

Final Recommendations and Action Plan to Improve Health Care Delivery in Monroe County



A Report of the Community Task Force for the Monroe County Community Health Initiative

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***Prepared by:
The Health Council of South Florida, Inc.***



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MONROE COUNTY COMMUNITY HEALTH INITIATIVE

Final Recommendations and Action Plan to Improve Health Care Delivery in Monroe County

Introduction and Purpose Overview

As part of an ongoing effort to assess the health care needs in Miami-Dade and Monroe Counties, the Health Council of South Florida, Inc. with the financial support of the Monroe County Board of County Commissioners launched the Monroe County Community Health Initiative (MCCHI) in February 2002. The goal of the Initiative was to outline the current health care delivery system and the health care needs of residents in the Upper, Middle and Lower Keys and develop recommendations/strategies for improving the health care delivery system in Monroe County.

The Monroe County Board of County Commissioners met in March, 2002, at which time they reviewed and unanimously approved the slate of members to serve on the MCCHI Task Force. The Task Force met between February 2002 and April 2003 and served as an advisory body to the MCCHI in order to assure that the information presented in the Initiative's reports provided an accurate description of the Monroe County community and that it was portrayed in a culturally sensitive manner. The role of the Task Force was to provide guidance within a local community driven approach to coordinate and enhance the health care delivery system in Monroe County. Task Force members included public and private health care providers, community advocates, religious leaders, and government representatives.

Between the months of February and August 2002, the MCCHI Task Force worked on developing the Monroe County Community Health Perspectives Report¹. The report outlines the results of the 1,132 Personal Interviews/Community Surveys conducted or collected between March and June 2002, the Physician Focus Group sessions held on May 7th and June 19th; and the three-site Town Hall Meeting conducted in Key Largo, Marathon and Key West on May 23rd. Collectively, these personal interviews, surveys, focus groups and community meetings succeeded in obtaining valuable community participation and information on access to health insurance and the availability of affordable health care as addressed by the MCCHI Task Force.

A second document developed by the MCCHI Task Force was the Monroe County Community Health Profile². This report presents a snapshot of the general level of health and health care resources available in Monroe County. In addition to providing a socio-demographic overview of the area and an analysis of health status indicators, the Profile contains an inventory of the primary health care delivery services available throughout Monroe County and quantifies the utilization of these services by area residents. Also included is a review of social and support services, as well as some of the other factors that have a direct impact on the community's health care.

¹ The Monroe County Community Health Perspectives Report was reviewed and unanimously approved by the Monroe County Board of County Commissioners on August 21, 2002.

² The Monroe County Community Health Profile was reviewed and unanimously approved by the Monroe County Board of County Commissioners on November 20, 2002.

After extensive review of the myriad of issues present in Monroe County, the MCCHI Task Force developed specific recommendations and strategies in the areas of Public Health/ Prevention, Direct Services, Insurance/Health Plan, as well as Elder Care. These efforts were designed to promote service delivery enhancements and improve the health of residents in Monroe County. These community-driven strategies are contained in this Final Recommendations and Action Plan to Improve Health Care Delivery in Monroe County document and serve as a blueprint for implementing changes to improve the health status of Monroe County residents.

Intended Audiences and Use of Materials

It is the intent of the MCCHI Task Force that this Action Plan serve all residents of Monroe County in several capacities. Health care providers, including private practitioners, community-based organizations, hospitals, assisted living facilities, home health providers, and trauma centers can support and/or implement the outlined strategies to advocate for additional school-based health services; reduce child abuse rates; assure access for trauma transport services countywide; expand the availability of assisted living facilities; and increase access to primary and specialty care services.

Recommendations and strategies geared toward health educators address disseminating user friendly materials in English, Spanish and Creole, establishing a telephone support network to provide educational information on the debilitating effects of substance abuse; as well as, utilizing existing tools (e.g., music) to develop public health messages.

Advocates addressing the County's growing number of uninsured are provided with specific Insurance/Health Plan related recommendations and strategies to mitigate this mounting concern. Finally, grant funders, including state and local governments, private foundation and other organizations, can use these recommendations/strategies in their decision-making process of awarding monies to grant applicants.

SUMMARY OF FINAL RECOMMENDATIONS

Part I: Public Health/Prevention

Recommendation 1

Provide education for prevention of chronic diseases, communicable diseases, unintentional injuries, and substance abuse.

Recommendation 2

Reduce infant mortality rates countywide.

Recommendation 3

Provide young adults with the necessary tools to make informed decisions regarding their sexual health.

