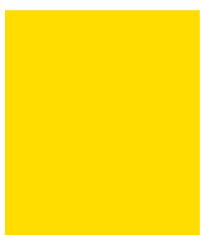




Florida Department of Health in Pinellas County

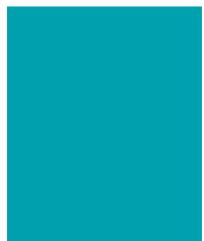
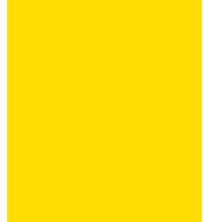
Strategic Plan 2016-2018



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Mission, Vision and Values

Mission – Why do we exist?

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

Vision – What do we want to achieve?

To be the Healthiest State in the Nation.

Values – What do we use to achieve our mission and vision?

I nnovation: We search for creative solutions and manage resources wisely.

C ollaboration: We use teamwork to achieve common goals & solve problems.

A ccountability: We perform with integrity & respect.

R esponsiveness: We achieve our mission by serving our customers & engaging our partners.

E xcellence: We promote quality outcomes through learning & continuous performance improvement.

Executive Summary

The Florida Department of Health in Pinellas County (DOH- Pinellas) initiated a new strategic planning process in November of 2015. The process was championed by the Strategy Performance Improvement Leadership (SPIL) team, and involved numerous internal stakeholders including executive leadership, program managers, and employee representatives. External stakeholders were also engaged in the planning process through the Pinellas County Community Health Action Team (CHAT), the local community health improvement planning steering committee.

DOH- Pinellas approached the strategic planning process with a number of objectives in mind, including re-focusing efforts on core public health functions and ensuring the provision of essential public health services.

DOH- Pinellas also sought to articulate what we plan to achieve as an organization, how we will achieve it, and how we will know if we have achieved it. Success will be monitored via quarterly monitoring (see appendix B).

The DOH- Pinellas Strategic Plan was developed to clarify the course and direction of the agency for consumers, employees, administrators and legislators seeking to understand the work of Pinellas County public health. Our Strategic Plan is intended to position DOH- Pinellas to operate as a sustainable local health office within Florida's integrated public health system, under current economic environment and to give our customers high quality public health services.

Our strategic planning process resulted in identifying five critical priorities. These strategic priorities represent the synthesis and integration of information, data, opinions, perceptions, and issues examined by the DOH-Pinellas leadership team. DOH-Pinellas's strategic priorities are:

1. Healthy Mothers and Babies
2. Long, Healthy Life
3. Readiness for Emerging Health Threats
4. Effective Agency Processes
5. Access to Care

These priorities guided the development of goals, strategies and objectives and will help to shape decisions about resources and actions.

The result of the strategic planning process is a well-crafted roadmap that we will review and revise annually to meet emerging challenges and opportunities.

Background and Overview

Public health touches every aspect of our daily lives. By definition, public health aims to provide the maximum benefit for the largest number of people. It is what we do collectively to assure conditions in which people can be healthy. Public Health is a well-established science that has been in practice for hundreds of years. It is based upon the social, behavioral, environmental, biological, and socioeconomic factors that impact population-wide health.

The over-arching goal of public health is to protect and improve the health of communities through education, promotion of healthy lifestyles, and research for disease and injury prevention. Through research, surveillance, and data analysis, we develop programs and policies that protect the health of the entire community.

Demographics

The Florida Department of Health in Pinellas County serves a population of 925,030.

Where we live influences our health. Demographic, socioeconomic, and environmental factors create unique community health service needs. A key characteristic that sets Pinellas County apart is our large population over age 45. Our county has approximately 7.5% more people over age 45 than the state as a whole.

**Population by Age
Pinellas County and Florida**

	County – 2014	State – 2014
Age Group	Total Percentage	Total Percentage
< 5	4.6	5.6
5 - 14	9.6	11.5
15 - 24	10.5	12.9
25 - 44	22.7	24.9
Subtotal	47.4	54.9
45 - 64	30.5	26.9
65 - 74	11.2	9.8
> 74	10.9	8.4
Subtotal	52.6	45.1

Source: 2010-2014 American Community Survey 5-Year Estimates

Background and Overview

Programs and Services

Some of the most effective strategies for improving public health include policies and programs that shape the environment and create opportunities for healthier behaviors. This is the basis for Florida Department of Health in Pinellas County's commitment to providing the highest standards of public health through the following core functions and services:

Environmental Health

We protect the health of the community by monitoring and regulating environmental activities which may contribute to the occurrence or transmission of disease by ensuring safe drinking water, safe food, proper sewage disposal, clean swimming pools, complaint investigations and enforcement of public health laws.

Communicable Disease Control

We protect the health of the community through the surveillance, monitoring, and prevention of infectious and communicable diseases. Activities include investigating contagious disease cases and outbreaks, sexually transmitted infections (STI) detection and control, AIDS/HIV treatment and education, immunizations, and tuberculosis (TB) control.

Public Health Preparedness

We partner with the local healthcare system, emergency management, government and the community on preparedness and response to natural and man-made disasters. The preparedness effort focuses on developing critical capabilities necessary for an effective disaster response to keep the community safe and minimize loss.

Family Planning

We offer education and counseling to help women plan their families and improve their reproductive health and birth outcomes.

Community Health

We plan and implement programs to promote healthy behaviors and reduce chronic disease through education, community outreach, and collaborative partnerships.

Women, Infants and Children (WIC) We provide nutrition education and counseling, breastfeeding support, and healthy foods to eligible pregnant, breastfeeding and new moms, infants, and children up to age five.

School Health

We collaborate with the local school boards to improve student health by offering immunizations, vision and hearing screenings, and tracking of physical development in all children.

Vital Statistics

We maintain Florida birth and death records locally and are able to assist with birth, death, marriage and divorce records for all fifty states. Using data collected by our office, we are able to assist the state with tracking causes of morbidity and mortality—two main indicators of health status.

