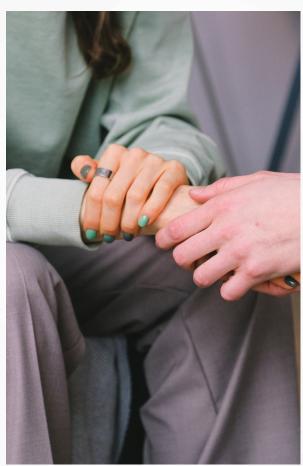


PUTNAM COUNTY NEEDS ASSESSMENT







2024

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- Aza Health
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- Concerned Community Members
- Florida Army National Guard Counterdrug Drug Demand Reduction Outreach
- GFWC Woman's Club of Palatka, Inc.
- LSF Health Systems
- North Florida High Intensity Drug Trafficking Area (NFHIDTA)
- North Florida/South Georgia Veterans Health System
- Project Opioid Jax
- Palatka Housing Authority
- · Prevention Coalition of St. Johns
- Putnam County Commissioner's
- Putnam County Medical Mission
- Putnam County Sheriff's Department
- Recovery Point Recovery Community Organization
- Students with Emotional/Behavioral Disabilities (SEDNET) Region 12
- SMA Healthcare
- University of North Florida

NEEDS ASSESSMENT PROCESS

Through a better understanding of the local context, guided by the Strategic Prevention Framework (SPF), Community Coalition Alliance (CCA), Putnam Behavioral Health Forum and Putnam Health & Wellness Coalition sought to support/leverage efforts to ensure a comprehensive and inclusive response. Key to this was the focus on increasing awareness across community members and stakeholders as well as enhancing the capacity to create those responses necessary to address substance use and overdose challenges in Putnam County. This report is the first step in a long-term strategic planning process. In order to identify appropriate strategies to address the rising concern surrounding underage drinking, marijuana use by youth, increased opioid and stimulant use, drug overdoses and deaths in Putnam County, Florida. This had led to a widespread burnout among first responders and a common negative attitude towards those suffering from substance mis(use) disorders. It was imperative to not only identify the current needs based on data, but to also examine current strategies being implemented.

CCA and Putnam Behavioral Health Forum and Putnam Health & Wellness Coalition have taken the lead in bringing the members together and engaging the members through ongoing planning meetings. The initial planning process began by identifying key priorities based on the findings from the needs assessments. Over the course of a seven month period, staff hosted several meetings to review the ongoing data collection process, examine the needs, barriers, and challenges noted, and identify priority areas:

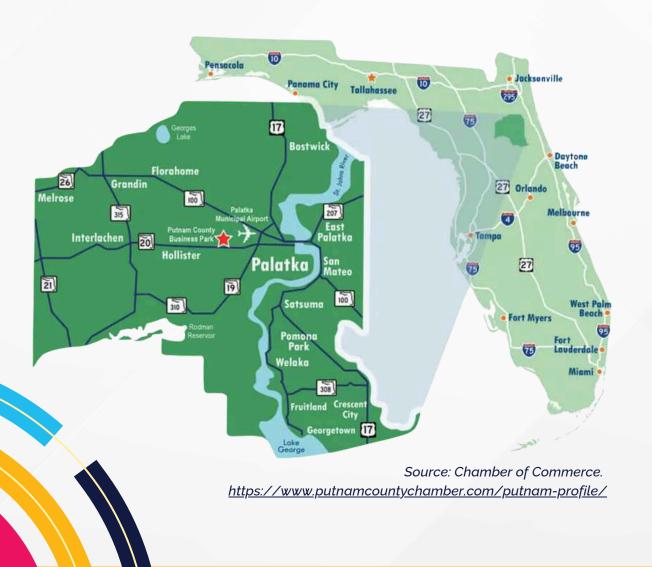
- Monthly Behavioral Health Forum and coalition meetings
- Environmental Scans
- Key Informant Interviews
- Ongoing follow-ups, meetings, and conference calls with members
- Surveys
- Technical assistance provided by Community Coalition Alliance team
- Product Development: Needs Assessment, Problem Statement, and Resource Assessment.

Through this effort, CCA hosted several meetings to build consensus across the key elements to ensure buy-in. Next steps is to develop a logic model, action/strategic plan.

COMMUNITY DESCRIPTION & HISTORY

Putnam County has a long and rich history dating back to its creation in 1849 as Florida's 28th county. Putnam County and Palatka were regarded as one of the largest trading centers located on the St. Johns River, transporting lumber, freight, and citrus. https://putnam-fl-historical-society.org/a-brief-history-of-palatka/

Putnam County is in northeast Florida with State Roads 17, 19, 20, 100, and 207 being the primary routes through the county, as well as the St. Johns River flowing south to north on the east side of the county. The county is approximately 827 square miles with an estimated 12% being water. Putnam County is centrally located between Clay, St. Johns, Flagler, Volusia, Marion, Alachua, and Bradford Counties. Primary communities include the cities of Palatka (County Seat) and Crescent City, the towns of Interlachen, Pomona Park, and Welaka, as well as several unincorporated communities. Below is a map of Putnam County, Florida.



Communities Within Communities

The county is home to numerous faith-based communities that often serve as community centers due to the lack of traditional gathering places for many of the smaller townships. Church groups are typically involved in planning and organizing festivals, events, and celebrations throughout the year with partners such as local Rotary organizations and businesses. Church of the Heights in Palatka has helped make significant strides in raising substance misuse awareness by hosting local partners and resources in training, awareness, and networking seminars. Community members shared descriptions of Putnam County's make up dividing it into Crescent city, Interlachen, and Palatka. Details of South Putnam entailed a strong connection with the community by Baptist - based churches, additionally, a need for further health resources calls for concern as there is only one licensed mental health clinician available to the south district. Crescent city is known as the wealthy district of Palatka where an accumulation of revenue is made from an "underlined drug culture". Descriptions of Interlachen included their population occupying blue collared classes and retirees. Members did share a concern regarding the influx of homeless populations in their county accounting locations such as San Mateo, Moody Road, Dunn's Creek Bridge, The Library, and First Presbyterian church.

Historical Origin of Related Issues

Putnam County has struggled with socioeconomic conditions conducive to common substance use risk factors for many years. Poor socioeconomic conditions and lack of education have been identified by the National Research Council and Institute of Medicine as key risk factors for substance abuse among young people. Key informant interviews report many families in the region suffer generational poverty, rely primarily on welfare resources and have much lower education levels, often leading to substance mis(use) or drug trafficking. For more information, see Appendix I.

PUTNAM COUNTY HIGH PROFILE EVENTS

There have been significant incidents that have drawn attention to substance mis(use).

- February 2009, a local five-year-old female 'HaLeigh Cummings' was reported missing by her guardians. Father of HaLeigh, Ronald Cummings Sr maintains a lengthy-revolving criminal history prior to and following the disappearance of his daughter. Cumming's Sr and his then girlfriend had different charges of resisting officers, battery on a law enforcement officer, and trafficking and possession of oxycodone. Fifteen years following her disappearance, HaLeigh's Guardians still proclaim their innocence while Putnam County Sheriff's Office has no further leads to the cold case investigation.
- April 2023, two female students of Interlachen Junior-Senior High school students were transported to Gainesville Pediatrics after separate vaping incidents. A thirteen-year-old girl was conscious yet not alert when found in the restroom during school. Additionally, during the incident another female stated she was going to faint and was transported to the hospital shortly before experiencing seizures. Two kids were sent to the hospital after vaping in school, PCSO says.
- April 2023, two sixth-grade students of Jenkin's Jr Elementary were hospitalized
 after the consumption of marijuana edibles. Sheriff DeLoach reported one
 student passed out and experienced overdose symptoms. Investigation revealed
 girlfriend seeked out gummies via social media from her boyfriend. Putnam's
 Superintendent, Dr. Rick Surrency, stated disciplinary action would be followed
 after the conclusion of the Sheriff's investigation.
- October 2023, four second-grade students of Jenkin's Jr. Elementary were sent
 to the hospital following the ingestion of THC gummies. Putnam County Sheriff's
 Office received reports of the students presenting signs of being under the
 influence of a substance. Deputies were able to pinpoint the location of
 possession from one student's family member. Putnam PD stated this incident
 serves as a reminder for parents and guardians to protect children from
 exposure of the edibles that closely mirrors candy.
- May 2024, a ninth grader attending QI Roberts Junior-Senior High School was arrested for the possession of a handgun in their backpack on school property.
 The tip was received using the 'Fortifyfl' app where suspicious activities can be reported to law enforcement.

First drug coalition meeting was held September 2023. In addition, to the establishment of a cohesive multi-sectoral community coalition, coalition can facilitate the effective implementation of evidence-based and practice-based substance use prevention strategies within a community that include but are not limited to:

- Maintain active sector membership and collaboration
- Assess the scope and nature of the problem, including the root causes and local conditions driving substance mis(use)
- Promote health equity
- Implement proven strategies
- Monitor progress

Sector Representatives

A community coalition is a community-based formal arrangement for cooperation and collaboration among 12 required sectors of a community in which each group retains its identity, but all agree to work together toward a common goal. According to CADCA model these required sectors are:

- Youth: Someone 18 years of age or younger in a public, private, home schooled, or alternative school.
- Parent: A person who is legally responsible for a child, grandchild, or foster child.
- Business: A representative of a business-related organization.
- Media: A representative of a communication outlet that provides information to the community. Through an appropriate media platform, this representative should be capable of communicating and disseminating information (such as in print, digitally, or through social media) that furthers the coalition's mission.
- School: A representative of the school system with influence in school policies and procedures.
- Youth-serving organization: A representative of an organization that provides services to support youth.
- Religious or fraternal organization: A representative of a faith-based organization or from a fraternal organization based on a common tie or pursuit of a common goal. The organization must have a substantial program of fraternal activities.
- Law enforcement: A representative of a law enforcement agency.

Putnam Health & Wellness Coalition added a Peer Sector. A peer is a person with substance mis(use) lived experience. Coalition successfully recruited and engaged all 13 sectors. In addition, each sector representative signed a sector agreement. See Appendix IV for sector agreement.

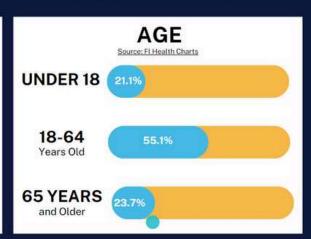
COUNTY PROFILE

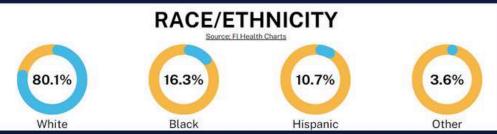
COUNTY PROFILE Putnam County



Putnam County is located in the northeastern region of Florida, just to the south of Jacksonville, which is Florida's largest municipality by population and size. Palatka, the County Seat is located on the St. Johns River, one of the few rivers in the world that actually flows north.







	Putnam	St. Johns	Volusia	Flagler	Florida
Poor or Fair Health	23%	12%	16%	15%	13%
Poor Mental Health Days	5.7	4.9	5.2	5.3	4.2
Uninsured	18%	10%	16%	13%	15%
Preventable Hospital Stays	4,876	2,388	2,795	2,314	3,035

Source: County Health Rankings & Roadmaps

2023 COUNTY HEALTH RANKING

	Putnam	St. Johns	Volusia	Flagler
Health Outcomes	66	2	40	20
Health Factors	67	1	31	24

COUNTY PROFILE Putnam County



Substance Use Indicators

ADULT Source: County Health Rankings & Roadmaps

	Putnam	St. Johns	Volusia	Flagler	Florida
Excessive Drinking	18%	23%	20%	19%	17%
Alcohol Impaired Driving Deaths	39%	21%	23%	25%	22%
Smoking	27%	15%	20%	19%	16%
Teen Births	36	6	18	13	16
Child Poverty	37%	6%	17%	17%	17%

YOUTH - PAST 30-DAY USE

	Putnam	St. Johns	Volusia	Flagler	Florida
Alcohol	14%	16.6%	15.5%	12.3%	11.8%
Binge Drinking	6.6%	8.8%	7.5%	5.7%	5.6%
Cigarettes	1.2%	1.3%	1.4%	2.4%	1.2%
Vaping Nicotine	11.1%	10.8%	16.1%	11.5%	9.7%

OF HIGH SCHOOL STUDENTS WHO DRINK,

FYSAS, 2022 Source: FL Dept. of Children and Families



43.4%



13%

report drinking at home

report someone gave it to them

report they took it from family

report they bought it from a store

YOUTH REPORTED

"riding in a vehicle driven by someone who had been drinking or using..." past 30 days

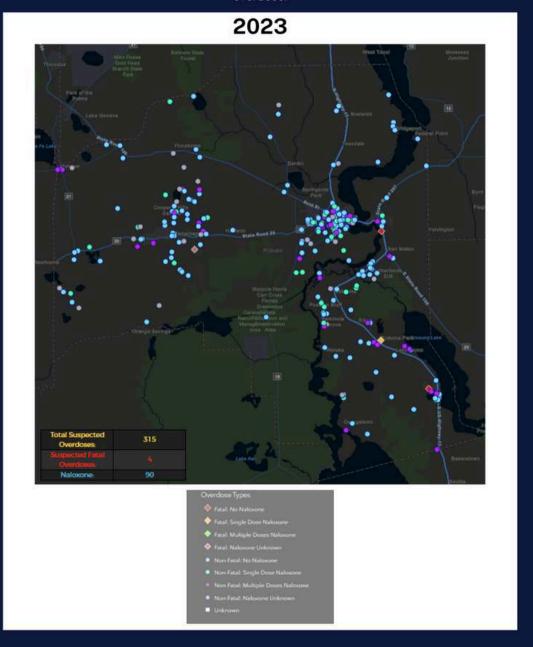
FYSAS, 2022

		Source: Fl Health Char	ts	
	ALCO	HOL	MARIJ	LANA
	Putnam	Florida	Putnam	Florida
High School Students	16.4%	13.5%	17%	17.8%
Female HS	23%	16%	19.9%	20.6%
Male HS	9.8%	11.2%	14.3%	15.1%

COUNTY PROFILE Putnam County Overdose Map - Courtesy of North Florida HIDTA & ORS Team



The maps below provides information on suspected overdoses for Putnam County. The legend provides key information based to understand the color significance of the dots on the maps below. It is important to note that ODMAP data is NOT indicative of an illicit drug overdose.



YOUTH DATA

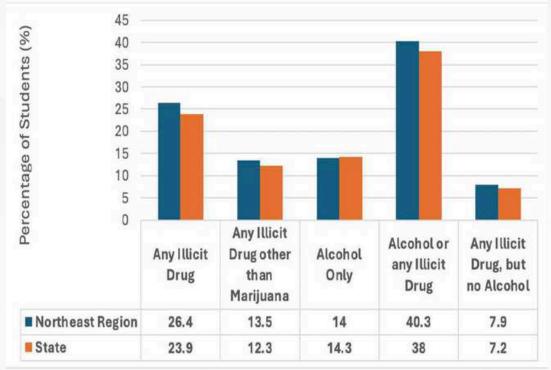
The Florida Youth Substance Abuse Survey is a collaborative effort between the Florida Departments of Health, Education, Children and Families, Juvenile Justice, and the Governor's Office of Drug Control. It is based on the "Communities That Care" survey, assessing risk and protective factors for substance abuse, in addition to substance abuse prevalence. The survey was first administered to Florida's middle and high school students during the 1999-2000 school year, and is repeated in the spring, annually. In the spring of even years, the survey is administered simultaneously with the Florida Youth Tobacco Survey, sampling enough students to generate data applicable at the county and Department of Children & Families (DCF) district level. In odd years the Youth Risk Behavior Survey and the Youth Physical Activity and Nutrition Survey are also added. All surveys are administered to a statewide sample of students.

The Florida Youth Substance Abuse Survey (FYSAS) is part of the multi-survey Florida Youth Survey (FYS) project. In 2022, students were surveyed in all 67 Florida counties. Participation from 384 public middle schools and 352 public high schools. Final sample size is 47,572 across grades 6 through 12. 61.5% administered online and 38.5% with booklets. The margin of error is less than 1.0 percentage point for state-level M.S. and H.S. prevalence rates. In Putnam County 605 middle and high school students were surveyed. For major demographic characteristics see table below.