Recommendation 4

Reduce the number of low birth weight babies and improve birth outcomes.

Recommendation 5

Advocate for additional school-based health services in Monroe County.

Recommendation 6

Reduce child, adult and elder abuse rates countywide.

Part II: Insurance/Health Plan

Recommendation 1

Develop a countywide health care coverage model including the uninsured and underinsured, regardless of employment status.

Recommendation 2

Encourage the establishment of a federally qualified health center working in collaboration with local private and public providers, including the Monroe County Health Department and the Rural Health Network.

Recommendation 3

Expand Health Flex Plan to include Monroe County.

Part III: Direct Services

Recommendation 1

Increase access to primary, secondary, specialty and dental care services.

Recommendation 2

Advocate for increased cultural sensitivity and competency among providers by encouraging them to develop linguistically and culturally appropriate services in concert with public health, social services and school systems.

Recommendation 3

Increase mental health and substance abuse services for children, teens, and adults.

Recommendation 4

Assure access for trauma transport services countywide.

Part IV: Elder Care

Recommendation 1

Increase access to licensed in-home services, including home health in Monroe County.

Recommendation 2

Expand the availability of adult day care centers and assisted living facilities (ALFs) countywide.

Monroe County Community Health Initiative

FINAL RECOMMENDATIONS AND ACTION PLAN

Part I: Public Health/Prevention

Recommendation 1

Provide education for prevention of chronic diseases, communicable diseases, unintentional injuries, and substance abuse.

Strategies

1. Support the “Know Your Numbers³” campaign sponsored by the Monroe County Health Department and funded by the CDC’s Bureau of Chronic Disease Prevention.
2. Attend certification classes to become a Wellness Education Counselor.
3. Collaborate with local community education system (e.g., college community, faith based groups/health ministries).
4. Enhance technology usage and make it work for public health. Be creative and utilize existing tools (e.g., music) to develop public health messages (e.g., high cholesterol blues, Rural Health Network’s “Wash your Hands” jingle).
5. Disseminate user friendly materials in English, Spanish, and Creole.
6. Establish a telephone support network to provide educational information on the debilitating effects of substance abuse (e.g., tobacco, alcohol, food).
7. Promote education on effects of club drugs⁴ (e.g., MDMA/Ecstasy, GHB, Rohypnol) to the body, particularly when used in combination with alcohol.
8. Streamline data collection and reporting systems to accurately identify high-risk groups at the zip code and/or census tract levels.

Process and Outcome Measures

1. Monroe County attains four-year goal of reaching approximately 40,000 residents through the “Know Your Numbers” campaign.
2. Twenty licensed health care professionals in Monroe County become certified as Wellness Education Counselors by 2007.
3. Increased collaborative educational efforts with local health ministry groups and community college.
4. A 10% decrease in deaths due to unintentional injuries from 55.72 per 100,000 population (1996-2000) to 50.15 per 100,000 population (2003-2007).

Healthy People 2010 Target: 20.8 deaths per 100,000 population.

5. A 10% decrease in the number of hospitalizations due to alcohol and drug abuse or dependence, detoxification from 106 in 2001 to 95 in 2007.

Healthy People 2010 Objective for State and Local Efforts: Increase the proportion of persons who are referred for follow-up care for alcohol problems, drug problems

³ The “Know Your Numbers” campaign is aimed at increasing an individual’s awareness of his/her blood pressure, pulse, body mass index, cholesterol, waist circumference, and weight measurements.

⁴ A collective term used for the drugs that are often associated with rave or dance parties. Source: National Institute on Drug Abuse, 2000.

- or suicide attempts after diagnosis or treatment for one of these conditions in a hospital emergency department.*
6. A countywide data warehouse to maintain morbidity and mortality data, as well as health services utilization data is established.

Recommendation 2

Reduce infant mortality rates countywide.

Strategies

1. Preserve high Healthy Start screening rates for prenatal care.
2. Advocate for consistent adherence to well child protocols (e.g., vision screenings up to 18 months for tumor detection).
3. Encourage health fairs to include information on well child screenings.
4. Promote the provision of well child care by Monroe County Health Department nurse practitioners and nurses.
5. Address funding constraints that limit access to well child care.

Process and Outcome Measures

1. A 5% decrease in infant mortality rates from 4.9 per 100,000 population (1996-2000) to 4.7 per 100,000 population (2003-2007).
Healthy People 2010 Target: 4.5 per 100,000 population.
2. A 10% increase in the number of well child care screenings performed by Monroe County Health Department nurse practitioners and nurses by 2007.
Healthy People 2010 Objective: Ensure appropriate newborn bloodspot screening, follow-up testing, and referral to services.

