FY 2021/22 BUDGET WORKSESSION #3

TUESDAY, JUNE 15, 2021

BCC CHAMBERS 9:30 AM - 5:00 PM

AGENDA

9:30 OPENING COMMENTS

CONSTITUTIONAL OFFICERS

Property Appraiser - David Johnson

Clerk of the Circuit Court and Comptroller - Grant Maloy

Supervisor of Elections – Chris Anderson

Tax Collector - J. R. Kroll

Florida Department of Health – Donna Walsh

12:00 LUNCH

1:00 COURT SUPPORT

18th Judicial Circuit Court - Judge Jessica Recksielder

Guardian Ad Litem - Amber Padrick

Public Defender - Blaise Trettis

** LYNX

** May be moved to the morning session if time permits

Public Comments

Board of County Commissioners Questions/Discussion/Direction

WORKSESSION #4 - TUESDAY, JUNE 29, 2021

BCC DEPARTMENTS
CAPITAL PROGRAMS

WORKSESSION #5 - TUESDAY, AUGUST 10, 2021 (IF NECESSARY)



FY 2021/22 BUDGET WORKSESSION #3

JUNE 15, 2021 9:30AM



CONSTITUTIONAL OFFICERS

- Property Appraiser David Johnson
- Clerk of Court & Comptroller Grant Maloy
- Supervisor of Elections Chris Anderson
- Tax Collector J.R. Kroll

FLORIDA DEPT OF HEALTH

Donna Walsh

Lunch Break



LYNX TRANSIT

James Harrison

COURT SUPPORT

- 18TH Judicial Judge Jessica Recksiedler
- Guardian Ad Litem Amber Padrick
- Public Defender Blaise Trettis



PROPERTY APPRAISER

David Johnson





FY 2021/22 Budget Worksession Property Appraiser Budget Update

Budget Submitted to DOR



	DR-484, R. 12/1-
	Rule 12D-16.002, F.A.C
	Provisiona
BUDGET REQU	UEST FOR PROPERTY APPRAISERS
2	
	Appraiser ofSeminole County, Florida, certify the proposed budget
or the period of October 1, 2021, through September 30,	2022, contains information that is an accurate presentation of our work program
or the period of October 1, 2021, through September 30,	2022, contains information that is an accurate presentation of our work program
or the period of October 1, 2021, through September 30,	2022, contains information that is an accurate presentation of our work program
or the period of October 1, 2021, through September 30,	2022, contains information that is an accurate presentation of our work program
or the period of October 1, 2021, through September 30,	2022, contains information that is an accurate presentation of our work program
	2022, contains information that is an accurate presentation of our work program is (section 195.087, F.S.).

Budget must be submitted to DOR by June 1st per Florida Statute 195.087

Budget Submitted to DOR



APPROPRIATION	ACTUAL	APPROVED	ACTUAL	- 1	(INCREASE/	DECREASE)
CATEGORY	EXPENDITURES 2019-20	BUDGET 2020-21	EXPENDITURES 3/31/21	REQUEST 2021-22	AMOUNT	96
(1)	(2)	(3)	(4)	(5)	(6)	(6a)
PERSONNEL SERVICES (Sch. 1-1A)	5,379,394	5,639,399	2,779,537	5,718,612	79,213	1.4%
OPERATING EXPENSES (Sch. II)	686,375	607,300	250,581	706,100	98,800	16.3%
OPERATING CAPITAL OUTLAY (Sch. III)	62,846	19,250	1,199	22,000	2,750	14.3%
NON-OPERATING (Sch. IV)		0		0	0	
TOTAL EXPENDITURES	\$6,128,615	\$6,265,949	\$3,031,317	\$6,446,712	\$180,763	2.88%
NUMBER OF POSITIONS		49		48	(1)	-2.0%
					COL (5) - (3)	COL (6) / (3)

^{*1.4%} increase in Personnel Services due to 3% salary increases, FRS, and insurance rates

^{*16.3%} increase in Operating Expenses due to aerial photography

Budget Submitted to DOR



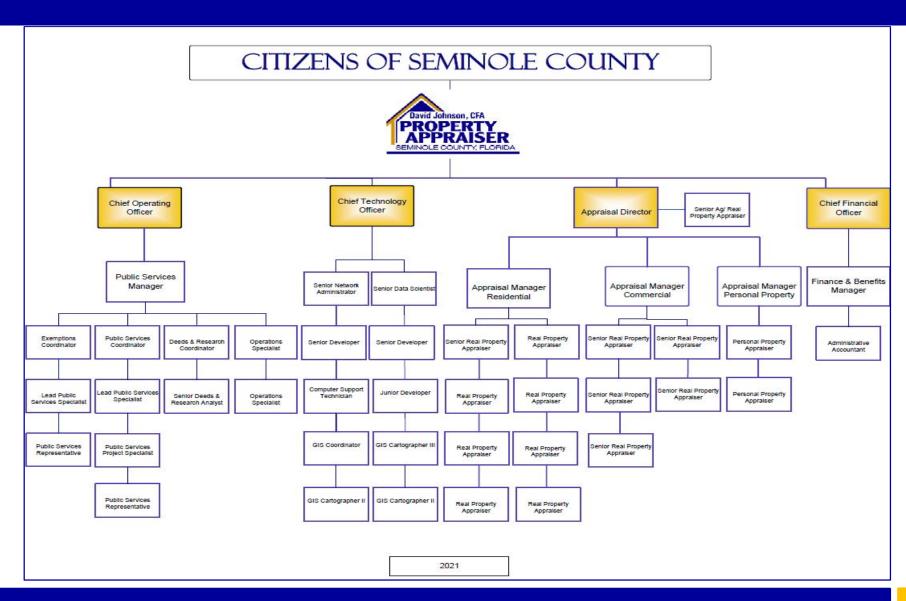
Required by statute with annual budget submission:

- Schedule I (Salaries)
- Schedule IA (Personnel Services)
 - Insurance, FRS, FICA
- Schedule II (Operating)
 - Professional Services, Transportation, Equipment, Leases
- Schedule III (Capital Outlay)
- Schedule IV (Non-Operating)
 - Contingency
- Justification Worksheets for all schedules and positions
- Justification Worksheets for Contracts, Travel, Postage, Education, Vehicles
- Organizational Chart of approved positions
- Budget Summary is posted to our website, as required by law
- SCPA also posts annual audits to our website

https://www.scpafl.org/Budget

Organizational Chart





County Budget Letter



County Portion



May 26, 2021

Honorable Lee Constantine, Chairman Seminole County Board of County Commissioner 1101 East First Street Sanford FL 32771

Dear Mr. Constantine:

Pursuant to Chapter 192.091, Florida Statutes, the total budget submitted to the Department of Revenue for the Seminole County Property Appraiser's 2021-2022 fiscal year is \$6,446,712.

Based on the budget proposed and submitted to the Department of Revenue, the Seminole County Board of County Commissioner's proportionate share is \$5,524,187.51, which is 85.69% of the total proposed budget. Therefore, this amount should be included in your 2021-22 budget and will be billed in one annual installment of \$5,524,187.51, commencing October 1, 2021.

These figures are subject to change upon final approval by the Department of Revenue, but the change should be negligible.

Thank you for your assistance with this matter. If you should have any questions please call me at (407) 665-7500.

Sincerely,

David Johnson, CFA Seminole County Property Appraiser

CC: Lorie Bailey Brown, Resource Management Director Timothy Jecks, Budget Division Manager Wendy Aviles, Accounting Specialist



Awarded the Certificate of Excellence in Assessment Administration



Road Portion



May 26, 2021

Honorable Lee Constantine, Chairman Seminole County Unincorporated Road District 1101 East First Street Sanford FL 32771

Dear Mr. Constantine:

Pursuant to Chapter 192.091, Florida Statutes, the total budget submitted to the Department of Revenue for the Seminole County Property Appraiser's 2021-2022 fiscal year is \$6,446,712.

Based on the budget proposed and submitted to the Department of Revenue, the Seminole County Unincorporated Road District's proportionate share is 522,563.49, which is .35% of the total proposed budget. Therefore, this amount should be included in your 2021-22 budget and will be billed in one annual installment of \$22,563.49, commencing October 1, 2021.

These figures are subject to change upon final approval by the Department of Revenue, but the change should be negligible.

Thank you for your assistance with this matter. If you should have any questions please call me at (407) 665-7500.

Sincere

David Johnson, CFA Seminole County Property Appraiser

CC: Lorie Bailey Brown, Resource Management Director Timothy Jecks, Budget Division Manager Wendy Aviles, Accounting Specialist



Awarded the Certificate of Excellence in Assessment Administration



Fire Portion



May 26, 2021

Honorable Lee Constantine, Chairman Seminole County/Municipal Fire District 1101 East First Street Sanford FL 32771

Dear Mr. Constantine:

Pursuant to Chapter 192.091, Florida Statutes, the total budget submitted to the Department of Revenue for the Seminole County Property Appraiser's 2021-2022 fiscal year is \$6.446,712.

Based on the budget proposed and submitted to the Department of Revenue, the Seminole County/Municipal Fire District's proportionate share is \$805,839.00, which is 12.50% of the total proposed budget. Therefore, this amount should be included in your 2021-22 budget and will be billed in one annual installment of \$805,839.00, commencing October 1, 2021.

These figures are subject to change upon final approval by the Department of Revenue, but the change should be negligible.

Thank you for your assistance with this matter. If you should have any questions please call me at (407) 665-7500.

Sincerely

David Johnson, CFA Seminole County Property Appraiser

CC: Lorie Bailey Brown, Resource Management Director Timothy Jecks, Budget Division Manager Wendy Aviles, Accounting Specialist



Awarded the Certificate of Excellence in Assessment Administration



PA Budget per Capita



Statewide Median: \$25, Ranges from \$9.53 - \$74.32

Seminole: \$13.15

8th lowest in state out of 67 counties, 13th largest population

Brevard: \$15.44

Lake: \$12.44

Orange: \$13.32

Osceola: \$18.66

Polk: \$14.47

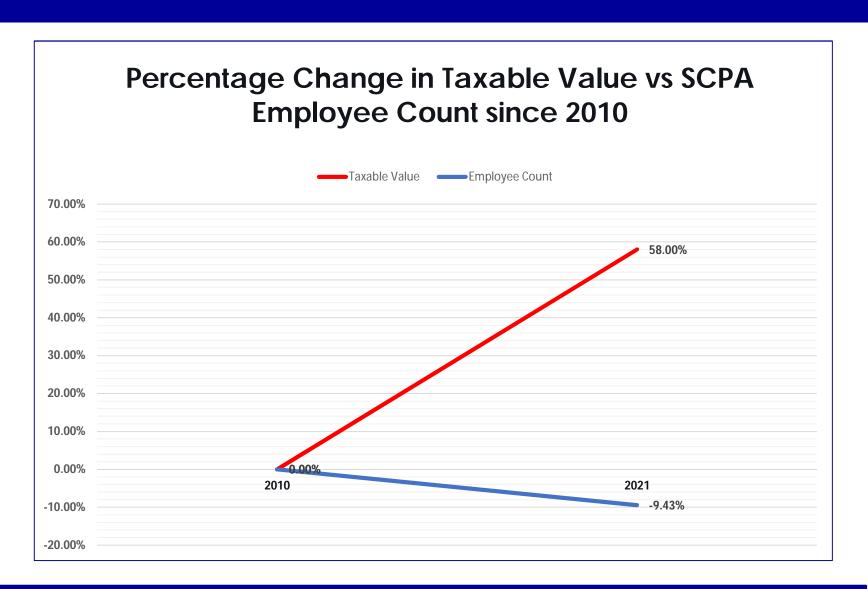
Volusia: \$20.40

Sarasota: \$15.93



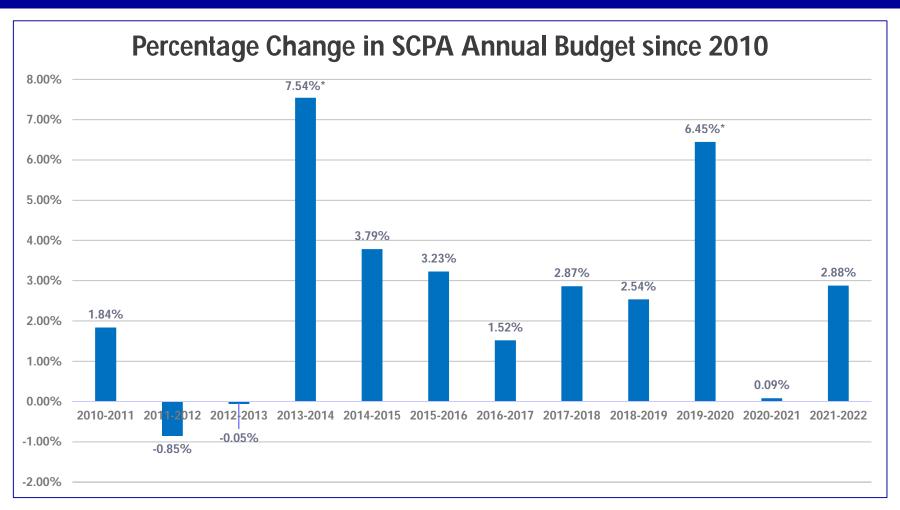
History





History





Average of 2.65% annual increase since 2010

*2013-14 and 2019-20 increases due to increases in health insurance premiums and FRS rates





QUESTIONS?



CLERK OF COURT & COMPTROLLER

Grant Maloy

Seminole County Clerk of the Circuit Court and Comptroller



Fiscal Year 2022 Proposed Budget

Presentation For the Board of County Commissioners

June 15, 2021



Accomplishments and Initiatives



- While several Clerk Offices laid off employees during the pandemic, our partnership with the County enabled us to retain all court employees.
- We were able to leverage employees to the County to respond to the needs of the community by providing staff to help with the CARES Act funding.
- The County provided financial assistance that helped us comply with social distancing requirements as well as provide safety measures for our citizens and employees.
- Cubicles were added at the Record Center for customer social distancing as well as a walk-up window at the Criminal Justice Center.



Accomplishments and Initiatives



- The Self-Help Center was completed and will provide citizens limited legal guidance and filing information needed to represent themselves before the court for issues such as evictions and small claims.
- We partnered with Turbo Court to provide Self-Help forms for Landlord Tenant Disputes, Domestic Violence Protection and Dissolution of Marriage.
- Jurors made contributions of approximately \$9,600 of their jury pay to selected non-profit organizations within the County.
- Information Services created Telework capabilities that allow the Clerk to maintain full functionality throughout the COVID-19 pandemic.





Technology Enhancement Projects



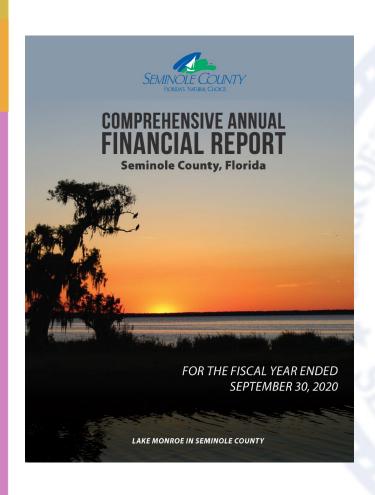
- Accounts Payable Automation Solution
- TimeClock Plus
- Electronic Paystubs
- Online Marriage Licenses
- Cloud backups for all Clerk systems, including JD Edwards
- eRecording Notices of Commencement from the Building department
- Enhanced online Value Adjustment Board portal
- Relocated (JD Edwards) Disaster Recovery Site from Civil Courthouse to Criminal Justice Center
- Environmental Services now uses RFgen Solution for Mobile Barcoding of its inventory which integrates with JD Edwards



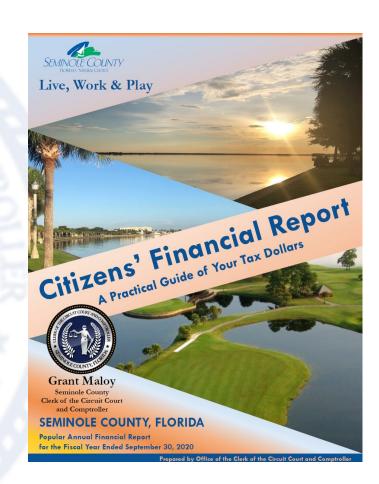


Financial Responsibility and Accountability





- Received unmodified opinion from our fiscal year 2020 audit.
- Awarded the Certificate of Achievement for Excellence in Financial Reporting by the Government Finance Officers Association (GFOA) for the County's Comprehensive Annual Financial Report for the fiscal year ended September 30, 2019.
- Received GFOA Award for Outstanding Achievement in Popular Annual Financial Reporting for the Citizens' Financial Report for the fiscal year ended September 30, 2019.

