

**Wayne County Substance Abuse Coalition
Strategic Plan
July 2020- June 2023**

Mission:

The Wayne County Substance Abuse Coalition (WCSAC) seeks to reduce the impact of opioid use/substance use disorder (OUD/SUD) through comprehensive prevention, treatment, recovery and support services by collaboration with community partners.

A. Assessment Summary

Briefly summarize the relevant data regarding the overall problem identified in your needs assessment.

Analysis of Georgia and Wayne County data reveals that substance and opioid misuse in Wayne County are a primary concern for residents. Data from public health and community forums indicates that:

- From 2012-17, the age-adjusted death rate by residence for all opioids in Georgia was 7.7/100,000. The rate for the 16-county SEHD was slightly lower at 7.5. The rate for Wayne County was 12.2, the second highest rate in the SEHD.
- In Wayne County, opioids represent the leading cause of drug overdose deaths and ER visits.
- Wayne County's age-adjusted hospital discharge rate for admissions related to drug use is the highest in the SEHD at 171.3, the highest in the SEHD and over twice as high as both the SEHD and Georgia rates.
- There were 117 ER observation visits at Wayne Memorial Hospital with a primary or secondary diagnosis of substance use from July 2018 to July 2019.
- In 2018, Wayne County's opioid prescription rate was 805.3-911.4/1,000 population, one of the highest rates in the state.
- During community forums held during the Fall of 2019, participants indicated that stigma impacted harm reduction and treatment seeking behavior.
- A survey conducted in the Fall of 2019 revealed that only one pharmacy had Naloxone in stock.
- Wayne County is a designated Health Professional Shortage Area (HPSA) in the areas of primary care, dental, and mental health.
- Only one provider has a DEA waiver to prescribe buprenorphine.
- The regional drug court currently does not accept medication assisted treatment (MAT).
- There are no inpatient facilities within Wayne County.

B. Problem Statement

Concisely describe the priority problem based on your assessment data.

In Wayne County, opioids represent the leading cause of drug overdose deaths.

C. Target Population

Describe the individuals or groups most affected by the problems in your problem statement above.

Direct Target: Wayne County residents
Indirect Targets: Health professionals, prescribers, policymakers, community members.

D. Goal

State the major changes in behavior that need to occur within your identified target population to achieve your vision.

Reduce opioid/substance mis-use in Wayne County.

E. Long-Term Outcome

Define the change you are seeking to make in problems or behaviors.

By June 30, 2023, reduce five-year opioid mortality rates by 50%, to 6.1/100,000.
By June 30, 2023, reduce the opioid prescription rate in Wayne County by 50%.
By June 30, 2023, reduce the five-year ER Visit Rate for drug use by 50% to 109/100,000.

F. Long-Term Outcome Indicators

List the indicators that will demonstrate you are making progress toward your goal.

By June 30, 2021, reduce five-year opioid mortality rates among individuals in Wayne County to an overall rate of 10.6/100,000.
By June 30, 2022, reduce five-year opioid mortality rates among individuals in Wayne County to an overall rate of 8.6/100,000.
By June 30, 2023, reduce five-year opioid mortality rates among individuals in Wayne County to an overall rate of 6.1/100,000.
By June 30, 2021, reduce the opioid prescription rate in Wayne County by 25%.
By June 30, 2022, reduce the opioid prescription rate in Wayne County by 35%.
By June 30, 2023, reduce the opioid prescription rate in Wayne County by 50%.
By June 30, 2021, reduce the five-year ER Visit Rate for drug use by 10%.
By June 30, 2021, reduce the five-year ER Visit Rate for drug use by 25%.
By June 30, 2022, reduce the five-year ER Visit Rate for drug use by 35%.