Recommendation 3

Provide young adults with the necessary tools to make informed decisions regarding their sexual health.

Strategies

1. Increase awareness among young adults of services available at Teen Clinics⁵ (e.g., sex education); consider collaborating with the school system.
2. Encourage parents to educate their children during the early years about sexual health, including contemporary environmental risk factors (e.g., HIV/AIDS).
3. Establish an interactive website that offers resource materials, includes links to other social service programs and provides an educational forum on sexual health.

Process and Outcome Measures

1. From a baseline of 360 teens in calendar year 2002, increase the number of young adults utilizing the Teen Clinic for sexual health services by 10%.
2. A quantifiable increase in the number of teenagers receiving efficient, non-judgmental, risk reduction professional services at the Teen Clinic.
3. An interactive website offering resource materials on sexual health is established.

⁵ The Teen Clinics are sponsored by the Monroe County Health Department & Womankind. The clinics, which are both located in Key West, provide free and confidential services for all teens with regards to their sexual and reproductive health.

Recommendation 4

Reduce the number of low birth weight babies and improve birth outcomes.

Strategies

1. Support the Florida Keys Healthy Start Coalition in its efforts to reduce the number of low birth weight babies and improve birth outcomes
2. Increase the number of prevention strategies, including education efforts, environmental controls on smoking, and restrictions on tobacco availability, including increased tobacco excise taxes and bans on cigarette vending machines.
3. Explore best clinical and administrative practices toward improving birth outcomes.

Process and Outcome Measures

1. A 7% decrease in the percentage of low birth weight babies from 5.7% (1996-2000) to 5.3% (2003-2007).
Healthy People 2010 Target: 5.0%.
2. A quantifiable decrease in the number of adverse birth outcomes including birth defects related to alcohol, tobacco, and drug use.
Healthy People 2010 Objective: Increase abstinence from alcohol, cigarettes, and illicit drugs among pregnant women.

Recommendation 5

Advocate for additional school-based health services in Monroe County.

Strategies

1. Expand school nurse programs.
2. Consider impact/limitations as a result of the nursing shortage.
3. Advocate for increased pregnancy prevention programs for at-risk youth.
4. Address funding issues that limit the amount of school-based health services offered.
5. Collaborate with schools, the local health department, and the local Area Health Education Center to expand Wellness Screening Program mini-fairs.
6. Expand health education programs to address obesity, diabetes, nutrition, smoking and drinking behavior, hypertension and blood pressure.
7. Expand screening efforts (e.g., dental, vision, hearing, physical development) for children in child care programs.

Process and Outcome Measures

1. At a minimum, one health nurse should be available in every school with sufficient operational funds appropriated through resources such as those from the Tobacco Settlement Funds.
2. A 5% decrease in the percentage of live births to adolescents aged 10 to 17 years from 3.2% (1996-2000) to 3.0% (2003-2007).
Healthy People 2010 Target: 43 pregnancies per 1,000 live births.
(Note: Healthy People 2010 target is for female adolescents aged 15 to 17 years)
3. A 5% increase in funding for school-based health services in Monroe County from \$518,767⁶ in 2003 to \$544,705 in 2007.

⁶ The majority of these funds are provided by the Monroe County Health Department. Source: Finance Department, Monroe County School Board, March 2003.

Recommendation 6

Reduce child, adult and elder abuse rates countywide.

Strategy

1. During the month of April, participate in Child Abuse Prevention Month activities.
2. Support the Blue Ribbon Campaign sponsored by the Wesley House Families Available for Children in Emergency Shelter (FACES) Program, in conjunction with the Wesley House Family Services Neighborhood Centers and the Department of Children and Families, to increase awareness among Monroe County residents of the need to prevent child abuse.
3. Refer at-risk families to attend child abuse prevention education classes offered through Wesley House Family Services' Neighborhood Centers located in Key West, Marathon, and Tavernier.
4. Offer additional support services to distressed families after natural disasters (e.g., hurricanes) occur.
5. Collaborate with the Wesley House FACES Program to increase the number of licensed foster homes⁷ in Monroe County.
6. Conduct abuse screenings at health department clinics.
7. Offer child abuse risk screenings through the Healthy Start Program and provide referrals to appropriate programs.
8. Encourage training/education of medical personnel for screening and referrals for suspected abuse and neglect among children and elders.
9. Support Healthy Families Monroe, a child abuse prevention program offered by Wesley House for targeted high risk families with newborns and children up to age five.