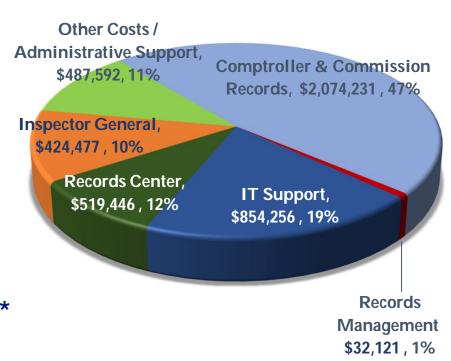


Budget Summary By Department



Department	FY2020/21 Approved Budget	FY2021/22 Proposed Budget	Dollar Variance	% Change
Comptroller & Commission Records	\$2,063,795	\$2,074,231	\$ 10,436	0.5%
Records Management	68,153	32,121	(36,032)	-52.9%
Information Services	656,514	854,256	197,742	30.1%
Inspector General	392,129	424,477	32,348	8.2%
Records Center	427,524	519,446	91,922	21.5%
Other Costs / Administrative Support	293,129	487,592	194,463	66.3%
Total Proposed Budget	3,901,244	4,392,123	490,879	12.6%
Budget Amendment for 3% Salary Increase	30,883	0	(30,883)	<u>-100.0%</u>
Total Clerk's Budget	<u>\$3,932,127</u>	<u>\$4,392,123</u>	<u>\$459,996</u>	<u>11.7%</u>

FY 2021/22 Budget By Department



^{*} Includes 2 new FTEs totaling \$193k, net increase without new FTEs is 5.5%

Budget Summary By Account



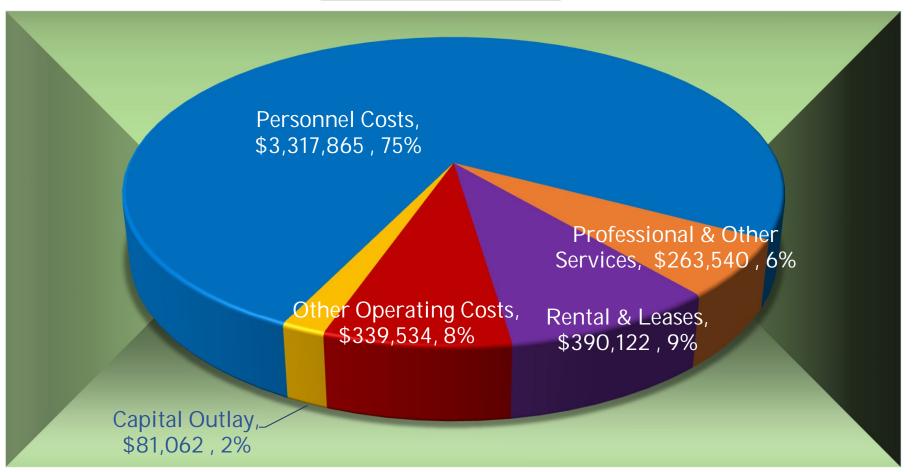
Account	FY21/22 Proposed Budget
Personnel Costs	
5101X0 Salaries and Wages	\$ 2,195,824
5102XX Taxes and Benefits	1,122,042
Personnel Costs Total	3,317,865
Operating Expenses	
5303X0 Professional Services & Other Services	263,540
530400 Travel and Per Diem	12,893
530410 Communications	94,900
530420 Postage	760
530430 Utilities	5,550
530440 Rental and Leases	390,122
530451 Property Taxes	19,500
53046X Repairs and Maintenance	103,953
530470 Printing and Binding	13,623
530490 Other Charges/Obligations	2,000
53051X Office Supplies	17,922
53052X Operating Supplies and Equipment	32,099
530540 Books, Dues, Publications	8,078
530550 Training	28,255
Operating Expenses Total	<u>993,196</u>
5606XX Capital Outlay	81,062
TOTAL FY 2021/22 CLERK'S PROPOSED BUDGET	<u>\$4,392,123</u>



Budget Summary By Category



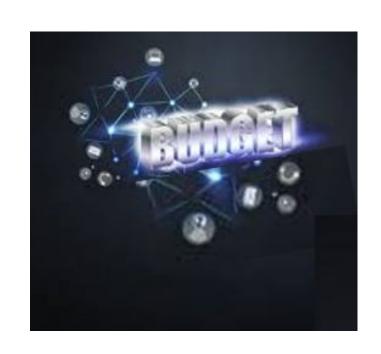




Clerk of the Circuit Court and Comptroller's Budgeted FTE



Department	FY2020/21 Approved Budget	FY2021/22 Proposed Budget	Increase (Decrease)
Comptroller's Office	17.70	17.83	0.13
County Records	3.00	3.00	0.00
Records Management	1.14	0.45	(0.69)
Information Services	3.35	4.71	1.36
Inspector General	3.00	3.00	0.00
Purchasing/Mail	0.31	0.34	0.03
Admin/Finance	1.82	2.57	0.75
Human Resources	0.31	0.34	0.03
Totals	<u>30.63</u>	<u>32.25</u>	<u>1.62</u>



^{*} Includes Network Security Administrator

FY 2022 Proposed Budgε

Seminole County Clerk of the Circuit Court and Comptroller



QUESTIONS



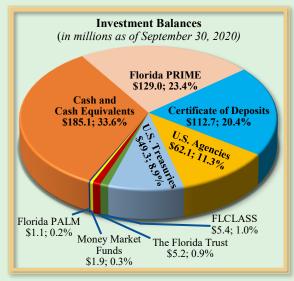
NON-COURT GENERAL FUND PROPOSED BUDGET

For the Fiscal Year Ending September 30, 2022

Grant Maloy

Seminole County Clerk of the Circuit Court and Comptroller

Investments



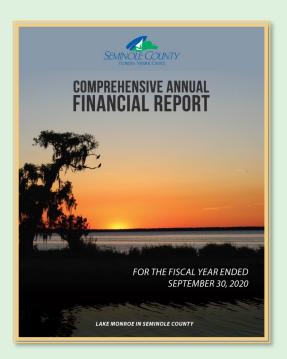
VAB Online Portal Access

County Recorder

Commission Minutes & Records



Comptroller's Office



Accounts Payable and Payroll



Inspector General/Auditor









Clerk of the Circuit Court and Comptroller Seminole County

April 30, 2021

Commissioner Constantine, Chairman Seminole County Board of County Commissioners 1101 E. First Street Sanford, Florida 32771

RE: Clerk of the Circuit Court Non-Court General Fund Budget for Fiscal Year 21-22

Dear Chairman Constantine:

Attached is the fiscal year 21-22 non-court budget for the Seminole County Clerk of the Circuit Court and Comptroller (the "Clerk"). The non-court budget includes expenditures relating to the Clerk's functions as Clerk to the Board of County Commissioners, Comptroller, Auditor, County Recorder, Value Adjustment Board Clerk and Custodian of funds for the Seminole County Board of County Commissioners (the "County").

We continue to increase our electronic operations to assist residents and facilitate the community's needs, which was vital due to the COVID-19 pandemic. The fiscal workload and responsibilities continue to increase and have been compounded by the COVID-19 responses to the community.

The total transfer request from the County for fiscal year 21-22 is \$4,392,123. This constitutes an increase of approximately \$460,000 over the approved funding received for fiscal year 20-21.

Staffing

The proposed budget includes two new positions totaling approximately \$193,000. One of the positions is for the Comptroller's Office to compensate for the rising transaction volumes brought by Fleet being in-sourced instead of the previously outsourced contract. In addition, the County's accounts payable activity has increased as a result of the Infrastructure Sales Tax projects, the transactions in connection with the various stimulus dollars and the expected increase activity for the Five Points Project.

The other position is for the Information Services Department to help protect technology resources in response to increased ransomware attacks against government agencies, resulting in multimillion-dollar payouts and the loss of public records. This position will work in concert with the County's two new Network Administrator (Security/Cybersecurity Administrator) positions to strengthen Seminole County's overall cybersecurity capabilities.

The other remaining increase of approximately \$267,000 is primarily attributable to anticipated increase in health insurance, FRS and three percent salary increase.

Cost per Resident

We are providing comparisons of the non-court budgets for the Clerk's operations in terms of cost per resident in comparison with other counties. Our cost remains at the low end of funding per resident.

					TRANSFER	POPULATION		
	2021				AS PERCENT	AS LISTED IN		
	NONCOURT		2021 TOTAL		OF TOTAL	2021		
COUNTY	CLERK		GENERAL FUND		GENERAL	ADOPTED	СО	ST PER
NAME		FUNDING	REVENUE FUND BUDGET		RE	SIDENT		
SEMINOLE	\$	3,932,127	\$	289,898,506	1%	476,727	\$	8.25
LAKE	\$	5,041,064	\$	189,184,340	3%	357,247	\$	14.11
SARASOTA	\$	10,736,102	\$	322,893,016	3%	438,816	\$	24.47

Summary

As Clerk, I have attempted to maintain a high level of service to the public, while keeping costs within minimal growth limits. We continue to look for better ways to do business through technology and the streamlining of processes. We strive to maintain an efficient and effective operation. I believe that we have accomplished this, even though we have experienced ongoing increases in workload for noncourt.

We will continue to work as a team with the County to address the community's needs as we work through the impacts of the pandemic.

If you should have any questions or need additional information regarding this budget request, please do not hesitate to contact me at 407-665-4335 or Jenny Spencer, Director of Comptroller's Office at 407-665-7665.

Respectfully submitted,

Grant Maloy, Clerk of the Circuit Court and Comptroller

Attachments

Cc: Commissioner Bob Dallari

Commissioner Jay Zembower

Commissioner Amy Lockart

Commissioner Andria Herr

County Manager Nicole Guillet

Resource Management



CLERK OF THE CIRCUIT COURT & COMPTROLLER SEMINOLE COUNTY FY 21-22 BUDGET REQUEST

TO ECOUNTY FORM	Approved and Funded Budget Fiscal Year 20-21	Requested Budget Fiscal Year 21-22
Comptroller's Office and County Commission Records		
Personnel Services:		
Comptroller's Office	\$ 1,604,767	\$ 1,561,864
County Commission Records	260,178	279,617
Total Personnel Services and Related Benefits	1,864,945	1,841,481
Operating Expenditures		
Comptroller's Office	42,300	71,500
County Commission Records	5,050	14,750
	47,350	86,250
Other Operating Expenses:	1 500	1 500
Disclosure Counsel	1,500	1,500
Valuation of OPEB (Other Post Employment Benefits) Investment Custodian Fees	30,000 60,000	60,000
Professional Services for Financial Reporting	60,000	60,000
AP Automation Solution Maintenance	-	25,000
Total Other Operating Expenditures	151,500	146,500
Total Comptroller's Office & County Commission Records	2,063,795	2,074,231
Records Management:		
Personnel Services	66,704	29,409
Operating Expenditures	1,449	2,711
Total Records Management	68,153	32,121
Information Carvisos Cunnerts		
Information Services Support: Personnel Services	417 620	E71 140
Operating Expenditures	417,620 23,161	571,149 46,915
Communications	65,000	94,900
Maintenance Contracts	72,771	54,876
Professional Services	77,962	80,479
Capital Outlay	-	5,937
Total Information Services	656,514	854,256
Inspector General:		
Personnel Services	381,554	413,902
Operating Expenditures	10,575	10,575
Total Inspector General	392,129	424,477
Records Center Lease, Taxes & Maintenance:		
Records Center Building Lease	372,424	387,321
Records Center Property Taxes, Repairs & Maintenance	55,100	57,000
Capital Equipment	· -	75,125 🗸
Total Records Center Lease and Related Expenditures	427,524	519,446
Advitational or Comment		
Administrative Support:	22.052	26 100
Purchasing and Mail - Personnel and Operating Administration and Clerk Finance - Personnel and Operating	22,953	26,189
Human Resources - Personnel and Operating	233,263 36,913	418,190 43,213
Total Administrative Support	293,129	487,593
• •	255,125	+07,333
Total Budget Approved and Proposed Budget	3,901,244	4,392,123
Budget Amendment - 3% Salary Increase - BAR 21-030	30,883	
Total Budgeted Amount	\$ 3,932,127	\$ 4,392,123
Increase From Fiscal Year 20-21 Approved Funding		\$ 459,996
Less: New Accountant I Position in Comptroller's Office		(73,699) 🗹
Less: New Information Services Network Administrator		(119,552) 🔽
Less: Back up Generator for Vault at Records Center		(64,200)
Net Increase Without New Items		\$ 202,545
Adjusted Percentage of increase		5.2%
Includes Packup Congrator for Vault at Poserds Contor		

[✓] Includes Backup Generator for Vault at Records Center



CLERK OF THE CIRCUIT COURT & COMPTROLLER SEMINOLE COUNTY FY 21-22 SUMMARY BUDGET BY OBJECT ACCOUNT

Requested Budget Fiscal Year

	Fiscal Year			
Object Account Description		21-22		
510 Personnel Services				
510110 Executive Salaries	\$	28,490		
510120 Regular Salaries		2,167,334		
510210 Social Security Matching		165,822		
510220 Retirement Contributions		294,600		
510230 Health, Life and Other Benefits		659,400		
510250 Unemployment		2,220		
510 Personnel Services TOTAL		3,317,865		
530 Operating Expenditures				
530301 Bank Charges - Custodian Fees		60,086		
530310 Professional Expenses		112,147		
530312 Legal Services		6,163		
530320 Accounting and Auditing		60,000		
530340 Other Services		25,145		
530400 Travel and Per Diem		12,893		
530410 Communications		94,900		
530420 Postage		760		
530430 Utilities		5,550		
530440 Rentals and Leases		390,122		
530451 Property Taxes		19,500		
530461 Repairs and Maintenance		19,452		
530462 Maintenance Contracts		84,501		
530470 Printing and Binding		13,623		
530490 Other Current Charges		2,000		
530510 Office Supplies		11,354		
530512 Office Supplies - Equipment		6,568		
530520 Operating Supplies		12,843		
530521 Operating Supplies-Equipment		621		
530522 Operating Supplies Tech		18,634		
530540 Books, Dues, Publications		8,078		
530550 Training		28,255		
530 Operating Expenditures TOTAL		993,196		
560 Capital Outlay				
560640 Equipment & Software		5,937		
560650 Leasehold Improvements		75,125		
560 Operating Expenditures TOTAL		81,062		
GRAND TOTAL	\$	4,392,123		



CLERK OF THE CIRCUIT COURT & COMPTROLLER SEMINOLE COUNTY BUDGETED FULL TIME EQUIVALENTS (FTE)'S

Department	20-21 Budget	21-22 Budget	Change
Comptroller's Office	17.70	17.83	0.13
County Commission Records	3.00	3.00	0.00
Records Management	1.14	0.45	-0.69
Information Services	3.35	4.71	1.36
Inspector General	3.00	3.00	0.00
Purchasing and Mail	0.31	0.34	0.03
Administration and Clerk Finance	1.82	2.57	0.75
Human Resources	0.31	0.34	0.03
Total	30.63	32.25	1.62



Grant Maloy

Seminole County
Clerk of the Circuit Court and Comptroller

www.seminoleclerk.org

Clerk of Court Locations

Civil Courthouse 301 N Park Ave., Sanford, FL 32771



Records Center 1750 E. Lake Mary Blvd., Sanford, FL 32773



Altamonte Springs Branch 990 N. State Road 434, #1124 Altamonte Springs, FL 32714

Criminal Justice Courthouse 101 Eslinger Way, Sanford, FL 32773



Juvenile Justice Center 190 Eslinger Way, Sanford, FL 32773



Casselberry Branch 376 Wilshire Blvd., Casselberry, FL 32707





SUPERVISOR OF ELECTIONS

Chris Anderson

1500 EAST AIRPORT BLVD, SANFORD, FL 32773

MAIN OFFICE PHONE: **407-585-VOTE** (8683) | GENERAL FAX: 407-708-7705

Fiscal Year 2021/2022 Budget Report

	FY 21/22	Vari	ance
EXECUTIVE SALARIES (51011000)	162,864	6.4%	9,864
REGULAR SALARIES & WAGES (51012000)	1,019,427	16.5%	144,402
OTHER SALARIES & WAGES (51013000)	336,060	-20.4%	-86,140
OVERTIME (51014000)	113,050	9.4%	9,759
SPECIAL PAY (51015000)	1,250	0.0%	50
SOCIAL SECURITY (51021000)	123,868	5.4%	6,345
RETIREMENT CONTRIBUTIONS (51022000)	256,251	19.3%	41,457
HEALTH & LIFE INSURANCE (51023000)	287,160	5.4%	14,808
UNEMPLOYMENT COMPENSATION (51025000)	1,000	0.0%	0
PROFESSIONAL SERVICES (53031000)	35,202	39.7%	10,000
CONTRACTED SERVICES (53034000)	205,455	15.2%	27,062
TRAVEL & PER DIEM (53040000)	11,500	0.0%	0
COMMUNICATION (53041000)	40,995	-7.9%	-3,511
TRANSPORTATION (POSTAGE) (53042000)	289,381	246.0%	205,756
RENTAL & LEASES (53044000)	18,365	0.0%	0
REPAIR & MAINTENANCE (53046000)	67,587	8.2%	5,119
PRINTING & BINDING (53047000)	558,240	7.6%	39,480
OTHER CHARGES & OBLIGATIONS (53049000)	116,042	0.5%	580
OFFICE SUPPLIES (53051000)	17,000	0.0%	0
OPERATING SUPPLIES (53052000)	122,005	60.7%	46,065
OPERATING SUPPLIES - EQUIPMENT (53052100)	7,000	-58.8%	-10,000
BOOKS, PUBS, MEMBERSHIPS, ETC. (53054000)	12,912	2.0%	257
TRAINING (53055000)	2,100	0.0%	0
CAPITAL EQUIPMENT (56064200)	127,000	100.0%	127,000
TOTAL FY 2021/2022 PROPOSED OPERATING BUDGET	3,804,714	13.8%	461,352
TOTAL FY 2021/2022 PROPOSED BUDGET	3,931,714	17.6%	588,352