	Putnam	County	Florida S	rida Statewide	
	N	%	N	%	
Sex					
Female	286	47.3	22,957	48.3	
Male	313	51.7	23,857	50.1	
Race/Ethnic group					
African American	104	17.2	10,187	21.4	
American Indian	16	2.6	422	0.9	
Asian	5	0.8	785	1.7	
Hispanic/Latino	90	14.9	10,291	21.6	
Native Hawaiian/Pacific Islander	1	0.2	63	0.	
Other/Multiple	118	19.5	6,956	14.0	
White, non-Hispanic	270	44.6	18,419	38.	
Parent/Guardian in the Military					
No	511	84.5	41,174	86.6	
Yes	89	14.7	5,980	12.0	
Age				4	
11	32	5.3	2,576	5.4	
12	85	14.0	6,243	13.	
13	107	17.7	6,872	14.4	
14	105	17.4	7,136	15.0	
15	86	14.2	7,278	15.3	
16	74	12.2	6,918	14.5	
17	67	11.1	6,616	13.9	
18	40	6.6	3,403	7.2	
Grade					
6th	82	13.6	6,626	13.9	
7th	100	16.5	6,817	14.3	
8th	126	20.8	7,021	14.5	
9th	85	14.0	7,193	15.	
10th	64	10.6	7,025	14.3	
11th	88	14.5	6,557	13.5	
12th	60	9.9	6,333	13.3	
Middle School	308	50.9	20,463	43.0	
High School	297	49.1	27,109	57.0	
Total	605	100.0	47,572	100.0	

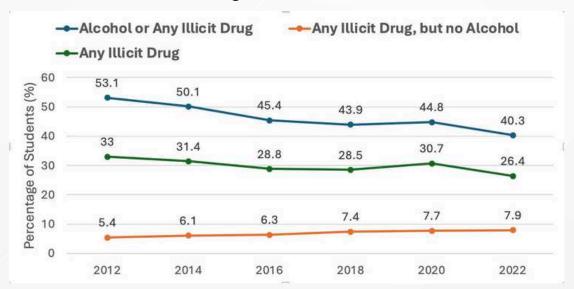
For this community needs assessment, the 2022 FYSAS was used as the primary data source for youth. We compared state, Northeast Region of Florida which includes 23 counties, and Putnam County.



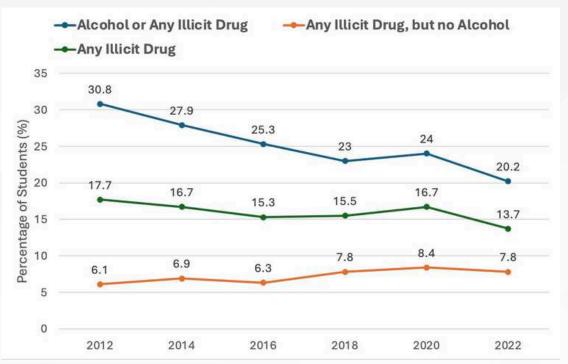


This first slide compares lifetime substance use among the 23 counties in the region to the state levels. We found that substance use in our region is higher than the state in most categories except for alcohol only which is 0.3% lower. Putnam County was at 28.6% for alcohol only which is significantly higher than the state.

Youth Lifetime Substance Use Regional 10-Year Trend (2012-2022)

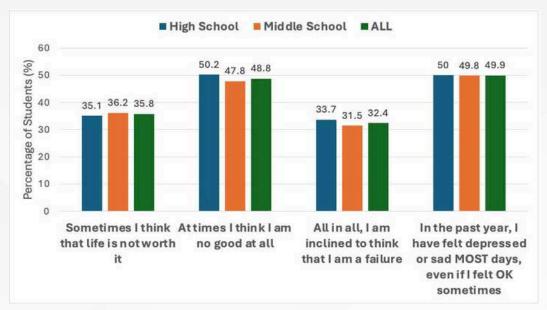


When we look at youth lifetime substance use over the last 10 years, we found that any illicit drug without alcohol has increased slightly. In Putnam it was 5.4% in 2012 and increased to 9.8% in 2020 and in 2022 it stayed at 9.8%.



This trend is even more evident when looking at past 30-day use, any illicit drug without alcohol has continued to increase. For Putnam County it decreased from 6.6% in 2012 to 5.3% in 2022. While all substance use increased in 2020, both alcohol or any illicit drug and any illicit drug alone have gradually decreased and in 2022 were the lowest in the previous 10 year. In Putnam in 2020 alcohol was 14.7%, vaping nicotine 11.1%, and marijuana 7.1%. In 2022 alcohol and marijuana slightly decreased but vaping nicotine slightly increased.

Regional Youth Mental Health 2022



FYSAS 2022 revealed that nearly 50% of middle and high school students report that in the past year they have felt depressed or sad most days even if they did feel ok sometimes. In Putnam County it was 44.3% while the state rate was 47.3%. We also see that middle school students were more likely to report that they sometimes think life is not worth it in the state at 33% and in Putnam County it was 31.5%. Middle school students ranked higher in all categories for symptoms of depression and suicide than high school students. High school aged students reported higher percentages for the other categories, including feeling like a failure or that they are no good at all at the state level compared to Putnam high school students.

Adverse Childhood Experiences (ACEs)

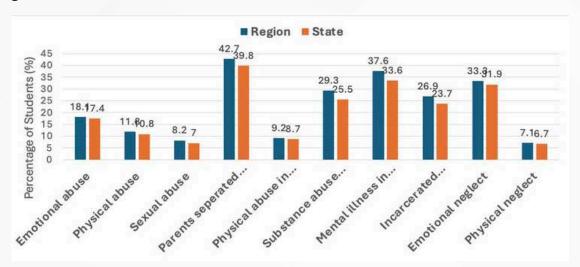
ACEs is the title of a 1998 study examining the relationship between childhood trauma and long-term health outcomes. One of the lead investigators, Dr. Vincent Felitti, had access to health outcomes data for patients at Kaiser Permanente San Diego, and he collaborated with Center for Disease Control researcher, Dr. Robert Anda, to survey the patient sample about their exposure to childhood trauma. The research revealed that exposure to ten childhood traumas directly impacted patients' health outcomes. These ten traumatic experiences, which the researchers termed "ACEs," are:

- Physical abuse
- Sexual abuse
- Emotional abuse
- Physical neglect
- Emotional neglect
- Intimate partner violence
- Substance abuse
- Mental illness in the household
- Loss of parent through death, parental separation, or divorce
- Incarceration of a household member.

13

ACEs, are traumatic events experienced during childhood that have been linked to a broad range of negative health and behavior outcomes, including impaired cognitive development, high-risk behavior such as substance use, difficulty forming positive social relationships, high rates of chronic disease, and employment and financial difficulties. For the first time in 2022 ACES data was collected on high school youth in the FYSAS. The table below outlines the percentages of Hamilton County and Florida Statewide high school youth who reported adverse childhood experiences (ACEs), 2022. Those included in FYSAS are emotional abuse, physical abuse, sexual abuse, parents separated or divorced, physical abuse in household, substance abuse in household, mental illness in household, incarcerated household member, emotional neglect, physical neglect, bullying only collected for high school, Ages 15-17.

Regional Adverse Childhood Events (ACEs)



This data was only collected among high school students When compared to the state, our region has a higher percentage of students reporting ACEs in all categories with the most common being divorce or separation, mental illness in the household, and emotional neglect Putnam was higher than the state for parents separated or divorced, physical abuse in the household, substance abuse in the household, incarcerated household member, and physical neglect.

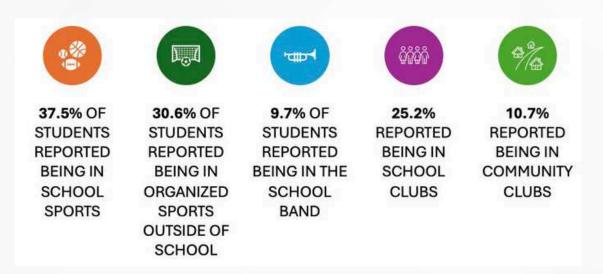
Regional Positive Childhood Experiences (PCEs)

Positive Childhood Experiences (PCEs) are defined as childhood experiences which stem from safe, stable, nurturing relationships and environments, and have the power to prevent or protect children from traumatic events, toxic stress, or ACEs.

Those included in FYSAS are school sports, organized sports outside of school, school band, school clubs, community clubs, family opportunities for prosocial involvement, family rewards for prosocial involvement, school opportunities for prosocial involvement, school rewards for prosocial involvement, and religiosity.

The northeast region reports lower protective factor prevalence when it comes to school opportunities and rewards for prosocial involvement, but has comparable rates of opportunities for family, peer, and individual prosocial involvement.

Other student reports of protective factors in the northeast region of Florida:





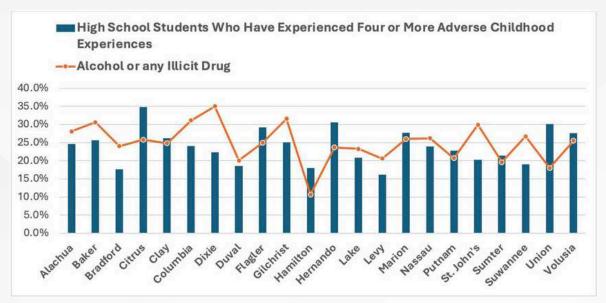
In Putnam 40.6 % students reported being in school sports, 26.5% students reported being in organized sports outside of school, 8.6% students reported being in the school band, and 18.1% students reported being in school clubs.

The FYSAS measures PCEs through measuring opportunities and rewards for prosocial involvement. The northeast region reports lower protective factor prevalence when it comes to school opportunities and rewards for prosocial involvement, but has comparable rates of opportunities for family, peer, and individual prosocial involvement. Protective factor prevalence rates for Putnam County, Florida Statewide youth, and the national normative database, 2022 are:

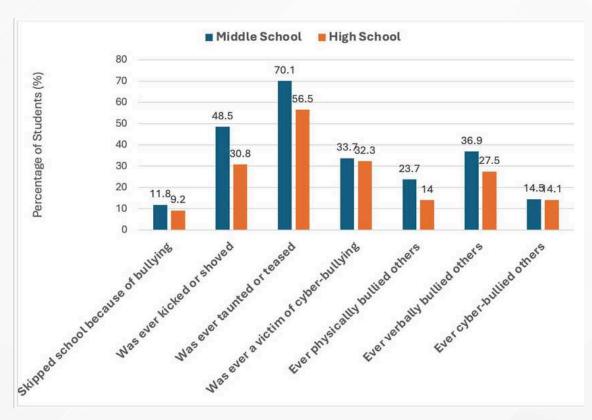
Domain/Scale	Putnam Middle School	Putnam High School	Florida Middle School	Florida High School	National Middle School	National High School
Family – opportunities for prosocial involvement	50	58	53	55	59	54
Family – rewards for prosocial involvement	41	43	46	49	54	55
School - opportunities for prosocial involvement	46	57	51	60	57	60
School - rewards for prosocial involvement	48	61	45	56	53	58
Peer & Individual - religiosity	39	45	36	46	56	62

Because risk is associated with negative behavioral outcomes, it is better to have lower risk factor scale scores, not higher. Conversely, because protective factors are associated with better student behavioral outcomes, it is better to have protective factor scale scores with high values.

Counties with High ACEs Compared to Youth Past 30-Day Substance Use 2022



The bars on this graph represent high school students with 4+ aces. The green line represents alcohol or any illicit drug. In many of the counties the percent of high school students who reports ACEs and the percent who report substance use is very closely related.



Bullying, although it is not a part of the original ACE study, is a potentially traumatic experience. This data shows that bullying is more commonly reported among middle school students. For all age groups being taunted or teased is most common. In middle school being kicked or shoved is second most common. In high school, being a victim of cyber bullying is second most common.

In Putnam County 65.5% middle school students reported being taunted or teased, 37.9% reported being kicked or shoved, and 35.8% reported verbally bullying others. For high schools students 41.2% reported being taunted or teased, 27.3 % reported being a victim of cyber bullying, 22.9% reported being kicked or shoved and reported verbally bullying others.

Regional Student Reports of Impulsivity or Lack of Self-Control

Individual differences in impulsivity contribute to risk taking that is observed during adolescence. Nearly 1/3 of students reported "I often do what brings me pleasure now". On average across all these measures nearly 30% of student respondents had characteristics of impulsivity or limited self-control.

In Putnam 24.5% of students reported "I often do what brings me pleasure now". On average across all these measures nearly 30% of student respondents had characteristics of impulsivity or limited self-control. Programs that teach self-control skills could potentially create more resilient youth in our communities.

Other Risk and Protective Factors at the Regional Level (2022)

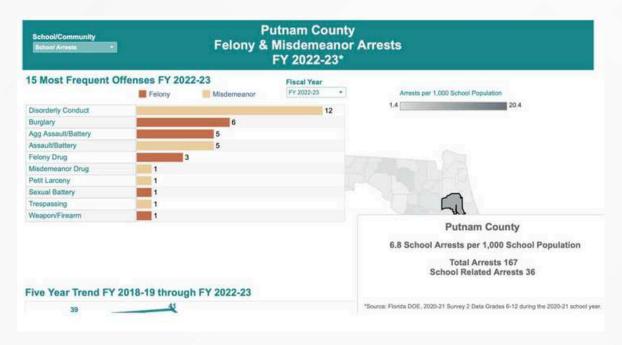
Community	Family	School	Peer and Individual
Laws and norms favorable to drug use	Poor family management	Poor academic performance	Favorable attitudes toward antisocial
Perceived availability of	Family conflict	Lack of commitment to	behaviors*
drugs Perceived availabilty of		school	Favorable attitudes toward ATOD use*
handguns			Early initiation of drug

Factors are higher among middle and high schoolers in our region compared to the state and Putnam except lack of school commitment in Putnam.



	2018-1	9 201	9-20	2020-21	2021-22	2022-23		
PUTNAM	5.29	6 5	.3%	3.8%	4.0%	3.5%		
	Crescent City JrSr. High School Interlachen JrSr.High School					91.3% 88.4%		
	Palatka JrSr. High School					%		
Putnam Edge Charter High School (closed in July 2022) Putnam Virtual School					(2) 42.9	%		
					71.4	%		
	Q. I. Roberts JrSr. High School							

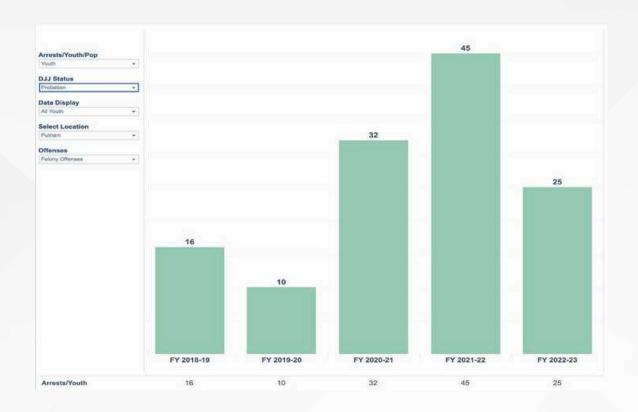
Florida Department of Education released official 2022 graduation rates. The State of Florida graduation rate is 87.3% and Putnam County School District's graduation rate is 88.5%.

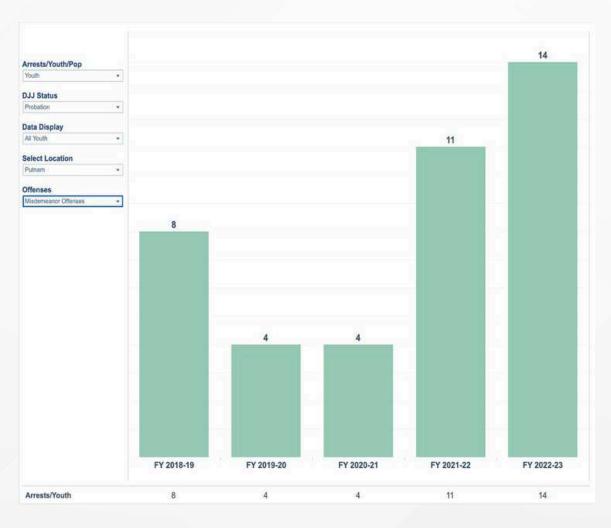


This chart includes youth arrest data specific to school offenses for years 2022-2023 provided by FL Health Charts.

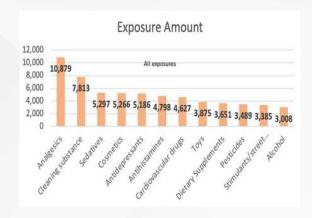
The charts below include all youth population arrest, intake, probation rates for felony and misdemeanor offenses from years 2018 - 2023 provided by FL Health Charts.

