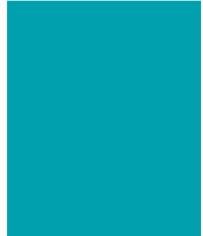


Florida Department of Health in
Holmes/Washington
Strategic Plan 2016-2018



Rick Scott

GOVERNOR

John H. Armstrong, MD, FACS

STATE SURGEON GENERAL AND
SECRETARY OF HEALTH

Karen Johnson, A.R.N.P.

HOLMES/WASHINGTON COUNTY
HEALTH OFFICER/ADMINISTRATOR

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Florida Department of Health in Holmes/Washington Counties

602 Scenic Circle, Bonifay

1338 South Boulevard, Chipley

<http://holmes.floridahealth.gov/index.html>

<http://washington.floridahealth.gov/index.html>

Mission:

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



Rick Scott
Governor

John H. Armstrong, MD, FACS
State Surgeon General & Secretary

Vision: To be the **Healthiest State** in the Nation

November 20, 2015

Dear Residents of Holmes and Washington Counties:

Strategic planning is a management tool used to determine where an organization is going over the next several years, how it's going to get there, and how it will determine its success. It is an organization's process of defining its direction and making decisions on allocating its resources, including its capital and people. Strategic planning is a step by step process with definite objectives and end products that can be implemented and evaluated. Very simply, it is a process by which we look into the future, paint a picture of that future based on current trends, and develop a plan to meet the challenges and opportunities that will affect us.

Our Strategic Plan starts with a focus on our organization's mission, vision, and values. It then determines goals that are critical to achieve the mission. Finally, it incorporates objectives to achieve the goals that articulate measurable results with timeframes for programs to accomplish. In order to develop and update our plan, we have to keep answering three key questions:

- "What do we do?"
- "For whom do we do it?"
- "How do we excel?"

This Strategic Plan charts a definite course based on strong indicators of what the public health environment will be like in the next three years. Our indicators include census demographic statistics, economic indicators, government policies, health status indicators, and technological advances. Some of the trends identified by these indicators are potential opportunities, some potential threats, and some are both. Examining the possibilities and formulating strategies to meet the challenges help our organization take full advantage of opportunities and minimize threats. In short, we take control of the future. We can use our energies and resources more effectively and conduct our business more successfully, despite changes in the environment.

Sincerely,

Karen Johnson, A.R.N.P.
Administrator

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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?

Innovation: We search for creative solutions and manage resources wisely.

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

Accountability: We perform with integrity & respect.

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

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

Executive Summary

The Florida Department of Health (FDOH) in Holmes and Washington Counties initiated a new strategic planning process in September 2015. The process involved numerous internal stakeholders including senior leadership, program managers, and a dedicated Strategic Planning Committee. External stakeholders were also engaged in the planning process through multiple channels that included the local Healthy Holmes Task Force, Washington Community Health Improvement Partnership, and our customers.

FDOH-Holmes/Washington approached the strategic planning process with a number of objectives in mind, including: focusing efforts on core public health functions; thoroughly examining our strengths, weaknesses, threats, and opportunities for improvement; implementing and linking health improvement planning at state and local levels; aligning our priorities with those in the states strategic plan; and ensuring the provision of essential public health services.

FDOH-Holmes/Washington 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. Quarterly monitoring will take place (see appendix B). The FDOH-Holmes/Washington 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 public health. Our Strategic Plan is intended to position FDOH-Holmes/Washington to operate as a sustainable local health office within Florida's integrated public health system, under the current economic environment and to give our customers high quality public health services.

Our strategic planning process resulted in identifying four strategic issue priorities. These strategic priorities represent the synthesis and integration of information, data, opinions, perceptions, and issues examined by the FDOH-Holmes/Washington Strategic Planning Committee. FDOH-Holmes/Washington's strategic issue priorities are:

1. Health Promotion and Protection
2. Service to Customers and Community
3. Workforce-Staff Training and Development
4. Business and Finance

These priorities guided 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.