TAX COLLECTOR

J.R. Kroll



2021/2022 TAX COLLECTOR BUDGET ESTIMATE



2020-2021 Income

Budget FY20/21

\$13,780,860.00

May income YTD

\$11,610,744.89

May prior YTD

\$11,344,871.42

2021 additional income YTD

\$265,903.47



2020-2021 Expenses

Budget FY20/21

\$13,094,627

May expenses YTD

\$6,416,449.72

May prior expenses YTD

\$6,976,738.75

2021 savings YTD

\$560,289.03



PRELIMINARY ESTIMATES SUMMARY 2021-2022 BUDGET

ESTIMATED REVENUE\$13,821,860

PERSONNEL SERVICES

\$9,802,455

OPERATING EXPENSES

\$1,934,845

OPERATING CAPITAL

\$1,278,000

TOTAL EXPENDITURES

\$13,015,300

EXCESS FEES

\$806,560



Offices to be Consolidated





Property Addresses: 766 N Sun Dr Lake Mary 260 Wekiva Springs Rd Longwood

Longwood Branch Monthly Rent: \$12,978 - Lease Expires Oct 31,2022

Lake Mary Admin Monthly Rent: \$15,515 – Last Lease Expires March 30, 2023

Annual Rent to be saved: \$341,916



Administration Consolidation



Total previous rent: \$15,515 mo (3 offices)

Last remaining lease amount: **\$5816 for 36 months**

Lease End Date: March 30, 2023

2 Leases Terminated saving:\$9700/mo saving \$77,600 in 1st year

2 leases termination date: **May 1, 2021**



New Branch Location



Property Address: 150 N Westmonte Dr, Altamonte Springs

Building Size: **16,100 sq/ft**

Purchase Price:

\$1.695m

Estimated Construction Costs: **\$200,000**

Building pays for itself: **5.5 years**



New Branch Location



Bottom floor: 8000 sq/ft of DMV office

Top floor:

8000 sq/ft office space already built out to house Accounting, IT Dept, Call Center, additional space for Clerk of Court.



Questions?



FLORIDA DEPARTMENT OF HEALTH

Donna Walsh

The Florida Department of Health Seminole County

Donna J. Walsh, MPA, BSN, RN Health Officer



Mission: To protect, promote & improve the health of all people in Florida through integrated state, county, and community efforts.



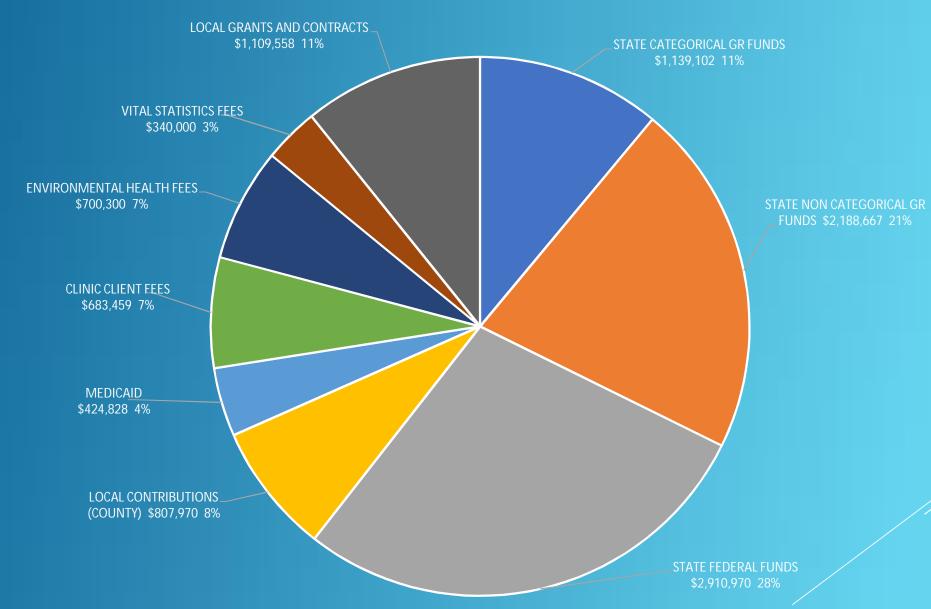


FY 20-21 REVENUE (ACTUALS)

STATE CATEGORICAL GR FUNDS	\$ 1,293,193	13%
STATE NON CATEGORICAL GR FUNDS	\$ 2,188,667	22%
STATE FEDERAL FUNDS	\$ 2,871,222	29%
LOCAL CONTRIBUTIONS (COUNTY)	\$ 807,970	8%
MEDICAID	\$ 397,422	4%
CLINIC CLIENT FEES	\$ 513,063	5%
ENVIRONMENTAL HEALTH FEES	\$ 720,700	7%
VITAL STATISTICS FEES	\$ 300,000	3%
LOCAL GRANTS AND CONTRACTS	\$ 697,753	7%



FY 21-22 REVENUE (PROJECTED)





3 YEAR BUDGET

			Bu	dget FY(20-21) as of		
	Budget FY(19-20)			June 1, 2021	Budget FY(21-22) (Projected)	
Total Revenue	\$	10,214,352	\$	9,852,990	\$	10,304,854
Total Expenditures	\$	10,551,127	\$	9,617,702	\$	10,200,905
Total Balance LESS Total						
Expenditures	\$	(336,775)	\$	235,288	\$	103,949
Trust Fund (Percentage)		2.76%		10.70%		10.69%
Trust Fund Amount	\$	291,173	\$	1,026,740	\$	1,090,875





COVID BUDGET

COVID Budget FY (20-21) As of June 1, 2021					
TOTAL REVENUE	\$3,357,243				
SALARY	\$196,974				
OPS	\$2,527,457				
TEMP EMPLOYMENT	\$43,275				
PUBLIC HEALTH SUPPLIES	\$340,811				
PROPERTY RENTAL	\$150,047				
MEDICAL VACCINE REFRIGERATOR/ FREEZER	\$35,073				
PRINTING PRODUCTION	\$28,758				
INFORMATION TECHNOLOGY	\$34,848				
TOTAL EXPENDITURES (as of June 1, 2021)	\$3,357,243				





COVID BUDGET

COVID Budget FY (21-22) As of June 1, 2021				
TOTAL REVENUE	\$2,812,018			
SALARY	\$0			
OPS	\$2,553,365			
TEMP EMPLOYMENT	\$15,000			
PUBLIC HEALTH SUPPLIES	\$30,000			
PROPERTY RENTAL	\$150,047			
PRINTING PRODUCTION	\$28,758			
INFORMATION TECHNOLOGY	\$34,848			
TOTAL EXPENDITURES (as of June 1, 2021)	\$2,812,018			





COVID BUDGET

COVID Expenditures (FY 20-21) County Funded					
PERSONAL PROTECTIVE EQUIPMENT (PPE)	\$40,000				
ULTRA-COLD FREEZERS (3)	\$30,240				
NURSE CARTS	\$45,315				
EPI PENS	\$39,115				
TOTAL EXPENDITURES (as of June 1, 2021)	\$154,670				





COVID STAFFING

OPS COVID STAFF	NUMBER HIRED
OPS BIOLOGICAL SCIENTIST IV - EPIDEMIOLOGY	17
OPS GOC II - CONTACT TRACING	12
OPS REGISTERED NURSE	19
OPS GOC I, SENIOR CLERK - REGISTRATION / DATA ENTRY (PODS)	57
HOME VISITS / TESTING / COVID SUPPORT	3
CALL CENTER - COVID SUPPORT	4





Seminole County Government

Seminole County Government Contributions				
\$807,970	Direct Services			
\$40,000	Diabetes Prevention and Education			
\$20,000	School Dental Sealant Services			
\$100,000	Mobile Health Services			
\$81,000	Teenage Outreach Program (TOP)			







Grants

FY 20-21		FY 21-22	
Ryan White HIV Grant	\$160,000	Ryan White HIV Grant	\$200,000
Orlando Health (Paramedicine Program)	\$25,000	Orlando Health (Project Scores)	\$60,225
Orlando Health (Diabetes - Spanish)	\$50,000	Kresge (Community Integrated Mobile Health Services)	\$50,000
Orlando Health (Project Scores)	\$60,225	NACCHO (Overdose Prevention)	\$445,861
Orlando Health (Dental Sealant Program)	\$56,138	Goldsboro Farmer's Market (City of Sanford)	\$15,026
Kresge (Community Integrated Mobile Health Services)	\$20,000	Seminole County (Integrated System of Care, Diabetes Prevention and Education, Dental Sealant, TOP)	\$241,000
NACCHO (Overdose Prevention)	\$54,139		
National Association for Chronic Disease Directors	\$25,000		
City of Sanford (CDBG)	\$30,000		
Goldsboro Farmer's Market (City of Sanford)	\$19,000		
Seminole County (Integrated System of Care, Diabetes			
Prevention and Education, Dental Sealant, and TOP)	\$241,000		
TOTAL	\$740,502	TOTAL	\$1,012,112







COVID-19 Tests

COVID-19 Testing

Site	Tests	%
DOH	43,408	53.6%
County	37,534	46.4%
Total	80,942	100.0%



COVID-19 Vaccinations

Total vaccines given/number of people vaccinated.

Age-Group	Population	First Dose	% First Dose	Series Complete	% Series Complete	Total People Vaccinated	% Total
12-14	17,967	2,671	14.87%	1575	8.77%	4246	23.63%
15-24	57,905	5,567	9.61%	1,932	3.34%	24,499	42.31%
25-34	71,196	4,779	6.71%	22,683	31.86%	27,462	38.57%
35-44	68,031	4,625	6.80%	29,170	42.88%	33,795	49.68%
45-54	65,563	4,323	6.59%	32,228	49.16%	36,551	55.75%
55-64	63,105	3,825	6.06%	37,393	59.26%	41,218	65.32%
65-74	45,677	2,548	5.58%	34,097	74.65%	36,645	80.23%
75-84	22,243	1,365	6.14%	16,443	73.92%	17,808	80.06%
85+	9,873	645	6.53%	6,263	63.44%	6,908	69.97%
TOTAL Eligible	421,560	30348	7.20%	181784	43.12%	229132	54.35%

- Total # of people with at least one vaccine dose: 229,975
- Total # of doses administered by Seminole County providers: 407,965
- Total # of doses received by Seminole County residents: 415,120



COVID-19 Vaccinations

Site	Doses Administered	%
DOH/County	238,917	58.6%
Other	169,048	41.4%
Total	407,965	100.0%



School Health Services

Type of Screening	Services
Vision Screening	12,156
Hearing Screening	10,342
Growth and Development Screening (BMI)	8,290
Dental Screening*	-
Scoliosis Screening	3,163
Total	33,951



^{*} Screenings were not conducted due to COVID-19



Women, Infants and Children (WIC) Services

TYPE OF SERVICE	# OF SERVICES
Certification Assessments	11,085
Benefits Issuance	31,234
Group Nutrition Education Class	260
High Risk Nutrition Education	4,871
Low Risk Nutrition Education	11,225
Breastfeeding Education & Counseling	8,503
Nutrition Education Newsletter	14,459
Income Eligibility	7,485
* Thru 5/31/2021 Tot	al 89,122





Environmental Health Services

Program	Services
Swimming Pools	1236
Biomedical Waste	1037
Body Piercing	10
Food Hygiene	880
Group Care	221
Limited Use Public Water Systems	128
Mobile Home Parks	34
Nuisance Complaints	117
Tanning Program	32
Tattoos Program	94
Migrant Labor Camp	3
State Underground Petroleum	
Environmental Response Act (SUPER)	
Program Surveys and Samples	100
* Thru 5/31/2021 Tota	I 3892





DOH-SEMINOLE Promotes and Collaborates















We PROMOTE and COLLABORATE by hosting and attending health fairs and outreach events



DOH-SEMINOLE Promotes and Collaborates











We **PROMOTE** and **COLLABORATE** by hosting and attending health fairs and outreach events

The Florida Department of Health in Seminole County

THANKS YOU FOR YOUR SUPPORT!



Mission: To protect, promote & improve the health of all people in Florida through integrated state, county, and community efforts.





COURT SUPPORT

18th Judicial Guardian Ad Litem Public Defender State Attorney



18th JUDICIAL CIRCUIT COURT

Judge Jessica Recksiedler



GUARDIAN AD LITEM

Amber Padrick



PUBLIC DEFENDER

Blaise Trettis



LYNX Mass Transit



PRESENTATION OUTLINE

- **► LYNX Overview**
- ► LYNX COVID Response
- ▶ General Budget Overview



LYNX OVERVIEW



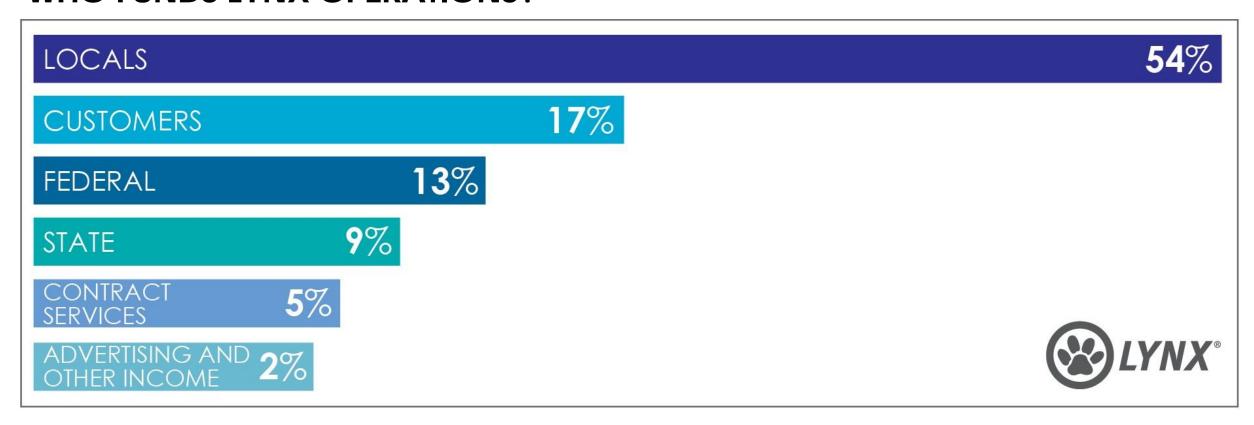
LYNX HISTORY

- Established in May 1972 as Orange Seminole Osceola Transportation Authority (OSOTA)
- Became Tri-County Transit in 1984
- Began doing business as LYNX in 1992
- Official name changed to Central Florida Regional Transportation Authority in March 1994
- Orange, Seminole and Osceola counties
- Service area of approximately 2,500 square miles
- Resident population of more than 2.2 million people
- Created by Florida State Statute Ch. 343 Part II
- 5 member Governing Board



LYNX FUNDING

WHO FUNDS LYNX OPERATIONS?