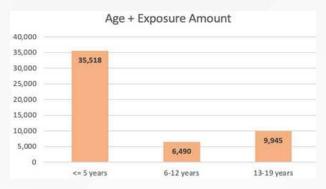


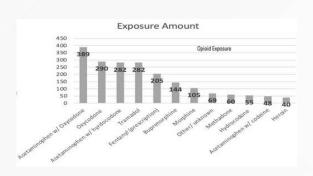


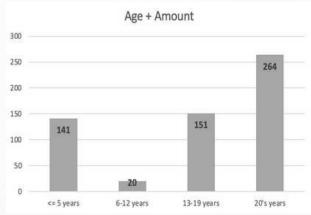


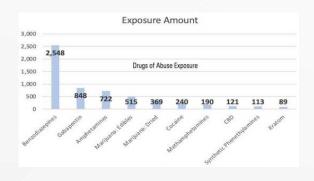
Charts below include youth exposure rates to opioids, drugs, and substance use from 2023 provided by Florida's Poison Control Center

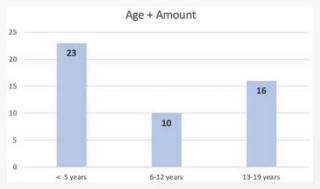










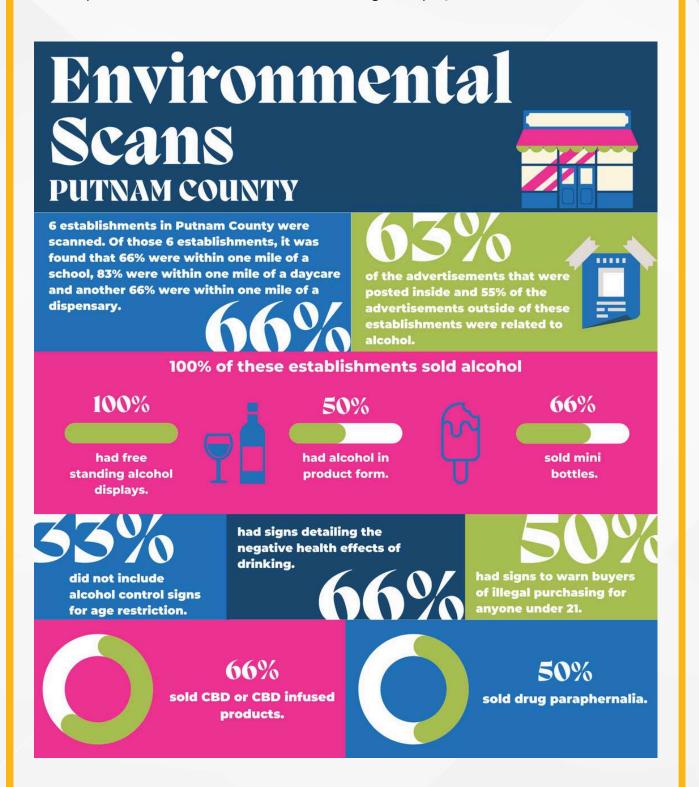


Putnam data from Florida's Poison Control center, 2023.

Environmental Scans

Environmental Scans discover and document youth exposure to alcohol, CBD, delta, hemp, tobacco, vaping, kratom products and their messaging within the community. This information is utilized to identify practices and policies toward healthier advertisement and sale methods within the retail environment across our communities.

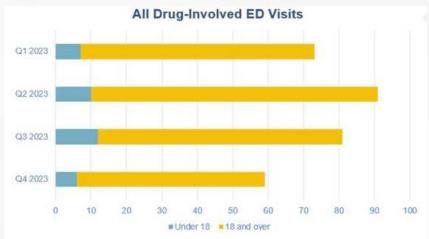
A snapshot of the information collected through this project in Putnam is below:



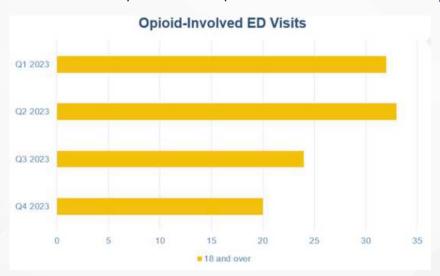
ADULT DATA

Essence

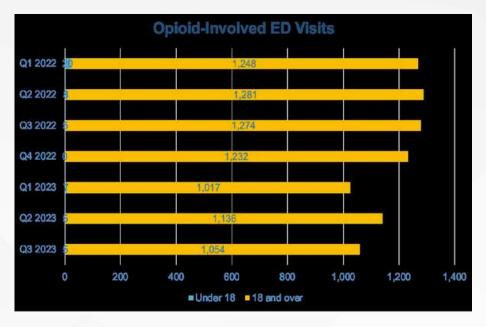
All data excludes alcohol ONLY suspected overdoses. Opioid specific data was not gathered until 2020.



- 29% of all EMS suspected OD's responses were opioid-involved in 2023
- 377 Total EMS Responses for Suspected OD's in Putnam County in 2023 Data point description
- 424 Total EMS Responses for Suspected OD's in Putnam County in 2023 Data point description
- The teal part of this graph represents EMS responses for all suspected drug overdoses, the yellow represent those that were opioid-involved.
- 29% of suspected ODs were opioid involved.
- 12.4% increase in EMS responses to suspected ODs for Putnam County.



- In 2023, 36% of the ED visits were Opioid-Involved.
- 122 Opioid-Involved ED Visits in Putnam County in 2022
- 109 Opioid-Involved ED Visits in District 23 in 2023
- In 2023 there were 109 Opioid-Involved ED Visits, this is a 10.7% decrease from 2022.



- In quarters 1-3 or 2023, individuals 18 years old and younger accounted for 0.5% of Opioid-Involved ED Visits
- 5,085 Opioid-Involved ED Visits in North Florida in 2022
- 3,224 Opioid-Involved ED Visits in North Florida in Q1-3 2023

Suspected Opioid-Involved Emergency Department Visits by County of Facility and Age Group North Florida
Opioid Involved ED Visits Q1-Q3 2023

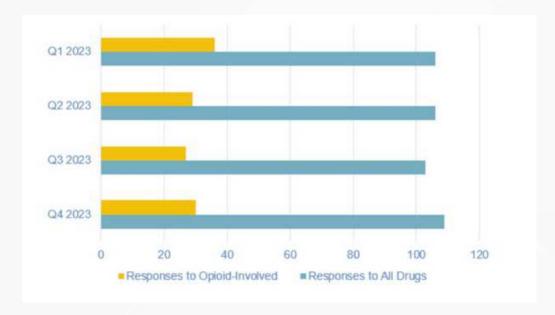
Hospital	Child	Total Percent Change	Adult	Total Percent Change
(County) (Und	ler 18 year	rs)	(18 years and older)	
Alachua, FL		-100%	252	6.30%
Baker, FL	0	0%	28	0%
Bradford, FL	0	0%	0	-100%
Clay, FL		0%	221	-15.60%
Columbia, FL		0%	60	15.40%
Duval, FL	17	-26.10%	1,568	-20.40%
Flagler, FL	0	-100%	112	-5.90%
Leon, FL		0%	222	441.50%
Marion, FL		-100%	423	-43.20%
Nassau, FL	0	0%	28	-34.90%
Putnam, FL	0	-100%	89	-1.10%
St. Johns, FL		0%	204	-2.90%
Union, FL	0	0%	0	-100%
NFHIDTA Total	17	-48.50%	3,207	-15.70%
Florida (Total)	189	-9.50%	20,896	-8.50%

This chart is opioid-involved ED visits for Q1-Q3 2023 compared to Q1-Q3 2022. The good news is in under 18 years old there was no increase in opioid involved ED visits. Overall, the NFHIDTA AOR saw a 48.5% decrease in 18 years and under and 15.1% decrease in over 18-year-old individuals.

Biospatial

The National Collaborative for Bio-Preparedness (NCBP) Operating as a partnership between University of North Carolina (UNC) and Biospatial, builds on a six - year pilot program developed between the Department of Homeland Security (DHS) and the (UNC) to provide data – driven operational insight for the national preparedness and response enterprise, state and local responders. Biospatial provides access to clinical and operational dashboards with near - real time information used to improve national bio - preparedness, operations and response. Multi - source data collection is developed into information that provides early warning of health and safety threats and trends and is used to detect anomalous events related to public health and safety, syndromic event detection, naturally – occurring health events, biological or chemical terrorism and unexpected outbreaks. Florida Department of Health (FDOH) along with multi -agency cooperation supports the Biospatial platform and our local partner subscribers like Emergency Medical Services (EMS) in a collaborative effort to improve situational awareness, response capabilities and public health.

All data excludes alcohol ONLY suspected overdoses. Opioid specific data was not gathered until 2020.



- In 2023, individuals 18 years old and younger accounted for 11.5% of All Drug-Involved ED Visits
- 303 All Drug-Involved ED Visits in Putnam County in 2022
- 304 All Drug-Involved ED Visits in Putnam County in 2023
- Full year 2023 children made up 11.5% of ED visit involving all drugs
- 9.4% increase in ED visits in FY 2023 compared to FY 2022
- 0.3% increase in Putnam County from FY 2023 compared to FY 2022

Emergency Medical Service Responses for Suspected Drug Overdoses (ODs) by County of Incident - Florida EMS Q1-Q3 2023

County	Responses to drug O.D	Responses to drug O.D with Opioid	Responses to opioid ODs when Narcan was given
Alachua, FL	1,230	221	204
Baker, FL	108	28	25
Bradford, FL	115	28	20
Clay, FL	571	215	183
Columbia, FL	287	0	0
Duval, FL	4,395	1,973	1,827
Flagler, FL	312	125	115
Leon, FL	993	202	156
Nassau, FL	292	125	116
Putnam, FL	315	92	70
St. Johns, FL	721	181	180
Union, FL	43	6	5
NFHIDTA Total	11,553	4,121	3,766
Florida (Total)	86,513	28,673	25,510

This chart shows EMS responses for suspected ODs Q1-Q3 2023 compared to Q1-Q3 2022. A few things to highlight – Alachua and Putnam saw an increase in responses to ODs, while Bradford saw an increase in responses to ODs involving opioids as well as Narcan administrations. Overall, the NFHIDTA AOR saw decreases in all three categories.

Full Year 2023 - EMS Under 18

Quarter 3 - 2023		Quarter 2 - 2023			Quarter 3 - 2023		Quarter 4 - 2023					
County	Responses to drug overdoses			Responses to drug overdoses	Responses to drug overdoses involving Opioid	Responses to opioid ODs where nallowner was administered	Responses to drug overdoses		Responses to opioid ODs where nalowone was administered	Responses to drug overdoses	Responses to drug overdoses involving Opioid	Responses to opiol OOs where naloxon was administered
Flagler	16	0	0	5	0	0	9	0	0	14	0	0
Putnam	10	0	0	1		1.4	/*	o	o	10	- 4	E#/
St. Johns	22			17	0	0	23	0	0	17	0	0
District 23	48	۰	ø	29	0	0	40	0	0	41	0	0
FHIDTA (Total)	294	0		284	0	0	305		0	223	0	0
Florida (Total)	1,933	67	56	1,894	93	85	1,665	55	52	1,670	64	58

	Quarter 1 - 2023			Quarter 2 - 2023		Quarter 3 - 2023		Quarter 4 - 2023				
County	Responses to drug overdoses		Responses to opioid ODs where naloxone was administered	Responses to drug overdoses		Responses to opioid ODs where naloxone was administered	Responses to drug overdoses		Responses to oploid GOs where naloxone was administered	Responses to drug overdoses		Responses to opioi ODs where naloxor was administered
flagler	94	39	35	94	44	43	94	42	37	94	22	16
Putnam	96	36	n	99	29	20	95	27	17	99	30	23
St. Johns	219	69	69	237	58	57	201	54	54	237	51	51
District 23	409	144	137	430	131	120	392	123	108	430	103	90
FHIDTA (Total)	3379	1355	1241	3743	1441	1323	3548	1320	1202	3744	1053	948
Florida (Total)	26,368	9,550	8,483	27,652	9,759	8,674	27,001	9,149	8,160	27,853	7,488	6,613

The chart above breaks down the data by county and then gives a comparison for the NFHIDTA area of responsibility (AOR) within Florida.

The Washington/Baltimore HIDTA developed the Overdose Detection Mapping Application Program (ODMAP) in 2016. ODMAP provides near real-time suspected overdose surveillance data across jurisdictions to support public safety and public health efforts to mobilize an immediate response to a sudden increase or spike in overdoses. The data below highlights overdoses in Putnam County for the year of 2022- 2023. Data is pulled from an Automatic Program Interface through the Florida Department of health, Biospatial, and the Washington.Baltimore High Intensity Drug Trafficking Area ODMAP.

ODMAP Highlights

ODMA	D Cuenacta	d Overdoses
UDIVIA	r suspecte	u Overdoses

	January - September 2022	January - September 2023	Total Percent Change
Alachua	877	887	1.10%
Baker	87	90	3.40%
Bradford	105	99	-5.70%
Clay	455	434	-4.60%
Columbia	18	19	5.50%
Duval	3,853	3,455	-10.30%
Flagler	273	251	-8.10%
Leon	842	731	-13.20%
Marion	1,797	1,716	-4.50%
Nassau	289	249	-13.80%
Putnam	233	244	4.70%
St Johns	592	526	-11.10%
Union	53	36	-32.10%
NFHIDTA	AOR 9,474	8,737	-7.80%

Overdose Map - Courtesy of North Florida HIDTA & ORS Team

Map below provides information on suspected overdoses for Putnam County. The legend provides key information based to understand the color significance of the dots on the maps below.

2022



January - April 2023



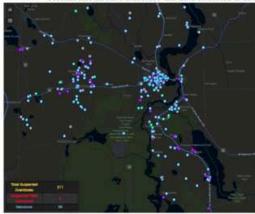
COMMP Suspension Constitutes:
Considerate Types

Part Technique

Part Techni

The table above provides a summary of the information from the maps above for 2020 – April 2023.

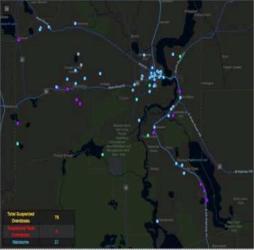
- Data does not indicate an illicit drug overdose.
- All data excludes alcohol ONLY suspected overdoses.
- Florida has an API therefore the data reflected is automatically updated from FL DOH EMSTARS into ODMAP





The table above provides a summary of the information from the maps above for year 2023.

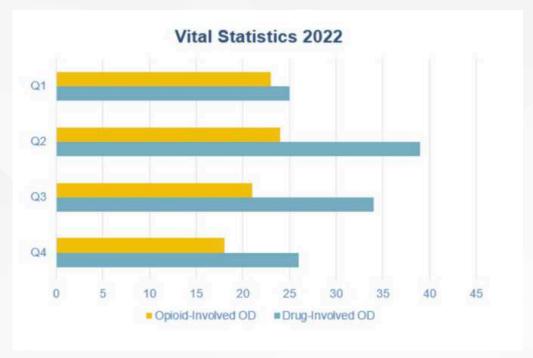




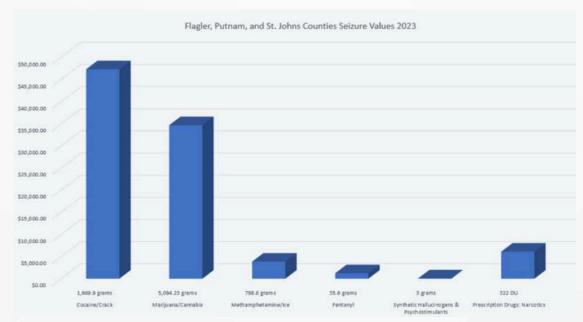
The table above provides a summary of the information from the maps above for year 2023 vs 2024. 7.3% decrease

Vital Statistics

All data is overdose deaths.



- 92% of the fatal overdoses were opioid involved.
- For 2022, District 23 had 93 Drug-Involved fatal overdoses.
- The numbers for Putnam County were suppressed meaning, more than 0 but less than 5, so it was easier to show District 23 data. I can tell you the first 3 quarters of 2022 there were at least 19 fatal overdoses in Putnam County, but the 4th quarter data specifically was suppressed. For Full Year 2022 District 23 had 93 fatal overdoses and of those 92% involved opioids.



This graph represents 2023 seizures within the NFHIDTA program. This is specific to District 23 area but to highlight Putnam County specifically 1,669.9 grams of cocaine/crack and 798.6grams of meth/ice were seized in Putnam County.

PUTNAM 2023 Crash Data

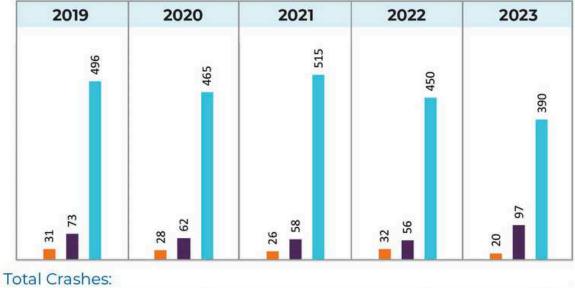
Totals: 1,770 Crashes | 21 Fatalities* | 126 Serious Injuries*

		Serious		No	
Emphasis Areas	Fatality	Injury	Injury	Injury	Total
Lane Departure	14	48	142	499	703
Intersections	4	33	136	335	508
Pedestrian and Byclists	3	7	13	6	29
Aging Road Users	4	28	98	349	479
Motorcyclists and Motor Scooter Riders	4	14	21	7	46
Commercial Motor Vehicle Operators	1	6	20	76	103
Teen Drivers	2	13	55	174	244
Impaired Driving	17	12	25	36	90
Occupant Protection	11	18	46	36	111
Speeding and Aggressive Driving	2	6	20	50	78
Distracted Driving	3	16	80	197	296

NOTE: Crashes can encompass multiple emphasis areas; therefore, the summation of emphasis area crashes does not equate to the total number of crashes.