SWOT Analysis

Strengths, Weakness, Opportunities and Threats (SWOT) Analysis*

Strengths (Internal)

- Programmatic and financial data
- Resource rich in terms of staff, money and partnerships
- Local funding and millage
- Culture of Quality Improvement (QI)
- Active Community Health Improvement Plan (CHIP)
- New technologies
- Integrated statewide system of public health
- Scope of services

Opportunities (External)

- Scope of services
- Mobility and flexibility due to large staff
- Culture of QI throughout all agencies to work together
- Integrate systems
- Partner with private sector
- Apply for local grants
- Alignment USA
- Health in all Policies
- Recognition of population health
- Hospital activities
- Behavioral health
- Increase breastfeeding rates

Weaknesses (Internal)

- Too much data
- Use of technology, restricted beyond our control
- Low wages cause poor recruitment
- Barriers to grant opportunities
- Staff feel unappreciated
- Lack of communication
- Employee wellness
- Commitment to initiatives
- Lack of leadership development, no plans for
- Little employee recognition
- Staff retention

Threats or Challenges (External)

- State restrictions on technology
- Rising infectious disease/ obesity
- Silos in funding streams
- State funding reductions
- Hurricanes (petroleum transportation)
- Access to care
- ACA/ Medicaid expansion
- Aging population and workforce

Strategies and Indicators

Strategic Issue Area: Healthy Mothers and Babies

Goal 1.1: Reduce infant mortality

Strategies	Indicators	Source
1.1.1: Promote health equity in mothers and children	Objective A: Reduce the three-year rolling average of black infant mortality rate from 13.1 (2012-2014) to 11.8 per 1,000 live births and reduce black-white infant mortality gap from 2.9 to less than 2.6 times higher or by 10% by Dec. 31, 2018.	FDOH Pinellas Vital Stats
1.1.2: Promote breastfeeding	Objective A: Increase percentage of WIC clients who report ever breastfeeding from 75.3% (Q3 2015 WIC) to 77.4% by Sept. 30, 2018.	FDOH Pinellas WIC

Strategic Issue Area: Long, Healthy Life

Goal 2.1: Increase healthy life expectancy

Strategies	Indicators	Source
2.1.1: Promote the healthy weight of children and adults	Objective A: Increase the percentage of children in grade 6 who are at a healthy weight from 71% (2014-2015 Local Annual School Health Mandatory Screening) to 73% by Dec. 31, 2018. Objective B: Increase the percentage of adults in Pinellas who are at a healthy weight from 36.8% (2013 BRFSS) to 38% by Dec. 31, 2018.	A: Local Annual School Health Mandatory Screening B: BRFSS
2.1.2: Reduce cancer incidence and increase cancer survival	Objective A: Increase the amount of women who had an initial program pap test who were previously rarely or never screened from 35.1% to 40% by Dec. 31, 2018.	FDOH Pinellas BCCP
2.1.3: Reduce HIV Incidence	Objective A: Reduce the annual number of newly diagnosed HIV infections in Pinellas from 278 (2014) to 261 overall and from 77(2014) to 72 in the black population by Dec. 31, 2018. Objective B: Increase the proportion of ADAP clients with an undetectable viral load from 89% (2014) to 92% by Dec. 31, 2018.	A/B: FDOH Pinellas Disease Control

Strategic Issue Area: Readiness for Emerging Health Threats

Goal 3.1: Demonstrate readiness for emerging health threats

Strategies	Indicators	Source
3.1.1: Promote vaccination for children and adults	Objective A: Increase percent of those eligible for HPV vaccine and reported through FL Shots who have completed the 1st HPV shot from 6.5% (2014) to 7.96% by Dec. 31, 2018.	FL SHOTS
3.1.2: Discourage inhaled nicotine use among children and adults	Objective A: Decrease current inhaled nicotine prevalence in youth age 11-17 from 17.6% (2014) to 11.2% (FL Youth Tobacco Survey) by December 31, 2018.	A: FYTS
	Objective B: Decrease percentage of Pinellas adults who are current smokers from 19.3% (2014) to 19% by Dec. 31, 2018.	B: BRFSS
3.1.3: Reduce rates of syphilis	Objective A: Reduce the rate per 100,000 of total early syphilis cases in Pinellas from 8.4 (2014) to 7.0 by Dec. 31, 2018. (PRISM)	FDOH Pinellas Disease Control
3.1.4: Promote environmental health	Objective A: Investigate 100% of reported foodborne illnesses within two business days of receiving notice.	FDOH Pinellas Disease Control

Strategic Issue Area: Effective Agency Processes

Goal 4.1: Establish a sustainable infrastructure, which includes a competent workforce, sustainable processes and effective use of technology, which supports all of the Department's core business functions

Strategies	Indicators	Source
4.1.1: Increase the number of communications products	Objective A: Write 9 articles for the local media on public health practices by Dec. 31, 2018.	FDOH Pinellas Public Information
4.1.2: Publish public health best practices in conferences	Objective A: Create 6 posters on public health best practices at conferences by Dec. 31, 2018.	FDOH Pinellas Public Info
4.1.3: Promote the use of Individual Development Plans for DOH- Pinellas employees (vs. completion of Learning Management System activities)	Objective A: Between 5-15% of DOH-Pinellas employees will have participated in one or more professional development activities on their Individual Development Plan (IDP) by Dec. 31, 2018.	FDOH Pinellas Human Resources

4.1.4: Increase opportunities for employee wellness at DOH-Pinellas	Objective A: Institute an employee wellness initiative by Dec. 31, 2018.	FDOH Pinellas HR
4.1.5: Ensure balanced operational budgets	Objective A: 100% of programs will operate within their annual operating budgets by Dec. 31, 2018. Objective B: Fully implement the operational plan for West Coast Human Resources Consortium at FDOH Pinellas by June 30, 2017.	A: FDOH Pinellas Finance & Accounting B: FDOH Pinellas HR
4.1.6: Promote a culture of Quality Improvement	Objective A: Implement 95% of Quality Improvement activities in the QI Plan by Dec. 31, 2018.	FDOH Pinellas Community Health & Performance Management
4.1.7: Improve community health via data-driven initiatives (CHA and CHIP)	Objective A: Produce a Community Health Assessment (CHA) for Pinellas County by December 31, 2017. Objective B: Produce a Community Health Improvement Plan (CHIP) that aligns with SHIP and convene with community partners a minimum of annually to assess CHIP progress by December 31, 2018.	FDOH Pinellas Community Health & Performance Management
Strategy 4.1.8: Provide and assess knowledge of cultural competency and health equity	Objective A: Provide a minimum of two trainings in cultural competency annually and complete CLAS assessment at least once by Dec. 31, 2018. Objective B: Improve the percentage of employees who feel administrators are interested in, and supportive of, cultural diversity within the organization from 76.7% to 85% (CLAS) by Dec. 31, 2018.	A: Training B: CLAS Survey

Strategic Issue Area: **Access to Care**

Goal 5.1: Provide equal access to appropriate health care services and providers

Strategies	Indicators	Source
5.1.1: Promote behavioral health screenings and referrals	Objective A: Increase the rate of primary care clients with a completed behavioral health assessment completed from 86% (2015) to 95% by Dec. 31, 2018.	FDOH Pinellas Clinical Health Services (HEDIS)
5.1.2: Promote early intervention and management of chronic diseases	Objective A: Reduce the rate of preventable hospitalizations among primary care clients by 10% by December 31, 2018.	FDOH Pinellas Clinical Health Services

5.1.3: Promote access to care in school-age children	Objective A: Increase the percentage of children age 12-19 on Medicaid with up-to-date well child visits from 58% (2015) to 65% by Dec. 31, 2018. (Amerigroup)	FDOH Clinical Health Services (Amerigroup)
5.1.4: Promote the dental program to school-aged children	Objective A: Increase the number of children served by the Pinellas County school-based sealant program from 4,000 (2016) to 5,500 by Dec. 31, 2018 (HMS).	FDOH Pinellas Dental (HMS)