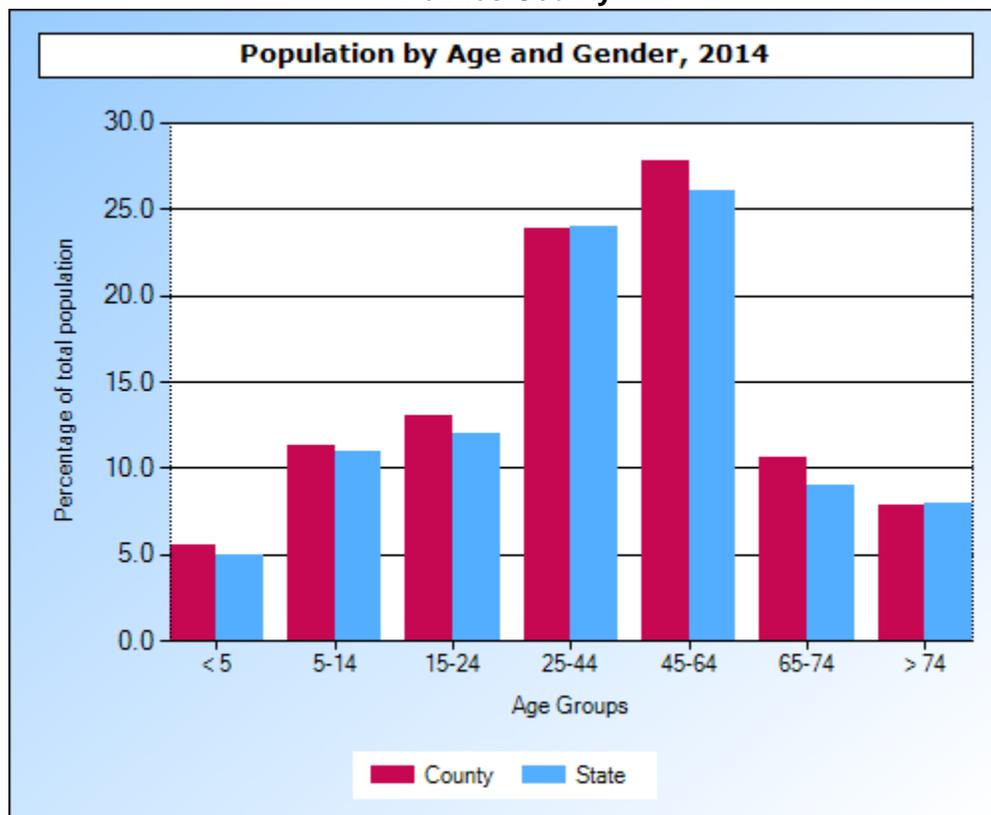
The over-arching goal of public health is to protect and improve the health of communities through education, promotion of healthy lifestyles, and research for disease and injury prevention. Through research, surveillance, and data analysis, we develop programs and policies that protect the health of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