Template: Strategic Plan Objective Worksheet

Objective 1: Increase provider education and access to treatment					
Intermediate Outcome: By June 30, 2023, Wayne County will have four providers with a DEA waiver to prescribe buprenorphine.					
Intermediate Outcome Indicators (List the indicators that will demonstrate you are making progress toward your goal):					
<ul style="list-style-type: none"> • By June 30, 2022, Wayne County will have three providers with a DEA waiver to prescribe buprenorphine. • By June 30, 2022, 80% of providers and prescribers will have undergone Academic Detailing training. • By June 30, 2022, patients will report increased access to MAT. 					
Strategy #1: Increase number of local MAT providers					
Activities	Timeline		Who Is Responsible?	Process Indicators	Short-Term Outcomes
	Start Date	End Date			
Analyze barriers to obtaining a DEA waiver.	7/1/20	7/30/20	Coordinator/partners	Number of provider surveys returned to determine barriers.	By 6/22, access to buprenorphine certified prescribers will increase by 100%. By 6/21, 3 providers will obtain CME or CEU credits on MAT and how to obtain a DEA waiver.
Develop webinar offering CME credits on MAT and how to obtain a DEA waiver to prescribe buprenorphine.	7/1/20	9/1/20	MCAHEC	Webinar held and archived.	
Identify and provide information on best practices to physicians.	7/1/20	9/30/20	Coordinator, Renee Bolin	Best practices information disseminated.	
Recruit providers interested in pursuing waiver status.	8/1/20	6/30/21	Gerald Fillmore/WMH	# providers recruited.	
Establish 1:1 peer support and consultation for physicians interested in obtaining or who have obtained DEA buprenorphine waivers.	9/1/20	Ongoing	SEHD	# physicians accessing peer support.	
Incorporate reduction of MAT stigma in community education campaigns.	11/1/20	6/30/23	Education Committee	# educational presentations; #	

				fact sheets disseminated.	
Conduct bi-annual survey to track the number of patients receiving MAT.	7/1/20	Biannual	Coordinator	# surveys completed.	
Conduct bi-annual survey of providers participating in peer support activities.	2/1/21	Biannual	SEHD	# physicians participating in survey.	
Strategy #2: Increase availability of Naloxone					
Activities	Timeline		Who Is Responsible?	Process Indicators	Short-Term Outcomes
	Start Date	End Date			
Apply for federal or state grant funds to purchase Naloxone for distribution at community sites.	1/1/21	12/30/21	Share Health & Coalition partners	Grant funds obtained	By 12/30/21, Naloxone will be available at 5 sites throughout the county. By 6/30/21, 95% of first responders will have a Naloxone kit.
Distribute Naloxone to at-risk community members, and make available at community sites such as hospital/ER, jail, MAT providers, potential SSPs, health department and other outlets.	7/1/20	Ongoing	Coordinator	# and type of distribution sites.	
Continue to work with Georgia Overdose Prevention to obtain free Naloxone kits to distribute to active drug users, people on MAT and their loved ones.	7/1/20	Ongoing	Face-to-Face	# of Naloxone kits distributed.	
Obtain Naloxone training and kits for first responders through GA BHDD.	9/1/20	3/1/21	Coordinator	First responders trained.	
Work with local law enforcement and EMS to assure that costs of Naloxone are included in future agency budget requests.	7/1/20	6/30/22	Coordinator	Budget requests include cost of Naloxone.	
Offer individual Academic Detailing training to providers and prescribers.	10/1/20	6/30/21	SEHD trainers	# physicians and providers receiving training.	

Conduct periodic pharmacy surveys to determine Naloxone availability and cost.	7/1/20	Quarterly	Wayne CHD	# surveys and availability.	
Review and select evidence-based educational materials aimed at reducing stigma around SUD/OD.	7/1/10	7/30/20	Coordinator	Evidence-based materials selected and approved.	