FAMILY OF SERVICES



FIXED ROUTE



ACCESS LYNX



LYMMO



ROAD RANGER



NEIGHBORLINK



VANPOOL



FASTLINK



SUNRAIL CONNECTIONS



DAILY & ANNUAL SERVICE

Daily Service

- 72 local routes called Links serve the tri-county area
- Earliest service begins at 3:50 a.m.
- Last bus leaves LYNX Central Station at 12:15 a.m.
- Peak frequency is every 15 minutes
- Average frequency in urban areas is every 30 minutes; Outlying areas receive hourly service
- More than 50% of our ridership routes serve major tourism destinations

Annual Service

- More than 77,000 rides provided each weekday
- 24,438,949 million passenger trips in FY2019 [17,832,104 million in FY2020]



ANNUAL REPORTING

Federal Transit Administration (FTA)

- National Transit Database
- Transit Asset Management (TAM)
- Preventive Maintenance Plan
- Fleet Management Plan
- Agency Safety Plan (ASP)
- Agency Triennial Review (LYNX)

Florida Transportation Commission (FTC)

• FTC Report

Florida Department of Transportation (FDOT)

- Transit Development Plan (TDP)
- Agency Triennial Review (LYNX)
- Rule Chapter 14-90, Florida
 Administrative Code (F.A.C.)
 - System Safety Program Plan (SSPP)
 - Security Program Plan (SPP)
 - Drug and Alcohol Compliance

Partner Jurisdictions

- Quarterly Financial Reports
- Comprehensive Annual Financial Report (CAFR)





DRIVER & PUBLIC SAFETY















ESSENTIAL WORKERS MOVING ESSENTIAL WORKERS



WLYNX®

#LYNXEssentia



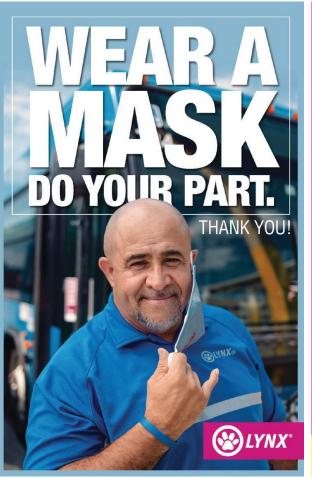






SAFETY CAMPAIGN











VACCINE INITIATIVES



THE COUNTY PARTNERSHIP WITH
LYNX MEANS VULNERABLE SENIORS

HAVE A FREE RIDE TO GET

VACCINATED AT EITHER

THE CONVENTION CENTER OR

VALENCIA COLLEGE WEST.

ATTENTION RESIDENTS 60+:

Do you need transportation to your COVID-19 vaccination appointment at the Convention Center or FEMA site at Valencia College West Campus?

CALL 311 TO INQUIRE ABOUT A FREE RIDE

Visit ocfl.net/vaccine for more information.





VACCINE INITIATIVES

















RIDE WITH CONFIDENCE

SAFE, CLEAN TRANSPORTATION











GENERAL BUDGET OVERVIEW



KEY BUDGET ASSUMPTIONS

- Maintain FY2021 Level of Service.
- ► Continue Paratransit cost containment strategies
- ▶ Include the American Rescue Plan Act grantfunds.
- ▶ Maintain COVID protocols as provided by the CDC.
- ▶ Include best estimates based on the situation today.

BUDGET OVERVIEW

	FY2022 PROPOSED BUDGET	FY2021 AMENDED BUDGET	FY2021 ORIGINAL BUDGET
OPERATING REVENUE	\$131,022,663	\$124,661,876	\$141,536,165
CARES/CRRSA/ARPA FUNDING	\$44,000,000	\$54,769,903	\$16,000,000
TOTAL REVENUES	\$175,022,663	\$179,431,779	\$157,536,165
OPERATING EXPENSES	\$175,022,663	\$179,431,779	\$157,536,165
OPERATING INCOME/(DEFICIT)	\$ 0	\$ O	\$ 0

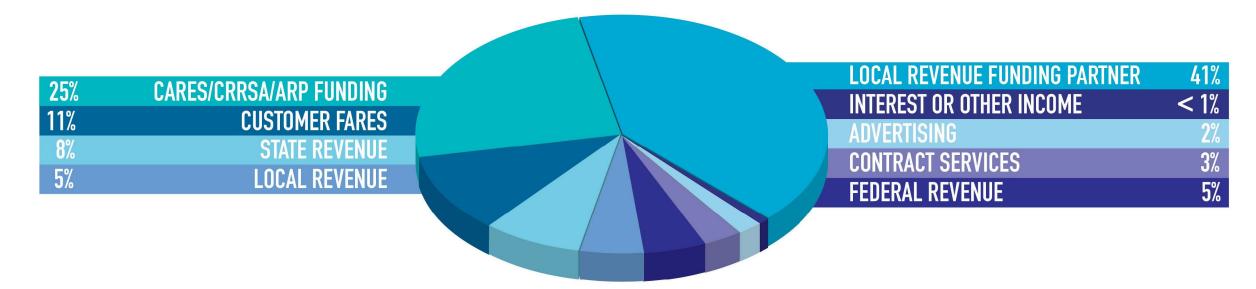


FY2022 OPERATING BUDGETED REVENUE

	FY2022 PROPOSED BUDGET	FY2021 AMENDED BUDGET	FY2021 ORIGINAL BUDGET
REVENUES			
CUSTOMER FARES	\$18,480,166	\$13,424,892	\$15,283,345
CONTRACT SERVICES	\$5,739,863	\$5,991,876	\$7,710,314
ADVERTISING	\$3,550,000	\$2,900,000	\$2,200,000
INTEREST & OTHER INCOME	\$790,900	\$700,000	\$1,032,100
FEDERAL REVENUE	\$8,310,944	\$9,504,144	\$14,054,144
STATE REVENUE	\$13,691,519	\$12,225,601	\$13,776,728
LOCAL REVENUE	\$9,037,152	\$8,493,244	\$8,785,244
LOCAL REVENUE FUNDING PARTNER	\$71,422,119	\$71,422,119	\$71,422,119
CARES/CRRSA/ARPA FUNDING	\$44,000,000	\$54,769,903	\$16,000,000
USE OF BUDGET STABILIZATION FUNDS	\$0	\$0	\$7,272,171
TOTAL REVENUE	\$175,022,663	\$179,431,779	\$157,536,165



FY2022 OPERATING BUDGETED REVENUE



TOTAL: \$175,022,663

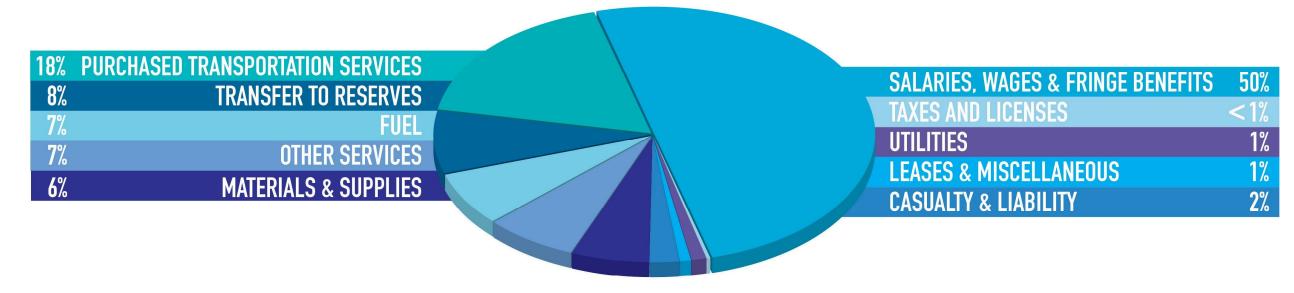


FY2022 OPERATING BUDGETED EXPENSES

	FY2022 PROPOSED BUDGET	FY2021 AMENDED BUDGET	FY2021 ORIGINAL BUDGET
EXPENSE			
SALARIES, WAGES & FRINGE BENEFITS	\$88,144,812	\$85,154,997	\$84,790,997
OTHER SERVICES	\$12,997,815	\$12,196,032	\$12,560,032
FUEL	\$12,158,746	\$10,458,746	\$12,158,746
MATERIALS AND SUPPLIES	\$9,630,955	\$9,822,116	\$9,822,116
UTILITIES	\$1,717,676	\$1,581,528	\$1,581,528
CASUALTY & LIABILITY	\$3,189,832	\$3,589,653	\$2,734,701
TAXES AND LICENSES	\$598,048	\$598,048	\$598,048
PURCHASED TRANSPORTATION SERVICES	\$31,468,965	\$28,873,763	\$31,637,695
LEASES & MISCELLANEOUS	\$1,670,104	\$1,646,267	\$1,646,267
INTEREST EXPENSE	\$0	\$0	\$6,035
TRANSFER TO BUDGET STABILIZATION/RESERVES	\$13,445,710	\$25,510,629	\$0
TOTAL EXPENSE	\$175,022,663	\$179,431,779	\$157,536,165
OPERATING GAIN/(LOSS)	\$ 0	\$ 0	\$ 0



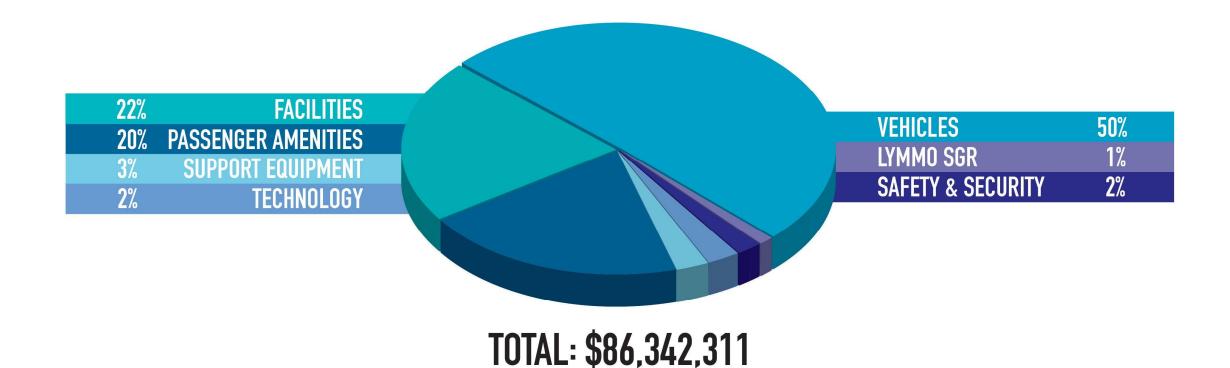
FY2022 OPERATING BUDGETED EXPENSES



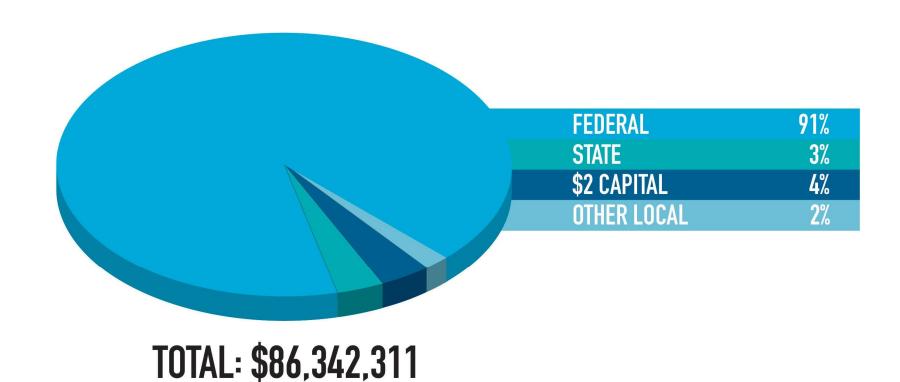
TOTAL: \$175,022,663



FY2022 CAPITAL BUDGET SUMMARY



FY2022 CAPITAL BUDGET FUNDING



PATH BACK TO THE FUNDING MODEL

Budget Stabilization Fund

Review and analyze the budget stabilization funds and needed budget requirements for FY2022.

- ► For FY2021, local partner funding was maintained at the FY2020 level with a one year hiatus from increases.
- For FY2022, LYNX is recommending that while in total the local partner funding remains the same, the proportionate share is allocated based on the funding model.
- LYNX will continue to re-evaluate the balance in the Budget Stabilization Fund and budget requirements each year.



FY2022 PARTNER FUNDING

FY2022

OPERATING

ORANGE COUNTY	OSCEOLA COUNTY	SEMINOLE COUNTY		
\$52,805,637	\$9,482,620	\$9,133,862		
TOTAL OPERATING: \$71,422,119				

CAPITAL

\$1,784,602	\$251,570	\$227,473		
TOTAL CAPITAL: \$2,263,645				

PARTNER FUNDING

TOTAL PA	RTNER FUNDING: \$7	3,685,764
\$54,590,239	\$9,734,190	\$9,361,335

FY2021

OPERATING

ORANGE COUNTY	OSCEOLA COUNTY	SEMINOLE COUNTY	
\$53,758,012	\$9,196,097	\$8,468,010	
TOTAL OPERATING: \$71,422,119			

CAPITAL

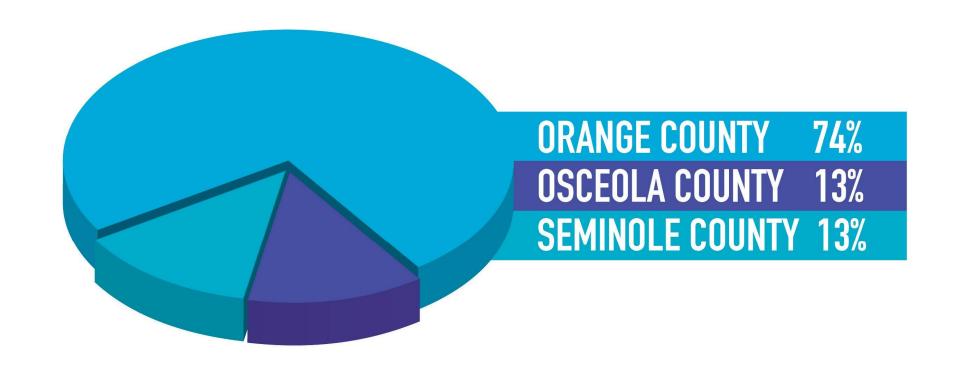
\$1,806,724	\$253,172	\$218,352		
TOTAL CAPITAL: \$2,278,248				

PARTNER FUNDING

\$55,564,736	\$9,449,269	\$8,686,362
TOTAL PA	RTNER FUNDING: \$7	3,700,367



FUNDING PARTNER OPERATING SHARE



FY2022 FUNDING REQUEST

SEMINOLE COUNTY BUDGET REQUEST

	FY2022	FY2021
FIXED ROUTE	\$5,154,847	\$4,934,240
PARATRANSIT SERVICE	\$3,979,015	\$3,533,770
OPERATING	\$9,133,862	\$8,468,010
CAPITAL	227,473	218,352
TOTAL BUDGET REQUEST	\$9,361,335	\$8,686,362





COMMENTS & QUESTIONS



FY22 BUDGET DEVELOPMENT SCHEDULE

- 3/9 Worksession #1 Property Values
- 5/18 Worksession #2 Sheriff Reserves E.S.
- 6/15 Worksession #3 Constitutionals / Outside Agencies
- 6/29 Worksession #4 BCC Departments
- 7/27 TRIM Adoption Set Maximum Millage Rates
- 9/15 1st Public Hearing
- 9/28 2nd Public Hearing

Vision: To be the Healthiest State in the Nation

COVID-19 Pandemic Response Report March 2020 – June 10, 2021 Seminole County, Florida

Case Summary

On March 12, 2020, the first COVID-19 case was reported to the Florida Department of Health in Seminole County (DOH-Seminole). As of June 10, 2021, 35,467 COVID-19 cases have been reported and 229,975 individuals have received a COVID-19 vaccine in Seminole County. Approximately 40 staff conducted COVID-19 case investigations and contact tracing and approximately 50 staff supported the COVID-19 vaccine points of dispensing at any given time during the response.

Case Demographics

The majority of cases reported to DOH-Seminole identified as white and non-Hispanic, followed by individuals who identified as Hispanic and then those who identified as Black (Figures 1, 2).

Figure 1. COVID-19 Cases by Race in Seminole County as of June 10, 2021

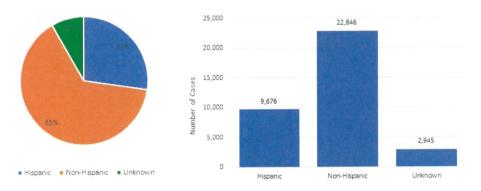
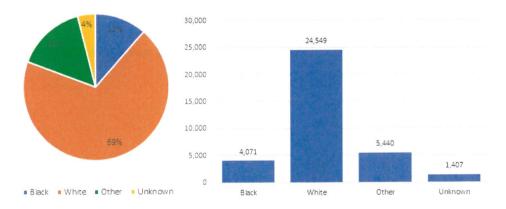


Figure 2. COVID-19 Cases by Ethnicity in Seminole County as of June 10, 2021



Florida Department of Health in Seminole County – Epidemiology Program 400 West Airport Boulevard, Sanford, FL 32773 PHONE: 407-665-3243 • FAX: 407-845-6055 FloridaHealth.gov



At the start of the pandemic, adults age 65 years of age and older made up the majority of cases. Later in the pandemic, cases surged in younger age groups, with individuals 15-34 years of age making up the majority of COVID-19 cases in Seminole County (Figure 3).