Demographics

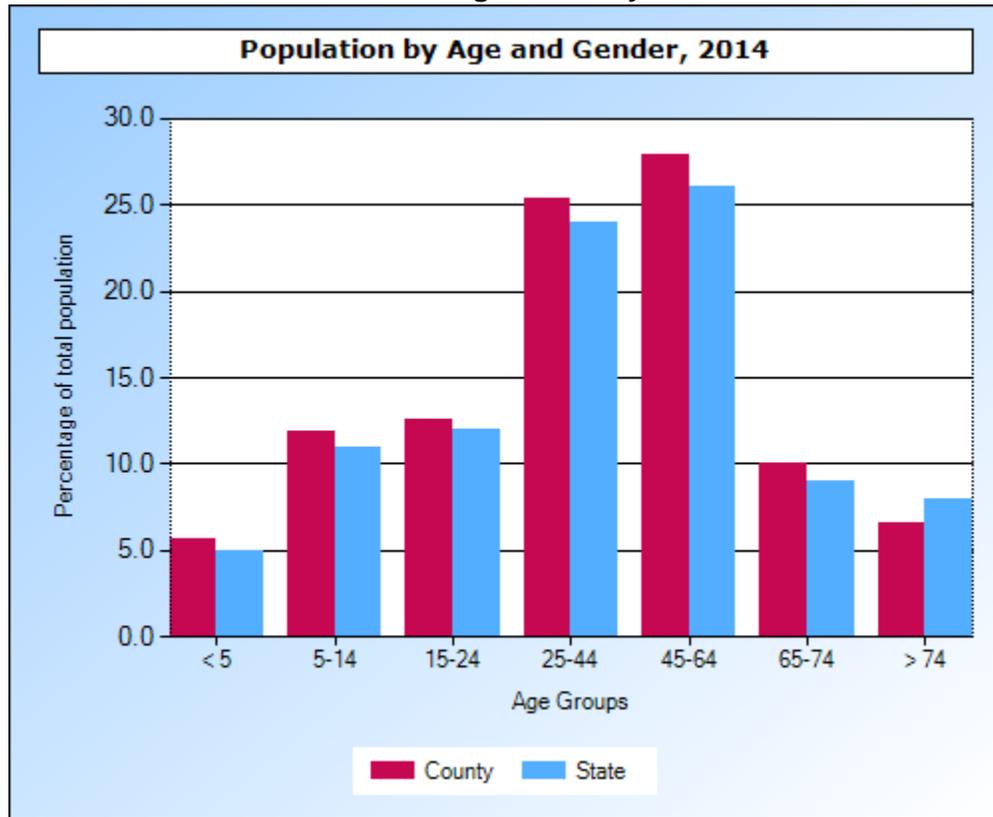
The combined population served by FDOH Holmes/Washington is 44,731 with Washington slightly larger by having 24,777 and Holmes 19,954.

Where we live influences our health. Demographic, socioeconomic, and environmental factors create unique community health service needs.

**Population by Age and Gender
Holmes County**



Population by Age and Gender Washington County



Data Source: The Florida Legislature, Office of Economic and Demographic Research.

Population by Race Holmes County

Race	Total Number	Total Percentage
White	18,082	90.0
Black or African American	1,289	6.4
Other	712	3.5
Hispanic or Latino	542	2.7
Non-Hispanic	19,541	97.3

Data Source: The Florida Legislature, Office of Economic and Demographic Research.

**Population by Race
Washington County**

Race	Total Number	Total Percentage
White	20,365	81.7
Black or African American	3,606	14.5
Other	954	3.8
Hispanic or Latino	735	2.9
Non-Hispanic	24,190	97.1

Data Source: The Florida Legislature, Office of Economic and Demographic Research.

**Socio-Economic Indicators
Holmes County**

Percent of total population below poverty level	23.8
Percent of families below poverty level	10.2
Percent of population under 18 below poverty level	34.0
Percent of civilian labor force unemployed	14.7
Median household income	\$44,772
Population 5+ that speak English less than very well	5.8
Median age	49.6