5-Year History | Crashes by Severity:





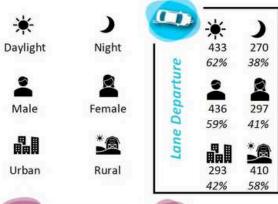
2019: 1,865 2020: 1,759 2021: 1,971 2022: 1,899 2023: 1,770

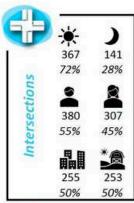
Florida Department of Transportation, 2023

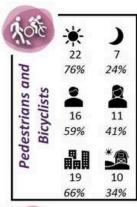
Source: Signal Four Analytics, Crash data is from 01/01/2023 through 12/31/2023. Data was generated on 03/11/2024 and is subject to change.

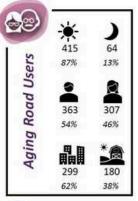
PUTNAM 2023 Crash Data

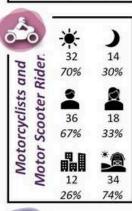
Crash Facts by Emphasis Areas

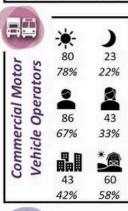






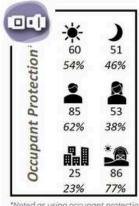


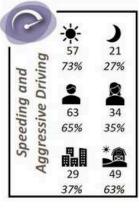


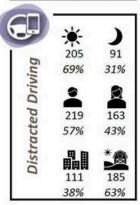


65	*)
	164	80
2.0	67%	33%
1 Drivers	182 55%	149 45%
Teen	125	***
	51%	49%

ĊP)	*)
bu	39 43%	51 57%
d Drivi	59	42
nire	58%	42%
Impa	17	* <u>@</u>
	19%	81%







*Noted as using occupant protection.

Totals and percentages are based on crash incidents, not injuries.

Source: Signal Four Analytics. Crash data is from 01/01/2023 through 12/31/2023. Data was generated on 03/11/2024 and is subject to change.

Florida Department of Transportation, 2023

BARRIERS & CHALLENGES

During the development of the Resource Assessment, barriers and challenges were identified. See results below.

Strengths

- The community is looking into creative funding opportunities such as the HOPS grant that would assist with transportation concerns.
- Meridian received a SAMHSA grant for the Treatment of Individuals Experiencing Homelessness (TIEH).
- Putnam County is looking into boosting the infrastructure of internet services to the more rural areas. This may assist in addressing access to telehealth.
- Second chance employers in the community are strong partners.
- Engage RCO to assist with peer support for individuals with SUDs under a Marchman Act order.
- There is a form on the PCSO website under jail information and visitation for "Family Resources" that was created in collaboration with Patients not Prisoners. The form allows families and loved ones to email medical staff directly with information on prescription medication, allergies, primary care provider information, mental health diagnoses, or other pertinent information.
- With the medical staff transition, PCSO is exploring options to provide in-jail MAT services.
- The PDO works diligently with clients to identify mental health concerns and address appropriately.
- Researching and beginning to provide MAT services,
- Jail provides recovery pods in jail for individuals with extra needs.
- Working to bring "Jail Bridge" program (methadone/MAT) as an in-jail program.
- Researching ACTS software that would provide stats for individuals.
- At the time of the mapping, PCSO recently secured a building for their recovery center. The re-entry center is in the planning stages.
- There is strong collaboration among Goodwill and CareerSource to help with workforce barriers for individuals e-entering the community.
- SMA offers re-entry planning for individuals with SUDs in jail.
- There is strong collaboration among Public Defenders Office and HRDS, misdemeanor probation provider
- Several local employers are willing to provide second chance employment to individuals re-entering the community.
- Narcan vending machines are utilized throughout the county and all PCSO deputies carry Narcan.
- Student led mental health awareness event convened September 30, 2023.

- The BRAVE program is an asset to Putnam County youth. However, it may be beneficial to explore pathways to earlier identification/referrals of youth in need.
- A recovery school model has been discussed for Putnam County as an alternative school setting for youth in need of additional support.
- Putnam County has high civil citation utilization rates.
- DJJ has formed a advisory board to engage communities.
- Explore creative funding opportunities available due to designation as rural area such as HRSA and STAR to incentivize behavioral health workers to the location.
- Explore pathways to leverage BAYS for additional diversion programming.
- CAT Team is permitted to visit youth in the detention center.
- Community Re-entry Team (CRT) is utilized to help assist the youth and families with re-entry.
- DJJ Advisory Board has been created to help address detention issues.
- Recreational activities available through Police Athletic League at both county and city level.

Barriers

- Transportation continues to be a barrier for clients to receive services.
- South Putnam County has trouble in access to services. The community may
 want to explore the development of satellite centers and shared staff models to
 hep alleviate some the division of resources.
- NAMI may be a potential partner to engage that would provide additional assistance with community awareness and stigma reduction.
- There is a need and desire to have a residential detoxification facility for adults and juveniles.
- The staff capacity for dispatch is limited and therefore difficult to engage in training initiatives.
- The community will benefit from expansion of CTTU hours if funding permits.
- Establish collaboration with HCA Putnam Medical to pursue discharge planning for individuals released following a Baker Act.
- Increase community awareness about the jail's website to provide medical information for individuals in the system. At the SIM, participants expressed a desire around a HIPAA/42CFR Part 2 complaint release for families to allow jail to share information on loved ones.
- There is an opportunity for earlier identification of the mental health and substance use needs of individuals in jail.
- Increase PCSO collaboration with VA social work department on notification/referral system (for veterans not receiving their medications).
- Explore the feasibility of implementing evidence-based screening tools at jail booking.
- Involuntary outpatient may address needs addressed related to client buy-in for mental health treatment services.
- Possibility for Mental Health Court or to have St. Johns provide spots for individuals, as well as Homelessness court.

- Peer support could be leveraged within the jail and within the problem-solving courts.
- DrugCourt could utilized to full capacity.
- Explore best practice models such as the Assess, Plan, Identify, and Coordinate (APIC) Model for re-entry planning for individuals with mental health and substance use needs.
- Streamline linkages to resources and warm hand-off to community-based providers.
- Palatka Housing Authority is an advocate in the community and provides RAPID Rehousing options as they are available. However, at the time of the mapping there was a waitlist of over 900 for housing vouchers.
- Streamline and increase the resources awareness amongst providers.
- Explore opportunity to engage probation officers in the future CIT trainings and other related law enforcement mental health training initiatives.
- There are barriers to staffing within Putnam County and many youth services are out-of-county.
- There are barriers to engaging youth in mental health services die to parent permissions.
- Youth-led support group is convening in Putnam County. Explore evidence-based models for youth peer-to-peer support.
- Explore opportunities for additional diversion programming for juveniles such as Teen Court model.
- There is not an in-country receiving facility for juveniles under a Baker Act or Marchman Act Order. This acts as a major barrier when transiting home because SMA/local providers cannot provide transport back to county. Youth must be picked up by parent/guardian.
- There is a very limited number of options available for substance use treatment for juveniles under a Marchman Act order.
- The community expressed the challenge of engaging parents and families in youth treatment services.
- There are not any mental health-specific services provided to youth while in secure detention.
- Explore opportunities for other providers to be allowed to visit clients while in detention.
- There is a need for stigma reduction initiatives for families and youth in the system and experiencing MH and/or SUD issues.
- System navigators would be beneficial to assist with re-entry process.
- The community expressed a need to have an alternate housing option or independent living for transition aged youths ages 18-21.
- Explore supported employment opportunities for teens and transition age youth through local second chance employers.
- Peers and family navigators may be leveraged to assist with engagement and navigation of behavioral health and juvenile justice system.

PROTECTIVE/RISK FACTORS

April 11, 2024, Risk and Protective Factor activity was facilitated by Gabrielle K. Magnanti, Commander C Co 753rd BEB, 53rd IBCT, North Florida Officer in Charge, Drug Demand Reduction and Outreach, Florida National Guard Counterdrug Program at coalition meeting. See results below.

Community: Faith Based, Workplace, School Protective Factors:

- Narcan Education
- Prevention Programs in school
- State required prevention education in schools
- Active in sports / clubs
- Food Truck Fridays / Festivals
- Services available in the community
- All Putnam School District counselors trained in Hidden in Plain Sight
- Churches that regularly have youth and / or family activities
- Community involvement / resources
- Involved at school in clubs / activities / sports or involved in community (church)

Community: Faith Based, Workplace, School Risk Factors:

- Prescribed controlled RX
- Lack of perceived support + opportunities
- Bullying in school + social media
- Lack of youth activities
- Poverty, Homelessness, Generational cycles, Transportation
- Adults tend to diminish youth problems
- Need things within in the community to keep kids busy
- Job opportunity for teens
- Stigma around asking for help
- Lack of knowledge of community resources to provide services
- Lack of 100% committed partnership with key stakeholders

Relationships: Family, Teachers, Peers, & Mentors Protective Factors:

- Attentive parents
- Stable housing
- Parents who listen + give emotional support
- Family / Parent Involvement Social support
- Kids want to talk to trusted adults
- Substance abuse counselors, Mentors, Mental health counselors
- Girls Can Initiative
- Brave summit
- Organized sports and activities

Relationships: Family, Peers, Teachers, & Mentors Risk factors:

- Stigma / Education (lack of)
- Lack of education
- Isolation
- Lack of support
- Little knowledge if available resources
- Parents don't know how to identify problem or help.
- Kids say 'I can't talk to you'
- Low perception of harm (socially acceptable to drink)
- Family history of substance abuse -normalized easily accessible
- Friends (pressured), Depression, Mental health, wrong place / wrong time
- Domestic violence / Child Abuse + Neglect
- Normalization of drug use in the homes



PROBLEM/GOAL STATEMENT

Several barriers the adults in Putnam County face is lack of resources, drug - substance use availability, and lack of business and employment opportunities within their area. Tops concerns regarding adults included drug/alcohol overdoses, criminal activity, and homelessness. By providing education and resources to adult populations this can help youth reduce risk factors and adverse behaviors - Increasing awareness and prevention among adult populations can improve relationships and support between children.

Underage drinking has drastically increased throughout the nation. Low perception of harm surrounding alcohol creates challenges in reducing underage drinking. High levels of alcohol retail (and social) access has been seen as a sector in maintaining the issue of underage sales and consumption in Putnam County. Youth are engaging in underage drinking as a coping mechanism method for mental health, familial issue, and lack of social activities.

The work taken on by CCA and Putnam County Health & Wellness Coalition has provided a better understanding of the current challenges and barriers as well as the extent of the underage drinking across Putnam's community. As a result of this process, the members engaged in a planning process to identify priority areas with noted objectives to address current needs across the Behavioral Health Continuum of Care. It is important to note the goal factors below have not only been identified through this coordinate planning process, but through consensus building efforts and agreement across all members of Putnam County Health and Wellness Coalition. This is yet another example of how at the heart of Putnam County are strong and committed partners ready to engage, commit, and support what is needed to help their community.

PROBLEM/GOAL FACTORS

May 9, 2024, Creating youth problem statement was facilitated by Gabrielle K. Magnanti, Commander C Co 753rd BEB, 53rd IBCT, North Florida Officer in Charge, Drug Demand Reduction and Outreach at coalition meeting. See responses below.

1. Problem: Underage drinking

- a. Perceived Low Risk of Harm
- b. Retail Access
- c. Lack of Mental Health Services/coping mechanisms

2. Perceived Low Risk of Harm

- a. Everybody does it/available at home
- b. Normalized
- c. Lack of traumatic experience related to alcohol use
- d. Makes somebody "feel better"
- e. "Don't Do It" only message (instead of educating on consequences)
- f. Limited protective factors
- g. Middle school combined with high school (exposure)
- h. Drinking with parents/social events/parental influence

3. Retail Access:

- a. Family will buy/families work at retail stores
- b. Alcohol retailers close proximity to other establishments
- c. Vast public advertising
- d. Retail sales law/citations
- e. Link up with MAJ Rhodes

4. Lack of Mental Health Services:

- a. Low opportunities for prosocial activities
- b. Parents deny support
- c. Referrals for mental health not being addressed
- d. Parents must consent to mental health services

APPENDIX I: KEY INFORMANT INTERVIEW RESULTS

With the startup of Putnam County's Health & Wellness Coalition, SSG Foresman interviewed fourteen community members regarding eleven questions about their neighborhood. Community members included public service workers, new residents, and citizens who have lived here their whole life. Eleven inquiries regarding their community were involved and, to the best of their abilities, they completed the questionnaire. When asked about how the pandemic has affected their community, individuals shared common answers such as loss of businesses/jobs, lack of health care, negatively impacted economy, a rise in telehealth, and still an impact to this day. Additionally, interviewees were able to provide information on known substances in the area in particular, Fentanyl, Meth, Marijuana, Pills, Cocaine, Alcohol, and MDMA. Furthermore, knowledge on how these substances is obtained, members shared stories of drug dealers, doctors, parents, family-friends, out of county traffickers, Orange County, High Ridge County, and their homes. Moreover, when questioned about the contribution of substance use in the community members shared responses of poverty, peer pressure, lack of mental health care, loneliness, and lack extra-circular activities local to their community. When asked about the consequences of these substances they recalled stories of broken families, overdoses, poverty, deaths, crime increase, homelessness, and arrest rates rise. In addition, when members were questioned about barriers impacting the community regarding substance abuse, members shared providers do not want to be involved, lack of transportation, the want to stop but cannot alone, a mentality that 'drugs are fun', and no drug coalition in Putnam.



- 1. How long have you lived in this community?
 - a. Entire life (39 years)
- 2. How long have you been in this position at your agency/organization?
 - a. 1 year, 5 months
- 3. What is unique about this community?
 - a. Putnam very rural, very dynamic..in the middle of Gainesville/ Jacksonville/etc. People from out of Putnam merging into Putnam because of low cost of living. Fisherman mixed with higher income individuals. One of the poorest and unhealthiest in the state.
- 4. How has the pandemic/Covid impacted the community?
 - a. Small businesses impacted. Schools staying at home with remote learning.
- 5. What substances have you seen impact your community the most?
 - a. Tobacco (smoking, dipping, and vaping), alcohol, meth
- 6. What do you think contributes to the substance use in your community?
 - a. Family history of use, lack of education, isolation, trauma/stress, homelife.
- 7. What consequences from substance use do you see impacting individuals and your community as a whole?
 - a. Family life, jobs, health, crime rates increase, unemployment rates
- 8. Where do you think individuals obtain the substances from?
 - a. Substances discarded on the ground, meth labs
- 9. What barriers/challenges do you see impacting your community when it comes to substance use?
 - a. Access to treatment, transportation is a really big barrier. Social support is "taboo". Economic factors. Associate treatment facilities with cost and missing work and/or school.
- 10. Is there anything else you would like to share that I have not ask you about?
- 11. Is there another individual who you would recommend I reach out to who may offer additional insight into this topic?

- 1. How long have you lived in this community?
 - a. 40 years (Interlochen 20 years, moved to Duval but work in Putnam county)
- 2. How long have you been in this position at your agency/organization?
 - a. CMO last 20 years, with organization 40 years
- 3. What is unique about this community?
 - a. Widespread "not a true community" a huge rural space
- 4. How has the pandemic/Covid impacted the community?
 - a. affected my employees quite a bit. Lost about 30% of employees...an issue we can't recover from. Changed how people came in to the office. Numbers way down from Pre-covid times. People became more isolated, more depressed, increased anxiety.
- 5. What substances have you seen impact your community the most?
 - a. Opioids and benzos are the leader, then crystal (speeds)
- 6. What do you think contributes to the substance use in your community?
 - a. Poverty has a lot to do with it. Lack of community...supports.
- 7. What consequences from substance use do you see impacting individuals and your community as a whole?
 - a. Chronic depression, suicide, loss of jobs, loss of families, loss of homes. Strains the sense of community.
- 8. Where do you think individuals obtain the substances from?
 - a. Combination of from legitimate providers, majority from the street. For 20 plus years providers were told to treat pain with opioids and that it doesn't cause addiction. New tools allow to communication to eliminate "doctor shopping".
- 9. What barriers/challenges do you see impacting your community when it comes to substance use?
 - a. Wait for resources is tedious which leads to a loss of will by the time resources are available. Tough to get MAT treatment into the community. Lack number of resources compared to the need.
- 10. Is there anything else you would like to share that I have not ask you about?
 - a. Lots of people don't have any contact with anybody. Lack of social stability in the community.
- 11. Is there another individual who you would recommend I reach out to who may offer additional insight into this topic?