Strategy #3: Increase local access to treatment and recovery programs					
Activities	Timeline		Who Is Responsible?	Process Indicators	Short-Term Outcomes
	Start Date	End Date			
Disseminate community-wide information about available treatment and recovery programs via social media and traditional outlets.	7/1/20	Ongoing	Coordinator	# dissemination sites	By 6/30/21, 50 professionals will receive training through GCSA. By 6/30/21, at least 2 additional behavioral health counselors will be CAC certified.
Conduct survey of behavioral health providers to determine barriers to recruiting and training professional staff.	7/1/20	7/30/20	Workforce Development Committee	Survey completed	
Coordinate treatment and recovery services through initiation of inter-agency case management services.	1/1/21	6/30/23	Workforce Development Committee	Interagency case management services begin.	By 6/30/21, a minimum of 10 individuals will be enrolled in peer support services. By 6/31/21, a minimum of 10 individuals impacted by opioids will be enrolled in support programs.
Provide training to behavioral health, social service, school, jail and health professionals on relevant topics such as ACEs, Trauma Informed Care, Messaging Training, MAT, MAT Stigma and the Science of Addiction Recovery.	10/1/20	4/31/21	Contract with GCSA GA Center for Child Advocacy	Training completed	
Provide anti-stigma training to treatment and recovery partners on benefits to all types of MAT.	10/1/20	9/30/21	SEHD	# of treatment/recovery staff trained.	
Identify and invite all providers to quarterly meetings to provide support.	3/1/21	Quarterly	Anchored in Wellness/Mattingly	Meetings initiated.	

Recruit and support CARES-certified peer support specialists and promote CAC training as appropriate.	1/1/21	6/30/23	Access Committee	Percent increase of CAC certified staff.	
Establish Access Committee to identify and address barriers to care for uninsured and underinsured, people in recovery, those with criminal records and active drug users.	7/1/20	Ongoing	Coalition partners	Committee established.	
Identify inpatient and outpatient care options for uninsured, people in recovery, those with criminal records and active drug users.	10/1/20	6/30/21	Access Committee	Number of care options identified.	
Develop partnership with Diversity Health Center (FQHC) to facilitate opening a clinic site offering OUD/SUD outpatient treatment care in Jesup.	10/1/20	6/30/23	Access Committee	Clinic opens.	
Explore feasibility of opening local inpatient treatment facility and MAT friendly halfway house.	4/1/21	9/30/21	Access Committee	Feasibility assessment completed and reported to Coalition.	
Based on assessment of need, expand peer support services to offer support, encouragement, distribute Naloxone, and educate regarding benefits of MAT.	1/1/21	3/31/21	Access Committee	Peer advocates hired and trained.	
Implement support programs by providers trained in SUD/ODU and related areas including trauma-informed care and ACE, utilizing evidence-based interventions for family members and children impacted by SUD/ODU.	4/1/21	1/31/22	Anchored in Wellness/Mattingly	Support program implemented.	
Utilize kiosk at jail for inmates to access WARN Line, GCSA resources and link to MAT and harm reduction resources.	7/1/21	1/31/22	Face to Face	Kiosk in use.	

Objective 2: Decrease availability of opioids in Wayne County

Intermediate Outcome: By 6/30/22, the number of opioid prescriptions in Wayne County will be reduced by 35%

Intermediate Outcome Indicators:

- By 6/30/21, the number of opioid prescriptions in Wayne County will be reduced by 25%..

Strategy #1: Train providers and prescribers on alternatives to opioids

Activities	Timeline		Who Is Responsible?	Process Indicators	Short-Term Outcomes
	Start Date	End Date			
Offer individual Academic Detailing training to prescribers and providers.	7/1/20	6/30/23	SEHD trained staff	# physicians and prescribers trained.	By 6/30/21, 30% of Wayne County providers and prescribers will have undergone Academic Detailing training.
Improve accessibility to local alternative pain management options by providing community education through social and traditional media outlets.	7/1/20	8/30/20	Access Committee	# pain management options identified.	
Promote continuing education training for providers by recommending web-based continuing education on opioid prescribing practices and pain management.	2/1/20	6/30/23	Coordinator	# of providers who receive CEU credit	
Monitor yearly PDMP data to identify decreases in opioid prescriptions.	7/1/20	Annually	SEHD Epidemiology staff	% decrease in opioid prescriptions.	