Appendix A

The Florida Department of Health in Pinellas County Strategic Planning Participants

Dr. Ulyee Choe
DOH Pinellas Director

Gayle Guidash
Asst. CHD Director, Director- Disease Control & Health Protection

Ray Hensley
Director- Maternal and Child Health

Marisa Pfalzgraf
Director- Information Technology

Pervinder Birk
Director- Administrative Services

Elizabeth Smith
Executive Community Health Nursing Director
Director- Community Health and Performance Management

Melissa Van Bruggen
Director- Clinical Health Services

Jocelyn Howard
Accreditation Liaison, CHIP Lead

Sonja Davis
Healthiest Weight QI Lead, Health Services Manager

Barbara Sarver
WIC & Nutrition Manager, Florida Healthy Babies Initiative Lead

Nida Khan
ESS/ Client Fee Collection QI Lead, Research & Statistics Consultant

David Jewett
Planner, Health Equity Team Lead

Appendix B

Planning Summary

Florida Department of Health in Pinellas County's Strategy and Performance Improvement Leadership (SPIL) Team, made up of leadership, Quality Improvement Liaison, and planners, oversaw the development of the Strategic Plan.

The following is the Strategic Plan Schedule of Meetings:

MEETING DATE	MEETING TOPIC
Dec. 11, 2015	EMT/S PIL Reviewed state plan's strategic priority areas and goals, objectives, and strategies. Developed local objectives/strategies.
Jan. 7, 2016	SWOT Analysis
Jan. 22, 2016	EMT/OMT/S PIL Develop local strategic priority area: Access to Care and create strategies and objectives.
Feb. 5, 2016	Discuss and modify draft Agency Strategic Plan
Feb. 19, 2016	Discuss and modify draft Agency Strategic Plan
Mar. 4, 2016	Review strategic plan action plans created in prior month by PMC. Suggest edits/changes.
Mar. 18, 2016	Discuss and modify draft Agency Strategic Plan
Apr. 1, 2016	Receive and discuss final action plans and review for accuracy/completeness.
Apr. 15, 2016	Finalize and approve FDOH-Pinellas Strategic Plan

In preparation for the SWOT analysis, staff from DOH-Pinellas County summarized data from the Community Health Assessment, the Community Health Improvement Plan, the Employee Satisfaction Survey, and customer satisfaction data. Further, they looked at financial data, and they interviewed key stakeholders.

DOH-Pinellas County staff presented their environmental scan to the SPIL Team, who reviewed the findings and had a facilitated discussion of agency strengths, weaknesses, opportunities and threats (SWOT analysis) based on these findings. They included information management, communications, programs and services, budget (financial sustainability), and workforce development as agenda items for discussion in their SWOT meeting.

SPIL Team members then used the SWOT analysis and the agency mission, vision and values to choose strategic issue areas and agency goals. After a face-to-face meeting, members arrived at the final strategic issue areas: Healthy Moms and Babies, Long, Healthy Life, Emerging Health Threats, Effective Agency Processes, and Access to Care. Staff then worked with program managers and their staff to write and revise objectives for each goal area and strategy, which were then routed back to the SPIL Team for comment and approval.

Monitoring Summary

The SPIL Team is responsible for measuring, monitoring and reporting of progress on the goals and objectives of the Strategic Plan, the members of which will monitor the Strategic Plan through monthly meetings, where the Strategic Plan will be a standing agenda item. On a quarterly basis, the SPIL Team will review quarterly Strategic Plan Tracking Reports, showing progress toward goals, and annually, a Strategic Plan Progress Report, assessing progress toward reaching goals and objectives and achievements for the year. We will revise the Strategic Plan annually, based on an assessment of availability of resources and data, community readiness, the current progress and the alignment of goals.

Appendix C

Stakeholder Engagement

The Florida Department of Health in Pinellas County has been working diligently to maintain transparency throughout the Strategic planning process. We have engaged community stakeholders through numerous channels. These include cooperating with our partners in environmental scans and community health needs assessments. We have also openly shared and discussed our strategic plan with the Community Health Action Team (CHAT) and aligned our strategies to the FDOH State Strategic Plan as well as the Community Health Improvement Plan (CHIP), which was developed using the input of over 40 community partner organizations. Many of our action steps require community engagement and involvement to be successful and so our crucial partnership with the community and our stakeholders will continue and grow stronger throughout this process.

Appendix D

The following charts display our local strategic plan's alignment with the Community Health Improvement Plan (CHIP), the Quality Initiative Plan (QI Plan) and the Agency Strategic Plan.

Alignment

Strategic Issue Area: **Healthy Moms & Babies**

Objective	Baseline	Target	CHIP Alignment	QI Plan Alignment	Agency Strategic Plan Alignment	Due Date	Responsibility
Objective 1.1.1A: Reduce the three-year rolling average of black infant mortality rate from 13.1 (2012-2014) to 11.8 per 1,000 live births and reduce black-white infant mortality gap from 2.9 to less than 2.6 times higher or by 10% by Dec. 31, 2018.	13.1 per 1,000 2.9 Times higher	11.8 per 1,000 2.6 Times higher	Access to Care Goal 3	Florida Healthy Babies Initiative	ASP 1.1.1 SIP	12/31/2018	MCH/WIC
Objective 1.1.2A: Increase percentage of WIC clients who report ever breastfeeding from 75.3% (Q3 2015 WIC) to 77.4% by Sept. 30, 2018.	75.3%	77.4%	Access to Care Goal 3	Florida Healthy Babies Initiative	--	12/31/2018	MCH/WIC

Source of data for baseline measures: Florida Community Health Assessment Resource Tool Set (CHARTS), Florida Department of Health

Strategic Issue Area: Long, Healthy Life

Objective	Baseline	Target	CHIP Alignment	QI Plan Alignment	Agency Strategic Plan Alignment	Due Date	Responsibility
Objective 2.1.1A: Increase the percentage of children in grade 6 who are at a healthy weight from 71% (2014-2015 Local Annual School Health Mandatory Screening) to 73% by Dec. 31, 2018.	71%	73%	Health Promotion and Disease Prevention Goal 1	Healthiest Weight QI project	ASP 2.1.1	12/31/2018	School Health Svcs.
Objective 2.1.1B: Increase the percentage of adults in Pinellas who are at a healthy weight from 36.8% (2013 BRFSS) to 38% by Dec. 31, 2018.	36.8%	38%	Health Promotion and Disease Prevention Goal 1	Healthiest Weight QI project	ASP 2.1.1	12/31/2018	PICH
Objective 2.1.2A: Increase the amount of women who had an initial program pap test who were previously rarely or never screened from 35.1% to 40% by Dec. 31, 2018.	35.1%	40%	--	--	--	12/31/2018	Clinical Health Svcs.
Objective 2.1.3A: Reduce the annual number of newly diagnosed HIV infections in Pinellas from 278 (2014) to 261 overall and from 77(2014) to 72 in the black population by Dec. 31, 2018.	278/77	261/72	Health Promotion and Disease Prevention Goal 3	--	ASP 2.1.5	12/31/2018	Disease Control Prevention and HIV/AIDS