7000 6000 5340 5000 Number of Cases 4000 2296 2173 2000 1000 661 493 5-14 15-24 25-34 35-44 45-54 55-64 65-74 75-84 Age Group

Figure 3. COVID-19 Cases by Age Group in Seminole County as of June 10, 2021

Case Outcomes

Of the over 35,000 COVID-19 cases in Seminole County, 1,311 (3.7%) were hospitalized and 518 (1.5%) died (Figures 4, 5). Individuals age 65 and older comprised 85.6% of those mortalities. Seminole OEM followed up with the cases to offer social services during the isolation period.

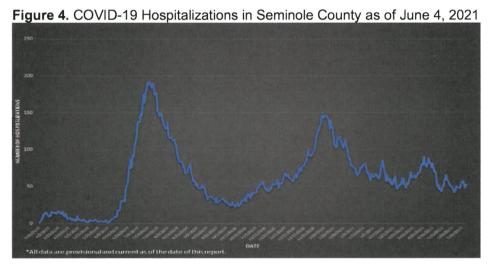
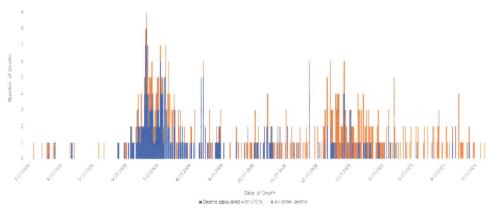


Figure 5. COVID-19 Associated Mortalities by Date of Death in Seminole County as of June 10, 2021



COVID-19 variant cases became a significant public health concern as the wild-type SARS-CoV-2 virus mutated into multiple variants of interest and concern. Of the cases who were tested for SARS-CoV-2 variants, 355 variant cases were identified, most of which were the B.1.1.7 UK variant.

Cases by Facility Type

There were many COVID-19 cases that worked, attended or visited group settings. Five percent (5%) of cases were associated with long-term care facilities (LTCFs), 6% were associated with schools and childcare facilities and 1% were associated with correctional facilities (Table 1).

Table 1. COVID-19 cases by some facilities in Seminole County as of June 10, 2021

Facility	Staff	Resident/Attendee	Visitors	Total
LTCFs	815	1,103	5	1,923
Schools	340	1,556	8	1,908
CCF	117	135	0	253
Correctional Facility	53	354	0	407

Testing & Positivity Rate

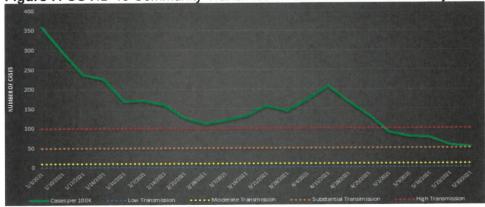
Seminole County's positivity rate varied greatly, with a seven-day moving average weekly positivity rate that almost reached 20% at its peak (Figure 6). Test volume has declined, with a current seven-day average of about 200 tests per day. The preliminary positivity rate for the week of June 4, 2021 is 4.7%.

Figure 6. COVID-19 Test Volume and Positivity Rate in Seminole County as of June 10, 2021



Seminole County's weekly COVID-19 case incidence rate is improving, having decreased from high (>100 new cases per 100,000 population in the past 7 days) to sustained (50-99) transmission in May 2021, and is very close to decreasing into moderate(25-49) transmission in June 2021 (Figure 7).

Figure 7. COVID-19 Community Transmission Level in Seminole County as of June 5, 2021



At the start of the pandemic, DOH-Seminole and the Seminole County Office of Emergency Management (Seminole OEM) partnered to provide the only COVID-19 testing in the county. Since the start of the pandemic, these two agencies provided over 80,000 COVID-19 tests (Table 2).

Table 2. COVID-19 Testing Conducted By DOH-Seminole and Seminole OEM as of June 10, 2021

Site	Tests	Percent
DOH	43,408	53.6%
County	37,534	46.4%
Total	80,942	100.0%

Outbreaks

DOH-Seminole identified and responded to 269 outbreaks, most of which were in LTCFs (Table 3).

Table 3. COVID-19 Outbreaks by Facility Type in Seminole County as of June 10, 2021

Facility	Outbreaks	Percent
LTCFs	165	61.3
Schools	16	5.9
CCF	21	7.8
Correctional Facility	4	1.5
Other	63	23.4
Total	269	100.0

Contact Tracing

DOH-Seminole identified over 21,000 unique COVID-19 exposures that spanned across almost 18,000 people, as some people were exposed more than once (Table 4). DOH-Seminole reached about two-thirds of the contacts to recommend quarantine. Seminole OEM also followed up with these contacts to offer social services during the guarantine period.

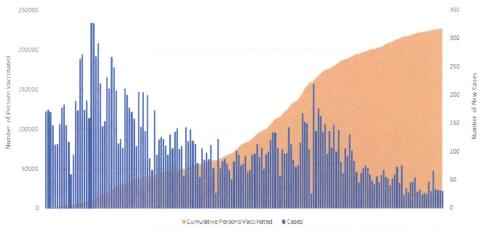
Table 4. Number of contact exposures by outcome in Seminole County as of June 10, 2021

Outcome	Count	Percent
Contact Attempted	4,734	22.2%
Contacted	14,345	67.1%
N/A	2,295	10.7%
Total of Exposures	21,376	100.0%

Vaccinations

The number of new COVID-19 cases continues to decline as the number of people vaccinated increases (Figure 8). Only 126 cases were fully vaccinated prior to their incubation period.

Figure 8. COVID-19 cases vs persons vaccinated in Seminole County as of June 10, 2021



Of individuals age 65 and older in Seminole County, 79% have received a COVID-19 vaccine. As age decreases, the percent who have received at least one dose of COVID-19 vaccine also decreases, except for a slight increase in the 15-24 age group (Table 5).

Table 5. Seminole County Residents who Received a COVID-19 Vaccine by Age as of June 10, 2021

Age Group	2021 Population	First Dose ¹	Percent	Series Complete ²	Percent	Total People Vaccinated	Percent
12-14	17,967	2,470	13.7%	1,865	10.4%	4,335	24.1%
15-24	57,905	5,372	9.3%	19,317	33.4%	24,689	42.6%
25-34	71,196	4,719	6.6%	22,895	32.2%	27,614	38.8%
35-44	68,031	4,591	6.7%	29,355	43.1%	33,946	49.9%
45-54	65,563	4,246	6.5%	32,401	49.4%	36,647	55.9%
55-64	63,105	3,798	6.0%	37,523	59.5%	41,321	65.5%
65-74	45,677	2,534	5.5%	34,153	74.8%	36,687	80.3%
75-84	22,243	1,365	6.1%	16,455	74.0%	17,820	80.1%
85+	9,873	645	6.5%	6,271	63.5%	6,916	70.0%
TOTAL Eligible	421,560	29.740	7.1%	200,235	47.5%	229,975	54.6%

Age Group	2021 Population	First Dose	Percent	Series Complete	Percent	Total People Vaccinated	Percent
65+	77,793	4,544	5.8%	56,879	73.1%	61,423	79.0%

^{1,2} A person can only be counted in one category, first dose or series complete, which add up to the total vaccinated.

Almost 60% of the vaccines administered in Seminole County were administered through the vaccine PODs operated by DOH-Seminole and Seminole OEM (Table 6).

Table 6. Doses Administered by Site in Seminole County as of June 10, 2021

	Doses	
Site	Administered	Percent
DOH	239,780	58.5%
Other Providers	170,282	41.5%
Total	410,062	100.0%

Conclusion

Seminole County experienced a great deal of morbidity and mortality during the COVID-19 pandemic. While activity is decreasing, vaccination and other prevention measures are still recommended to continue to curtail this disease. This extensive response would not have been possible without the support from the Board of County Commissioners and countless other public and private partners coming together to protect the health and wellbeing of Seminole County residents and visitors. DOH-Seminole continues to perform core epidemiological functions of case investigation, contact tracing and surveillance until the pandemic has been contained.

¹ First Dose: Current number of people who have only received their first dose of the Moderna or Pfizer vaccine.

² Series Complete: Current number of people who have received both Moderna or Pfizer vaccine doses or one Johnson & Johnson dose.



2020-2021

Seminole County Integrated Health Services

Mobile Health

Through the generous support of Seminole County Government, there are a number of important programs and services the Florida Department of Health is able to provide the residents and visitors of Seminole County. In addition to the core services provided to the residents of Seminole County in the last few years, we have enhanced our mission by embarking on additional services in an effort to maintain and raise the health of our residents. In late 2015, the Florida Department of Health in Seminole County (DOH-Seminole) purchased a mobile health unit to extend health services to uninsured and underserved communities in Seminole County. On February 16, 2016, several dignitaries from Seminole County Government attended the ribbon cutting ceremony; including, Chairman John Horan, Commissioner Carlton Henley, Commissioner Brenda Carey, and Commissioner Bob Dallari. Norton Bonaparte, City of Sanford Manager, was also in attendance. Commissioner John Horan, stated: "What we're trying to do is get these services to areas where they are needed. Public health and safety are the top, most important categories that we address. And in this case, you're dealing with public health and you're dealing with a population that is struggling or disadvantaged." The mobile health unit has agreements to visit various locations throughout Seminole County including Uptown Inn & Suites (formerly Remington Inn), Grace & Grits, Rescue Outreach Mission in Sanford, Shepherd's Hope, Midway Safe Harbor and several other locations. A minimum of 13 regularly scheduled outreach events are held at strategic locations within the county to provide services to uninsured and underinsured neighborhoods. Additional outreach events are coordinated with community partners to meet the unique needs of the each community.

Health Services Agreement

On October 26, 2018, a new agreement was entered into between DOH-Seminole and Seminole County. The intent of this agreement was to fund DOH-Seminole to provide additional health care programs and services, including dental treatments and diabetes prevention and educational services to homeless, uninsured, and underinsured populations in Seminole County.



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Diabetes Prevention Program	2
Diabetes Self-Management Program	3
Dental Sealant Program	4
Community Integrated Mobile Health Services	5
Teen Outreach Program	7
Recognition	Q

"12% of Seminole
County residents
are uninsured"



Ouick Fact

What is type 2 diabetes?

Type 2 diabetes is a disease caused by having too much sugar in our blood. The sugar in blood is called glucose, pronounced GLUE-

How do we get glucose?
We get glucose from the food we eat. Our body breaks down all the sugar and starch we eat into glucose. Glucose is the basic fuel for the cells in our body.

How do we get too much glucose in our blood?

Normally our bodies use a hormone called insulin to carry the glucose in our blood to the other cells in our body. The amount of glucose in our blood can get too high for two reasons: 1) our body does not have enough insulin or 2) our body does not use insulin

What happens when the glucose in our blood gets

The glucose builds up in the blood instead of poing into the cells, and we get diabetes.
Diabetes can damage many parts of the body, including the heart, eyes, kidneys, and

How can we stop ourselves from getting type 2

Participating in a lifestyle intervention to lose some weight and become more active can prevent diabetes

Seminole County Diabetes Prevention Program (DPP)

The Florida Department of Health in Seminole County is committed to reducing health disparities by providing free services through the Diabetes Intervention Services Programs. Our Diabetes Intervention Services consists of the Diabetes Prevention Program (DPP), a 12-month lifestyle change program to prevent or delay Type 2 Diabetes. This program is designed to promote modest weight loss, increase physical activity and other lifestyle changes in adults diagnosed with pre-diabetes. The Diabetes Self Management Education (DSME) program provides the foundation to help people with diabetes navigate these decisions and activities and has been shown to improve health outcomes.

Outreach efforts:

In the past year we have maintained partnerships with medical providers and pharmacists, community-based healthcare services, and certified community health workers. These providers referred patients to the Diabetes Intervention Services Program to increase participation and community access to free diabetes education. Due to limitations imposed by COVID-19, our program shifted to offering education in a virtual setting to complete the existing cohort. The Florida Department of Health in Seminole County has an active presence within the community by working with the Seminole Congregational Wellness Program in partnership with faith-based organizations to provide health education and outreach activities. Despite the shut-down of primary essential services the Diabetes Prevention program staff continued to use partnership opportunities to raise awareness about pre-diabetes. The program worked with several faith-based organizations during Covid-19 testing events and later vaccination activities to promote diabetes services. To maintain connections with the community the staff held educational sessions with community organizations such as the Women's Missionary Society. As a result, we were able to maintain referrals from residents and medical providers during a very challenging year. We are looking forward to a new start in 2021 for both the

DSME and DPP programs.

Accomplishments:

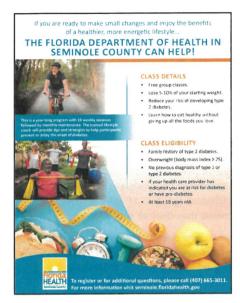
In 2020, the Diabetes Prevention Program participated in monthly forums hosted by the National Association of Chronic Disease Directors (NACDD) which focused on:

- Increase referrals to lifestyle change programs by health system partners.
- Market the lifestyle change programs to drive enrollment.
- Retain participants into lifestyle change programs.
- Reimburse for lifestyle change programs by public and private payers and employers and supporting Medicare Diabetes Prevention Program suppliers.

Participation in these forums provided our agency staff with valuable information and resources to share with the community regarding the effects of COVID-19 on individuals with chronic diseases including Type 2 Diabetes. Those with certain medical conditions were identified as a priority population as they are at greater risk of becoming severely ill from COVID-19. Appropriate health education and support provided for priority populations has continued to promote prevention and maintenance of Type 2 diabetes as a measure to reduce negative health outcomes. Messaging such as "Staying at home doesn't have to mean giving up your healthy lifestyle! Find ways to get moving, eat healthy, and stay connected with family and friends while you remain indoors" was also an important component of awareness.

During National Diabetes Month the Diabetes Intervention Services Program released a Diabetes PSA that was created in partnership with SGTV. The video has received nearly 150 views on YouTube to date and featured actual program participants who shared their experiences being a part of the Diabetes Prevention Program.

https://www.youtube.com/watch?v=XfA5DPOUDMs



Future Plans:

We continue to seek opportunities in medical and community settings to establish agreements to increase risk screenings, complete referrals, and advertise our Diabetes Intervention Services. Our marketing efforts will continue to focus on prevention as the cure and build awareness about the link between preventable medical conditions like Type 2 Diabetes and increase of adverse health outcomes when paired with viral infections such as COVID-19.



(DPP Coordinator, Herronda Mortimer with client)



(True Health Community Day Pharmacy Team)

the option to participate by phone or virtual platforms. The total number of clients for DSME over the past year was 22 and the total number of educational service encounters via phone, virtual or in-person was 74. Despite the decrease in our number of participants compared to pre-COVID times, our educational model grew and evolved into a much more client-centered approach. Instead of expecting that people would commit to an entire series of 10-12 hours of structured

the time spent on the learning needs most pertinent to them at the time. For example, one woman was already very comfortable with taking her medication correctly and using her glucose meter, but really needed additional time spent helping her learn carbohydrate-counting. Now and in the coming months, as we move closer to returning to normal, our ability to

curriculum covering many topics, we focused

closer to returning to normal, our ability to engage clients in community settings will be back to pre-pandemic levels. We are very pleased to now have onboard a native Spanish-speaking Registered Nurse who has previous work experience delivering community diabetes education programs. With her expertise and cultural competency, we will at last be able to connect with a larger portion of our community and deliver educación sobre diabetes en español.

Diabetes Self-Management Education (DSME) Program

Since October, 2018, the DOH-Seminole Diabetes Self-Management Education (DSME) program has conducted education sessions for client cohorts.

The educational model for our DSME program is based on the curriculum purchased from the American Association of Diabetes Educators (AADE) and incorporates hands on instructional elements from the Diabetes Empowerment Education Program (DEEP) developed by The University of Illinois at Chicago Midwest Latino Health Research, Training and Policy Center.

Diabetes program staff participate in outreach events throughout the county to disseminate information and conduct diabetes and prediabetes screenings. Partnerships and referral agreements have been established with several private medical practices and most recently with Shepherd's Hope Health Center in Longwood and True Health for their Sanford and Casselberry clinics.

During this past year, the COVID-19 pandemic impacted our ability to recruit and engage residents in community settings. Diabetes risk assessments and A1c screenings continued to be available onsite at DOH-Seminole. Our educational model also had to adapt to accommodate the changing needs of the community. In-person education was still offered to those who were comfortable coming to the clinic, however, clients were also given



Sealant is applied Tooth without sealant Tooth with final sealant



(Dental Hygienist with client)

Did You Know?

- About 1 in 5 (20%) children aged 5 to 11 years have at least one untreated decayed tooth.
- 1 in 7 (13%) adolescents aged 12 to 19 years have at least one untreated decayed tooth.
- Fluoride varnish can prevent about one-third (33%) of cavities in the primary teeth.