Process and Outcome Measures

1. A quantifiable decrease in the number of occurrences and reoccurrences of child abuse.
2. A 10% increase in the number of families attending child abuse prevention education classes at Wesley House Family Services Neighborhood Centers.
3. A quantifiable decrease in the number of child abuse incidents occurring after a natural disaster (e.g., hurricane).
4. A 20% increase in the number of licensed foster homes in Monroe County from 31 (as of June 2002) to 40 by June 2005.

⁷ As of June 2002, there were 31 licensed foster homes in Monroe County. Through a grant from the Florida Department of Children and Families, Wesley House administers and operates the Wesley House Families Available for Children in Emergency Shelter (FACES) Program which aims to recruit 16 new licensed foster homes in Monroe County, through community outreach presentations to social organizations, church groups and a media campaign to promote interest in foster care.

Part II: Insurance/Health Plan

Recommendation 1

Develop a countywide health care coverage model, including the uninsured and underinsured, regardless of employment status.

Strategies

1. Support the work of the Health Insurance Task Force to identify solutions to the challenges of obtaining affordable health care coverage for Florida Keys residents.
2. Explore best practices to identify health insurance crisis solutions.
3. Examine established Trust Fund models and adapt to Monroe County.
4. Preserve private base of healthcare providers.
5. Coordinate efforts with the Insurance Commissioner and other partners (e.g., insurance companies, hospitals, businesses, physicians).

Process and Outcome Measures

1. A new countywide health care plan for the uninsured and underinsured
2. An actuarial analysis that identifies the total number of individuals anticipated to participate, and the overall yearly and monthly cost of providing health care coverage similar to that provided to Monroe County employees.
3. A Trust Fund, which would include both public and private funds, is established in Monroe County to help defray the plan cost.

Recommendation 2

Encourage the establishment of a federally qualified health center working in collaboration with local private and public providers, including the Monroe County Health Department and the Rural Health Network.

Strategies

1. Build on existing infrastructure by utilizing the Good Care Clinic as a model for a pilot project.
2. Apply for Medically Underserved Area redesignation by the U.S. Department of Human Services, Bureau of Primary Health Care.

Outcome Measures

1. A federal qualified health center that builds on a local model is established.
2. Monroe County is redesignated as a Medically Underserved Area under new federal guidelines.

Recommendation 3

Expand Health Flex Plan⁸ to include Monroe County.

⁸ The Health Flex Plan was created by the 2002 Legislature (Senate Bill 46-E) as a pilot program for the north, central and southern areas of the State that have the highest levels of uninsured residents and includes Miami-Dade County. Plans developed will not be as expensive as current health care insurance since the plans are not subject to mandates of the Florida Insurance Code and the law regulating Health Maintenance Organizations and insurance plans. To qualify an individual must be a resident of the State and 64 years of age or younger, with a family income of up-to 200 percent of the poverty level, have not been covered by a private insurance policy for the past 6 months and not be eligible for coverage by a public health care program (Source: Agency for Health Care Administration, April 2003).

Strategy

Support Monroe County in its efforts to be included in the Health Flex program since Miami-Dade and Monroe County's health care systems are intertwined.

Outcome Measure

The Health Flex Plan is expanded to include Monroe County.

Part III: Direct Services

Recommendation 1

Increase access to primary, secondary, specialty and dental care services.

Strategies

1. Encourage more primary care physicians, particularly in the Middle Keys, to offer extended evening and weekend hours to accommodate the schedules of working families.
2. Advocate for more physicians to accept KidCare and Medicaid.
3. Increase the participation by physicians in the care of the medically indigent, including the provision of preventive care.
4. Address reimbursement issues (e.g., Medicaid).
5. Expand KidCare outreach.
6. Increase dental services.
7. Study waiver possibility to expand coverage to KidCare parents.
8. Provide coverage to immigrant children currently on KidCare waiting list.
9. Increase primary and secondary care women's health services.

Process and Outcome Measures

1. Extended evening and weekend hours among Middle Keys physicians.
2. A 15% increase in the number of physicians who accept KidCare from 51 in 2002 to 59 in 2007.
3. A 10% increase in the number of physicians who accept Medicaid from 62 in 2002 to 68 in 2007.
4. KidCare coverage is expanded to cover KidCare parents and immigrant children.