Data Source: US Bureau of the Census, American Community Survey

**Socio-Economic Indicators
Washington County**

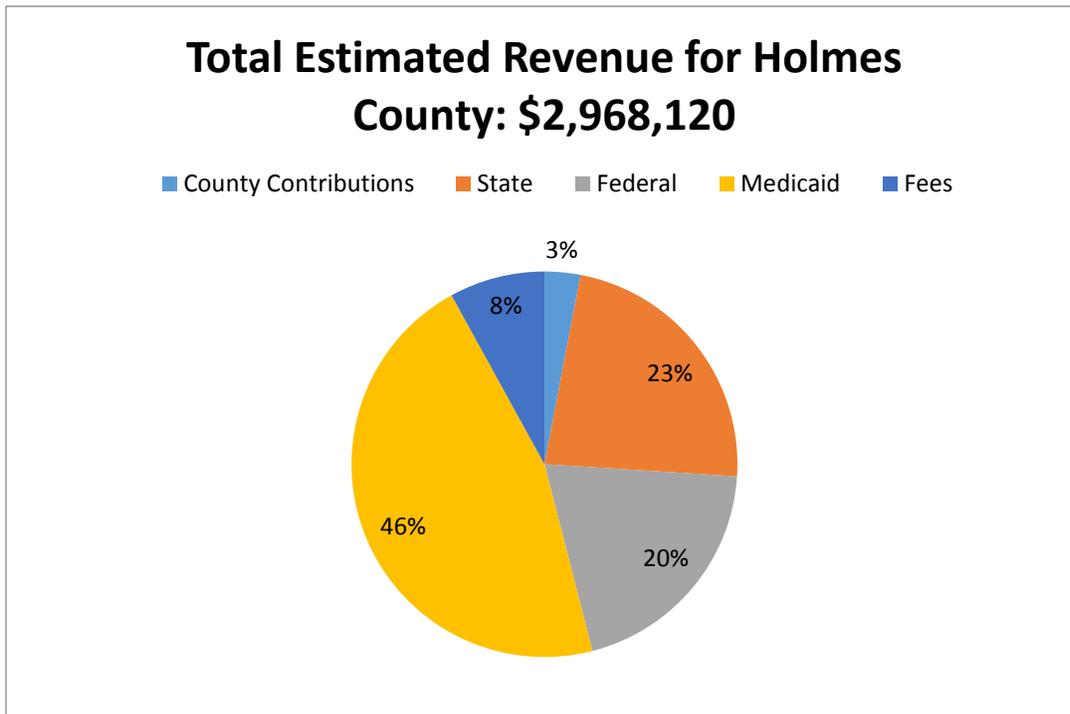
Percent of total population below poverty level	20.1
Percent of families below poverty level	13.8
Percent of population under 18 below poverty level	28.7
Percent of civilian labor force unemployed	13.5
Median household income	\$38,501
Population 5+ that speak English less than very well	1.5
Median age	40.5

Background and Overview

Budget and Revenue

Florida Department of Health in Holmes and Washington Counties financial resources are provided through multiple sources. These include fees, grants, and budget allocations from the County, State and Federal governments. Some of the changes affecting our services and programs include the advent of Statewide Managed Medicaid, state and federal cuts to the Florida Department of Health in Holmes and Washington Counties.

**The Florida Department of Health in Holmes County
Estimated Revenue Percentage by Source
Fiscal Year 2015-2016**

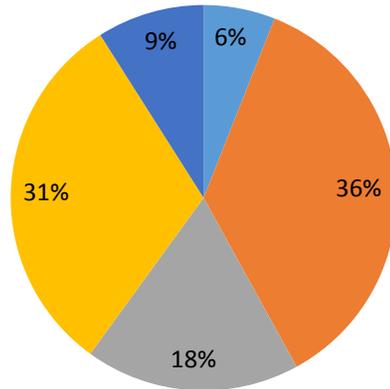


Source: FIRS

**The Florida Department of Health in Washington County
Estimated Revenue Percentage by Source
Fiscal Year 2015-2016**

Total Estimated Revenue for Washington County: \$2,261,229

■ County Contributions ■ State ■ Federal ■ Medicaid ■ Fees



Source: FIRS

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 Holmes and Washington 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, HIV detection 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 Summary

Strategic Challenges influence our likelihood of future success. In 2015, our leadership team identified the Strategic Challenges and Advantages listed below. They were used to help us identify our Goals and Objectives.