Dental Sealant Program

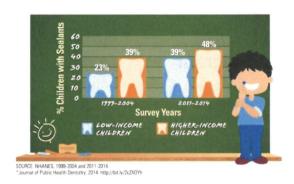


Dental sealants are thin coatings that when painted on the chewing surfaces of the back teeth (molars) can prevent cavities (tooth decay) for many years. Sealants protect the chewing surfaces from cavities by covering them with a protective shield that blocks out germs and food. Once applied, sealants protect against 80% of cavities for two years and continue to protect against 50% of cavities for up to four years. Children ages 6 to 11 years without sealants have almost three times more first molar cavities than children with sealants.

The dental sealants that are provided by DOH-Seminole take place at the schools using portable dental equipment. Our dental hygienist provides screenings, oral hygiene education, fluoride varnish treatments and sealants. The following elementary schools in Seminole

County were provided services by our staff in 2020-2021: Altamonte, Casselberry English Estates, Forest City, Idyllwilde, Lake Orienta, Midway, Pine Crest, Spring Lake, Wicklow and Winter Springs. Less than half of children ages 6 to 11 years have dental sealants. Low-income children are

Low-income children are 20% less likely to get



sealants and twice as likely to have untreated cavities. Untreated cavities can cause pain, infection, and problems eating, speaking, and learning. School sealants are a highly effective way to deliver sealants to children who are less likely to receive private dental care. Each tooth sealed saves more than \$11 in dental treatment costs. For the School Year (SY) 2020-2021 the School Based Sealant Program provided services to students at 12 Title 1 Schools in Seminole County. A total of 139 students were screened, with 401 sealants placed and 139 students received Fluoride treatment and education on oral hygiene. Of the total number of students seen, approximately 50% had Medicaid. Our program completed all schools by the end of April, 2021.

Community Integrated Mobile Health Services (CIMHS)

Key findings reported in the 2019
Community Health Needs Assessment indicate concerns about chronic conditions related to diabetes and obesity in Seminole County. Additional reoccurring community themes from the report and feedback from focus groups included health inequities, a need for behavioral health and substance abuse services and improved healthy weight, nutrition and physical activities. The goal of CIMHS is to improve health outcomes for

all Seminole County residents. Community health educators, community paramedics, emergency medical technicians (EMTs), disease intervention specialists (DISs) and nurses provide community in-home alternatives to hospital visits for uncomplicated conditions and simple or routine checkups through case management coordinated with medical providers, potentially saving the patient and community thousands of dollars. Clinically trained staff



complement the CIMHS through continued case management for patients beyond the initial 60-day period provided by the Community Health Educator. Nationally, Certified Community Health Workers are used in a variety of community and healthcare settings, with the primary goal of increasing access, delivering screening and

preventive services, improving system navigation, care coordination and disease management. They enhance the cultural and community specific appropriateness of services and help to address social determinants that impact health including housing, safety, transportation, and poverty.

Program Goals:

- Continue to expand the Community Integrated Mobile Health Services program.
- Conduct home visits and needs assessments to connect 100 or more Seminole County residents with community resources.
- Refer program participants to the Diabetes Prevention Program, Diabetes Self-Management Education classes and other DOH-Seminole services.
- Assess fall risks for elderly and disabled program participants.
- Track number and type of service provided at each community outreach event.
- Track number of patients that were given specific education and case management.
- Report patient satisfaction with the CIMHS program.

Summary of Activities (July 2020—May 2021)

Community Integrated Mobile Health Services (CIMHS)

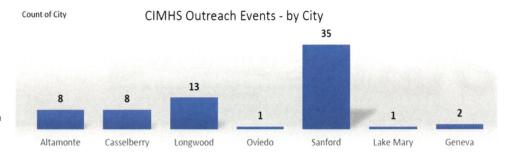
In early March 2020, the emergence of COVID-19 necessitated cessation of many scheduled outreach events and activities normally performed by DOH-Seminole's Community Integrated Mobile Health Services (CIMHS) team. While social distancing and stay at home recommendations/orders impeded traditional outreach activities, DOH-Seminole immediately identified community support activities to meet the needs of Seminole County's citizens. The CIMHS team has been working diligently to mitigate the spread of COVID-19 through community contact investigations and the provision of supplies to monitor symptoms and support isolation and quarantine efforts. To date, more than 300 home isolation kits have been delivered to Seminole County residents who are being monitored or are under isolation or quarantine for COVID-19 exposure.

The kits include thermometers (digital or single use) for individuals to monitor their temperature, a log to document their temperature twice daily and face masks to use when interacting with members of their household or if symptoms necessitate the need to leave their homes to go to the doctor or hospital. Community contact investigations, performed seven days a week, identify individuals who have been in close contact with lab confirmed positive COVID-19 cases. The CIMHS team contacts each identified individual to notify them of exposure, recommend self-monitoring and isolation for two weeks past exposure and assist the individual during their isolation period. Additionally, the CIMHS team has been

integral in supporting Seminole County's healthcare workforce. Healthcare workers who are exposed to COVID-19 need to be tested twice before returning to work to ensure the safety of their patients and prevent the spread of COVID-19 in our healthcare facilities. To date, more than 50 COVID-19 tests have been processed through CIMHS. Services to support individuals while they are isolated due to a positive COVID-19 test, or exposure to a person who has a lab confirmed positive COVID-19 test, are essential in reducing the spread of COVID-19 in our community. CIMHS has supported this effort by ensuring needed prescription medications are paid for, picked up at the pharmacy and delivered to the residence.

Program specific goals that were made more challenging due to the COVID-19 pandemic included conducting home visits for COPD/asthma/other CIMHS programs, increasing the number of assessments for fall risks, and completing 25% of patient satisfaction surveys. However, COVID-19 required the expansion of all DOH-Seminole services, including those in CIMHS. This afforded an opportunity to increase outreach and expand services to Seminole County citizens and provide disease specific education. Further, DOH-Seminole received thousands of calls related to health conditions and the impact of COVID-19. CIMHS was an essential part of the response to citizens to provide education and guidance regarding chronic health conditions and respond to this unique community health crisis.

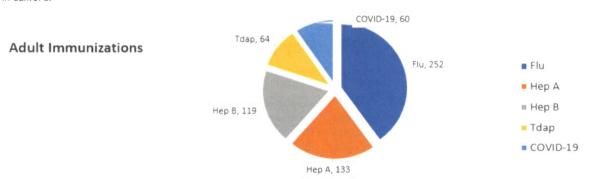
CIMHS outreach events are strategically planned to address health disparities in Seminole County. Included is a summary of the CIMHS outreach events from September 2020 through May 2021.



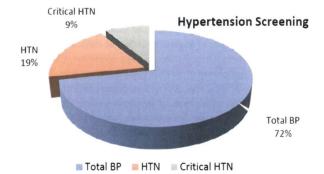
Additionally, CIMHS coordinated over 30 Pop Up COVID-19 testing sites to serve the community. DOH-Seminole's CIMHS team has been adaptable and focused on community support activities to serve Seminole County citizens throughout the COVID-19 pandemic

In FY2021, in addition to thousands of COVID-19 services provided (testing and vaccination), CIMHS performed over 1,400 individualized services for Seminole County residents. CIMHS outreach events encompass a wide range of services focused on early identification of signs indicative of chronic health conditions. Services include, but are not limited to, screening, referral and education for: A1C, BMI, blood pressure, family planning, dental needs, food security, HIV testing, vaccinations, STD testing, homeless outreach, diabetes and cholesterol screenings and vast community connection and referral services.

In addition to COVID-19 vaccinations, CIMHS is committed to bolstering the heath of Seminole County residents through proactive immunization activities. The chart below shows the number of adult immunizations provided at outreach events in the community from September 2020 through May 2021. Additional immunization services are provided at the Florida Department of Health offices in Sanford.



The 2019 Community Health Needs Assessment highlighted the need to address several chronic health conditions. In an effort to educate the community regarding healthy lifestyle choices, clinically trained CIMHS staff members regularly conduct blood pressure screenings. The graphic below shows a summary of blood pressure screenings conducted from September 2020 through May 2021 (28% of individuals tested had blood pressure readings consistent with hypertension, 9% of those had critically high levels and were immediately referred to area emergency departments or urgent care centers. All individuals screened were provided healthy diet and exercise education and offered follow up services through CIMHS home visitation programs).



HTN: Individuals are provided with on-site counseling, education and referral services to reduce risk factors associated with hypertension.

CRITICAL HTN: Individuals whose BP reading is deemed critical are immediately referred to a hosptial or urgent care center.

Teen Outreach Program

The School Health Program at the Florida Department of Health in Seminole County's goal is to minimize health barriers that may impact youth's academic achievement and promote student health. The School Health program works closely with Seminole County Public Schools and private schools to help coordinate health screenings, provide referrals and administrative support for health services, and conduct health education and community outreach activities. In addition, in 2011 the School Health Program began offering positive youth development activities, including the Teen Outreach Program (TOP), thanks to a 5-year grant sponsored by the Florida Department of Health (DOH) and the U.S. Office of Adolescent Health. TOP is a positive youth development curriculum developed by the Wyman Center in St. Louise Missouri, that encourages Healthy Behavior, Life Skills and a Sense of Purpose in youth. The program is delivered in a group format and led by a certified TOP Wyman facilitator and for a minimum of 25 meetings over a period of 9 months. In addition, youth complete at least 20 hours of community service learning. The TOP curriculum addresses a range of issues for teens through a Youth Development approach. The program also supports parents, teachers and youth leaders as the primary influence in the lives of adolescents.

TOP has been evaluated and proven to:

- Lower the risk of school suspension by 52%
- Lower the risk of course failure by 60%
- Reduce risk of teen pregnancy among participants by 53%

In Seminole County the TOP program has been offered since 2011 at 8 different locations including community settings, alternative school sites and afterschool programs: The Grove Counseling Center, Boys and Girls Club in Altamonte Springs and Sanford, Journey's Academy, Eugene Gregory Memorial Youth Academy, the Department of Juvenile Justice and at SCPS 21st Century After School Program sites including South Seminole Middle, Greenwood Lakes Middle and Milwee Middle.

EVIDENCE-BASED



Download the infographic









Since 2016, with the support of the Seminole County Sheriff's Office, the program continued to be offered for three more years in collaboration with the SCPS 21st Century Afterschool Program and the Boys and Girls Club of Central Florida in 4 locations: Crooms Academy, Midway Safe Harbor and Boys and Girls Clubs of Altamonte Springs and West Side Sanford.

Annual Project Goals:

- Obtain collaborative agreements with potential youth serving agencies.
- Establish 2-3 TOP clubs in collaboration with youth serving agencies.
- Reach between 40-60 youth participants per school year.
 - Ages 12-19 years old
 - Secure parental consent forms
 - Administer pre and post-tests
- Maintain data collection (i.e. attendance, community service-learning hours, lesson plans, session logs, etc.) through Wyman Connect electronic data collection system.
- Reach at least 75 additional youth every year through positive youth development sessions.

Due to COVID response activities, progress towards procuring the curriculum and hiring were delayed. However, during this past quarter TOP was delivered in partnership with Seminole County Public Schools' 21st Century After School Program at Midway Safe Harbor. In addition, a new TOP facilitator was recruited, trained and introduced to our partner site. Our expenditures to date this fiscal year were delayed.

Establishing a Provider Referral System to Increase Access to **Diabetes Intervention Services**

Herronda Mortimer, BS, IBCLC and Venise White, MPH, MPHE

Florida Department of Health in Seminole County, Office of Health Promotion and Education

BACKGROUND

conditions related to diabetes and obesity in Seminole Seminole) began planning for a Diabetes Intervention Cey findings reported in the 2016 Community Health reported that they had been told they have diabetes Services Program, including diabetes prevention and developing Type 2 Diabetes. In 2017, DOH-Seminole trained through The Diabetes Training and Technical Veeds Assessment indicate concerns about chronic self-management education. Designated staff were or prediabetes, but less than half had received any Assistance Center utilizing the Centers for Disease County. In 2013, nearly 63% of adults in Seminole Department of Health in Seminole County (DOH-Services Program targeting populations at risk for established the Seminole Diabetes Intervention County were overweight or obese. Nearly 20% diabetes education. In early 2016, the Florida Control and Prevention/Diabetes Prevention Recognition Program (DPRP) Curriculum.



58%



Figure 1: Informational Program Flyer.

PARTICIPANT RECRUITMENT

obtained from community outreach events. Targeted marketing and risk expectation to reach a greater number of people by increasing access to Diabetes Intervention Services. Although the program was successful in practices to adopt a policy to refer people with prediabetes or at risk for referred and enrolled into the program was much less than anticipated. recruitment and marketing in collaboration with health care providers. establishing written referral agreements with 10 health care providers The first diabetes prevention class started in May 2017, with referrals or health systems to encourage health care providers, systems and In December 2017, DOH-Seminole was awarded a grant from the conducting risk screenings, the number of participants who were To overcome this challenge, our focus shifted towards targeted screenings were conducted in community-based settings with American Diabetes Association (ADA) to support this effort by

prediabetes to our program.

PROVIDER PLEDGE & REFERRALS

program staff and interns scheduled meetings with health care providers meetings to revise referral system documents and troubleshoot steps in the protocol. During a 6-month timeframe, staff met with 15 health care Program curriculum, promotional and marketing materials to display at enroll a patient in the appropriate intervention. The health department prediabetes or diabetes to our Diabetes Intervention Services Program. A process map was developed to outline the steps to screen, refer and leadership supported the initiative and participated in monthly team to introduce our program and referral process. During the meetings, commitment to referring patients, they were asked to sign a written providers received a sample of the Prevent T2 Diabetes Prevention With the goal of building a patient referral system, DOH-Seminole their practice and the referral form. To strengthen the provider's pledge form as an agreement to refer their patients who had providers and obtained 12 signed commitments.





HEALTH



PROGRESS & CONCLUSIONS

7 Health Care Systems committed to advertise the program in their

In addition to the 12 signed pledge commitments, we partnered with program services. As a result, an increased number of referrals from the health care setting and community outreach, enabled us to start a new class in May 2018. Recently in 2019, a local federally qualified established new partnerships with traditional health care providers, establish agreements to increase risk screenings, complete referrals health center has agreed to participate in the referral system. We 7 health care practices and systems to promote and advertise our as well as pharmacists, community-based healthcare services and certified community health workers. We will continue to seek opportunities in the medical setting and in the community to and advertise our Diabetes Intervention Services.





NACCHO ANNUAL 3 6 0 PHIITS	Raisin	July 7-9 2020	OF PUS		alth
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Registration	167 Views			A Q&A	Attendees (3)
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	Health in Ser Department to visit our he of health. Ou the past year have also ac Community b Unit deliverir rapid growth currently fina	for Publication: The Community Inti- minole County (DOH-Seminole) has a visits, providing screening, testing, ed- ealth department. DOH-Seminole has r team is composed of a health educa- we have been recording our success hieved grant funding for a Pediatric A- Health Worker- and Community Parar g wellness checks to poorest, more v and success. DOH-Seminole made a lizing its growth by adding a Communistered Nurse. Through this restructuri	chieved substantial reductions in ucation and referrals to clients in utilized this innovative approach after a community paramedic and sees and failures for continuous of sthma. Home Visiting Program whedic-driven. This department of ulinerable populations in the cool decision to restructure the mobility Health Worker, Department.	in the number of Emergin need of services who the to address the social and a community health was quality improvement pro- with the delivery method with the delivery method iriginally started with a limmunity. As a result of boile health department a Supervisor, and a Nutri	gency o were unable determinants worker. Over occesses. We d being both Mobile Health its recent and are ition and

now expecting to turn people's homes into safe, healthy, teaching, and learning environments that enable chronic

illness management for both young and old.

Virtual presentation by our CIMHS team at the National Association of County & City Health Officials (NACCHO) conference in July 2020.



Grants Narrative

1. CDBG - City of Sanford

The Florida Department of Health in Seminole County (DOH-Seminole) serves the community with a mission to protect, promote and improve the health of all people in Florida through integrated state, county and community efforts. DOH-Seminole, and its community partners, have worked collaboratively to address the needs of county residents who are most impacted by the COVID-19 pandemic. Due to school closures, reduced grocery store hours and limited restaurant options, robust access to food that Seminole County citizens have traditionally enjoyed are reduced. Three census tracts in Seminole County are designated food deserts. Additionally, transportation and social distancing factors have hampered citizen's ability to freely traverse the community to access food. All these factors may negatively impact certain chronic health conditions.

CDBG Cares Act funding will be used to improve the health and well being of the residents of the City of Sanford. Multiple negative outcomes have been seen due to the COVID-19 pandemic. Among those are a reduction in economic stability and autonomy of the community and a reduction in access to affordable and accessible care. To support the community in improving health equity and health outcomes, DOH-Seminole's Community Integrated Mobile Health Services (CIMHS) will go to the community, in their neighborhoods, to provide essential services to promote improved health. Through this initiative, the community will benefit from improved health equity and services to those who have been negatively impacted by the pandemic.

