

Strategic Plan Progress Report, 2017

Florida Department of Health in St. Lucie County

March 2018

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Introduction

This is a progress report for the DOH-St. Lucie County Strategic Plan 2016-19. The Strategy, Performance and Improvement Leadership (SPIL) Team reviewed the plan and its goals, objectives, and indicators for 2015-16. The review process consisted of collecting data for 2016-17 year and evaluating progress made on key indicators.

Overview

This strategic plan provides a unified vision and framework for action for the Florida Department of Health in ST. LUCIE County. As part of a larger performance management system, the DOH-ST. LUCIE Strategic Plan allows us to identify the critical issues that must be addressed to protect, promote and improve the health of Floridians.

DOH-ST. LUCIE Strategic Performance and Leadership Team, made up of executive, management and program directors, oversaw the development of this Plan during the year 2016. The Team reviewed key findings from the DOH-ST. LUCIE Community Health Improvement Plan and had a facilitated discussion of agency strengths, weaknesses, opportunities and threats (SWOT) based on the findings. They considered information management, workforce development, communication and financial stability in their discussion.

Team members then used the SWOT analysis and the agency mission, vision and values to choose strategic issue areas and agency goals. After a number of face-to-face meetings, members arrived at the final strategic issue areas: health protection and promotion, financial and business excellence, service to customers and community, and workforce development.

STRATEGIC ISSUE AREA	GOAL
Healthy Moms and Babies	Provide resources and educational programs for families
Long and Healthy Life	Provide high quality community needs- driven programs, services, and credible health information
Readiness for Emerging Health Threats	Improve the community's health through integrated, evidence-based prevention, protection and promotion initiatives
Effective Agency Processes	Achieve operational efficiencies through sound financial and business practices within regulatory constraints in order to remain sustainable

Progress Toward Goals

Strategic Issue Area #1: Healthy Moms and Babies

Goal: Provide resources and educational programs for families.

Strategies:

- 1. Promote the benefits of breastfeeding
- 2. Protect child with safety education
- 3. Prevent teen pregnancy
- 4. Increase new born survival rates

	rategic issue Area: Healthy Mom and Bables oal 1: Improve the health of moms and bables													
Objective	2014	2015	2016	Target	Trend	CHIP Alignme nt	QI Plan Align ment	Agency Strategic Plan Alignment	SHIP	ю	Respon sibility	Due Date	Progress	Complete
1.1.1 Increase percentage of WIC infants who are ever breastfed	74.70%	76.40%	77.70%	77.50%.	Does not meet target	CHIP 1.3.1, 1.3.2, 1.3.3		ASP goal 2.1	Yes		Mally Chrulski , Sonya Gabriel, WIC, Healthy Start	31-Dec-18	Percentage of WIC infants is improving, CHIP activities are supporting the strategy in promoting breastfeeding in Maternity Care Practices and professional education trough a CHIP committee. WIC is working with Breastfeeding Counselor to increase %.	Complete
1.2.1 Reduce racial disparity in infant mortality by reducing the three-year rolling average of black infant mortality rate	18	11.2	9.8	11 per 1,000 live births, or a 10% reductio n	Does not meet target	CHIP 1.3	FHB	ASP goal 1.1	Yes		Healthy Start Program Sonya Gabriel	31-Dec-18	 Conduct Assessment, 2. Community Meeting, Develop an Action Plan: Draft plan to be presented at Healthy St. Lucie, Plan must be uploaded to Florida Health Babies' Sharepoint by Sept, 30, 2016 	1. Assessment-April, 2016 2. Community Meetings: March 17 and September 8, 2016, 3. Action Plan uploaded on September 23, 2016. Target Achieved
1.3.1 Reduce births to mothers with no prenatal care	3	2.3	2.7	State rate of 1.5 per 1000 births	Does not meet target	CHIP 3.1.1		ASP goal 1.1	Yes		Healthy Start Program Sonya	31-Dec-18	Florida Healthy Babies Action Plan and CHIP new strategies are in place to address prenatal care disparites in the county.	1. FHB Action Plan is ready for implementation, 2. Protective Factors/Circle of Parents evaluation complete, October 14, 2016.
1.4.1 Reduce the rate of repeat teenage pregnancy in blacks	22.1	21.7	15.1	18.4 births per 1000.	Does not meet target			ASP goal 1.1	Y		Teen Zone and Healthy Start program s, Sonya and Donna	12/31/2018	 Teen Zone Clinic is providing a 3 year contraceptive implant Nexplanon to 18-19 year old teens. Implant is removed when they turn 21. Moving teens who are sexually active from condom use to hormonal pill, to Long- Acting Reversible Contraception. 	Evaluate impact after a year of implementation in October, 2018. Target achieved in 2016-17