SWOT Analysis FDOH Holmes/Washington

Strengths	Weaknesses
<ul style="list-style-type: none"> • Staff passion for public health • Staff devoted to the mission of Florida Department of Health • Strong community partnerships • Staff are creative • Provide quality education to clients and public • Display a strong team effort • Staff adapt well to changes • Merging of staff from both health departments has been successful • Strong leadership • Caring staff • Improved & maintained immunization rates of 2 year olds to 100% within the last year at both health departments • Leadership and management have realistic expectations • Produced new opportunities to increase revenue through school based dental program, establishing a cash fee schedule for dental/denture services, and by reviewing clinic fee schedule to align with those in private sector • Strong management team • Efficient financial management department • Excellent providers and medical staff • Customer service is excellent based on customer satisfaction results • Policies and procedures are well documented and implemented by 	<ul style="list-style-type: none"> • Insufficient staff due to budget reductions and loss of Low Income Pool funding • Need greater sustainability of budget • State office having unrealistic timelines and expectations for small county health departments • State office has great amount of staff turnover which creates some delays and confusion for the county health departments • Sharing of positions between 2-3 counties • Morale effected by loss of revenue and positions • Maintaining IT/facilities on 3 buildings for Holmes • Balancing and bridging the expectations and requirements of state vs grant programs (Tobacco specifically) • Managed care payments delayed and insufficient • Transition to ICD-10 has not been adequately facilitated through EHR • Buildings/telephone systems/IT systems aging and insufficient budget to replace • School health equipment aging and insufficient budget to replace • Feeling state office personnel unconcerned by setting mandates and unrealistic expectations (Example: mandating a 5K in every county on

<p>staff to maintain compliance</p>	<p>the same day of the month in all 67 counties)</p> <ul style="list-style-type: none"> • Tobacco Program has difficulty creating policy change due to restricted lobbying rules • Decrease in providers and nursing staff with budget reductions and loss of Low Income Pool funding
<p>Opportunities</p> <ul style="list-style-type: none"> • Change our culture to one that has more efficient and lucrative business practices • Marketing of services • Evaluate fee schedules annually to make small changes rather than large ones that burden our clients • Communicate and educate the community on fees • Provide consistent disaster preparedness training • Build partnerships between programs • Community education on health department services • Improve internal communication between departments • Decrease number of internal meetings by utilizing current committees • Implementing cash fee for dental services 	<p>Threats</p> <ul style="list-style-type: none"> • Change fatigue • Managed Care Reimbursement • Changes in Managed Care company requirements creating more workload • Frequent changes in state priorities • Community partners viewing us as competition • Unfunded mandates • Primary care and dental funding decrease with Federally Qualified Health Center competition • Legislature decreasing Florida Department of Health funding sources • Creditability with patients and community when we stop offering a service (loss of Low Income Pool) • Sustainability of grant funded programs

*See Appendix B for a description of the SWOT process

Strategic Priorities

Strategic Issue Area 1: Health Promotion and Protection

Goal 1.1: Increase healthy life expectancy

Strategy 1.1.1: Increase the number of breastfed infants

Strategy 1.1.2: Increase the healthy weights of children and adults

Strategy 1.1.3: Reduce injury

Strategy 1.1.4: Reduce teen pregnancy rates

Strategy 1.1.5: Reduce adult tobacco use

Strategic Issue Area 2: Services to Customers and Community

Goal 2.1: Increase healthy life expectancy

Strategy 2.1.1: Increase access to dental care for adults and children

Strategic Issue Area 3: Workforce-Staff Training and Development

Goal 3.1: Establish a competent workforce

Strategy 3.1.1: Increase opportunities for staff development

Strategy 3.1.2: Provide opportunities for staff feedback

Strategy 3.1.3: Increase opportunities for staff engagement to improve satisfaction

Strategic Issue Area 4: Business and Finance

Goal 4.1: Establish a sustainable infrastructure which supports all of the Department's core business functions.