DOH-Seminole's activities, supported by the CDBG Cares funding, will aid in supporting the community's return to work efforts by reducing the burden of socioeconomic struggles related to food insecurities and health disparities.

- A. On-site COVID-19 screening and testing
- B. Support for basic supplies (food, medication, thermometers, etc.)
 - a. On-site screening and testing for chronic health conditions including, but not limited to: diabetes, chronic obstructive pulmonary disease, asthma, hypertension, and dyslipidemia. Available testing includes: A1C, Body Mass Index (BMI), glucose, Human Immunodeficiency Virus (HIV), Tuberculosis (TB), blood pressure, Sexually Transmitted Diseases (STDs) and cholesterol levels.
- C. On-site provision of vaccines to increase community health such as Tetanus and Diphtheria Toxoids with Acellular Pertussis (Tdap), Measles, Mumps and Rubella (MMR), Hepatitis A & B, Inactivated Polio Vaccine (IPV), Pneumovax, Influenza, Menactra, Chicken Pox, etc.
- D. Referrals to DOH-Seminole programs including Diabetes Self-Management Education (DSME), Diabetes Prevention Program (DPP), Asthma Program, Chronic Obstructive Pulmonary Disease Program, Hypertension and Dyslipidemia Program and other community resources.

- E. DOH-Seminole's CIMHS Team will assess each participating resident to provide community outreach services and referrals with an emphasis on services to underserved areas of the county.
- F. DOH-Seminole's CIMHS Clinical Team will provide nutrition and wellness education to all participants.
- G. The DOH-Seminole CIMHS Team will continue to work cooperatively with multiple agencies whose primary focus is to reduce food insecurities, including The Christian Sharing Center, Inc. food pantry and Harvest Time International, Inc. to ensure affected Seminole County residents continue to have access to healthy food options.

2. Kresge Foundation

During the response to the pandemic, DOH-Seminole recognized the need to streamline actions to address health inequity. While benefits such as paid time off or sick leave may assist some in the traditional workforce, members of the community such as Uber drivers, handymen, grocery delivery services, seasonal workers, and others who are unemployed or underemployed adversely affected by missing work and healthcare needs often go unmet. Without proper access to healthcare and screening services, there is a potential for spread of COVID-19 and developing medical complications in this population. Utilizing funding from the Kresge Foundation, DOH-Seminole is well positioned to improve healthcare access and health equity for underserved, low income and other members of the community who experience health disparities. Through expanded testing efforts and the provision of services, the spread of COVID-19 can be further contained and the impact of unmanaged chronic health conditions can be mitigated.

DOH-Seminole is committed to serving all members of the community, and funding from the Kresge Foundation would allow DOH-Seminole to mobilize individualized services, in lower socio-economic communities, specifically to address disparities seen due to COVID-19. By employing a community-based approach, DOH-Seminole aims to expand COVID-19 testing and education, increase the provision of necessary social supports such as food, medical and other needed supplies and screen and offer services for chronic health conditions.

Kresge Foundation funding allows CIMHS to expand the scope of current services and deploy a wide array of screening and supportive services to lower socio-economic communities where residents traditionally avoid seeking healthcare due to lack of transportation, paid time off from work or other financial barriers.

- A. Two community outreach events to targeted locations each week.
- B. Individualized follow up with residents to monitor and support improvement in the identified chronic health condition(s) programs
- C. Linkage with a primary healthcare provider
- D. Enrollment in all applicable DOH-Seminole services
- E. Provision of healthy food pantry boxes and nutritional education for residents who live in the Goldsboro community, a lower socio-economic community that is

designated as a food dessert, and other communities with health disparities.

- F. On-site COVID-19 screening and testing
- G. Support for basic supplies (food, medication, thermometers, etc.)
 - a. On-site screening and testing for chronic health conditions including, but not limited to: diabetes, chronic obstructive pulmonary disease, asthma, hypertension, and dyslipidemia. Available testing includes: A1C, BMI, glucose, HIV, TB, blood pressure, STDs and cholesterol.
 - b) On-site provision of vaccines to increase community health (Tdap, MMR, Hepatitis A & B, IPV, Pneumovax, Influenza, Menactra, Chicken Pox, etc.)
 - c) Referrals to DOH-Seminole programs including Diabetes Self-Management Education (DSME), Diabetes Prevention Program (DPP), Asthma Program, Chronic Obstructive Pulmonary Disease Program, Hypertension and Dyslipidemia Program and other community resources.

3. Orlando Health - CIMHS

The Community Integrated Mobile Health Services (CIMHS) program is able to provide community-based health screening, testing, education, and referrals to populations with limited access to care in Seminole County. CIMHS leads outreach events in underserved areas to improve awareness of COVID-19 and chronic disease management strategies. CIMHS also serves the community through home visitation programs which target multiple chronic health conditions. By going into the community, CIMHS services reduce or eliminate transportation and financial barriers to ensure underserved, low income and other members of the community who experience health disparities receive much needed medical screening, testing and social services.

Program Goals:

Goal 1: Improve community awareness of local resources through community integrated mobile health services outreach activities.

Goal 2: Provide nutritional education and resources to the community to reduce food insecurity.

Goal 3: Provide education and resources to the community to promote effective management of chronic health conditions.

Goal 4: Collaborate with community partners to reduce barriers to care and improve health equity within Seminole County.

Goal 5: Improve access to adult vaccinations to improve the health of the community.

Goal 6: Expand access to medical screenings and referral services to underserved areas of the community.

4. Project SCORES – Project SCORES focuses on reducing adverse childhood experiences through increased awareness of eligibility of Earned Income Tax Credit (EITC) which would supplement the household income and reduce stressors associated with financial burdens. 5. NACCHO - In partnership with the CDC, NACCHO and community partners such as the Seminole County Sheriffs Office and Advent Health, DOH-Seminole's Community Paramedics deploy to the home to offer services and reduce medical complications that are aggravating substance misuse. Referrals are received from the Seminole County Sheriff's Office SCORE Team on individuals who experienced a non-lethal overdose. Additionally, outreach activities target transitional housing and other providers who offer services to individual struggling with substance abuse disorders. A robust community marketing campaign is currently ongoing with bus wraps and billboards. The messaging on the billboards and bus wraps directs individuals to Substance Abuse and Mental Health Services (SAMHSA) and the Centers for Disease Control and Prevention (CDC) for referrals. See images below.





- 6. **Cardio** Offers in home visitation services to adults who have been diagnosed with hypertension or dyslipidemia. Home visits are structured to provide education regarding healthy diet and exercise which will reduce hypertension and dyslipidemia.
- 7. **Pediatric Asthma** Offers in home visitation services to children from age 5 -18 who have been diagnosed with asthma. The program involves robust incentives which are strategically chosen to address environmental triggers in an effort to reduce asthma exacerbations. Incentives include: vacuum cleaners, swiffers, air filters, etc.

Florida Department of Health in Seminole County 400 W. Airport Blvd, Sanford FL 32771





PROJECT SUMMARY

REPORT PERIOD PROJECT NAME PREPARED BY

1st Quarterly Report Date: 5/14/2021

DOH-Seminole Community Integrated Mobile Health Services Kelly Welch, DOH-Seminole Program Administrator John Fleemin, DOH-Seminole Community Paramedic

BACKGROUND

The Community Integrated Mobile Health Services (CIMHS) program is able to provide community-based health screening, testing, education, and referrals to populations with limited access to care in Seminole County. CIMHS leads outreach events in underserved areas to improve awareness of COVID-19 and chronic disease management strategies. CIMHS also serves the community through home visitation programs which target multiple chronic health conditions. By going into the community, CIMHS services reduce or eliminate transportation and financial barriers to ensure underserved, low income and other members of the community who experience health disparities receive much needed medical screening, testing and social services.

Program Goals:

- **Goal 1:** Improve community awareness of local resources through community integrated mobile health services outreach activities.
- Goal 2: Provide nutritional education and resources to the community to reduce food insecurity.
- **Goal 3:** Provide education and resources to the community to promote effective management of chronic health conditions.
- **Goal 4:** Collaborate with community partners to reduce barriers to care and improve health equity within Seminole County.
- **Goal 5**: Improve access to adult vaccinations to improve the health of the community.
- Goal 6: Expand access to medical screenings and referral services to underserved areas of the community.

PROJECT OVERVIEW

TASK	STATUS	TIME FRAME	NOTES
Task #1: Provide two community outreach events weekly	Ongoing	Ongoing	See attached summary
Task #2: Provide individualized follow up with residents in chronic disease management	Ongoing	Ongoing	See summary
Task #3: Provide nutritional education to members of the Goldsboro community	Ongoing	Ongoing	See attached
Task #4: Provide healthy food boxes to reduce food insecurity	Near completion	1 st & 2 nd quarters	See attached

Task #5: Provide referrals to local food pantries	Ongoing	Ongoing	See attached
Task #6: Assess participant blood pressure, BMI, weight and/or A1C	Ongoing	Ongoing	See attached
Task #7: Provide resource and referral information	Ongoing	See attached	
Task #8: Record participant demographics	Ongoing	See attached	

SUMMARY OF HIGHLIGHTS OF ACTIVITIES FROM JANUARY TO MARCH

During the first quarter of 2021, seventeen outreach events were held where health screenings including blood pressure/A1C checks, vaccinations (Hep A & B, Flu, Tdap, COVID-19), community resource and referral linkages and basic on-site health education. The specific locations for quarter one outreach events are listed below. At these seventeen events, a total of 364 services were provided. In addition, the attached PDF document shows a summary of all events held, year to date.

Date	Location	City
1/24/2021	Historic Goldsboro	Sanford
2/3/2021	Remington Inn	Altamonte
2/3/2021	Grace & Grits	Sanford
2/9/2021	Iglesia Nueva Vida	Sanford
2/10/2021	Remington Inn	Altamonte
2/10/2021	Grace & Grits	Sanford
2/11/2021	Rescue Mission	Sanford
2/16/2021	Harvest Time International	Sanford
2/19/2021	Grace & Grits	Sanford
3/2/2021	Shephard's Hope	Longwood
3/9/2021	Iglesia Nueva Vida	Sanford
3/11/2021	Rescue Outreach Mission	Sanford
3/13/2021	Reacción en Cadena Ministries	Lake Mary
3/16/2021	Harvest Time International	Sanford
3/19/2021	Grace & Grits	Sanford
3/25/2021	Mars Hill SDA	Sanford

During the first quarter of 2021, CIMHS partnered with Harvest Time International to target food insecurities in Seminole County. The initiative began in early February. During this timeframe, 364 healthy food boxes were delivered to families struggling with food insecurities. The attachment shows a summary of all food boxes delivered, year to date. Additionally, the Hebni Fresh Bus made eight stops during this reporting period, serving a total of 194 individuals. The Hebni Fresh Bus provides fresh fruits and vegetables to residents primarily in the Goldsboro community, a designated food dessert. A sample of the flyer disseminated in the community is attached to this report.

During the first quarter of 2021, Community Integrated Mobile Health Services (CIMHS) continued COVID-19 response operations in addition to community outreach events to serve the community. In partnership with the Seminole County Fire Department, CIMHS facilitated home vaccinations for hundreds of disabled and home bound individuals (breakdown by dose below).

Totals - Home Vaccinations

1st Doses	618
2nd Doses	422
Janssen J&J	50
Total Q1 Doses:	1090

On Wednesday, April 7th, Kelly Welch, DOH-Seminole Program Administrator and John Fleemin, DOH-Seminole Community Paramedic met with Chinonye Ike-Egwuatu and Dr. Anita Ekambaram from Orlando Health to discuss the referral process for patients encountered at Orlando Health that would benefit from community paramedicine support and services. A protocol was established whereby Orlando Health can send referrals directly to CIMHS.

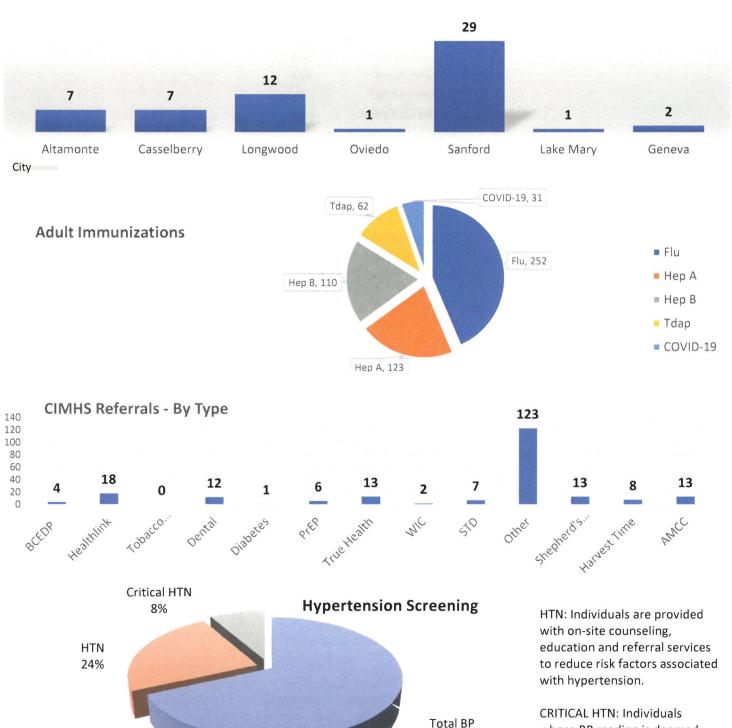
During this reporting period, a total of four referrals were received, contact was made, and all patients accepted services. In home services included: health literacy training, health insurance navigation, utility assistance referrals, medication management review and education. Additionally, three PEATs assessments (Physical Environment Assessment Tools) were completed, all with positive findings requiring corrections with education for sustainability.



Community Integrated Mobile Health Services

Eff: 5/1/2021

CIMHS Outreach Events - by City



■ Total BP ■ HTN ■ Critical HTN

68%

CRITICAL HTN: Individuals whose BP reading is deemed critical are immediately referred to a hosptial or urgent care center.



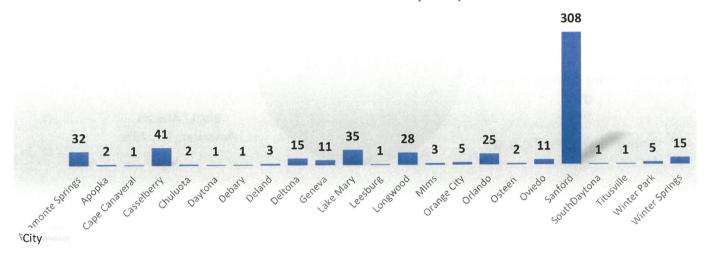
Community Integrated Mobile Health Services

Eff: 5/10/2021

Food Insecurity - Healthy Food Box Distribution					
Total Served: 553 Average Household Size: 3					
Average Household Income:	\$16,804	Average Recipient Age:	50		

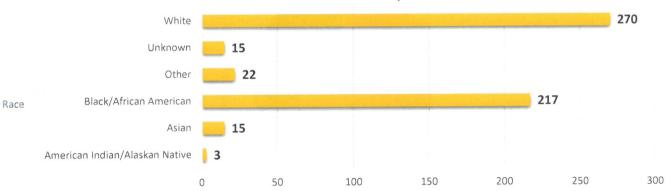
Count of City

Food Box Distribution - by City



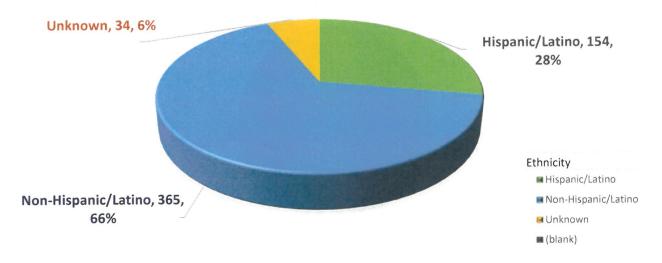
Count of Race

Food Box Distribution - by Race



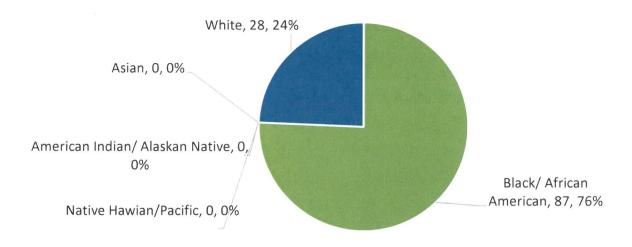
Count of Ethnicity

FOOD BOX DISTRIBUTION - BY ETHNICITY

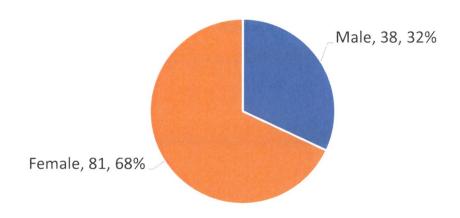


Food Insecurity - Hebni Fresh Fruits & Vegatables - Bus Stops						
Total Served:	119	Total Fresh Bush Stops:	8			

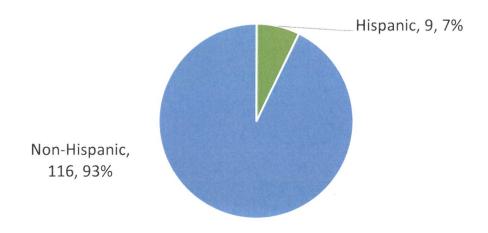
Hebni Fresh Stop Bus - Individuals Served by Race



Hebni Fresh Stop Bus - Individuals Served by Gender



Hebni Fresh Stop Bus - Individuals Served by Ethnicity









MAKING A FRESH STOP IN YOUR COMMUNITY!