Strategic Issue Area: Healthy Mom and Babies

Objective	2014	2015		Target	Trend	CHIP Alignme nt	Align	Agency Strategic Plan Alignment	SHIP	но	Respon sibility	Due Date	Progress	Complete
1.4.2 Increase the percent of teen CHD family planning clients who adopt an effective or higher method of birth control	94.3	90.70%	89.40%	>80%	Meets target			ASP goal 1.1	Y		Healthy Start Program , Donna	31-Dec-18	Moving teens who are sexually active from condom use to hormonal pill, to Long-Acting Reversible Contraception.	Evaluate impact after a year of implementation in October, 2018
1.5.1 Reduce Low Birth Weight <2500 grams	8.00%	7.80%	8.70%	7.50%	Meets target	CHIP 3.1.1, 3.2.1		ASP goal 1.1	Y		Healthy Start Program Donna, Sonya Gabriel	31-Dec-18	Infant Mortality Aciont Plan implementation under way for October 2016 to September 30, 2017	Complete
1.6.1 Increase the percent of CHD family planning clients served who have documentation of race in their records	81%	92%	95%	95%	Meets target			ASP goal 1.1	Y		Family Plannin g Program , Angela Roberso n	31-Dec-18	In Progress	Complete

Strategic Issue Area #2:

Goal: Provide high quality community needs-driven programs, services, and credible health information

Strategies:

- 1. Ensure the provision of quality health services through performance management and customer satisfaction
- 2. Identify, respond to, and monitor community health issues through collaborative partnerships
- 3. Promote healthy lifestyles and reduce chronic disease risk

Strategic Issue Area: Long, H Goal 2: Increase Life Expect		Life											
Objective	2014	2015	2016	Target	CHIP Alignment	QI Plan Alignment	Agency Strategic Plan Alignment	SHIP	но	Responsi bility	Due Date	Progress	Complete
2.1.1 Healthy St. Lucie Coalition will have the completion of formulation of goals and objectives for the Community Health Improvement Plan.	0%	100%	100%	100%	Yes, CHIP 1.1, 1.2, 1.3, 2.1, 3.1, 3.2	QI Healthiest Weight Project	ASP goal 2.1			Healthy St. Lucie, Health Education Team, Donna	6/30/2016	Healthy St. Lucie 3 goals and 6 objectives	Jan, 2016. Plan is implemented
2.1.2 Create a marketing plan that outlines DOH in St. Lucie, services to enhance workplace wellness program for small businesses	0%	0%	100%	100%	CHIP 3.1.2, 3.2.1		ASP goal 2.1			Healthy St. Lucie, Health Education, Donna	6/30/2018	In Progress	A Social Marketing Plan and Research developed in 2017 by the CHIP work group. St. Lucie Billion Step Challenge plan developed.

Strategic Plan Progress Report, 2017

Goal 2: Increase Life Expectancy													
Objective	2014	2015	2016	Target	CHIP Alignment	QI Plan Alignment	Agency Strategic Plan Alignment	SHIP	но	Responsi bility	Due Date	Progress	Complete
2.2.1 Implement the Florida Healthiest Weight Initiative in adults and increase the percentage of adults in St. Lucie County who are at a healthy weight	32% (2013)	31	31.2	33%.	CHIP 1.1, 1.2, 1.3	Yes	ASP goal 2.1			Health Education, Donna	12/31/2018		St. Lucie Billion Step Challenge Plan developed in 2017
2.3.1 Development of the state and Area 15 HIV Partnership integrated strategic plan for prevention and patient care of People Living with HIV.	50%	75%	100%	100%			ASP goal 2.1			HIV/AIDS, Communi cable Disease	31-Oct-16	September, 2016: Epi Profile, SWOT, Goals	Complete, Next step to work with Consortia and Lead Agency in implementing objectives for 2017-2021
2.3.2 Reduce the incidence rate per 100,000 of new HIV positive cases	16.7	12.5	17.3	15			ASP 2.1			HIV/AIDS, Communi cable Disease,	31-Dec-18	Meets target	Comp Strategic Plan 2017-21
2.3.3 Increase percentage of ADAP clients that picked up ADAP medications for each month of the year	87%	87%	88%	85%			ASP 2.1			HIV/AIDS, Communi cable Disease	31-Dec-18	Meets target	Comp Strategic Plan 2017-21
2.3.4 Increase the percentage of new HIV positives with documentation of linkage to medical care within 90 days of diagnosis	75%	100%	100%	85%.			ASP 2.1			HIV/AIDS, Communi cable Disease	31-Dec-18	meets target	Comp Strategic Plan 2017-21
2.3.5 Decrease the HIV/AIDS resident death rate per 100,000	4	6.5	2.8	4			ASP 2.1			HIV/AIDSC ommunica ble Disease	31-Dec-18	meets target	Comp Strategic Plan 2017-21
2.3.5 Decrease the HIV infection diagnosis case rate per 100,000	20.5			13.6			ASP 2.1			HIV/AIDS, Communi cable Disease	31-Dec-18	Does not meet target	Comp Strategic Plan 2017-21
2.3.6 Increase percentage of HIV (new and old) cases dispositioned within 14 days of Field record creation date	85%			90%,			ASP 2.1			HIV/AIDS, Communi cable Disease	31-Dec-18	Does not meet target	Comp Strategic Plan 2017-21
2.4.1 Assure the percentage of TB cases with a documented HIV test result is 100%.	100%	100%	100%	89%			ASP 2.1			HIV, Communi cable Disease	31-Dec-16	Meets target	TB State Plan
2.4.2, Sputum-smear positive TB patients are initiating treatment within 7 days of specimen collection	100%	100%	86%	95%			ASP 2.1			TB, EPI, Communi cable Disease	31-Dec-16	Does not Meet target	TB State Plan