Strategy 4.1.1: Ensure fiscal accountability through monitoring and rotation of disaster preparedness stock and use of IRMS system

Strategy 4.1.2: Ensure balanced operational budgets

Strategy 4.1.3: Maximize funding to accomplish the public health mission

Strategies and Indicators

Strategic Issue Area 1: Health Promotion and Protection

Strategies	Objectives
1.1.1 Increase the number of breastfed infants	A. Increase the percentage of mothers who initiate breastfeeding from 47.3% (Holmes 2013) & 50.1% (Washington 2013) to 49.7% (Holmes) & 52.6% (Washington)
1.1.2 Increase the healthy weights of children and adults	A. Increase the percentage of adults who are at healthy weight from 33.1% (Holmes 2013) & 23.2% (Washington 2013) to 36% (Holmes) & 26% (Washington) B. Decrease the percentage of middle school students reporting BMI at or above 95 th percentile from 14.5% (Holmes 2012) & 17.5% (Washington 2012) to 11.5% (Holmes) & 14.5% (Washington)
1.1.3 Reduce injury	A. Decrease the unintentional injury death rate from 51.28% (Washington 2014) to 38.06% to 43.28% (Washington)
1.1.4 Reduce teen pregnancy rates	A. Decrease births to women age 15-19 from 61.2% (Holmes 2013) & 60.6% (Washington 2013) to 59.7% (Holmes) & 59.1% (Washington)
1.1.5 Reduce adult tobacco use	A. Decrease the number of adults smoking from 23.8% (Holmes 2013) & 20.3% (Washington 2013) to 22.6% (Holmes) & 19.3% (Washington)

Strategic Issue Area 2: Service to Customers and Community

Strategies	Objectives
2.1.1: Increase access to dental care for adults and children	A. By June 30, 2017 increase dental services to adults by 2% B. By June 30, 2017 increase dental services to children by 2%
2.1.2: Increase number of QI projects	A. Completion of two QI projects in accordance with PHAB and State requirements by June 30, 2016
2.1.3: Improve monitoring of QI program	A. Conduct an annual evaluation of the QI program each year including the CHIP, strategic plan processes, and annual QI plan

Strategic Issue Area 3: Workforce-Staff Training and Development

Strategies	Objectives
3.1.1: Increase opportunities for staff development	A. By December 31, 2018, 50% of Holmes & Washington employees will have participated in

	one or more professional development opportunities
3.1.2: Provide opportunities for staff feedback	A. By January 30, 2016, survey staff on their recommendations for staff development B. By January 30, 2016, provide staff with a mechanism to share ideas and concerns anonymously
3.1.3: Increase opportunities for staff engagement to improve satisfaction	A. By June 30, 2016, implement at least 1 staff engagement project recommended through employee satisfaction committees at each Health Department

Strategic Issue Area 4: Business and Finance

Strategies	Objectives
4.1.1: Ensure fiscal accountability through monitoring and rotation of disaster preparedness stock and use of IRMS system	A. By June 30, 2016, implement a process to annually exchange between newly ordered disaster supplies and those close to expiration B. By June 30, 2016, enter all newly acquired disaster supplies into IRMS system
4.1.2: Ensure balanced operational budgets	A. By June 30, 2016, 100% of programs will operate within their annual operating budgets
4.1.3: Maximize funding to accomplish the public health mission	A. Annually, complete process to analyze all state and local fees to ensure alignment with actual program costs B. Annually review and update fee policies and fee schedules C. Complete required components of the Rapid Process Improvement (RPI) process

Appendix A

The Florida Department of Health in Holmes/Washington Counties County Strategic Planning Committee Members as of September 2015

Executive Committee

Karen Johnson – Administrator
Kim Moore – Business Manager
Allen Swift, M.D. – Medical Director
Traci Corbin –Accreditation/Quality Improvement Coordinator
Susie Sewell– Director of Nursing
Jace Albury- Holmes Environmental Health Director
Amanda Baker – Washington Environmental Health Director
Sheri Rushing – Information Technology Director
James Bowen, D.M.D.– Holmes Dental Director
Drew Whitford, D.M.D. – Washington Dental Director

Committee Members

Deborah Campbell – Preparedness Planner
Valery Lawton – Healthy Start Program Coordinator
Deborah Powell – Holmes School Health Program Coordinator
Stephanie Green – Washington School Health Program Coordinator
Christopher Lauen – Holmes Tobacco Prevention Coordinator
Sharron Hobbs – Washington Tobacco Prevention Coordinator
Fran Amerson – HR/Personnel Liaison
Kathy Greene – Washington Administrative Assistant
Delicia Gainer – Holmes Front Office Supervisor
Beth Shiver – Washington Front Office Supervisor
Carolynn Henderson – Operations Manager
Donna Martin – Holmes Clinic Supervisor
Susan Miller – Washington Clinic Supervisor