Objective 2.1.3B: Increase the proportion of ADAP clients with an undetectable viral load from 89% (2014) to 92% by Dec. 31, 2018.	89%	92%	Health Promotion and Disease Prevention Goal 3	--	ASP 2.1.5	12/31/2018	Disease Control Prevention and HIV/AIDS
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Strategic Issue Area: Readiness for Emerging Health Threats

Objective	Baseline	Target	CHIP Alignment	QI Plan Alignment	Agency Strategic Plan Alignment	Due Date	Responsibility
Objective 3.1.1A: Increase percent of those eligible for HPV vaccine and reported through FL Shots who have completed the 1st HPV shot from 6.5% (2014) to 7.96% by Dec. 31, 2018.	6.5%	7.96%	Health Promotion and Disease Prevention Goal 3	--	ASP 3.1.1	12/31/2018	Immunization Team
Objective 3.1.2A: Decrease current inhaled nicotine prevalence in youth age 11-17 from 17.6% (2014) to 11.2% (FL Youth Tobacco Survey) by Dec. 31, 2018.	17.6%	11.2%	Health Promotion and Disease Prevention Goal 2	--	ASP 3.1.4	12/31/2018	SWAT/Tobacco Prevention Specialist
Objective 3.1.2B: Decrease percentage of Pinellas adults who are current smokers from 19.3% (2014) to 19% by Dec. 31, 2018.	19.3%	19%	Health Promotion and Disease Prevention Goal 2	--	ASP 3.1.4	12/31/2018	Tobacco Prevention Specialist
Objective 3.1.3A: Reduce the rate per 100,000 of total early syphilis cases in Pinellas from 8.4 (2014) to 7.0 by Dec. 31, 2018. (PRISM)	8.4	7.0	Health Promotion and Disease Prevention Goal 3	--	--	12/31/2018	Disease Control

Objective 3.1.4A: Investigate 100% of reported foodborne illnesses within two business days of receiving notice.	92%	100%	Health Promotion and Disease Prevention Goal 3	--	--	12/31/2018	Environmental Health
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Strategic Issue Area: Effective Agency Processes

Objective	Baseline	Target	CHIP Alignment	QI Plan Alignment	Agency Strategic Plan Alignment	Due Date	Responsibility
Objective 4.1.1A: Write 9 articles for the local media on public health practices by Dec. 31, 2018.	0	9	--	--	ASP 4.1.1	12/31/2018	Public Information Officer
Objective 4.1.2A: Create 6 posters on public health best practices at conferences by Dec. 31, 2018.	0	6	--	--	ASP 4.1.5	12/31/2018	FDOH-P Staff Presenting
Objective 4.1.3 A: Between 5-15% of DOH-Pinellas employees will have participated in one or more professional development activities on their Individual Development Plan (IDP) by Dec. 31, 2018.	0%	5-15%	--	Employee Satisfaction	ASP 4.1.2	12/31/2018	Training, Employee Satisfaction Team
Objective 4.1.4 A: Institute an employee wellness initiative by Dec. 31, 2018.	--	--	--	--	--	12/31/2018	HR Liaison/ Wellness Committee
Objective 4.1.5 A: 100% of programs will operate within their annual operating budgets by Dec. 31, 2018.	100%	100%	--	--	ASP 4.1.3	12/31/2018	Budget Team/ Finance

Objective 4.1.5 B: Fully implement the operational plan for West Coast Human Resources Consortium at FDOH Pinellas by June 30, 2017.	--	--	--	--	ASP 4.1.3	12/31/2017	HR/ Vital Stats
Objective 4.1.6A: Implement 95% of Quality Improvement activities in the QI Plan by Dec. 31, 2018.	100%	95%	--	Agency QI Plan	--	12/31/2018	QI Liaison
Objective 4.1.7A: Produce a Community Health Assessment (CHA) for Pinellas County by Dec. 31, 2017.	--	--	--	--	--	12/31/2017	CHIP Coordinator
Objective 4.1.7B: Produce a Community Health Improvement Plan (CHIP) that aligns with SHIP and convene with community partners a minimum of annually to assess CHIP progress by Dec. 31, 2018.	--	--	--	--	--	12/31/2018	CHIP Coordinator
Objective 4.1.8A: Provide a minimum of two trainings in cultural competency annually and complete CLAS assessment at least once by Dec. 31, 2018.	0	2	Access to Care Goal 1	Health Equity Team	--	12/31/2018	Health Equity Lead
Objective 4.1.8B: Improve the percentage of employees who feel administrators are interested in, and supportive of, cultural diversity within the organization from 76.7% to 85% (CLAS) by Dec. 31, 2018.	76.7%	85%	Access to Care Goal 1	Health Equity Team	--	12/31/2018	Health Equity Lead

Strategic Issue Area: Access to Care

Objective	Baseline	Target	CHIP Alignment	QI Plan Alignment	Agency Strategic Plan Alignment	Due Date	Responsibility
Objective 5.1.1A: Increase the rate of DOH Pinellas primary care clients with a completed behavioral health assessment from 86% (2015) to 95% by Dec. 31, 2018.	86%	95%	Behavioral Health Goal 1	--	--	12/31/2018	Medical Services
Objective 5.1.2A: Reduce the rate of preventable hospitalizations among DOH Pinellas primary care clients by 10% by Dec. 31, 2018.	--	-10%	Access to Care Goal 1	--	--	12/31/2018	Medical Services
Objective A: Increase the percentage of children age 12-19 on Medicaid with up-to-date well child visits from 58% (2015) to 65% by Dec. 31, 2018. (Amerigroup)	58%	65%	Access to Care Goal 1	--	--	12/31/2018	SBHC
Objective 5.1.4A: Increase the number of children served by the Pinellas County school-based sealant program from 4,000 (2016) to 5,500 by Dec. 31, 2018 (HMS).	4,000	5,500	Access to Care Goal 1	--	--	12/31/2018	Dental

CHIP: <http://www.pinellaschat.com/chip/index.html>

FDOH ASP: http://pinellas.floridahealth.gov/programs-and-services/community-health-planning-and-statistics/data-and-reports/_documents/doh-pinellas-strategic-plan-2016-2018.pdf