Strategic Issue Area #3: Readiness for Emerging Health Threats

Goal: Improve the community's health through integrated, evidence-based prevention, protection and promotion initiatives

Strategies:

- 1. Protect the community from preventable diseases
- 2. Prevent the spread of communicable diseases
- 3. Minimize impact on the community from public health hazards

Strategic Issue Area: Readiness for Emerging Health Threats

Goal 3: Demonstrate rea	adiness fo	or emergi	ing health	h threats								
Objective	2014	2016	Target	CHIP Alignment	QI Plan Alignment	Agency Strategic Plan Alignment	SHIP	ю	Responsi bility	Due Date	Progress	Complete
3.1.1 Increase percentage of 2 year-old CHD clients fully immunized from	96%	98%	97%		Project in 2013-14	ASP goal 3.1			lmmunizat ion Program, Angela, Jerri	12/31/2018	Previous Level at 92% in 2013. QI plan put in place for improvement	Complete
3.1.2 Increase the assessment level of CHD Immunization Coverage	95%	95%	>95%.		Imms increase for Grades K and 7th	ASP goal 3.1			lmmunizat ion Program	31-Dec-18	Meets target	
3.2.1 Increase percent of CHD STD cases treated according to the most recent STD guidelines within 14 days of diagnosis	94%	90%	90%		Project in 2014	ASP goal 3.1			Communi cable Disease	31-Dec-18	Levels from 79% to 94%. Activities are In progress to reach the target. Meets the target	Meets the target
3.2.2 Percent of infectious syphilis cases treated within 14 days of specimen collection date	50%		90%			ASP goal 3.1			Communi cable Disease	12/31/2018	Numbers are very low	
3.3.1 the Composite Annual Preparedness Score will increase	4.86	5	5			ASP Goal 3.1			Emergenc y Preparedn ess Program	31-Dec-18	Meets target	
3.4.1 Evaluation results of program review to Onsite Sewage, Community Programs, Water Programs, and Environmental Health Leadership will exceed the required programmatic standards of the State	100%	92%	75%			ASP Goal 3.1			Environme ntal Health Program	31-Dec-18	Meets target	
3.5.1 Achieve 100% mandatory training for all employees.	100%	100%	100%			ASP Goal 3.1			HR and Workforce Developm ent	30-Jun-16	Meets target	

Strategic Issue Area #4: Effective Agency Processes

Goal: Achieve operational efficiencies through sound financial and business practices within regulatory constraints in order to remain sustainable

Strategies:

- 1. Maximize revenue and maintain budgetary control procedures
- 2. Workforce development employee satisfaction and leadership opportunities

Strategic Issue Area: Effective Agency Processes Goal 4: Effective Agency Processes