- 1. How long have you lived in this community?
 - a. Palatka
- 2. How long have you been in this position at your agency/organization?
 - a. **N/A 16 y/o twins**
- 3. What is unique about this community?
 - a. Pretty small everybody is connected in some kind of way.
- 4. How has the pandemic/Covid impacted the community?
 - a. Taken away a lot of opportunities missed 2 years of school not experiencing normal teen things. More reliant on technology.
- 5. What substances have you seen impact your community the most?
 - a. Every time I go into a bathroom kids are vaping. People hiding in the classroom. Dab pen with THC.
- 6. What do you think contributes to the substance use in your community?
 - a. A lot of other people are doing it peer pressure. Didn't really see it when I was in middle school. They think its cool. The "buzz".
- 7. What consequences from substance use do you see impacting individuals and your community as a whole?
 - a. Breathing problems, messing up voice. "Solutions" ISS and out of school suspensions. Most students aren't getting caught. Schools started random searches.
- 8. Where do you think individuals obtain the substances from?
 - a. Small gas-stations. "Some Indian guy doesn't care". Getting it from family. "My mom just buys it for me."
- 9. What barriers/challenges do you see impacting your community when it comes to substance use?
 - a. Addiction, becoming really dependent.
- 10. Is there anything else you would like to share that I have not ask you about?
 - a. Side effects long term damage are deterrents. Products are marketing to teens, getting it from parents, or corner stores that check IDs. Lack of mental health resources to students.
- 11. Is there another individual who you would recommend I reach out to who may offer additional insight into this topic?
 - a. No

- 1. How long have you lived in this community?
 - a. Live in Nassau County Cover districts that include Putnam. 1.5 away.
- 2. How long have you been in this position at your agency/organization?
 - a. 5 years. 10 years in juvenile justice.
- 3. What is unique about this community?
 - a. Desire to help out the community response. Smaller community better sense of use of community resources that aren't money.
- 4. How has the pandemic/Covid impacted the community?
 - a. Biggest way, many things went virtual. A need for technology internet, tablets- became apparent.
- 5. What substances have you seen impact your community the most?
 - a. Opioids/Fentanyl, Cannabis, Meth
- 6. What do you think contributes to the substance use in your community?
 - a. Lack of family supports is the biggest issue.
- 7. What consequences from substance use do you see impacting individuals and your community as a whole?
 - a. Overdoses, strain on law enforcement. Crimes associated with substance use up, homelessness up. School systems not equipped. Vaping a huge issue in schools.
- 8. Where do you think individuals obtain the substances from?
 - a. From the streets.
- 9. What barriers/challenges do you see impacting your community when it comes to substance use?
 - a. The community as a whole does not attract quality people to move there. Lack of knowledge of resources. Lack of willingness to want to do it. Cost barriers. Not enough time off of drug to get them to want to recover.
- 10. Is there anything else you would like to share that I have not ask you about?
 - a. Different silos of funding have different rules and guidelines making it harder to utilize funding.
- 11. Is there another individual who you would recommend I reach out to who may offer additional insight into this topic?
 - a. I think you have a pretty good representation.

- 1. How long have you lived in this community?
 - a. Live in St. John's NW part. Office is 4 county area (including Putnam). 20 years in area.
- 2. How long have you been in this position at your agency/organization?
 - a. Worked in department of corrections for 30 years. 1.5 years ago transitioned to Putnam/Volusia/Flagler/St. John's area.
- 3. What is unique about this community?
 - a. "There's alot" Sharp contrast to Jacksonville area. Putnam is more rural. Lots of nature. Close proximity to urban areas. Lack of transportation to get to these areas. Kinda isolated. Different area with a lot of people not working. Two sectors of people retired looking for a quieter living, able-body high in poverty. Growth from northern Florida pushing down into Putnam. At the beginning of growth. People think it's in the middle of nowhere but they aren't really.
- 4. How has the pandemic/Covid impacted the community?
 - a. No different than anywhere else. Goes through waves. Lack of healthcare and lack of insurance might have prevented them to access medical care. (Lack of resources)
- 5. What substances have you seen impact your community the most?
 - a. Trends showed majority of "offenders" show meth, fentanyl, molly. On probation for sale or possession for the same three categories. Testing for fentanyl lacking. Testing started back in October
- 6. What do you think contributes to the substance use in your community?
 - a. Lot of it goes to poverty. Lack of education and lack of awareness. Generations of offenders. Historical factor to substance use. Lack of employment. Umbrella of poverty, family use.
- 7. What consequences from substance use do you see impacting individuals and your community as a whole?
 - a. "Community is not any better for it a given". "Robs the individual of their potential." Draining the community-not adding to the community.
- 8. Where do you think individuals obtain the substances from?
 - a. Acquaintances, family, friends. Will travel for it. Criminal activity from the north pushes down along with growth. Probably coming from other areas.
- 9. What barriers/challenges do you see impacting your community when it comes to substance use?
 - a. One contracted substance use prevention provider for the Putnam area. Not a lot of options for treatment. However, no impatient or intensive outpatient. Lack of options. Only option is to refer them to out of county, such as Jacksonville and Miami. But that removes them from their community. Contract does help with financial barrier.
- 10. Is there anything else you would like to share that I have not ask you about? a.Transportation is a key issue.
- 11. Is there another individual who you would recommend I reach out to who may offer additional insight into this topic?

- 1. How long have you lived in this community?
 - a. Lived in Palatka for 47 years. Born and raised there.
- 2. How long have you been in this position at your agency/organization?
 - a. Teacher for 5 years.
- 3. What is unique about this community?
 - a. Very small community. Everybody knows everybody. 3 major driving income - Georgia Pacific Paper Company- Seminole Electric Power Plant -Education
- 4. How has the pandemic/Covid impacted the community?
 - a. Certainly still impacting Putnam county small community everybody was put on lockdown forced changes especially in education teaching and learning habits.
- 5. What substances have you seen impact your community the most?
 - a. In Putnam cannabis is huge a lot of people use cannabis. Real big pill problem opioid problem. I've heard of cocaine use. Vaping is a huge problem with youth... and cannabis. Class changes and can smell cannabis get a contact buzz. Kids are getting really good at hiding it.
- 6. What do you think contributes to the substance use in your community?
 - a. peer pressure (youth), bullying (youth). A lot comes from seeing adult/parent use (youth). Lack of education. Maybe economics.
- 7. What consequences from substance use do you see impacting individuals and your community as a whole?
 - a. Vaping/smoking put in "Solutions" for 45 days. In-school suspension no talking. Cessation/drug and alcohol course class mandatory (youth).
 Cannabis is legal in so many states, thought process is that cannabis is okay.
 Not future-thinking. They don't think cannabis is a gateway drug.
- 8. Where do you think individuals obtain the substances from?
 - a. Finding it at home. "No big deal" because parents do it. Also, Putnam is "very poor". A lot of gang activity. In these gangs there are High School age dealers.
- 9. What barriers/challenges do you see impacting your community when it comes to substance use?
 - a. Mentality of "its fun", lack of forward-future thinking. Drug use leads to other consequences such as harder to get a job.
- 10. Is there anything else you would like to share that I have not ask you about?
 - a. My community, drug use is a big deal here. Affects more people than it doesn't affect.
- 11. Is there another individual who you would recommend I reach out to who may offer additional insight into this topic?
 - a. Other teachers. Will CC you.

- 1. How long have you lived in this community?
 - a. Lived in Palatka for 23 years.
- 2. How long have you been in this position at your agency/organization?
 - a. 23 Years
- 3. What is unique about this community?
 - a. Small town feel, but close enough to big cities so you can go do things nearby. Not too big, get around town in a few minutes. No "extras" but everything you need. "Culture shock after moving from Gainesville"
- 4. How has the pandemic/Covid impacted the community?
 - a. Really brought to light how much need there is. Working for a Christian radio station, people come to us with needs and requests for assistance. Covid made existing issues bigger issues. Brought to light how poor the county is and lack of resources. Still impacts the county, changing the mindset of the people. People don't want to come back to work. Lack of affordable housing. Giant population of homeless.
- 5. What substances have you seen impact your community the most?
 - a. Alcohol is a major problem. Pills. Hear from people all the time about the problems with substances. Meth is a big problem.
- 6. What do you think contributes to the substance use in your community?
 - a. People are unhappy, lonely, lacking a sense of purpose. Poverty is a big issue in our community. Heard stories about child abuse. Mistreatment leads to drugs and alcohol. Stuck in that cycle.
- 7. What consequences from substance use do you see impacting individuals and your community as a whole?
 - a. Homelessness. Seeing a lot of that lately. Neglecting kids, choosing to spend money on drugs and alcohol over taking care of kids. Businesses can't find good employees.
- 8. Where do you think individuals obtain the substances from?
 - a. No clue. Oblivious to that and glad I am. Mostly from retail for alcohol. Liquor store with a drive-thru (bar/retail). ABC liquor now opens at 7am.
- 9. What barriers/challenges do you see impacting your community when it comes to substance use?
 - a. A lot of people don't have transportation. Almost zero in public transportation. No information on how to use public transportation - like it's a big secret... no sign saying bus stop. Very difficult to get a hold of. Lack of accommodations for people with disabilities.
- 10. Is there anything else you would like to share that I have not ask you about?
 - a. Station is happy help to spread word.
- 11. Is there another individual who you would recommend I reach out to who may offer additional insight into this topic?
 - a. Celebrate recovery. Jeremy & Melissa Ray.

- 1. How long have you lived in this community?
 - a. Palatka outside of city. Lived in HS but moved back 4.5 years ago.
- 2. How long have you been in this position at your agency/organization?
 - a. 2 Years
- 3. What is unique about this community?
 - a. Very rural (work the west end Interlachen).
- 4. How has the pandemic/Covid impacted the community?
 - a. moved back when the pandemic hit. A lot of smaller businesses closed or reopened with new ownership. Small businesses took a hit. Mom and Pop stores took a hit.
- 5. What substances have you seen impact your community the most?
 - a. Fentanyl, meth, molly, crack cocaine. Lately, last year and a half is Fentanyl and Meth.
- 6. What do you think contributes to the substance use in your community?
 - a. Putnam as a whole lives mostly under the poverty line. People getting in with the wrong crowds. Kids I went to HS with were normal kids. Those who didn't leave Putnam fell into the wrong crowds. A little bit of use turns into addiction.
- 7. What consequences from substance use do you see impacting individuals and your community as a whole?
 - a. Everything from overdoses (seeing overdoses left and right)/death. Physical appearance (people who have ripped their hair out when high/picking at their skin/little to no teeth). Mental health as well. They are not "all there mentally". Crime rate increases due to people using substances, "history of substance abuse." Crimes are usually gang related or narcotics. Squatters have substance use issues.
- 8. Where do you think individuals obtain the substances from?
 - a. Our narcotics come from Marion (Orange Springs) and Clay (High Ridge) county. Known dealers supplying all users. Dealers are usually also using. Apartment complexes known for selling drugs. Cow Pen Groceries, people sitting outside. Dealers are coming to low income areas. Substance use/misuse individuals live together. Same house once or twice a week for an overdose.
- 9. What barriers/challenges do you see impacting your community when it comes to substance use?
 - a. Lack of resources. We have SMA Marchman. "You can lead a horse to water, but you can't make them drink." Methadone clinics, people abusing it or selling it. Arresting people selling Methadone pills.
- 10. Is there anything else you would like to share that I have not ask you about?
 - a. Putnam needs some kind of inpatient rehab. Current inpatient rehabs has a year wait - "a Florida problem as a whole." Narcan saves lives but it is giving substance users a crutch. Responded to places where people stock-pile Narcan, 30-40 Narcan. Narcan vending machine at the jail. Used to be issued. Every deputy should have them.
- 11. Is there another individual who you would recommend I reach out to who may offer additional insight into this topic?
 - a. Eric Pleiman works for city of Palatka. Palatka PD

- 1. How long have you lived in this community?
 - a. Live in Flagler.
- 2. How long have you been in this position at your agency/organization?
 - a. Works for Putnam for 12.5 years.
- 3. What is unique about this community?
 - a. Vast amount of land. A wide spectrum of people no income to rich people living on the river.
- 4. How has the pandemic/Covid impacted the community?
 - a. Spike in drug use b/c people were forced to stay home. Spike in domestic disturbances. Schools shut down parents had to stay home.
- 5. What substances have you seen impact your community the most?
 - a. Biggest issue Molly/MDMA, Meth, and most recently Fentanyl (spiked within the last year).
- 6. What do you think contributes to the substance use in your community?
 - a. Nothing here for the community. Nothing for the kids to do. No movie theater. Only one Wal-mart.
- 7. What consequences from substance use do you see impacting individuals and your community as a whole?
 - a. Families being broken part. Repeat offenders going back to jail for possessing. Areas of the county are "not good to go to because its a drug hole." Depends on where you are at in the community. Certain areas people don't go to. Not a lot of resources to combat these issues.
- 8. Where do you think individuals obtain the substances from?
 - a. From out-of-county traffickers. In-place counties supply users.
- 9. What barriers/challenges do you see impacting your community when it comes to substance use?
 - a. Don't really have any resources. Recent Stewart Marchman, but its in the center of the county. If we have to Marchman Act somebody they have to go Daytona. Only resource seems to put them into jail. Users who don't get caught doesn't have anywhere to get help. No programs for people who get out. Repeat over and over.
- 10. Is there anything else you would like to share that I have not ask you about?
 - a. Not enough available resources. Few resources for mental health and those resources are overloaded. Overdoses that go to hospital have no follow up to help the individual. Detectives follow up on domestic violence victims but not substance abuse victims.
- 11. Is there another individual who you would recommend I reach out to who may offer additional insight into this topic?
 - a. Maj. Surrency

- 1. How long have you lived in this community?
 - a. Live in Clay County (about a 35 minute commute). I don't want to live where I work. Since around 2011.
- 2. How long have you been in this position at your agency/organization?
 - a. 6 years. 1.5 year in jail. 9 months in courthouse. Patrol the rest of time. 9 months of "crime suppression".
- 3. What is unique about this community?
 - a. Very close-knit community. Everybody knows everybody. Rural. Less resources and money than St. Johns. "Poor". Most of the people in Putnam will "give you the shirt off their back."
- 4. How has the pandemic/Covid impacted the community?
 - a. Loss of jobs for a lot of people. Not working → bored → getting into trouble. Easier to get into trouble. Crime rate went up. Burglaries and thefts went up.
- 5. What substances have you seen impact your community the most?
 - a. Alcohol. Meth. More fentanyl coming up. Heroin is there but I haven't seen it. "Black" community Molly, crack, cocaine, cannabis, pills like oxy (Palatka). White community meth, fentanyl, cannabis, pills like oxy (Interlachen/Westend). Fentanyl not usually in black community unaware its fentanyl.
- 6. What do you think contributes to the substance use in your community?
 - a. Lot of it is they grew up with it "that's what they know", a lot of them do drugs with their parents. Climate they live in-continue the cycle.
- 7. What consequences from substance use do you see impacting individuals and your community as a whole?
 - a. Lose their family-kids. Exposing their children to drugs. Lose jobs places they live. Living conditions are horrid. DCF is overworked and under-staffed... letting them live in horrid conditions. Effects local businesses due to higher crime rates. Lack of able-body workers choosing to work. Families losing brother/sister. Not the same person as they used to be. Relationships are strained. Domestic Violence is prevalent. Rise in Mental Disorders.
- 8. Where do you think individuals obtain the substances from?
 - a. Get it from friends and dealers. Multiple ways dealer's house, drop-off in mailboxes, meeting them somewhere.
- 9. What barriers/challenges do you see impacting your community when it comes to substance use?
 - a. Biggest barrier is people wanting to get help. "say they want to stop and they don't". A lot of repeat users after getting out of jail. SMA is known resource.
- 10. Is there anything else you would like to share that I have not ask you about?
 - a. An idea to pass along substance use coming from home start with youth.
- 11. Is there another individual who you would recommend I reach out to who may offer additional insight into this topic?

