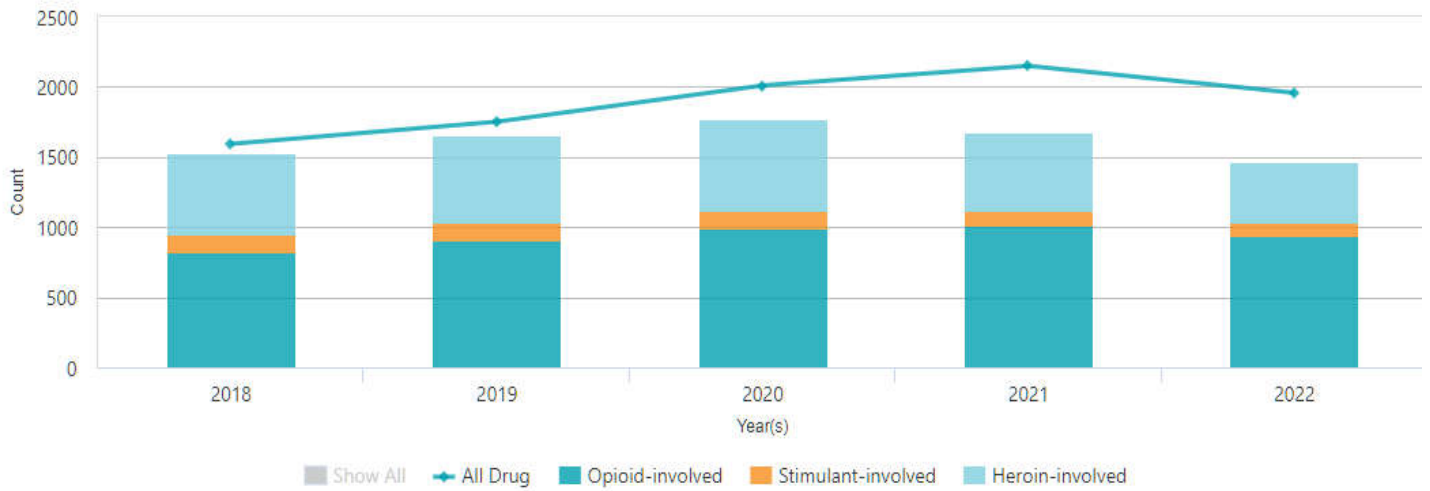


### Drug Overdose Deaths, Brevard County



Data Source: Florida Department of Law Enforcement

### Non-fatal Overdose Emergency Department Visits, Brevard County



# Priority HealthCare Implementation Plans

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## Priority Area 1: Access to Behavioral Health Services

### A. Key activities address the following health care indicators:

- Indicator 1: Total dollars spent on transportation of ambulatory patients to appointments
- Indicator 2: Numbers served with diagnosis of opiate use disorder
- Indicator 3: Detoxification bed days utilized

### B. Key Activities:

1. Circles of Care will utilize contracted incidental funding to provide transportation and reduce missed appointments for clients with transportation challenges.
2. Increase capacity for substance use disorders, including MAT and Child Welfare programs.
3. Circles will increase the number of designated Detoxification beds.

## Priority Area 2: Reduction in Opioid Overdoses

### A. Key activities address the following health care indicators:

- Number of opioid-related fatal overdoses
- Number of opioid-related non-fatal overdoses
- Number of Narcan distributed kits

### B. Key Activities:

1. Circles will lobby the Florida legislature for increased, non-recurring funding as a Central Receiving System to directly expand the available crisis services including mobile crisis support and substance abuse services for Brevard County residents.
2. Circles of Care will explore the possibility of a Mobile-MAT program.
3. Circles of Care will consider expansion of MAT services, including outpatient detox.
4. Circles of Care will participate with the County Department of Health for its Coordinated Opioid Recovery (CORE) initiative.

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<sup>i</sup> Space Coast Health Foundation. (n.d.). 2022 CHNA – Welcome. [https://www.schfbrevard.org/schf-releases-2022-community-health-needs-assessment/e \(schfbrevard.org\)](https://www.schfbrevard.org/schf-releases-2022-community-health-needs-assessment/e (schfbrevard.org))