Fresh Stop is a mobile farmers market on wheels. The bus travels through Central Florida neighborhoods offering fresh fruit and vegetables at budget friendly prices.

Our mission is simple, we want to make Central Florida healthier by making fresh produce more accessible and affordable!





FRESH STOP BUS - EVENT STOP

LOCATION: Warley Park - 1500 W. 25th Street

Sanford, FL 32771

DAY: Tuesday, March 2, 2021

TIME:

2:30 PM - until suppllies last

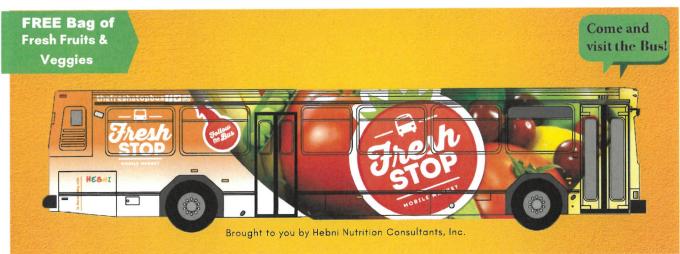
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407.872.1333

www.thefreshstopbus.com

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Florida Department of Health in Seminole County 400 W. Airport Blvd. Sanford FL 32773 **Tel** 407-665-3339



ORLANDO HEALTH COMMUNITY GRANT PROGRAM STATUS REPORT

PROJECT SUMMARY

REPORT PERIOD
PROJECT NAME
PREPARED BY

First Quarterly Report
February – April 2021

Educación sobre diabetes en español
Fublic Health Nutrition Consultant

BACKGROUND

Over the past three years, we at DOH-Seminole have implemented much-needed programs to address the growing diabetes epidemic. Currently, our Diabetes Self-Management Education (DSME) Program is only available in English due to lack of Spanish-speaking staff. The ability to offer services in Spanish will greatly expand enrollment in our classes and increase identification of persons at risk for diabetes in Hispanic populations of Seminole County. Adding Spanish-speaking staff to our Diabetes Intervention team and the ability to deliver our programs in Spanish will dramatically increase our ability to identify persons with and at risk for diabetes in underserved populations of Seminole County and provide them with the culturally competent education that they need and deserve.

Program Goals:

- Impact 500 Seminole County residents through educational programs and outreach.
- Whether through a brief encounter at an outreach event or several hours of instruction, we aim to improve our clients' knowledge of their disease conditions and the services available to them.
- Improve access to health education and screenings, low or no cost enrollment in our programs, as well as linkage to assistance in obtaining healthy food through our food pantry and affordable healthcare and mental health services through our community partners.

PROJECT OVERVIEW

TASK	STATUS	TIME FRAME	NOTES
Informational contacts that take place in the community, over the phone and within our building.	Ongoing	Ongoing	Initiated contact with 3 walk-in clients, and 8 self-referred clients that called for information. Engaged with 3 potential clients in community settings. Four clients were referred by healthcare providers. Total of 18 clients engaged.

Individuals screened for diabetes, by random blood glucose or A1C test.	Ongoing	Ongoing	A1C tests completed for 2 walk-in clients.
Clients referred to DPP or DSME whose primary language is Spanish through our direct efforts in the community.	Ongoing	Ongoing	Seven, however, they were proficient enough in English that they were able to engage with non-Spanish-speaking educator.
Clients listed above who enroll in one of our programs.	Ongoing	Ongoing	None of the clients listed above was interested in committing to enrollment in our structured DSME program at the time, however, accommodations were made to address individual needs for each of the clients we engaged, described more in summary below.
Individuals referred to our DOH-Seminole food pantry and for healthcare/mental health services through our collocated and external community partners.	Ongoing	Ongoing	Three clients listed above were referred to our food pantry. None verbalized unmet needs for other healthcare services.
Community partner / healthcare provider contacts that take place and the number of outreach events attended.	Ongoing	Ongoing	Zero
Referrals we receive from healthcare providers and self-referred clients that call or walk-in to our facility.	Ongoing	Ongoing	Fifteen, included in the 18 clients listed in first task.
# of individuals with improved A1C.	Ongoing	Ongoing	One client who received A1C screening reported that the number was an improvement from their last number.
Demographics: Age, Gender, Race, Ethnicity, County	Ongoing	Ongoing	Age: 30s - 1 (6%) 40s - 2 (11%) 50s - 6 (33%) 60s - 7 (39%) 70s - 2 (11%) Gender: Female - 11 (61%) Male - 7 (39%) Race: Non-hispanic white - 6 (33%) Hispanic white - 5 (28%)

Non-hispanic black – 4 (22%) Hispanic black – 2 (11%) Asian – 1 (6%)

Total non-hispanic – 11 (61%) Total Hispanic – 7 (39%)

Seminole County – 17 (94%) Volusia County – 1 (6%)

SUMMARY OF ACTIVITIES FROM FEBRUARY THROUGH APRIL

During the first quarter of the grant term, the COVID-19 pandemic continued to impact our ability to recruit and engage residents in community settings. Diabetes risk assessments and A1c screenings continued to be available onsite at DOH-Seminole. Our educational model also had to change to accommodate the changing needs of the community. In-person education was still offered to those who were comfortable coming to the clinic, however, clients were also given the option to participate by phone or virtual platforms. Despite the decrease in our number of participants compared to pre-COVID times, our educational model grew and evolved into a much more client-centered approach. Instead of expecting that people would commit to an entire series of 10-12 hours of structured curriculum covering many topics, we focused the time spent on the learning needs most pertinent to them at the time. For example, one woman was already very comfortable with taking her medication correctly and using her glucose meter, but really needed additional time spend helping her learn carbohydrate-counting. Now and in the coming months, as we move closer to returning to normal, our ability to engage clients in community settings will be back to pre-pandemic levels. We are very pleased to now have onboard a native Spanish-speaking Registered Nurse who has previous work experience delivering community diabetes education programs. With her expertise and cultural competency, we will at last be able to connect with a larger portion of our community and deliver educación sobre diabetes en español.

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Implementing Overdose Prevention Strategies at the Local Level (IOPSLL)

Quarter 1 Report (January 8, 2021 – March 15, 2021)

In the tables and charts below, you will find that Seminole County is experiencing an unprecedented rise in non-lethal and lethal overdoses. Although there was an upward trend prior to the impact of the COVID-19 pandemic, the pandemic has further exasperated the crisis as seen with marked increases in overdoses, hospitalizations, emergency room visits, Narcan administration, referrals and deaths.

From 2019 to 2020, there was a 62% increase in overdose incidents in Seminole County according to data collected by the Seminole County Overdose Response Effort (SCORE) Team. The total number of incidents for 2019 was 460 and increased to 748 in 2020. The total number of overdose deaths in 2019 were 83 and rose to 109. This was 31.3% increase. In a published report by the Centers for Disease Control and Prevention on synthetic opioid overdoses on their website, increases in synthetic opioid-involved deaths are being driven by increases in fentanyl-involved overdose deaths and specifically illicitly manufactured fentanyl. Our local data appears to support the national trend. Narcan administration increased from 570 in 2019 to 744 in 2020. Referrals for treatment or intervention also increased from 2019 to 2020. The total number of connections to services in 2019 was 58 and for 2020 there were 126. This represents 46 individuals in 2019 connected to services and 102 in 2020 connected to services. The increase in service utilization correlates to the rise in overdose incidents.

DOH-Seminole partnerships with AdventHealth and the Seminole County Sheriff's Office will serve those most in need of care in Seminole County due to substance use disorders. These partnerships will increase capacity to respond specifically and effectively to non-fatal overdoses through evidence-based strategies at the local level. Activities include: hiring critical personnel, improving coordination and linkage to care, improving community awareness of substance use disorders through marketing and data sharing, strengthening protocols to leverage resources and expertise of public safety and first responders, and enhancing the local response through substance use disorder inpatient therapy and community paramedic services in the field while measuring the impact of the overall program through comprehensive data collection and analysis.



Implementing Overdose Prevention Strategies at the Local Level (IOPSLL)

Background data and synopsis of Seminole County

OVERDOSE INCIDENTS

Source: SCORE (Seminole County Opioid Response Effort) Team¹

Overdose Incidents	2019	2020	Percent Change
January	25	52	108.0%
February	30	39	30.0%
March	37	56	51.4%
April	43	57	32.6%
May	29	51	75.9%
June	30	49	63.3%
July	50	62	24.0%
August	42	89	111.9%
September	55	88	60.0%
October	44	77	75.0%
November	36	61	69.4%
December	39	67	71.8%
Total	460	748	62.6%
Monthly Average	38.3	62.3	-
Monthly Standard Deviation	9.0	15.5	-

¹The SCORE Team includes all drug overdose incidents in their counts. Their list is not opioid specific.

OVERDOSE DEATHS

Source: SCORE team²

Overdose Deaths	2019	2020	Percent Change
January	9	7	-22.2%
February	5	2	-60.0%
March	6	17	183.3%
April	10	4	-60.0%
May	3	5	66.7%
June	5	7	40.0%
July	5	7	40.0%
August	3	16	433.3%
September	10	15	50.0%
October	12	10	-16.7%
November	7	8	14.3%
December	8	11	37.5%
Total	83	109	31.3%
Monthly Average	6.9	9.1	-
Monthly Standard Deviation	2.9	4.8	-

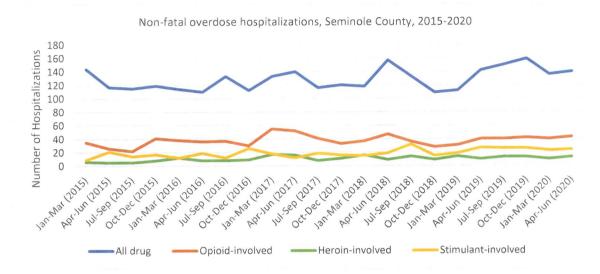
²The SCORE Team includes all drug overdose deaths in their counts. Their list is not opioid specific.



Implementing Overdose Prevention Strategies at the Local Level (IOPSLL)

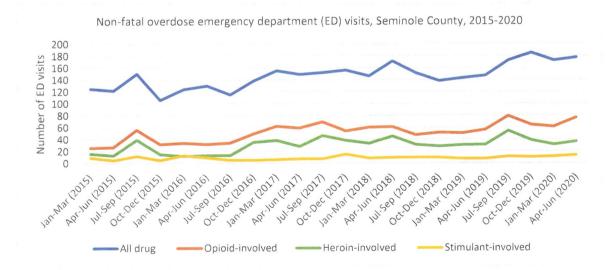
OPIOID OVERDOSE HOSPITALIZATIONS

Source: FL Charts



OPIOID OVERDOSE ED VISITS

Source: FL CHARTS

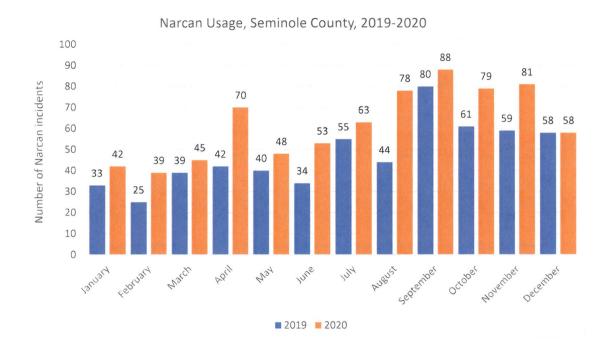




Implementing Overdose Prevention Strategies at the Local Level (IOPSLL)

NARCAN ADMINISTRATION

Source: SCORE Team



REFERRALS TO TREATMENT

Source: SCORE Team

Referrals to treatment by the SCORE team	2019	2020
Overdose callouts	124	191
Follow-ups completed with overdose victims	460	1,516
Going directly from overdose to detox	25	45
Referrals to Aspire	60	92
Referrals to Peer Specialist	36	121
Total connections to services	58	126
People who connected to those services	46	102
-Completed 30 days	56%	51%
-Completed 60 days	30%	28%
-Completed 90 days	19%	15%
-Completed 180 days	8%	7%
-Accepted into services multiple times following relapse	8	14
-Males in services	28%	72%
-Females in services	32%	68%

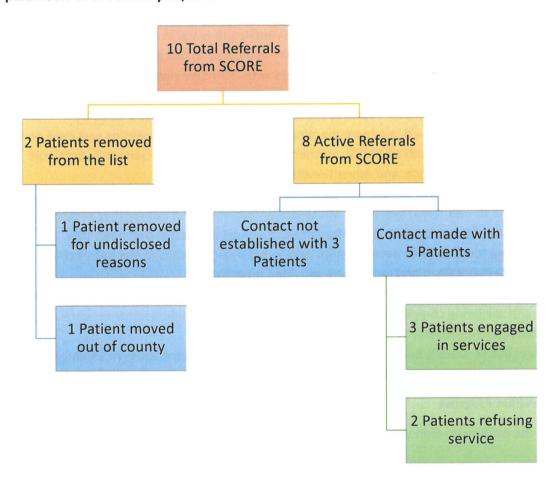


Implementing Overdose Prevention Strategies at the Local Level (IOPSLL)

New data from inception of grant (2021) for Seminole County

Note: This data represents services through February 28, 2021

The following is a flow diagram of the referrals received and processed from the community paramedic as of February 28, 2021



Other Notable Data collected through the community paramedic tracking tool

Based on the data, 37.5% of patients contacted by our community paramedic engaged in services and received basic screening of their vitals. Of those individuals, 66% were referred to the Intensive Outpatient Program with the Hope & Healing Center. Only 25% of the individuals contacted refused services. Our community paramedic was also able to research and find resources for one individual who was experiencing dental issues. Our hope is that by alleviating medical concerns (which could potentially be a barrier to SUD therapy) the patients will be able to focus on their mental wellness.



Implementing Overdose Prevention Strategies at the Local Level (IOPSLL)

Evaluation and Performance Measurement

Work Plan Progress

Based on the work plan submitted, the following activities have been completed

- Objective 1: DOH-Seminole has hired a Program Coordinator, Community Paramedic, Epidemiologist, and an Evaluator. Note: AdventHealth is still in the process of hiring a Substance Use Disorder Therapist specifically dedicated to this grant
- Objective 2: Weekly meeting are being held with DOH-Seminole and the Seminole
 County Sherriff's Office SCORE Team every Tuesday. Weekly meetings are held with the
 IOPSSL Team members on Thursday mornings (once SUD Therapist is hired by
 AdventHealth, they will join team meetings). An initial quarterly meeting was held on
 December 9, 2021 with all IOPSSL partners which included: DOH-Seminole, Seminole
 County Sherriff's Office, and AdventHealth.
- Objective 4: Training has been provided to the community paramedic on SCORE Team
 response to non-lethal overdose calls to law enforcement. An interagency protocol was
 completed for response to law enforcement involved non-lethal overdose calls. A
 reporting tool has been developed for non-lethal overdose calls to law enforcement.
 Data are maintained and reports are provided monthly.
- Objective 5: Home visits, health screenings, and identification of social determinants of health are being completed by the community paramedic. Educational sessions are also conducted in the field by the community paramedic.
- Objective 6: Data is being collected and analyzed on substance abuse in Seminole County and shared with project partners via e-mail monthly.

Evaluation Plan Progress

Based on the evaluation plan submitted, the following Outcomes have been established

- Cohesive team established with appropriate training to report and respond to nonlethal overdose incidents as evidenced by documented SCORE Team weekly meetings with Seminole County Sheriff's Office and weekly IOPPSL Team meetings.
- Increased understanding of interagency joint response protocol that promotes care collaboration between Seminole County Sheriff's Office, AdventHealth, and DOH-Seminole as evidence by Community Paramedic field reports during weekly team meetings.
- Initial understanding of data, data sources, and associated discrepancies as evidenced during weekly IOPPSL team meetings.
- Planning and initiating draft development of Substance Use Disorder dashboard using custom reports on Seminole County's existing mySidewalk Community Dashboard