- 1. How long have you lived in this community?
 - a. 5 Years Paloma Park Worked in Crescent City for about 7 years
- 2. How long have you been in this position at your agency/organization?
 - a. Little under a year.
- 3. What is unique about this community?
 - a. We call it "South County". Amazing how much poverty there is. "Opposite ranks" I live on a lake with millionaires, then there is people who live in sheds
 sharp contrast in poverty. Many people don't do drugs any more because
 - they can't afford them. Population high in unregistered people. Very caring community. Resistance to "out-of-county" people very suspicious.
- 4. How has the pandemic/Covid impacted the community?
 - a. (member of Eagles Lodge-service) brought us together, called people to see if they are ok women groups making masks impact economic business closed and never reopened.
- 5. What substances have you seen impact your community the most?
 - a. Meth cannabis (new dispensary) in parks No presence from Tobacco Free Florida - alcohol is huge (bigger than meth), liquor store per capita
- 6. What do you think contributes to the substance use in your community?
 - a. Lack of law enforcement, lack of prevention efforts. No prevention programs in schools.
- 7. What consequences from substance use do you see impacting individuals and your community as a whole?
 - a. Keeps them in poverty, children with disorders due to substance use during pregnancy. Strain on social services, welfare programs to support surplus of individuals using substances/in poverty. Normal day-to-day activities disturbed due to drugs. Huge foster care population due to substance use. Surveyed kids - most are depressed.
- 8. Where do you think individuals obtain the substances from?
 - a. Self-making meth. Buying it from the streets from out-of- county sources.
- 9. What barriers/challenges do you see impacting your community when it comes to substance use?
 - a. Lack of prevention programs (besides churches).
- 10. Is there anything else you would like to share that I have not ask you about?
 - a. Big gaps with organizations, communication, resources, training. Lots of funding for out-of-county organizations.
- 11. Is there another individual who you would recommend I reach out to who may offer additional insight into this topic?
 - a. Pastor South Putnam Church

- 1. How long have you lived in this community?
 - a. Lives in North Florida. 40 years.
- 2. How long have you been in this position at your agency/organization?
 - a. 2.5 years.
- 3. What is unique about this community?
 - a. Local close knit family oriented. "Everybody knows each other" Citizens have "skepticism" of people from other areas - especially Duval county.
 Respond better to community leaders. Generational families living in Putnam
- 4. How has the pandemic/Covid impacted the community?
 - a. "Disrupted things". Not as affected as more urban areas.
- 5. What substances have you seen impact your community the most?
 - a. Fentanyl number 1 driver of overdose ,meth, alcoholism
- 6. What do you think contributes to the substance use in your community?
 - a. Fentanyl state issue, lack of resources, underserved transportation, access to medical, food insecurity.
- 7. What consequences from substance use do you see impacting individuals and your community as a whole?
 - a. Family heavily impacted, spreads into the community. Large number of grandparents raising children in Putnam due to parents' substance use issues.
- 8. Where do you think individuals obtain the substances from?
 - a. Others that live in the community getting it from outside the county.
- 9. What barriers/challenges do you see impacting your community when it comes to substance use?
 - a. Transportation to get to treatment. Lack of insurance. Resources not accepting Medicaid. Stigma lack of education but community is receptive (example Narcan). Putnam County Jail has Recovery Pods.
- 10. Is there anything else you would like to share that I have not ask you about?
 - a. Challenge and point of conversation county access to internet.
- 11. Is there another individual who you would recommend I reach out to who may offer additional insight into this topic?
 - a. Randy Headstrom Putnam County Schools
 - b.b. Kim (Behavioral Health Putnam Schools)

- 1. How long have you lived in this community?
 - a. Lived in St. Johns for 12 years
- 2. How long have you been in this position at your agency/organization? a. 1 year.
- 3. What is unique about this community?
 - a. Very rural; spread out. Main area of Palatka with interlocking cities (Crescent city) They can't find the services they need. Issues with transportation. Hard to find a provider. Large population of uninsured and elderly.
- 4. How has the pandemic/Covid impacted the community?
 - a. Hard on the elder community. Large population is getting sicker. Issues with transportation. Moved more towards tele-health.
- 5. What substances have you seen impact your community the most?
 - a. Fentanyl (most recent) large number of deaths. Other substances laced with fentanyl. Other substances range from prescription pills, cocaine, meth.
- 6. What do you think contributes to the substance use in your community?
 - a. Lack of avenue for stress relief, pain management. Community using substances as a vice to help with issues.
- 7. What consequences from substance use do you see impacting individuals and your community as a whole?
 - a. Death from overdose. Family hard time understanding family stress. Family bonds broken from substance use and stealing from family members. Affects the whole community. Concern over establishing a wellness center because it "will bring those people to their community."
- 8. Where do you think individuals obtain the substances from?
 - a. Pain killers typically prescribed from a doctor to begin with. Turn to street drugs. "Find people who know people"
- 9. What barriers/challenges do you see impacting your community when it comes to substance use?
 - a. Prevention is just starting (new to the area), not as proactive as we should be. Attitude is getting better. Lack of resources (money, providers). Providers don't want to be part of the community.
- 10. Is there anything else you would like to share that I have not ask you about?
- 11. Is there another individual who you would recommend I reach out to who may offer additional insight into this topic?
 - a. Family and Community Engagement Manager born/lives in Putnam.

- 1. How long have you lived in this community?
 - a. Hastings, 2 children in Putnam. 9 years
- 2. How long have you been in this position at your agency/organization?
 - a. May of this year. 10 years in organization before this. In prevention work for over 10 years.
- 3. What is unique about this community?
 - a. "very comfortable area" ,culturally "kinda rural", lots of protestant/ Baptist churches.
- 4. How has the pandemic/Covid impacted the community?
 - a. "favorite restaurants closed down" (small business affected the most), difficult for students (ripple effect)
- 5. What substances have you seen impact your community the most?
 - a. marijuana common, fentanyl
- 6. What do you think contributes to the substance use in your community?
 - a. In part economic, lots of people barely getting by, lack of prevention work, especially students in schools. "reactive instead of proactive"
- 7. What consequences from substance use do you see impacting individuals and your community as a whole?
 - a. Huge impacts on the families, neglect on kids, strains on relationships/jobs. Arrest records impact economically. Crime increased "breaking into cars/houses", general safety concerns. Positive attitude towards drug use in the community (e.g dispensaries).
- 8. Where do you think individuals obtain the substances from?
 - a. They all know "somebody" who sells
- 9. What barriers/challenges do you see impacting your community when it comes to substance use?
 - a. No drug coalition in Putnam county, lack of resources
- 10. Is there anything else you would like to share that I have not ask you about?
 - a. I want to be a part of the prevention efforts, especially the school level
- 11. Is there another individual who you would recommend I reach out to who may offer additional insight into this topic?
 - a. Not sure but will send if I think of someone

APPENDIX II: NEEDS ASSESSMENT QUESTIONNAIRE

Putnam County community members and citizens were questioned on their top three concerns regarding youth, adults, and population. When asked about their top in the concerns within the community, issues regarding mental health (PTSD) (16), drug misuse (11), and fentanyl/opioid deaths (9) were the top three issues voted for. Community members and citizens selected drug misuse (15), stress-depression and anxiety (11), other mental health concerns (10), and school performance (10) for their top concerns regarding youth populations. Lastly, the top three concerns for adults showed drug/alcohol overdose (10), criminal activity (10), and homelessness (9) in their community.

1. WHAT ARE THE TOP THREE THINGS YOU ARE CONCERNED ABOUT?			
Please check your top 3 concerns			
16	Mental Health Issues: PTSD		
11	Drug Misuse		
9	Fentanyl/Opioid deaths		
9	Homelessness		
8	Housing Crisis		
7	Alcohol Misuse		
4	Economy		
3	School Violence		
3	Labor and/or sex trafficking		
2	Criminal Activities		
1	Other drug related deaths		
1	Other - Please describe: STI rates		

2. WHAT ARE THE TOP THREE THINGS YOU ARE CONCERNED ABOUT REGARDING YOUTH?					
	Please check your top 3 concerns				
15	Drug Misuse				
11	Stress, Depression, and/or Anxiety				
10	Other Mental Health Concerns				
10	School Performance				
6	Criminal Behaviors				
4	Suicide Rates				
4	Child Abuse and Neglect				
3	Bullying				
3	Alcohol Misuse				
2	Binge Drinking				
1	Eating Disorder				
1	Other - Please describe: Underage Pregnancy				
1	Other - Please describe: Proper Parenting				
1	Other - Please describe: Cyber Bullying				

3. WHAT ARE THE TOP THREE THINGS YOU ARE CONCERNED ABOUT REGARDING ADULTS?					
	Please check your top 3 concerns				
10	Drug / Alcohol Overdose				
10	Criminal Activity				
9	Homelessness				
8	Poverty				
7	Stress, Depression, and/or Anxiety				
7	Other Mental Health Concerns				
6	Access to Support Services				
6	Family / Domestic Violence				
4	Employment Issues				
3	Poor Physical health				
2	Suicide				
2	Health Insurance Coverage				
1	Alcohol Misuse				

APPENDIX III: RESOURCE ASSESSMENT

For the Putnam County resource assessment, we considered the different types of resources in the community including fiscal, human, organizational, programs, practices, and policies.

Resource	Action Plan	Source/Location/Provider
Provide crisis counseling and mental health referrals.	988 is a confidential, free crisis service that is available to everyone 24 hours a day, seven days a week. The Lifeline connects people to the nearest crisis center in the Lifeline national network. These centers provide crisis counseling and mental health referrals. 988 will forward referrals to 911 dispatch or VA when appropriate.	988 Suicide and Crisis Lifeline
Offers one-on-one support, recurring virtual peer groups, family member guidance and support, and referrals to additional services. The top service requests (by category) according to 211 data over the past year (Oct 2022-Oct 2023) were 1) housing and shelter (rent assistance, shelters, low-cost housing), 2) utilities, 3) food 4) healthcare and COVID-19, and 5) mental health and addictions(https://nefl.211counts.org/).	The 211 Call Center is operated out of Alachua County and is contracted to provide 211 information & referral services for Putnam County. In the Greater Northeast Florida Region, 211 is also a source for the First Responder Peer Support Program supported by Children's Home Society and funded by Florida Department of Children and Families and LSF Health Systems. The program offers one-on-one support, recurring virtual peer groups, family member guidance and support, and referrals to additional services.	211 operated by United Way of Northeast Florida
The Access line can make referrals to the mobile response team (MRT) or link callers to a therapist on the phone immediately. If the MRT is referred, there is a follow-up call within 30 days.	SMA operates a 24/7 hotline accessible at (800) 539-4228. Individuals may be referred to services or connected to the mobile response team (MRT) when appropriate. Call takers assess the situation, determine if telehealth is appropriate or refer the individual within an hour. The average response time depends on where the person is calling from. Bachelor's level and master's level personnel take calls and operate the crisis line with a master's level clinician acting as the program director. A clinician does not always respond to calls.	SMA Healthcare Access and Crisis Response Center
•Meridian operates an information and referral call line accessible at (800) 330-5615.	 Individuals may receive information or assistance with crisis stabilization unit availability, (CSU), detoxification, Baker Act & Marchman Act, family member rights, and coping activities. 	Meridian Behavioral Healthcare Referral Line
Operates 24 hours a day, 7 days a week.	The LSF Access to Care Line (877)229-9098 operates 24 hours a day, 7 days a week and provides referrals and information for mental health counseling. It is not a crisis line but does provide warm hand offs to services when possible.	LSF Health Systems Access to Care Line

The MRT may be accessed by way of telephone at (386) 872-2254and is available 24 hours-a-day, 7 days-a-week.	•At the time of the mapping, the average MRT response time was 11 minutes and 5seconds. O The goal is to help families remain stable as they navigate a mental health crisis. O To abide by F.S. 394.495, the MRT will respond within an hour and go onsite to provide deescalation, a risk assessment, and safety planning. Follow-up is also provided, including crisis counseling and a warm hand-off to resources such as mental health counseling, targeted case management, and psychiatric services. •The MRT is comprised of 3 master's level staff, supervised by a licensed clinician.	
The Wellness Center is open for walk-ins Tuesday-Thursday from 9 a.m. to 4 p.m. and available by phone 24/7at 386-481-3471or email atputnamwellnesscenter@chsfl.org.	The Wellness Center is a community hub created in collaboration between Children's Home Society of Florida (CHS), LSF Health Systems, and Care Connect+ of UF Health St. Johns. The Wellness Center provides mental health and substance use services for adults and children as well as promotes referrals to community partners for services. Services include individual and family therapy, professional clothing closet, food pantry, telehealth, insurance assistance, support, and guidance for pregnant women through Healthy Start, and more.	Putnam County Wellness Center
Recovery Point provides recovery support program in the Putnam County Jail through the Insight Recovery Programs as well as Celebrate Recovery Inside, relapse prevention, Seeking Safety, and All Recovery.	•Recovery Point became an RCO in 2022. •Recovery Point offers recovery support services to individuals and their families, peer support, recovery groups, linkages to resources, telephone recovery support, family support, a clothing closet, Celebrate Recovery, and access to Narcan.	Recovery Point Recovery Community Organization (RCO)
SMA Healthcare offers community education, groups, presentations (such as Baker Act information), and more for the community.	•The drop-in center provides adults with mental health issues an opportunity to socialize with others, learn new skills, and participate in various activities between Monday-Friday from 8:30 a.m. to 4:30 p.m. There is no appointment necessary, and no fees associated with services.	
Patients Not Prisoners represents the community and those that we seek to serve in the planning and implementation of Mental Health Courts. Providing workforce solutions.	Patients Not Prisoners is a nonprofit organization that provides advocacy, education, and support for first responders and families that provide support to individuals with mental illness. They are partnered with Better Help to provide therapy vouchers at no cost. CareerSource provides in-person and virtual	Patients Not Prisoners CareerSource Northeast Florida
	employment assistance.	
Removing barriers to employment through training, education, and career opportunities for the communities we serve	Goodwill is a second-chance employer that offers vocational, educational, and employment opportunities. The A-STEP program provides adults in North Florida access to obtain a first degree, technical credentials, or certifications, with one-on-one support. A-STEP serves adults in Duval, Nassau, Clay, Flager, St. Johns, Putnam, and Baker Counties. Eligibility requirements: be at or below the 300% national poverty guidelines, 18+, have a high school diploma or GED, be a US citizen/legal resident, and willingness to participate in case management services, financial literacy, and retention services for up to 90 days postgraduation.	Goodwill North Florida

Enhancement and Expansion of Treatment	•The Youth and Family Tree Program provides	Vouth and Family Tree operated by SMA
and Recovery Services for Adolescents,	prevention/education as well as counseling in the	[발생하고 있다] 회사 [대] 전경 [대] [대] (대) 대 [대] [대] [대] [대] [대] [대] [대] [대] [대] [
Transitional Aged Youth,	community for ages 16-25 and their families. This	
and their Families	is for co-occurring mental Health, substance use	
and their rannings	treatment.	
Putnam County 911 Division to assist with	911 Calls	Emergency Services and 911
	fin Putnam County, 911 calls and texts are	
the residents of Putnam County.	answered at the Public Safety Answering Point	
	(PSAP). Putnam County 911 telecommunicators	
	(call-takers and dispatchers), are state-certified	
	and highly trained to assist in helping you reach	
	emergency law, fire, or medical services.	
	Putnam County has a Consolidated Emergency	
	Communications Center (ECC), which means all	
	911 calls and texts are received here and dispatch	
	of all appropriate emergency law, fire and medical	
	services take place from here. Putnam 911 serves	
	approximately 74,000 residents in 5 municipalities,	
	including the City of Crescent City, City of Palatka,	
	Town of Interlachen, Town of Pomona Park and	
	Town of Welaka.	
	Dispatchers have limited mental health training	
	and will connect with law enforcement or MRT	
	depending on availability.	
	Text-to-911 Allows you to send emergency text messages to	
	the local 911 Public Safety Answering Point (PSAP)	
	when calling is not an option. It is especially useful	
	for people who may be deaf, hard-of-hearing or	
	speech impaired or if speaking out loud puts you in	
	danger.	
Putnam County Sheriff's Office is a full		Law Enforcement
[이 동일에 가는 문항이다면서] 공항 한 거리 되었다면서 얼마를 하는데 5~7. 집에 다른데 모양하다 이 때문	•Mental Health First Aid (MHFA) is provided to	Putnam County Sheriff's Office (PCSO)
	most of the PCSO employees upon hire and 40-	
administers directed patrol and investigative	TO AND THE REPORT OF THE PROPERTY OF THE PROPE	
responsibilities.	•At the time of the mapping, St. Johns River State	
	College hosts CIT trainings using salary incentives to encourage participation.	
	MHFA training is provided by SMA Healthcare.	
	•The HEROS program support Narcan distribution	
	among deputies.	
The local Police Department will develop		Municipal Law Enforcement
partnerships with our citizens to solve		Transfer Latt Ellion Schleite
problems, reduce crime, the fear of crime		
and enhance the quality of life, alway		
treating everyone with fairness and respect.		
	•When law enforcement arrives to the scene of an	Baker Act/Marchman Act
	incident, the officer must determine if the	A STATE OF THE STA
[2]	rindividual in crisis appears to meet the criteria for	
treatment and present an imminent dange	involuntary examination in accordance with the	
to self or others. The Baker Act applies to	Baker Act (Chanter 394 F.S.) or Marchman Act	
	(Chapter 397, F.S.).	
illness, whereas the Marchman Act relates to	(Chapter 397, F.S.). •Law enforcement may provide initial transport to	
illness, whereas the Marchman Act relates to	(Chapter 397, F.S.). •Law enforcement may provide initial transport to CTTU or meet CTTU vehicle to pick up an individual	
illness, whereas the Marchman Act relates to	(Chapter 397, F.S.). •Law enforcement may provide initial transport to CTTU or meet CTTU vehicle to pick up an individual requiring transport to the nearest Baker Act	
illness, whereas the Marchman Act relates to	(Chapter 397, F.S.). •Law enforcement may provide initial transport to CTTU or meet CTTU vehicle to pick up an individual requiring transport to the nearest Baker Act receiving facility.	
illness, whereas the Marchman Act relates to	(Chapter 397, F.S.). Law enforcement may provide initial transport to CTTU or meet CTTU vehicle to pick up an individual requiring transport to the nearest Baker Act receiving facility. Individuals will be placed in restraints upon	
illness, whereas the Marchman Act relates to incapacity due to substance abuse.	(Chapter 397, F.S.). Law enforcement may provide initial transport to CTTU or meet CTTU vehicle to pick up an individual requiring transport to the nearest Baker Act receiving facility. Individuals will be placed in restraints upon transport.	
illness, whereas the Marchman Act relates to incapacity due to substance abuse. The Crisis Triage and Treatment Unit (CTTU	(Chapter 397, F.S.). •Law enforcement may provide initial transport to CTTU or meet CTTU vehicle to pick up an individual requiring transport to the nearest Baker Act receiving facility. •Individuals will be placed in restraints upon transport. •The SMA CTTU provides transport for all	Crisis Triage and Treatment Unit (CTTU) operate
illness, whereas the Marchman Act relates to incapacity due to substance abuse. The Crisis Triage and Treatment Unit (CTTU is a program designed to meet the crisi	(Chapter 397, F.S.). •Law enforcement may provide initial transport to CTTU or meet CTTU vehicle to pick up an individual requiring transport to the nearest Baker Act receiving facility. •Individuals will be placed in restraints upon transport. •The SMA CTTU provides transport for all sinvoluntary examinations between the hours of	Crisis Triage and Treatment Unit (CTTU) operate by SMA Healthcare.
illness, whereas the Marchman Act relates to incapacity due to substance abuse. The Crisis Triage and Treatment Unit (CTTU is a program designed to meet the crisi	(Chapter 397, F.S.). •Law enforcement may provide initial transport to CTTU or meet CTTU vehicle to pick up an individual requiring transport to the nearest Baker Act receiving facility. •Individuals will be placed in restraints upon transport. •The SMA CTTU provides transport for all sinvoluntary examinations between the hours of 8a.m.to12 p.m. Outside of these hours, law	Crisis Triage and Treatment Unit (CTTU) operate by SMA Healthcare.
illness, whereas the Marchman Act relates to incapacity due to substance abuse. The Crisis Triage and Treatment Unit (CTTU is a program designed to meet the crisi	(Chapter 397, F.S.). •Law enforcement may provide initial transport to CTTU or meet CTTU vehicle to pick up an individual requiring transport to the nearest Baker Act receiving facility. •Individuals will be placed in restraints upon transport. •The SMA CTTU provides transport for all sinvoluntary examinations between the hours of 8a.m.to12 p.m. Outside of these hours, law enforcement provides transport.	Crisis Triage and Treatment Unit (CTTU) operate by SMA Healthcare.
incapacity due to substance abuse. The Crisis Triage and Treatment Unit (CTTU	(Chapter 397, F.S.). Law enforcement may provide initial transport to CTTU or meet CTTU vehicle to pick up an individual requiring transport to the nearest Baker Act receiving facility. Individuals will be placed in restraints upon transport. The SMA CTTU provides transport for all sinvoluntary examinations between the hours of 8a.m.to12 p.m. Outside of these hours, law enforcement provides transport.	Crisis Triage and Treatment Unit (CTTU) operate by SMA Healthcare.
illness, whereas the Marchman Act relates to incapacity due to substance abuse. The Crisis Triage and Treatment Unit (CTTU is a program designed to meet the crisi	(Chapter 397, F.S.). • Law enforcement may provide initial transport to CTTU or meet CTTU vehicle to pick up an individual requiring transport to the nearest Baker Act receiving facility. • Individuals will be placed in restraints upon transport. • The SMA CTTU provides transport for all sinvoluntary examinations between the hours of 8a.m.to12 p.m. Outside of these hours, law enforcement provides transport. • The goal is for LEO to hand off within 15 minutes. • SMA collaborates with law enforcement agencies	Crisis Triage and Treatment Unit (CTTU) operate by SMA Healthcare.
illness, whereas the Marchman Act relates to incapacity due to substance abuse. The Crisis Triage and Treatment Unit (CTTU is a program designed to meet the crisi	(Chapter 397, F.S.). Law enforcement may provide initial transport to CTTU or meet CTTU vehicle to pick up an individual requiring transport to the nearest Baker Act receiving facility. Individuals will be placed in restraints upon transport. The SMA CTTU provides transport for all sinvoluntary examinations between the hours of 8a.m.to12 p.m. Outside of these hours, law enforcement provides transport.	Crisis Triage and Treatment Unit (CTTU) operate by SMA Healthcare.