Appendix B

Planning Summary

Members of the Florida Department of Health Holmes & Washington Executive Management Team met to oversee the development of the Strategic Plan. Executive leadership first laid out the timeline and framework for the plan. After some discussion with Holmes/Washington leadership team and external partners, they finalized the strategic priority areas: health promotion & protection; service to customers & community; workforce-staff training & development; and business & finance.

In preparation for the SWOT analysis, staff from DOH- Holmes/Washington summarized data from the Community Health Assessments, the Community Health Improvement Plans, County Health Rankings, Florida Behavioral Risk Surveys, Employee Satisfaction Surveys, County Snapshot, Administrative Snapshot, State Strategic Plan, and CHARTS. .

During a full day, face-to-face meeting with staff from Executive Management and Leadership teams on September 16, 2015 the SWOT analysis was conducted. The team looked at key overlapping opportunities that aligned with the State priority issues of healthy moms and babies; long, healthy life; readiness for emerging health threats; effective agency processes; and regulatory efficiency. After completion of the SWOT analysis the teams were divided into four identified Holmes/Washington priority issue areas to develop goals, strategies, and objectives.

The draft strategic priorities, goals, strategies, and objectives were shared with all DOH- Holmes/Washington staff on October 20, 2015 for comment. The final strategic plan was presented to SPIL Executive Management Team November 30, 2015.

The following is the Strategic Plan Schedule of Meetings:

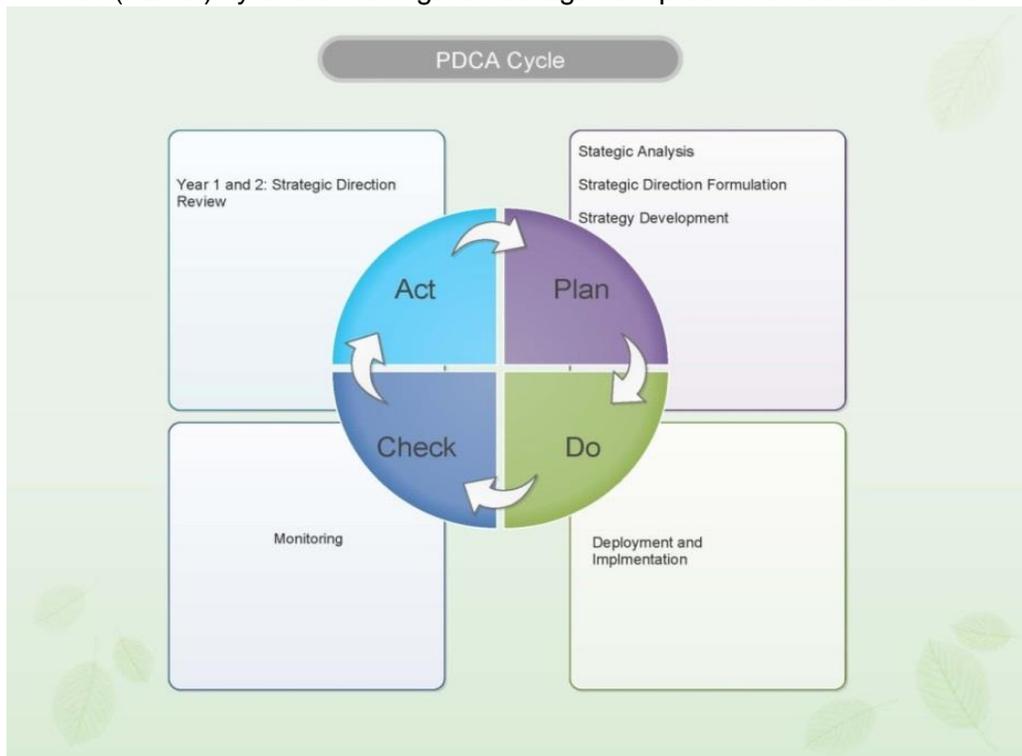
MEETING DATE	MEETING TOPIC
August 25, 2015	Analysis on progress of existing plan and establishment of timeline for strategic plan development and collection of data for SWOT Analysis
September 11, 2015	Executive Management Team members met to review and assess data needs for SWOT Analysis
September 16, 2015	Executive Management and Leadership Team members met to review all data and established strengths, weaknesses, opportunities, and threats, priorities, and objectives.
October 6, 2015	Executive Management Team members reviewed completed SWOT analysis and finalized objectives based on overlapping opportunities and alignment with Agency Strategic Plan.
October 29, 2015	Members of Executive Management Team worked with program managers and staff to write and revise strategies and objectives for each goal area.