Action Plan

STRATEGIC PRIORITY AREA: HEALTHY MOMS AND BABIES					
Goal 1.1: Reduce Infant Mortality					
Objective	Activity	Process Measure/Output	Timeframe	Responsible Parties	Outcomes
Strategy 1.1.1: Promote health equity in mothers and children					
Objective 1.1.1A: Reduce the three-year rolling average of black infant mortality rate from 13.1 (2012-2014) to 11.8 per 1,000 live births and reduce black-white infant mortality gap from 2.9 to less than 2.6 times higher or by 10% by Dec. 31, 2018.	Utilizing the guidelines of Healthy People 2020 and revised DOH TAGXXXX, increase the proportion of women delivering a live birth who discussed preconception/interconception health with a health care worker prior to pregnancy (MICH - 16.1)	Provide training to a minimum of 30 staff (MCH, WIC & Medical Services) on preconception/interconception script/curriculum each quarter.	7/1/2016 - 6/1/2017	Maternal Child Health (MCH); Information Technology (I.T.)	Increased number of women who report having had a preconception discussion during family planning visits; Enhanced public awareness in the community of the importance of preconception care services; Two (2) hospitals will have a work plan and completing activities towards receiving a "Baby Friendly" designation
	Participate in the Florida Department of Health - Florida Healthy Babies Initiative.	Utilizing the FHB Template, complete an environmental scan of local initiatives around infant mortality and/or social determinants of health that address safe sleep, breastfeeding, protective factors and other key issues identified from data analysis.	4/20/16	MCH; WIC; Vital Statistics; Healthy Start Coalition; Local Birthing Facilities	
	Assist with facilitating the FHB community events to gain input about what's needed to reverse current trends in infant mortality rates and to obtain buy-in regarding activities.	Develop additional activities based on the input from the FHB community events.	4/1/2016 - 6/30/2017	MCH; WIC; Child Care Licensing;	
	Promote the benefits of receiving a "Baby Friendly" designation to area hospitals.	1 Pinellas County hospital will complete the FHB Self-Assessment.	3/1/2016 - 9/30/2016	WIC & Nutrition	
Strategy 1.1.2: Promote breastfeeding					
Objective 1.1.2A: Increase percentage of WIC clients who report ever breastfeeding from 75.3% (Q3 2015 WIC) to 77.4% by Sept. 30, 2018.	Participate in additional training to improve the quality of breastfeeding education provided to pregnant mothers enrolled in the MCH home visiting program.	5 additional MCH home visiting caseworkers will attend a Certified Lactation Consultant training.	7/1/2016 - 12/31/2017	Maternal Child Health	Enhanced breastfeeding education in MCH home visiting program; 1 Local hospital will be completing activities related to obtaining a Breastfeeding Friendly designation; Breastfeeding promotion messages will be adopted by local media outlets.
	Promote and report breastfeeding education among home visiting clients.	60% of pregnant women enrolled in Home visiting programs will receive at least 1 breastfeeding education session (using encounter codes).	3/1/2016 - 9/30/2017	Maternal Child Health/IT	

STRATEGIC PRIORITY AREA: LONG, HEALTHY LIFE

Goal 2.1: Increase Healthy Life Expectancy

Objective	Activity	Process Measure/Output	Timeframe	Responsible Parties	Outcomes	
Strategy 2.1.1: Promote the healthy weight of children and adults						
Objective 2.1.1A: Increase the percentage of children in grade 6 who are at a healthy weight from 71% (2014-2015 Local Annual School Health Mandatory Screening) to 73% by Dec. 31, 2018.	Ensure mandatory screening of BMI of 6th graders is completed.	Screen at least 95% of 6th graders in public schools annually	6/30/2018	School Health Services	Increase in percent of 6th graders at a normal weight, and decrease in percent of 6th graders considered to be obese.	
	Increase the number of locations offering the Fun Bites healthy concession program	Increase number of locations from 12 to 15	12/31/2018	PICH		
	Conduct Healthy Pinellas Consortium meeting	Ensure: 4 meetings annually & 15 unique participating partners annually	12/31/2018	PICH/ Division of Community Health		
	Assist municipalities in being designated as Healthy Weight Community Champions-a recognition program of the Surgeon General	6 municipalities recognized annually	12/31/2018			
Objective 2.1.1B: Increase the percentage of adults in Pinellas who are at a healthy weight from 36.8% (2013 BRFSS) to 38% by Dec. 31, 2018.	Increase the number of outdoor fitness equipment stations (fitness zones) in city and county parks.	Increase number of locations from 12 to 14	9/30/2017	PICH	Increase in adults in Pinellas County who are at a healthy weight	
Strategy 2.1.2: Reduce cancer incidence and increase cancer survival						
Objective 2.1.2A: Increase the amount of women who had an initial program pap test who were previously rarely or never screened from 35.1% to 40% by Dec. 31, 2018.	Identify barriers to obtaining paps	Develop survey for women ages 21-50 to be distributed to each Center.	12/31/2016	Clinical Health Svcs.	Increase in percentage of women obtaining their initial pap smears.	
	Identify locations for women to receive annual exams.	Create a list of locations for clients to access low cost annual exams in 5 community locations	12/31/2016			

	Increase education on paps and cervical cancer in all centers	Identify current available literature. Create information poster/storyboard for 5 community locations	12/31/2016	
	Identify current clients needing pap smears.	Develop HMS Report that identifies female client ages 21-55 that have not had annual exam within 3 years.	7/29/2016	

Strategy 2.1.3: Reduce HIV Incidence					
Objective 2.1.3A: Reduce the annual number of newly diagnosed HIV infections in Pinellas from 278 (2014) to 261 overall and from 77(2014) to 72 in the black population by Dec. 31, 2018.	Conduct targeted outreach (traditional face-to-face or Internet-based/virtual) to populations and communities most heavily impacted by HIV/STDs in Greater South/Central St. Petersburg	Conduct 4 outreaches annually and document outreach contacts and condoms, brochures, and prevention items distributed during outreach on monthly reporting forms	Monthly through 12/31/2018	Disease Control & HIV/AIDS	Number of new HIV infections will decrease, especially in the black population; special emphasis will be placed on reducing new HIV infections in young black men who have sex with men
	Identify and increase the number of medical providers offering PrEP to High Risk HIV- partners of HIV+ individuals	Creation of provider directory, add at least one provider	12/31/2018		
	Through voluntary counseling and testing, increase the proportion of people who know their HIV status.	Complete a minimum of 456 HIV tests per quarter, and report results of each test with demographics	Quarterly through 12/31/2018		
Objective 2.1.3B: Increase the proportion of ADAP clients with an undetectable viral load from 89% (2014) to 92% by Dec. 31, 2018.	Implement new ADAP database that will automate medication ordering and refill process	Report time from order to medication delivery and pickup	9/30/2016 and report quarterly afterward	Disease Control & HIV/AIDS	Reduce HIV transmission from ADAP clients to their partners; reduce community viral load by reducing viral load in ADAP patients;
	Open satellite ADAP office at largest primary HIV care provider site in Pinellas county to deliver medication and record viral loads	Report % of clients picking up at new site and viral loads of those clients	5/30/2016 and report quarterly afterward		
	Implement email and text message notification for ADAP recertification and medication refills	Report number of clients completing ADAP recertification and picking up medications timely	Quarterly after implemented		