Meridian's Crisis Stabilization Units (CSUs) • The CSU has 50 beds (38adult beds; 20 children's Meridian Behavioral Healthcare Crisis Stabilization provide short-term stabilization for crisis and beds). The 38 adult beds are jointly designated unit (CSU)& Addictions Receiving Facility (ARF) serious mental health issues for adults and adult and youth by DCF. •The CSU has a full continuum of care postchildren. discharge. Discharge planning begins at admission Meridian's Addictions Receiving Facility (ARF) to the CSU and coordinates with family and others. provides evaluation and treatment to those olf an individual does not have a place to go struggling with substance use difficulties no following release from the CSU, they may be matter their drug of choice nor their status, housed at the Meridian Lodge–contingent on voluntarily seeking services or Marchman available funding and if the person to be served can function independently. The Lodge is a 39-bed motel adjacent to the Meridian campus that provides respite and connections to assistance including securing housing, employment, and Alcoholics Anonymous (AA) and Narcotics Anonymous (NA) groups. The ARF is a secure 12-bed unit for adults. The CSU is adjusted to manage additional ARF beds if ARF is at capacity. The ARF provides induction for Medication Assisted Treatment (MAT) using Methadone, Vivitrol, and Buprenorphine (Suboxone). Those discharged from the ARF are prioritized for Meridian's 66-bed co-occurring capable residential program. If an individual is not eligible for the residential program, they will be referred to the Meridian MAT clinics. There are MAT clinics in Alachua and Levy Counties. The Chet Bell Crisis Center provides crisis The Chet Bell Crisis Center is a Baker Act receiving SMA Chet Bell Crisis Center (CSU & ARF). stabilization for individuals experiencing facility in Volusia County. The CSU has 50 beds and mental health and substance abuse crises the ARF has 19 beds. Individuals receive medication appropriate Individuals will receive medication, individual and to their needs, individual and group group counseling, as well as discharge planning. counseling, and discharge planning toward From July 1, 2022-Dec 31, 2022,38 Putnam the next appropriate level of care. County residents were seen at CBCC for emergency screening, detoxification, or crisis stabilization. Additional Baker Act receiving facilities accessed by Putnam County residents: Flagler Hospital · Halifax Psychiatric-North UF Health Shands Psychiatric Hospital Marchman Act ·Following the file of a petition, a hearing is established within 2 days and 90 days within the system. •The magistrate will try to send locally for detoxification or treatment services. Individuals will be transported to Meridian or Chet Bell Crisis Center. SMA will receive any discharged paperwork when they transport the individual back to the community. The Putnam County Jail serves as a detention • The jail has two recovery pods and a pod for Putnam County Jail operated by Putnam County facility for persons convicted of a crime or individuals with medical needs. Sheriff's Office awaiting trial. For those serving time, Meridians in the process of executing new jail opportunities are available for classes inbridge program and will provides MAT services. active parenting, anger management and There is a care coordinator that provides peer substance abuse help. services.

Provides basic life skills, acaden	nic and Programs/services include: Putnam county Jail In-Jail Programs	
vocational education, substanc	e use Alcoholics Anonymous (AA) and Narcotics	
	inmates Anonymous (NA) classes, Bible study, second	
H - HT -	munity, chance employment opportunities, GED classes,	
, , , , , , , , , , , , , , , , , , ,	parenting classes, batterers intervention, Wellness	
	Recovery Action Planning (WRAP), substance use	
	The state of the s	
	programming, and recovery support programming	
	provided by Recovery Point	
	RCO including Celebrate Recovery Inside, Relapse	
	Prevention, Seeking Safety, and All Recovery	
	 In addition, there are employment trainings and 	
	partnerships established with the local landfill,	
	animal control/shelter, Beck, Marco (food	
	packaging), and Aramark as well as other local	
	providers.	
	ion drug •The Adult Drug Court serves Circuit 7 (Flagler, Adult Drug Court	
(2014년 1일 : 1201 - 1201 - 1201 - 1201 - 1201 - 1201 - 1201 - 1201 - 1201 - 1201 - 1201 - 1201 - 1201 - 1201 - 1	nce use Putnam, St. Johns, and Volusia Counties).	
disorders for prison-bound offen	ders to Drug Court is a voluntary program lead by the	
reduce crime and restore lives and fa	milies. Honorable Judge Elizabeth Morris and serves non-	
	violent individuals with substance related felony	
	charges who reside in Putnam County.	
	Drug Court has the capacity to serve 45 clients, and	
	the average length of the program is 18 to 36	
	months. At the time of mapping, the court was	
	serving 20participants.	
	Court appearances are held before a judge and	
	re (Ctrl) - e primarily from jail.	
	•SMA provides screening and MAT services for	
	participants, as well as referrals for additional	
	services.	
	Assistance with transportation (bikes provided)	
	and assistance with driver's licenses are provided.	
	Participants are required to partake random drug	
	testing and check-ins from probation.	
Veterans Court is an initiative in	the 7th • VTC operates in St. Johns and Putnam Counties. Veteran's Treatment Court (VTC)	
Judicial Circuit designed to focus	on the •VTC is a voluntary program lead by the Honorable	
[2] 10 [2] 10 [2] 10 [2] 10 [2] 10 [2] 10 [2] 11 [2] 12 [2] 12 [2] 12 [2] 12 [2] 12 [2] 12 [2] 12 [2] 12 [2] 12	criminal Judge McGillin Jr, it represents individuals that	
justice system.	serve or has served in the U.S. Armed Forces.	
jastice system.	Reserves or National Guard; is a current or former	
	U.S. Department of Defense Contractor; or is a	
	current or former military member of a foreign	
	allied country.	
	VTC has the capacity to serve 50 clients (will serve)	
	more if needed) and the	
	The average length of the program is 12 to 18	
	months. At the time of the mapping, the court was	
	serving 30 and 3 were Putnam County participants.	
	•Referrals are primarily from the jail or VA social	
	worker and first appearance documents are	
	stamped as Veteran. VA social worker will provide	
	evaluation to the court as needed.	
	•Court meets every 2 weeks and lasts about 2	
	hours.	
	• The VTC was awarded a SAMHSA grant specifically	
	to incorporate peer support for veterans and assist	
	with care coordination and outpatient treatments. •Treatment is provided primarily through the VA.	

[4] 전 등대 [4] 10 (1) 등대 [4] 10 (1) 10 (1) 11 [4] 11 [4] 12 [4] 12 [4] 12 [4] 12 [4] 12 [4] 12 [4] 12 [4] 12 [4]	ded •There is not a formalized jail reentry process for	Putnam County Jail Re-entry
to re-enter society as self-sufficient thriv members.	ringindividuals reentering the community. However, there are plans for a reentry center and expansion	
	of PSCO reentry designated staff.	
	Individuals on psychotropic medications are	
	provided a 10-day supply of medications at release.	
	•SMA Healthcare conducts reentry planning for	
	individuals with substance use disorders as a part	
	of their 90-day SUD program. Planning begins 30	
	days prior to release and continues for 60 days	
	post-release.	
	•SMA has embedded a person at the jail and	•
	provides a 90-dayprogram for individuals with	
	SUDs. The SMA staff assists 30 days prior to release	
	and 60 days after release.	
and the state of t		5
	are County Probation provided by Human Resources	Community Supervision
assessed and referred for services based	200 A B C C C C C C C C C C C C C C C C C C	
[1] 전경 전 교기 (1201) 12 1 전 경기 (1701) 12 1 전	ude HRDS supervises over 300 individuals on	
1 - A/	daymisdemeanor probation in Putnam County.	
40 C.	ion, Florida Department of Corrections (FDC)	
and linkage to service providers.	•At the time of mapping there were 1006 currently	
	on state probation.	
	*Approximately 33% (253/1006) are on drug	
	offender probation supervision.	
	*Three POs are assigned to drug offender	
	probation in the Palatka office.	
Provides quality health care for all stage	s of • Aza Health is the designated FQHC in Putnam	Aza Health Federally Qualified Health Center
[[[[[[[[[[[[[[[[[[[
	County and	(FQHC)
	County and provides mental healthcare, primary healthcare,	(FQHC)
	NAMES OF STREET AND ADDRESS OF THE PROPERTY OF	(FQHC)
	provides mental healthcare, primary healthcare,	(FQHC)
life.	provides mental healthcare, primary healthcare, dental healthcare and supports an on-site	
life. The FACT program serves adults with sev	provides mental healthcare, primary healthcare, dental healthcare and supports an on-site pharmacy.	Florida Assertive Community Treatment
life. The FACT program serves adults with sev and persistent mental illness, who may a	provides mental healthcare, primary healthcare, dental healthcare and supports an on-site pharmacy. The ere of the Seventh Judicial solicification of the seventh of the s	Florida Assertive Community Treatment
life. The FACT program serves adults with sev	provides mental healthcare, primary healthcare, dental healthcare and supports an on-site pharmacy. Pere •Two FACT Teams serve the Seventh Judicial also Circuit. FACT North serves St. Johns and Putnam use Counties.	Florida Assertive Community Treatment
life. The FACT program serves adults with sev and persistent mental illness, who may a have a co-occurring substance ab	provides mental healthcare, primary healthcare, dental healthcare and supports an on-site pharmacy. The ere of the Seventh Judicial solicification of the seventh of the s	Florida Assertive Community Treatment
The FACT program serves adults with sev and persistent mental illness, who may a have a co-occurring substance ab	provides mental healthcare, primary healthcare, dental healthcare and supports an on-site pharmacy. Pere •Two FACT Teams serve the Seventh Judicial also Circuit. FACT North serves St. Johns and Putnam use Counties. •The FACT North has capacity to serve up to 100 clients.	Florida Assertive Community Treatment
The FACT program serves adults with sev and persistent mental illness, who may a have a co-occurring substance ab	provides mental healthcare, primary healthcare, dental healthcare and supports an on-site pharmacy. The ere of two fact Teams serve the Seventh Judicial also Circuit. FACT North serves St. Johns and Putnam use Counties. The FACT North has capacity to serve up to 100 clients. The FACT Team provides comprehensive support	Florida Assertive Community Treatment (FACT)Team operated by SMA Healthcare.
The FACT program serves adults with sev and persistent mental illness, who may a have a co-occurring substance ab	provides mental healthcare, primary healthcare, dental healthcare and supports an on-site pharmacy. ere •Two FACT Teams serve the Seventh Judicial also Circuit. FACT North serves St. Johns and Putnam use Counties. •The FACT North has capacity to serve up to 100 clients. •The FACT Team provides comprehensive support services to individuals who have amental illness	Florida Assertive Community Treatment (FACT)Team operated by SMA Healthcare.
The FACT program serves adults with sev and persistent mental illness, who may a have a co-occurring substance ab	provides mental healthcare, primary healthcare, dental healthcare and supports an on-site pharmacy. The ere of two FACT Teams serve the Seventh Judicial also Circuit. FACT North serves St. Johns and Putnam use Counties. The FACT North has capacity to serve up to 100 clients. The FACT Team provides comprehensive support services to individuals who have amental illness and have experienced multiple psychiatric	Florida Assertive Community Treatment (FACT)Team operated by SMA Healthcare.
The FACT program serves adults with sev and persistent mental illness, who may a have a co-occurring substance ab	provides mental healthcare, primary healthcare, dental healthcare and supports an on-site pharmacy. The ere of two fact Teams serve the Seventh Judicial also Circuit. FACT North serves St. Johns and Putnam use Counties. The FACT North has capacity to serve up to 100 clients. The FACT Team provides comprehensive support services to individuals who have amental illness and have experienced multiple psychiatric hospitalizations.	Florida Assertive Community Treatment (FACT)Team operated by SMA Healthcare.
The FACT program serves adults with sev and persistent mental illness, who may a have a co-occurring substance ab	provides mental healthcare, primary healthcare, dental healthcare and supports an on-site pharmacy. ere •Two FACT Teams serve the Seventh Judicial also Circuit. FACT North serves St. Johns and Putnam use Counties. •The FACT North has capacity to serve up to 100 clients. •The FACT Team provides comprehensive support services to individuals who have amental illness and have experienced multiple psychiatric hospitalizations. •Members of the FACT Team provide services	Florida Assertive Community Treatment (FACT)Team operated by SMA Healthcare.
The FACT program serves adults with sev and persistent mental illness, who may a have a co-occurring substance ab	provides mental healthcare, primary healthcare, dental healthcare and supports an on-site pharmacy. ere •Two FACT Teams serve the Seventh Judicial also Circuit. FACT North serves St. Johns and Putnam use Counties. •The FACT North has capacity to serve up to 100 clients. •The FACT Team provides comprehensive support services to individuals who have amental illness and have experienced multiple psychiatric hospitalizations. •Members of the FACT Team provide services including vocational rehabilitation, psychiatric	Florida Assertive Community Treatment (FACT)Team operated by SMA Healthcare.
The FACT program serves adults with severand persistent mental illness, who may a have a co-occurring substance ab	provides mental healthcare, primary healthcare, dental healthcare and supports an on-site pharmacy. ere •Two FACT Teams serve the Seventh Judicial also Circuit. FACT North serves St. Johns and Putnam use Counties. •The FACT North has capacity to serve up to 100 clients. •The FACT Team provides comprehensive support services to individuals who have amental illness and have experienced multiple psychiatric hospitalizations. •Members of the FACT Team provide services including vocational rehabilitation, psychiatric assessments, individual therapy, nursing services,	Florida Assertive Community Treatment (FACT)Team operated by SMA Healthcare.
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The FACT program serves adults with several persistent mental illness, who may a have a co-occurring substance ab disorder. Palatka Housing Authority (PHA) committed to working with its families	provides mental healthcare, primary healthcare, dental healthcare and supports an on-site pharmacy. Pere •Two FACT Teams serve the Seventh Judicial also Circuit. FACT North serves St. Johns and Putnam use Counties. •The FACT North has capacity to serve up to 100 clients. •The FACT Team provides comprehensive support services to individuals who have amental illness and have experienced multiple psychiatric hospitalizations. •Members of the FACT Team provide services including vocational rehabilitation, psychiatric assessments, individual therapy, nursing services, medication delivery, housing negotiation, nutrition and diabetes education, smoking cessation support and education, substance use treatment, and crisis assessment and intervention, 24hours a day, 365 days a year. *The clients served by the FACT Team are discharged from the state hospital, the psychiatric unit at Flagler Hospital, or on judicial conditional release. is •At the time of the mapping, Meridian recently received a grant, Treatment of Individuals Experiencing Homelessness (TIEH) and looks to	Florida Assertive Community Treatment (FACT)Team operated by SMA Healthcare.