Objective	2014	2015	2016	Target	CHIP Alignment	QI Plan Alignment	Agency Strategic Plan Alignment	SHIP	ю	Due Date	Responsi bility	Progress	Complete
4.1.1 DOH in St. Lucie employees will have participated in one or more professional development opportunities.	30%			50%		QI Project	ASP goal 4.2.b			6/30/2017	HR and Training Team	Emergency Preparedness adds 2 trainings a year related to communications and leadership.	
4.2.1 Increase employee recognition. Score 4 on employee survey satisfaction 2016	Score below 4			Score of 4 on Employee Satisfactio n survey		QI Project	ASP goal 4.2.a			6/30/2016	HR and Training Team	Two Employee Recognition events per year (May/Nov).	
4.2.2 Increase opportunities for leadership. Score of above 4 on employee survey satisfaction on leadership opportunities	Score below 4			Score of 4 on Employee Satisfactio n survey		QI Project- -	ASP goal 4.2.b			6/30/2017	HR and Training Team	Basic Supervisory training available for all staff. Revising the Employee	
4.3.1 Reduce the rate of worker's compensation incidents per 100 employees	13.30%	2.20%	4.50%	8.80%			ASP Goal 4.1			31-Dec-18	Risk Managem ent, Edgar Morales	All claims evaluated and investigated and sent to our attorney	Meets target
4.4.1 Completed Playbook and Budget Allocation process in place	0%	100%	100%	100%		QI Project	ASP goal 4.1			6/30/2016	Finance Team	Plan is implemented	Complete January 2016
4.4.2 Management of schedule C OCA cash balances: Federal funds- zero balance 60 days after grant period ends will meet the state target of.	100%	100%	100%	100%			ASP Goal 4.1			30-Jun-16	Finance	Meets target	
4.4.3 Management of Schedule C OCA cash balances: State General Revenue and Trust funds – no negative cash balance will meet state's target of 100%	100%	100%	100%	100%			ASP Goal 4.1			30-Jun-16	Finance	Meets target	

Objective	2014	2015	2016	Target	CHIP Alignment	QI Plan Alignment	Agency Strategic Plan Alignment	SHIP	ю	Due Date	Responsi bility	Progress	Complete
4.5.1 Supervisors and employees certify accuracy of time recorded on Employee Activity Records within 7 calendar days of end of pay period meeting the state's target	99%	99%	98%	> 90%.			ASP Goal 4.1			30-Jun-16	All Supervisor s	Meets target	
4.6.1 By increase the percent of documented customer complaints acknowledged by the end of next business day.	92%	91%	100%	100%			ASP Goal 4.1			31-Dec-18	HR	Reduction on customer complaints from WIC-Lake Whitney, Activated Risk	Meets target
4.6.2 Completion of customer satisfaction surveys with a satisfactory or better.	92%		88%	100			ASP Goal 4.1			31-Dec-16	All Supervisor s	Clinical Survey developed. Surveys from Departments	Does not meet target

Revisions

No revisions were necessary since the Strategic Plan for the Florida Department of Health in St. Lucie County continues to be in alignment with the statewide overall strategic plan of the Florida Department of Health.

Accomplishments

Goal	Strategy	Accomplishment
Healthy Moms and	1.Promote the	Percentage of breastfeeding WIC infants has
Babies.	benefits of	improved from 74% to 78%. CHIP activities
Provide resources	breastfeeding through	are supporting the strategy in promoting
and educational	educational materials	breastfeeding in Maternity Care Practices and
programs for	that are culturally	professional education through a CHIP
families.	competent for the	committee. WIC is working with
Problem: Low	community.	Breastfeeding Counselor to continue in
levels breastfeeding		increasing levels of participation. Three
in the community		hospitals operating in St. Lucie County have

		joined the Baby Steps Baby Friendly initiative to increase breastfeeding initiation rates in hospitals through the Ten Steps to Successful Breastfeeding Assessment and Action Plan.
breastfeeding women (working with Healthy	and their infants) and a Start, prenatal care pro	agency efforts (working with prenatal and at FDOH-St. Lucie initiatives through CHIP oviders and local hospitals in the eding) impact this measure.

Goal	Strategy	Accomplishment
Healthy Moms and Babies. Increase new born survival rates. 3 year rolling rate of black infant mortality is 11.2 per 1000 births	1. Conduct an Infant Mortality Assessment, 2. Conduct a Community Meeting to address infant mortality in St. Lucie County	A committee took the information gathered at the community meeting and developed a draft document for an Action Plan for reducing infant mortality in St. Lucie County. The plan was presented to Healthy St. Lucie for vetting. Healthy St. Lucie (CHIP) approved the plan in September, 2016 for implementation. These activities formed part of the Florida Healthy Babies Initiative of the Florida Department of Health. Finally in 2107 the DOH in St. Lucie County was able to establishment of a Fetal Infant Mortality Case Review Program and collaborate with a group of health care providers to form a workgroup that reviews cases of infant mortality and to recommend actions to mitigate further infant mortality in the county.
		racial disparity in infant mortality helps reduce ty and the State of Florida.