STRATEGIC PRIORITY AREA: READINESS FOR EMERGING HEALTH THREATS					
Goal 3.1: Demonstrate readiness for emerging health threats					
Objective	Activity	Process Measure/Output	Timeframe	Responsible Parties	Outcomes
Strategy 3.1.1: Promote vaccination for children and adults					
Objective 3.1.1A: Increase percent of those eligible for HPV vaccine and reported through FL Shots who have completed the 1st HPV shot from 6.5% (2014) to 7.96% by Dec. 31, 2018.	Coordinate committee of Stakeholders that will work with DOH-Pinellas to develop a county wide action plan.	Roster of Stakeholders that have confirmed participation.	1/1/2016 - 3/31/2016	Immunization Outreach Team	Finalized countywide action plan that will provide specific goals, objectives and activities for increasing HPV vaccination rates in Pinellas.
	Convene Stakeholders to discuss action plan specifics to include: vision, goals, objectives, activities.	Hold 4-5 meetings and document meeting dates, agendas, and minutes.	3/31/2016 - 6/30/2016		
	Create a countywide action plan.	Publish written action plan to FDOH Pinellas website.	3/1/2016 - 6/30/2016		
Strategy 3.1.2: Discourage inhaled nicotine use among children and adults					
Objective 3.1.2A: Decrease current inhaled nicotine prevalence in youth age 11-17 from 17.6% (2014) to 11.2% (FL Youth Tobacco Survey) by Dec. 31, 2018.	Establish or maintain a Students Working Against Tobacco Chapter at Pinellas Middle and/or High Schools	Documentation of the creation and/or maintenance of ten SWAT clubs county wide.	On-Going through 12/31/2018	SWAT Coordinator	Decrease in inhaled nicotine prevalence in youth by 6.4%
	Host an annual regional Youth Summit training session to educate SWAT youth.	# of SWAT youth in attendance	7/1/2018		
	SWAT clubs will educate peers on the dangers of tobacco use quarterly.	# of educational SWAT activities by at least 5 clubs	On-Going through 12/31/2018		
Objective 3.1.2B: Decrease percentage of Pinellas adults who are current smokers from 19.3% (2014) to 19% by Dec. 31, 2018.	Conduct Tobacco Free Coalition meetings quarterly	# of meetings # of attendees	On-Going quarterly through 12/31/2018	Tobacco Prevention Specialist	Decrease the percentage of adult smokers by .3%
	Distribute AHEC Smoking Cessation class lists to partners and clinics	Documentation of monthly communication with partners and clinic managers	On-Going monthly through 12/31/2018		
	Establish one workplace tobacco free policy annually	# of new employer meetings, # of workplace policies passed	12/31/18		
Strategy 3.1.3: Reduce rates of syphilis					
Objective 3.1.3A: Reduce the rate per 100,000 of total early syphilis cases in Pinellas from 8.4 (2014) to 7.0 by Dec. 31, 2018. (PRISM)	Offer testing to individuals that live in high risk areas within Pinellas county.	25 tests per month	4/30/2016 - Ongoing	Disease Control	Early Syphilis cases will decrease by 1.4 per 100,000 with more testing in high risk areas and continued education in these communities and with providers.
	Provide education to small groups to enhance knowledge of STD's	2 presentations per month @high schools, churches, Jail and other group facilities.	4/30/2016-On going		

	Will identify providers in Pinellas county and educate them on the importance of reporting, diagnosis and timeliness of treatment.	Speak to at least 1 private provider monthly about reporting, timeliness of treatment, and treatment guideline update.	4/30/2016- On going		
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Strategy 3.1.4: Promote environmental health

Objective 3.1.4A: Investigate 100% of reported foodborne illnesses within two business days of receiving notice.	Provide a knowledgeable workforce capable of investigating suspected foodborne illness complaints.	Train 100% of certified food sanitation specialists in the process of investigating foodborne illnesses.	12/31/17	Environmental Health Trainer	100% of reported foodborne illnesses will be investigated within two business days of receiving notice.
	Investigate 92% of reported foodborne illness complaints by the end of 2017.	Trained certified food staff will investigate at least 92% of all reported foodborne illness complaints within two business days of receiving notice.	12/31/17	All EH Supervisors and trained certified food sanitation specialists.	
	Investigate 100% of reported foodborne illness complaints by the end of 2018.	Trained certified food staff will investigate 100% of all reported foodborne illness complaints within two business days of receiving notice.	12/31/18	All EH Supervisors and trained certified food sanitation specialists.	

STRATEGIC PRIORITY AREA: EFFECTIVE AGENCY PROCESSES

Goal 4.1: Establish a sustainable infrastructure, which includes a competent workforce, sustainable processes and effective use of technology, which supports all of the Department's core business functions

Objective	Activity	Process Measure/Output	Timeframe	Responsible Parties	Outcomes
Strategy 4.1.1: Increase the number of communications products					
Objective A: Write 9 articles for the local media on public health practices by Dec. 31, 2018.	Create a framework to research, write, submit and monitor public-health articles that increase the community's understanding of core functions.	Create an editorial calendar that includes observances and important agency dates from March 1, 2016 to Dec. 31, 2018.	4/1/2016	Public Info Officer	Number of articles on public-health functions published in local media increased from 0 to 9 by 12/31/2018.
	Identify suitable markets for articles.	Create a list of markets and their contacts for submissions	7/1/2016		
	Write, submit and monitor publication status on a quarterly basis. Identify subject-matter experts in agency to serve as sources or bylines.	Work with subject-matter experts to offer technical assistance. Create a master list of article submissions.	Quarterly schedule from 7/1/2016-12/31/2016		
Strategy 4.1.2: Publish public health best practices in conferences					
Objective A: Create 6 posters on public health best practices at conferences by Dec. 31, 2018.	A policy or procedure for creating posters exists and is accessible to staff.	Create a policy or procedure for creating posters and share with all DOH-Pinellas staff.	12/1/2016	FDOH Staff Presenting/ Public Info.	Creation of 6 posters at conferences
	Promote and track submission of conference posters by DOH-Pinellas programs.	Create a plan for encouraging and documenting poster submission, including internal opportunities for sharing best practices.	12/1/2017		