First Presbyterian Church is a faith-base	d • First Presbyterian is in the process of developing First Presbyterian
community established in 1856. Througho	ta solution to the shelter needs of the community.
our history our mission has been to respon	They have assembled a small group of community
to the calling to love God, our communi-	providers from behavioral health, local churches,
and others.	and the County Commissioner to begin to explore
	starting a shelter with the hopes of continuing to
	develop a plan for homelessness across the
	County.
Accepts reports 24 hours a day and 7 days	The Florida Abuse Hotline (1-800-962-2873)Florida Abuse Hotline operated by DCF
week.	accepts reports 24 hours a day and 7 days a week
	of known or suspected child abuse, neglect, or
	abandonment and reports of known or suspected
	abuse, neglect, or exploitation of a vulnerable
	adult.
	The CAT Team provides assessment, treatment, Community Action Treatment (CAT) Team
adults with behavioral health concerns	oand educational wraparound services as an operated by Clay Behavioral Health Center.
recover at home safely.	alternative to out-of-home placement for children
	with behavioral health problems and their families.
	•The team is comprised of a clinician, case
	manager, and medical staff.
[] [] [] [] [] [] [] [] [] []	Interface is a CINS/FINS short-term voluntaryInterface Youth Program operated by CDS Family
17.	residential program for youth ages 10-17. and Behavioral Health Services
	•The shelter can serve up to 12 youth (6 female
	beds, 6 male beds).
	At the time of the mapping, Interface was not at
	capacity.
	•They receive referrals from truancy court and
	DCF.
	•The average length of stay is 35 days.
	• The COACHES Program serves ages 6-21 within St. St. Augustine Youth Services (SAYS)
and provide them with the resources a	
	OACHES assists with support and guidance for
form healthy habits.	youths and families to improve their well-being
	with behavioral health issues and difficulties with
	accessing mental health services. As a part of the
	program, they will create a 6-to-9-month
	collaborative care plan.
	The staff is comprised of behavioral health case
	managers, therapists, peers, and family advocates.
	Staff utilizes Wrap around Services and Trauma
	Focused Cognitive Behavioral Therapy (TFCBT).
	•A Helping Hand is a nonprofit dedicated to A Helping Hand
[2] 아이를 가는 아이들이 얼마나 하시다면 하시면 하시는 사람들은 아이들이 없는 아이들이 아니는	nproviding mental health services to children and
	efamilies throughout Florida with an emphasis on
family.	natural supports using strengths-based services
	and trauma-focused treatment.
	All Alongside is an app that provides social-emotional Putnam County School District Program-Alongsid
	dlearning and self-help wellness tools administered
support that adolescents like and trust.	through a school's counseling team with modules
	such as journaling, breathing exercises, and an Al-
	powered chatbot.
	•Alongside was piloted at It was piloted at Q.I.
	Roberts during the 2022-2023 school year. This
	year, there are three high schools using it: Q.I.
	Roberts, Palatka. Jr./Sr. High School, and
	Interlachen Jr./Sr. High School.

	 According to the Florida Department of Education, SEDNET is a network of 19 regional 	[2] [2] [3] [4] [4] [4] [4] [4] [4] [4] [4] [4] [4
	projects that are comprised of the major child	
DV(6) 1		
hallenges.	serving agencies, community-based service	
	providers, students, and their families. Section	
	1006.04, F.S., defines the statutory requirements	
	and purpose of SEDNET. Local school districts	
	serve as fiscal agents for each local regional	
	project. Within this framework, SEDNET focuses	
	on developing interagency collaboration and	
	sustaining partnerships among professionals and	
	families in the education, mental health, substance	
	abuse, child welfare, and juvenile justice systems	K.
	serving children and youth with and at-risk of an	
	emotional/behavioral disorder (E/BD).Florida's	
	statewide network of SEDNET projects serve as a	
	collaborative resource for school districts,	
	agencies, and families working to promote positive	
	educational and community-based outcomes for	
	children with E/BD.	
he BRAVE Program breaks down the stigma	 The BRAVE Program encourages youth to be open 	Be Resilient and Voice Emotions (BRAVE) Program
ssociated with seeking assistance for mental	in receiving health and supports access to	operated by UF Health St. Johns
	behavioral health services through care navigation	
	and technology through school-based referrals.	
ccess to the services they need to thrive.	O The program provides family and youth	
	counseling, virtual if possible/needed. Youth may	
	also engage in counseling while they are at school	
	(virtually).	
	·BRAVE serves school-age youth attending school	
	in Circuit 7 and has been serving Putnam County	
	for three years.	
	O Y1:55 referrals; Y2-70 referrals; Y3 15 referrals	
	(current)	
	O 86% engagement rate, goal is 90% engagement	
	rate	
Shorany Is an important ingredient in	•RAP is a residential substance use treatment	SMA HealthCare's Pacidential Adolescent Brogram
		8 TO 1 TO
	program that serves ages 13-17. The program	(KAP)
	provides services including therapy, peer support,	
experiential learning theory, and behavior	experiential learning theory, reality therapy,	
nodification systems	education, and behavior modification support.	
	•The average length of time in the program is 4-6	
	months.	
Con Committee State to an observation of the	AND THE PROPERTY OF THE PROPER	Maria Dela Alegaria de Cara de
	Halifax Child and Adolescent Behavioral Services	Youth Baker Act receiving facilities.
herapeutic environment always.	O Halifax provides psychiatric services for children	
	and adolescents (ages 2-17) with emotional and	
	behavioral problems.	
	SMA Healthcare Marion County	
	[45] 1 A F 1 B 2 C F 2 C	
18.2 11.1.2	Meridian Behavioral Healthcare	V 11 14 14 14 14 14 14 14 14 14 14 14 14
HONOR HONOR CHIEF HE HE HONOR HE	 Juvenile Addictions Receiving Facility operated by 	Youth Marchman Act receiving facilities:
compassionate, comprehensive, and cost	Aspire (Orlando, FL)	
effective integrated behavioral health care.		
3		
BAYS envisions communities that believe in	Bays is a non-residential provider for DJJ that works	BAYS Programs
	with families and individuals and utilizes service	Proposition of the proposition o
bility to change, grow, and succeed.	delivery models.	
	BAYS work in communities to inspire change,	
	growth, and success.	
		Invanile Diversion Alternative Deserves (IDAD)
Diversion program that provides service	 JDAP a pre or post arrest diversion program that 	duvenile Diversion Alternative Program CHAP1
	DAP a pre or post arrest diversion program that provides services to the youth and family referred	
pased on the individual youth and family	provides services to the youth and family referred	
	provides services to the youth and family referred by SAO or DJJ with eligible misdemeanor and/or	
pased on the individual youth and family	provides services to the youth and family referred by SAO or DJJ with eligible misdemeanor and/or violent first-degree misdemeanors, and felonies.	
pased on the individual youth and family	provides services to the youth and family referred by SAO or DJJ with eligible misdemeanor and/or	
pased on the individual youth and family	provides services to the youth and family referred by SAO or DJJ with eligible misdemeanor and/or violent first-degree misdemeanors, and felonies. The average length of time in the program is 2-4	
pased on the individual youth and family	provides services to the youth and family referred by SAO or DJJ with eligible misdemeanor and/or violent first-degree misdemeanors, and felonies. The average length of time in the program is 2-4 months.	
pased on the individual youth and family	provides services to the youth and family referred by SAO or DJJ with eligible misdemeanor and/or violent first-degree misdemeanors, and felonies. The average length of time in the program is 2-4 months. •Services include initial assessments, monitoring of	
pased on the individual youth and family	provides services to the youth and family referred by SAO or DJJ with eligible misdemeanor and/or violent first-degree misdemeanors, and felonies. The average length of time in the program is 2-4 months. •Services include initial assessments, monitoring of interventions, psychoeducational services,	
pased on the individual youth and family	provides services to the youth and family referred by SAO or DJJ with eligible misdemeanor and/or violent first-degree misdemeanors, and felonies. The average length of time in the program is 2-4 months. •Services include initial assessments, monitoring of	

Complement case management services by -STRIVE partners with Community Partnership for Supportive Trusting Relationships with Inclusion, in-home family/Children (CPC) for referrals of children in need who/Vision, and Empathy (STRIVE) Program providing intensive engagement through supportive and reside in Volusia, Putnam, and Flagler Counties. therapeutic services, to successfully prevent The average length of stay in the program is 90-120 removal and/or reunite children with theirdays. To be eligible, parental/guardian must consent, and youth must be involved nor at risk of involvement with JJ and/or Child Welfare systems and engaged in disruptive behaviors. Services included are Enhanced Family Stabilization, a family support partner, prevention and safety planning, parenting classes, behavior and mood management, crisis management, employability skills, community and family support. and transition planning and linkages to services following conclusion of STRIVE. Provides supervision of youth in a safe, Youth requiring medical clearance for injury or Volusia Regional Detention Center operated by secure and humane environment. mental health needs will not be accepted into secure detention and are transported to the nearest hospital and supervised by a law enforcement officer for the duration of their stay. All youth referred to DJJ shall receive an initial mental health and substance use screening. The initial mental health and substance use screening is accomplished through administration of the Massachusetts Youth Screening Instrument-2 If the need for further assessment is indicated by the MAYSI-2, the youth shall be referred for a comprehensive assessment. •If the youth is to be released, the parent(s)/guardian(s) shall be informed of the results of the MAYSI-2 and shall be given information as to the location of the comprehensive assessment provider, appointment time, if arranged by the JPO, the importance of delivering the youth for the followup appointment. When the MAYSI-2 results or other information obtained indicates possible suicide risk, the youth shall be referred for an assessment of suicide risk to be conducted by Halifax within twenty-four (24) hours or immediately if the youth is in crisis. Halifax must provide medical clearance for the youth to return to the detention center. •JPO screeners participate in in-service training annually. Services include education, mental health, substance use, and primary healthcare. There is a mental health clinician and nurse on staff at the detention center. A nurse (LPN/RN) is present 24/7. A doctor is on-call and available to come in to prescribe medications or conduct telehealth appointments on occasion. psychiatrist is at the detention center once a week

and the facility has on-site mental health staff.

•DJJ transports youth for medical appointments

 Within 24 hours of admission, parents may bring prescriptions to the detention center for their

with external providers.

and referred for services based on risk and	 There are 4 JPOs serving Putnam County youth. JPOs receive Mental Health First Aid training, Motivational Interviewing training, and a human 	Fig. 1
	trafficking training. There are specialized caseloads for sexually violent offenders and gun violence. Interventions may include detention screening, intake, diversion, day treatment, probation, aftercare supervision, and linkage to service providers.	
	 The City of Palatka and Putnam County offer PAL recreational programs for youth across the county such as basketball, cheerleading, and mentoring. 	[CONT.] [CONT.



APPENDIX IV: COALITION SECTOR AGREEMENT

Coalition Sector Agreement

This agreement between CCA and sector inserted here Sector Representative, member's first and last name inserted here shall go into effect date signed. This agreement will be reviewed on a yearly basis and remain in effect until terminated by a mutual accord.

The sector inserted here Sector Representative, member's first and last name inserted here commits to becoming a member of the Putnam coalition and agrees to the following:

- 1. Attend and participate in scheduled Putnam coalition meetings;
- 2. Share expertise and experience to inform community focused initiatives with other partners to help shape the planning process;
- Provide leadership amongst sector represented;
- 4. Ensure clear communication between the sector representatives and coalition;
- 5. Act as a positive role model for youth, families, and peers;
- Contribute to the community assessment process; &
- 7. Participate in sustaining the coalition's capacity, involvement, and energy.

Community Coalition Alliance (CCA) agrees to:

- 1. Work with community partners to establish a local Putnam coalition;
- 2. Engage and recruit 13 sectors to become active members of the Putnam coalition to participate in a community assessment process;
- Lead a community assessment process;
- 4. Host monthly coalition meetings;
- 5. Provide training, as needed, to increase the skills and capacity of coalition members;
- 6. Seek funding to sustain Putnam coalition.

Community Assessment Goals & Objectives:

Goal 1	Outcome	Measure of Success	Documentation
Conduct an assessment to identify, understand and prioritize current OUD's and overdose mortality needs.	Conduct the 5 parts of the community assessment: community description, community history, needs assessment, resource assessment, and problem/goal statement.	Finalized Community Assessment and corresponding presentation.	Meeting agenda, minutes, sign-in sheets, Assessment Report, and power point.
Objective 1			
Engage and recruit 13 sector representatives to participate in community assessment process.	To have 13 sectors represented for assessment process.	13 signed sector agreements.	Meeting agenda, minutes, sign-in sheets, and sector agreements.
Objective 2			
Define community.	Defining the boundaries of the community, providing relevant geographic information, providing relevant demographic information, and defining communities within a community.	Clear definition of community.	Meeting agenda, minutes, and sign-in sheets.
Objective 3			
Complete community history.	Examines what the community's past experience has been with community problem solving efforts by looking at key events that have shaped the community and affected the communities' issues.	Narrative of community history.	Meeting agenda, minutes, sign-in sheets, and Community History Report.
Objective 4			
Conduct needs assessment.	Identifies the consequences of drug use, the problem, root causes, and local conditions through data collection.	Needs Assessment Report	Meeting agenda, minutes, sign-in sheets, and Needs Assessment Report.
Objective 5			
Conduct resource assessment.	Identify which resources are already in place to help address the needs and build a safe and healthy community and identify the gaps.	Resource Assessment Report	Meeting agenda, minutes, sign-in sheets, and Resource Assessment Report.

Objective 6			
Problem/Goal Statements	One problem statement for each identified community issue. Provides a rationale for the naming and framing choices made for each problem statement.	Defines the problem/goal the community wants to target.	Meeting agenda, minutes, sign-in sheets, and Problem/Goal Statements.
Objective 7			
Share community assessment to Putnam County residents, leaders, stakeholders, and partners.	Finalized Assessment and corresponding presentation.	Assessment Report and power point.	Meeting agenda, minutes, sign-in sheets, Assessment Report, and power point.
Objective 8			
Create logic model.	Roadmap between the Problem Statement, Root Cause, and Local Conditions.	Logic model for each substance identified.	Meeting agenda, minutes, sign-in sheets, and logic model.
Objective 9		·v	
Create a strategic and action plan.	Identify interventions/ strategies to achieve goals and objectives. Also, identifies who, will do what, by when to realize targeted community changes.	Strategic and action plan.	Meeting agenda, minutes, sign-in sheets, strategic and action plan.

APPENDIX V: DATA SOURCES

Proposed Data Collection

Data collection methods consisted of utilizing national, state, and county data sources including but not limited to:

- The Behavioral Risk Factor Surveillance System (BRFSS).
- National Center for Health Statistics.
- Biospatial
- ESSENCE
- Environmental Scans.
- Key Informant Interviews
- ODMAP
- Medical Examiners
- Putnam County, Florida Sequential Intercept Mapping report September 19-20,2023
- Florida Charts: https://www.flhealthcharts.gov/charts/default.aspx
- FYSAS Report: <u>www.myflfamilies.com</u>
- Poison Control: https://floridapoisoncontrol.org/poisoning-data/
- UF FROST: https://frost.med.ufl.edu/frost/
- Health Rankings: https://www.countyhealthrankings.org
- Recovery Ecosystem Index Score: https://rei.norc.org/
- SESIR: https://www.fldoe.org/safe-schools/discipline-data.stml
- Services Used: https://211counts.org/home/index
- CDC Wonder: https://www.cdc.gov/nchs/nvss/index.htm
- Census Data: Data (census.gov)
- NSDUH: https://pdas.samhsa.gov/saes/substate
- Community Commons: https://www.communitycommons.org/
- Mental Health: https://mhanational.org/mhamapping/mha-state-county-data
- DJJ Profile: https://www.djj.state.fl.us/research/reports-and-data/interactive-data-reports/delinquency-profile