Goal	Strategy	Accomplishment
Increase Life	1. Conduct Social	A CHIP committee developed the social
Expectancy.	Marketing around	marketing strategy and a series of community
Development of a	physical activities and	meetings were conducted to initiate the
plan to enhance	healthy weight in the	marketing research. Another CHIP
workplace wellness	county.	committee developed the plan to launch the
and increase	2. Develop a county-	2018 Billion Step Challenge in St. Lucie

number of adults who are at a healthy weight	wide plan to encourage people in the county to participate in the Billion Step Challenge	County.
How it's important for our agency: Increasing physical activity opportunities in the workplace and in the community helps improve healthy weight for the population.		

Conclusion

Quality improvement in public health refers to a continuous and ongoing effort to achieve measurable improvements in the efficiency, effectiveness, and performance of services or processes which improve the health of populations.

We have monitored, reviewed and revised the Plan and believe that it will continue to be a roadmap for our agency to improve the health of the residents of our county.

Appendices



Florida Department of Health in St. Lucie County Process Management Council Leadership Team Meeting Milner Conference Room January 8, 2018 12:30 – 1:30 p.m.

Minutes

*Note: A quorum of two-thirds of members is required.

Positio	n	In Attendance		Position	In Attendance
Health Officer (Chair)		Clint Sperber		Environmental Manager	David Koerner
Health Services Manager		Kim Kossler		AA/HR Liaison	Carolyn Roscoe
Nursing Director		Angela Roberson			
Public Information Officer	r	Arlease Hall			
Finance/Accounting Direct	tor	Traci Fox		Guest:	
Accreditation and Plannin	g	Edgar Morales		Operations & Mgmt. Consultant Mgr.	Jennifer Harris
				Health Educator Program Consultant	Danielle Chabot
Speaker		Торіс		Discussio	on
Clint Sperber	Welcome/Ca	all to Order			
Jennifer Harris Danielle Chabot	Wellness Pla	to • Re		owerPoint presentation on Worksite Wo make healthy choices. eviewed the 2017-2018 Healthiest Wei coreCard Improvement Plan Outline.	ellness/Making it easier for employees
Clint Sperber	Progress Report/Updates			scussed the Financial Workgroup revie coming changes for review/approval.	ewing non-categorical revenue and the
Edgar Morales	Strategic Pla	an- Matrix	str tha bro str • Cu	ategic plan objectives, presenting the at still need improvement. Achieveme eastfeeding, FIMR for infant mortality. ategies for HIV among others.	gress made on strategies outline in the achievements and areas from the plan nts include the Baby Steps program for Areas for improvement are within the update due to County Health Systems



Florida Department of Health in St. Lucie County Process Management Council Leadership Team Meeting Milner Conference Room January 8, 2018 12:30 – 1:30 p.m.

Minutes

Traci Fox	Budget Review	 Spending plan needs to be approved this month. Working on State and County allocations. Waiting for sliding fee scale reassessment from Lens. Discussed the importance of EARs coding and review by supervisors prior to approval.
All	Updates:	Arlease Discussed Rev. Dr. Martin Luther King, Jr. 24th Anniversary Commemorative Celebration January 5-21. 2018. Grand Parade and Festival in the Park Outreach event scheduled for Monday, January 15th. Kim Currently working on HIV/PRV and Preparedness budgets. David Advised Club Med Legionella testing came back negative.



Florida Department of Health in St. Lucie County Process Management Council Leadership Team Meeting Milner Conference Room January 8, 2018 12:30 – 1:30 p.m.

Minutes

-	Last Meeting Date/Time: 12/11/2017 12:30-1:30pm
	Next Meeting Date/Time: 01/22/2018 12:30-1:30pm



Executive Leadership Team Meeting Process Management Council

Date 1-08-2018

12:30 PM - 1:30 PM

Sign In Sheet

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Clint Sperber, Health Officer (Chair)	(H)
Angela Roberson, Nursing Director	Stuberoom
Kim Kossler, Health Services Manager	Celese (
Traci Fox, Finance/Accounting Director	Der
Arlease Hall, Public Information Officer	Station the the
Edgar Morales, Accreditation and Planning	Authan Sil
David Koerner, Environmental Manager	DAllin
Carolyn Roscoe, AA/HR Liaison	Carolyn Rosue

Gue	st:
Jennifer Harris, Operations & Mgmt. Consultant Mgr.	Abuntan
Danielle Chabot, Health Educator Program Consultant	Damier Chipor