Strategy 4.1.3: Promote the use of Individual Development Plans for DOH- Pinellas employees (vs. completion of Learning Management System activities)					
Objective A: Between 5-15% of DOH-Pinellas employees will have participated in one or more professional development activities on their Individual Development Plan (IDP) by Dec. 31, 2018.	Promote an environment of learning, research, teamwork, communication and positive employee morale.	Creation of method to access training on demand. Creation of 10 new professional development trainings identified on 8/13/2015 Faculty Development Day. Coordinate 1 Employee Development Day.	12/30/2016	Training & HR Liaison	Guidance and support for employees interested in leadership development. Improved morale
	Create a template for an Individual Development Plan for DOH-Pinellas employees.	An Individual Development Plan - approved by SPIL	10/31/2016	Employee Satisfaction Team	
	Create a process for implementing the IDP	Process map showing actual steps leading to implementation and the responsible parties involved	3/31/2017	Employee Satisfaction Team	
	Provide training to the responsible parties on use and implementation of the IDP	Training provided to at least 70% of the identified audience (Managers and employees who want an IDP)	5/31/2017	Employee Satisfaction Team	

	Create a monitoring mechanism for tracking the number for professional development activities completed by employees with IDP on TRAIN	Generate a report on participants completing professional development activities within the specified time period	6/30/2017	Training & HR Liaison	
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Strategy 4.1.4: Increase opportunities for employee wellness at DOH-Pinellas					
Objective A: Institute an employee wellness initiative by Dec. 31, 2018.	Create links on the DOH-Pinellas intranet site with tools for healthy options.	Minimum of two links, updated quarterly	5/1/2016 - 12/31/2016	HR Liaison	Create an employee wellness resource and training program by December, 2018.
	Offer staff training opportunities for Wellness/Healthy Choices	Minimum of 3 trainings available every six months	1/1/2017 - 12/31/2017	Training	

	Create a Wellness Employee Committee to organize Wellness Activities for the agency	Meetings planned quarterly, with 4 wellness activities a year	1/1/2018 - 12/31/2018	Wellness Committee	
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Strategy 4.1.5: Ensure balanced operational budgets

Objective A: 100% of programs will operate within their annual operating budgets by Dec. 31, 2018.	Program budgets for the next fiscal year will be entered in the FIRS Budget Module based on allocation, remaining grant/contract funding, or estimated fees by the L4 Managers, reviewed and approved by budget staff, division directors, and the CHD Director.	100% of program operational budgets completed in the FIRS Budget Module by Level 4 and OCA do not exceed their total annual allocation (including grants/contracts that cross fiscal years) and/or combination of annual allocation and current cash balance.	4/1/2016 - 6/10/2016 and annually	Budget / Finance	100% of programs will have a zero or positive budget balance at the end of the fiscal (17/18) year after all final transactions have posted in FLAIR.
	Divisions will have regular meetings with budget staff to review revenue and expenditure actuals and compare with current budget estimates.	Each program will have a minimum of 7 meetings annually.	8/1/2016 - 6/30/2017 and annually		
	Budget staff and program managers will research variances between budget estimates and actuals and report significant adjustments quarterly for corrective action if necessary.	A minimum of 4 reports per fiscal year.	7/1/2016- 6/30/2017 and annually		
	Budget staff will monitor Sch. C State and Federal OCA cash balances in FIRS throughout the fiscal year.	100% of State GR and Other State Funds OCA cash balances on Sch. C will be ≥ 0 , and 100% of Federal Funds OCA cash balances on Sch. C will be zero before or at 60 days after the end of their grant period.	7/1/2016- 6/30/2017 and annually		
Objective B: Fully implement the operational plan for West Coast Human Resources Consortium at FDOH Pinellas by June 30, 2017.	County HR to transfer their personnel files to the Pinellas HR Hub	Manatee County HR implemented to the West Coast HR Hub	6/1/2016 - 8/1/2016	Vital Stats	100% of the remaining County HR offices to be fully implemented to the West Coast Human Resources Consortium at the Pinellas County Health Department by June 30, 2017.
		Hernando County HR implemented to the West Coast HR Hub	4/2/2016 - 5/1/2016		
	County HR to hire and train their own County HR Liaison	Hillsborough County HR implemented to the West Coast HR Hub	5/2/2016 - 8/1/2016		
		Sumter County HR implemented to the West Coast HR Hub	8/2/2016 - 10/1/2016		

Strategy 4.1.6: Promote a culture of Quality Improvement					
Objective A: Implement 95% of Quality Improvement activities in the QI Plan by Dec. 31, 2018.	Provide QI activity updates to SPIL, EMT, OMT, PMC(incl. 1.progress towards communication of plans, 2. status of QI projects, 3. practices resulting in improved performance & quality of community engagement)	Provide QI updates during at least 6 SPIL meetings: 1. Communication of Plans - QI Liaison, 2. QI Projects Status-Project Leads, 3. Improved performance & community engagement members.	1/1/2016-12/31/2018	QI Liaison	Staff will be more engaged in QI activities and trained to assist. Overall, 95% of quality improvement activities in the QI plans should be completed by Dec. 31st, 2018. New QI plans will be created annually and the department will be able to periodically assess achievement toward QI initiatives.
	Coordination of trainings identified in QI plan annually	Have at least one QI training session annually (for PMC, EMT, OMT, SPIL) on QI(e.g. how to incorporate QI in staff meetings for 2016) with at least 70% of identified staff present.	1/1/2016-12/31/2018		
	Progress on local QI project/projects reported quarterly to PMC	Every quarter	4/1/2016-12/31/2018		
	Reach out to different avenues(along with PMC, SPIL, Consortia, Program Councils, State Office monthly Performance) to share results & practices resulting in improved results	1 storyboard displaying results, 1 news article in SUNTIMES, 1 community meeting or event, 1 external/internal award nomination.	1/1/2016-12/31/2018		
	Progress on SPIL provided to State(meeting minutes& scorecard)	Provide 10 SPIL meeting minutes annually to the state.	1/1/2016-12/31/2018		
	Evaluate & Create a new QI plan annually	Create a new QI plan for the 2016-2017 and 2017-2018 Fiscal Years.	1/1/2016-12/31/2018		
	Agency-wide audits and quality assurance activities are conducted quarterly.	Minimum of 90% achieved overall on clinical documentation audits.	1/1/2016-12/31/2018	QA Lead	

Strategy 4.1.7: Improve community health via data-driven initiatives (CHA and CHIP)					
Objective A: Produce a Community Health Assessment (CHA) for Pinellas County by Dec. 31, 2017.	Produce and distribute a Community Health Assessment to DOH partners and the Pinellas community.	CHA is available via DOH-Pinellas website and distributed to the community via a minimum of two methods of communication.	1/1/2016 - 12/31/2016	CHPM/ CHIP Coordinator	Completed CHA
Objective B: Produce a Community Health Improvement Plan (CHIP) that aligns with SHIP and convene with community partners a minimum of annually to assess CHIP progress by Dec. 31, 2018.	Produce and distribute a Community Health Improvement Plan to DOH partners and the Pinellas community.	CHIP is available via DOH-Pinellas website and distributed to the community via a minimum of two methods of communication.	7/1/2016-12/31/2017	CHPM/ CHIP Coordinator	2017-2021 CHIP Action Plan; Completed CHIP Annual Update; Completed/Updated Monitoring and Evaluation Plan