Recommendation 2

Advocate for increased cultural sensitivity and competency among providers by encouraging them to develop linguistically and culturally appropriate services in concert with public health, social services and school systems.

Strategies

1. Promote the recruitment, hiring and retention of medical and other personnel, including mental health therapists, from minority groups.
2. Educate providers on the need for cultural responsiveness according to local community populations served.
3. Endorse outreach activities in areas where there are few providers targeting high risk populations.

Process and Outcome Measures

Cultural competency training programs; outreach conducted among high-risk groups; culturally competent health and human service personnel.

Recommendation 3

Increase mental health and substance abuse services for children, teens and adults.

Strategies

1. Increase utilization of available grant funding for mental health services by identifying individuals with unmet needs (i.e., case finding).
2. Engage in early prevention activities through collaborative efforts with schools, parents, and juvenile court system.
3. Address reimbursement issues.
4. Advocate for the expansion of mental health and substance abuse programs available through the Department of Children and Families' contractual service providers.
5. Increase the number of quantifiable indicators regarding the incidence and prevalence of mental illness among populations.
6. Support the National Mental Health Association and advocate for comprehensive health insurance parity.⁹
7. Promote the recruitment, hiring and retention of mental health therapists from minority groups.
8. Expand crisis services for suicide reduction.
9. Obtain child/adolescent substance abuse beds for inpatient substance abuse services and secure appropriate funding.
10. Advocate for better reimbursement rates for mental health and substance abuse services.
11. Assure collaboration between social service agencies and mental health clinics through multi-disciplinary staffing and referrals to assure services for families.

Process and Outcome Measures

1. A measurable increase in the number of mental and substance abuse services available for kids and teens.
2. The availability of at least two child/adolescent substance abuse beds in Monroe County by 2007.
3. Passage of a Mental Health Parity bill; expanded coverage.
4. Increased reimbursement rates for mental health and substance abuse services provided to Monroe County residents of all ages.

⁹ According to the National Mental Health Association, comprehensive mental health parity “would ensure that mental health care, including substance abuse treatment, would have the same insurance coverage as physical health care”.

Recommendation 4

Assure access for trauma transport services countywide.

Strategies

1. Secure dedicated flight crews to assure coverage of multiple incidents within same geographic area.
2. Reexamine law pertaining to health taxing districts and consider possible applications countywide and at the local levels.

Outcome Measure

Increased access in the Middle and Lower Keys for trauma transport services.

Part IV: Elder Care

Recommendation 1

Increase access to licensed in-home services, including home health in Monroe County.

Strategies

1. Adopt sliding fee scale to increase access to in-home services among the working poor.
2. Decrease waiting lists for in-home services.
3. Explore best practices models of home based services that integrate physician home visits and disease management for chronic disease (e.g., congestive heart failure, advanced diabetes, hypertension, stroke).
4. Support the development of a network of elder care that provides 24-hour assistance by on-call physicians and nurses via a telephone triage helpline.
5. Encourage public/private partnerships to maximize resources provided through Older American Act funds and private home health agencies.
6. Explore cost-effective and comprehensive prescription assistance programs for the elderly.
7. Explore the formation of a Memory Disorders Clinic¹⁰.
8. Institute abuse screening and referral services.

Process and Outcome Measures

1. A quantifiable increase in the number of in-home services provided to the working poor in Monroe County.
2. A quantifiable reduction in unlicensed and unsupervised in-home services provided in Monroe County.
3. A reduced waiting list for in-home services.
4. Better management of resources coupled with enhanced clinical outcomes.
5. The establishment of a telephone triage helpline to facilitate the provision of elder care to Monroe County residents facing barriers to accessing care (e.g., transportation).
6. The creation of public/private partnership for the provision of in-home services.
7. A quantifiable increase in access to prescription assistance services for the elderly.

¹⁰ Memory Disorder Clinics provide state of the art diagnosis and treatment of memory disorders (e.g., Alzheimer's Disease) and age associated memory impairment.

8. The establishment of a Memory Disorders Clinic to provide diagnosis and treatment services for memory disorders and age associated memory impairment.

Recommendation 2

Expand the availability of adult day care centers and assisted living facilities (ALFs) countywide.

Strategies

1. Support the development of a 52 bed ALF in Key West.
2. Support church/faith-based and other adult day care program development.
3. Promote full services at ALFs; expand number of medical and support services offered.

Process and Outcome Measures

1. An increase in the number of medical and support services offered at ALFs countywide.
2. A 150% increase in the number of ALF beds available countywide from 35 to 87.