Strategy #2: Implement community-wide education campaign

Activities	Timeline		Who Is Responsible?	Process Indicators	Short-Term Outcomes
	Start Date	End Date			

Offer Mental Health First Aid Training to first responders including law enforcement, fire fighters, EMS, DFCS and school personnel.	7/1/20	6/30/23	SEHD trained staff, Pineland BHDD	# individuals trained.	<p>By 7/1/21, 30 individuals will receive MH First Aid training.</p> <p>By 7/1/21, 100 individuals will be reached by Speaker's Bureau.</p> <p>By 7/1/21, 200 individuals will be reached through educational programs.</p> <p>By 12/31/21, 75% of first responders, jail staff and law enforcement personnel will be trained.</p>
Establish media campaign using social media, local TV station and local newspaper for OUD/SUD messaging.	7/1/20	6/30/23	Coordinator	Media plan developed and rolled out.	
Establish Speakers' Bureau, and provide volunteers with evidence-based materials and relevant data for presentations at local civic organizations, churches and other venues.	9/1/20	6/30/23	Education Committee	# presentations.	
Train law enforcement, first responders, jail staff on harm reduction strategies and MAT.	1/1/21	12/31/21	Education Committee	# in target group trained.	
Identify SUD/ODU evidence-based education program for youth.	6/1/20	8/31/20	Education Committee	Evidence-based program approved by Coalition.	
Deliver evidence-based drug prevention and awareness programs to youth at schools, churches and youth-serving agencies.	1/15/21	6/30/23	Education Committee	# of evidence-based programs initiated.	
Design and deliver educational awareness programs at churches, civic organizations and others to raise awareness of OUD/SUD, promote proper disposal of prescription medications and reduce stigma regarding OUD/SUD and MAT.	11/1/20	6/30/23	Education Committee	# educational programs delivered.	
Market and implement activities related to annual Drug Takeback Day.	10/1/20	10/1/22	Education Committee	Event held.	
Print and disseminate medication disposal cards at funeral homes, senior centers, pharmacies and other community sites.	6/1/20	Ongoing	Education Committee	# of cards distributed	

Objective 3: Identify and acquire funds to implement SUD/ODU prevention, treatment and recovery activities.					
Intermediate Outcome: By 6/30/22, WCSAC partners will demonstrate evidence of leveraging federal, state and local funds to continue their work.					
Intermediate Outcome Indicators:					
<ul style="list-style-type: none"> By 6/30/21, the Coalition will secure additional revenue from at least 1 source. 					
Strategy #1: Identify federal, state and local sources of funding and organize coordinated approach to solicit additional resources.					
Activities	Timeline		Who Is Responsible?	Process Indicators	Short-Term Outcomes
	Start Date	End Date			
Using WCSAC sustainability plan, identify cost for each activity requiring outside funding.	7/1/20	9/30/20	Sustainability Committee	Budget for each activity developed.	By 6/30/21, a system will be in place to coordinate activities to leverage funds for OUD/SUD activities.
Develop and maintain list of potential federal, state and private funders.	7/1/20	12/30/20	Share Health	Initial list of potential funders developed.	
Coordinate Coalition member activities to secure additional funding.	1/1/21	Ongoing	Share Health	Work team process developed.	
Strategy 2: Acquire federal, state and local resources to implement WCSAC activities.					
Activities	Timeline		Who Is Responsible?	Process Indicators	Short-Term Outcomes
	Start Date	End Date			
Develop local partnerships to reduce expenses through cost sharing, such as shared/donated space and shared staff.	1/1/21	12/30/23	Coordinator/Partners	MOAs developed.	

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Develop regional partnerships to identify opportunities for resource sharing.	1/1/21	12/30/23	Coordinator	Regional partners identified	
Submit federal, state and private funding applications.	1/1/21	Ongoing	Coordinator/Coalition members	# of grants submitted.	