	Regularly collect data and information to measure CHIP progress	Collect progress on CHIP measures and objectives at least three quarters per year, and share updates with CHAT at least once per year.	4/1/2015 - 12/31/2018	CHPM/ CHIP Coordinator
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Strategy 4.1.8: Provide and assess knowledge of cultural competency and health equity.					
Objective A: Provide a minimum of two trainings in cultural competency annually and complete CLAS assessment at least once by Dec. 31, 2018.	Coordinate two training opportunities annually through the Health Equity Team.	Minimum of two trainings in health equity, disparity, or cultural competence per calendar year (total 6 minimum). At least one facilitator must be from outside the agency.	1/1/2016-12/31/2018	Health Equity Team	Through training and education, the FDOH Pinellas employees will have a deeper understanding of health equity and the health disparities our clients are challenged with. Employees will also understand the value FDOH Pinellas places on cultural and linguistic diversity and equity.
	Provide CLAS survey every 3 years to assess changing perceptions of cultural and linguistic competence beginning in 2016	CLAS survey completed by end of calendar year 2016.	1/1/2016-12/31/2018		
	Hold at least 10 Health Equity Team meetings annually to ensure effective creation and delivery of training	Number of Health Equity meetings annually (10 minimum)	1/1/2016-12/31/2018		
Objective B: Improve the percentage of employees who feel administrators are interested in, and supportive of, cultural diversity within the organization from 76.7% to 85% (CLAS) by Dec. 31, 2018.	Create a process for creating and coordinating cultural activities and celebrations	Health Equity Team creates a format for requesting approval for cultural celebrations and activities	1/1/2016-12/31/2018	Health Equity Team	Through training and education, the FDOH Pinellas employees will have a deeper understanding of health equity and the health disparities our clients are challenged with. Employees will also understand the value FDOH Pinellas places on cultural and linguistic diversity and equity.
	Create a small library collection of cultural DVDs, CDs, and books for training purposes	Contribute materials to a library used for training employees and create a log sheet for materials	1/1/2016-12/31/2018		
	Contribute monthly articles to the Sun Times regarding Health Equity	At least ten months annually contribute health equity article for internal employees	1/1/2016-12/31/2018		

STRATEGIC PRIORITY AREA: ACCESS TO CARE					
Goal 5.1: Provide equal access to appropriate health care services and providers					
Objective	Activity	Process Measure	Timeframe	Responsible Parties	Outcomes
Strategy 5.1.1: Promote behavioral health screenings and referrals					

Objective 5.1.1A: Increase the rate of DOH Pinellas primary care clients with a completed behavioral health assessment from 86% (2015) to 95% by Dec. 31, 2018.	Create a report for real time tracking of completed behavioral health assessments by medical home.	Behavioral health assessment tracking report available to 100% of medical homes.	4/1/2016-6/30/2016	IT	Increased monitoring for completed behavioral health assessments; Improved rate of behavioral health assessments completed at the initial visit.
	Identify barriers to getting patients to complete a behavioral health assessment.	Survey completed by 100% of medical homes.	5/1/2016 - 6/30/2016	Medical Services	
	Review survey results and identify process improvements.	Standard Operating Procedure for behavioral health assessment and referral to treatment implemented in 100% of medical homes.	7/1/2016-12/31/2016	Medical Services	

Strategy 5.1.2: Promote early intervention and management of chronic diseases

Objective 5.1.2A: Reduce the rate of preventable hospitalizations among DOH Pinellas primary care clients by 10% by Dec. 31, 2018.	Collaborate with Pinellas County Human Services to gather data on preventable hospitalizations among primary care clients.	Baseline rate of annual preventable hospitalizations among primary care clients established.	4/1/2016-6/30/2016	Medical Services	Increased monitoring for preventable hospitalizations
	Analyze data on preventable hospitalizations among primary care clients.	Top three primary diagnoses for preventable hospitalizations identified by site/zip code.	7/1/2016-12/31/16	Medical Services	
	Use data analysis and chart review to identify interventions to address preventable hospitalizations.	A minimum of 3 activities for 2017/2018 developed to address preventable hospitalizations.	7/1/2016 - 12/31/2016	Medical Services	

Strategy 5.1.3: Promote access to care in school-age children

Objective A: Increase the percentage of children age 12-19 on Medicaid with up-to-date well child visits from 58% (2015) to 65% by Dec. 31, 2018. (Amerigroup)	Partner with Amerigroup to identify adolescents currently serviced by the school based health clinics and the Tarpon Springs and Clearwater Health Departments without a well child visit.	75% of Amerigroup members missing a well child visit are contacted for follow up.	9/1/2016 - 12/31/2016	SBHC	Improved process for identifying children without an up-to-date well child visit
	Identify children accessing health department locations for episodic or acute care without a well child visit.	Status of well child visit is documented a minimum of 75% of the time.	6/1/2016 - 12/31/2018		
	Train providers to accurately code and document well child visits incorporating Bright Futures guidelines.	90% of pediatric providers complete a coding and documentation related training.	07/01/2016 - 06/30/2017		

Strategy 5.1.4: Promote the dental program to school-aged children

Objective 5.1.4A: Increase the number of children served by the Pinellas County school based sealant program from 4,000 (2016) to 5,500 by Dec. 31, 2018 (HMS).	Collaborate with community partners to identify resources and opportunities to increase participation in the school based sealant program.	A minimum of two new activities developed to increase participation.	4/1/2016-12/31/2016	Dental	Increased participation by students at schools currently served by the school-based sealant program; Increase in schools served by the school based sealant program
	Expand the reach of the school based sealant hygiene team to additional Title I schools.	A minimum of one new Pinellas school served per year.	7/1/2016-12/31/2018	Dental	

Appendix E

Glossary

Baseline Data

Existing data that show current level of the indicator you are seeking to improve. Baseline data are used to determine the quantitative level for success and indicates how much change will occur if the desired outcome is achieved.

Goal

Long-range outcome statements that are broad enough to guide the agency's programs, administrative, financial and governance functions (Allison & Kaye, 2005).

Objective

Short to intermediate outcome statements that are specifically tied to the strategy and goal. Objectives are clear and measurable.

Measure of change, in what, by whom, by when

Strategy

The approach you take to achieve a goal.

SWOT Analysis

A structured planning method used to evaluate the strengths, weaknesses, opportunities and threats involved in your agency.

- **Strengths:** characteristics of your agency that give it an advantage.
- **Weaknesses:** characteristics that place the agency at a disadvantage.
- **Opportunities:** outside elements that the agency could use to its advantage.
- **Threats:** elements in the environment that could cause trouble for the agency.

Target

Measurable and time specific target for achieving objectives.

EMT

Executive Management Team

OMT

Operation Management Team

PMC

Performance Management Council

SPIL Team

Strategy and Performance Improvement Leadership Team