November 20, 2015	Executive Management Team received draft of Strategic Plan for review and revisions
November 25, 2015	Executive Management Team reviewed final draft of Strategic Plan
November 30, 2015	SPIL Team/Executive Management Team approved final draft of Strategic Plan

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 executive management 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 by October, based on an assessment of availability of resources and data, community readiness, the current progress and the alignment of goals.

In the spirit of continuous improvement, DOH-Holmes/Washington will use the Plan, Do, Check, Act (PDCA) cycle for Strategic Planning. The process is shown below.



Appendix C

Stakeholder Engagement

The Florida Department of Health in Holmes & Washington Counties will work diligently to maintain transparency throughout the Strategic planning process. Karen Johnson, Administrator will engage community stakeholders through numerous channels. Some key activities will include: presenting the County Health Departments SWOT Analysis and final Strategic Plan to Board of County Commissioners, making copies available at the public library and DOH-Holmes & Washington County websites, and sharing findings and final plan with community health advisory groups.

Tentative Community Engagement Activities

11/30/2015	Final DOH Holmes/Washington Strategic Plan uploaded to DOH Holmes & Washington websites
11/30/2015	SWOT Analysis and final DOH Holmes/Washington Strategic Plan presented to local health advisory group
11/30/2015	Karen Johnson will provide the County Health Department's final strategic plan to the Board of County Commissioners

Appendix D

Plan of Work

Strategic Issue Area: Health Promotion & Protection

Objective	Baseline	Target	CHIP Alignment	QI Plan Alignment	Agency Strategic Plan Alignment	Due Date	Responsibility
<p>1.1.1. Increase the percentage of mothers who initiate breastfeeding from 47.3% (Holmes 2013) & 50.1% (Washington 2013) to 49.7% (Holmes) & 52.6% (Washington)</p> <p>Florida CHARTS Pregnancy & Young Child Profile 2013 81% (FL)</p>	<p>47.3% (H) 50.1% (W)</p>	<p>49.7% (H) 52.6% (W)</p>			Goal 2.1	Dec 31 2018,	<ul style="list-style-type: none"> • Clinic • Healthy Start • WIC
<p>1.1.2A: Increase the percentage of adults who are at healthy weight from 33.1% (Holmes 2013) & 23.2% (Washington 2013) to 36% (Holmes) & 26% (Washington)</p> <p>Florida CHARTS BRFSS 2013 35.0% (FL)</p>	<p>33.1% (H) 23.2% (W)</p>	<p>36% (H) 26% (W)</p>	Goal 1 H & W		Goal 2.1	Dec. 31 2018	<ul style="list-style-type: none"> • Clinic • HHTF Chronic/Obesity • WCHIP Diabetes/Obesity

<p>1.1.2B: Decrease the percentage of middle school students reporting BMI at or above 95th percentile from 14.5% (Holmes 2012) & 17.5% (Washington 2012) to 11.5% (Holmes) & 14.5% (Washington).</p> <p>Florida CHARTS Maternal & Child Health Indicators 2012 11.1% FL</p>	<p>14.5% (H) 17.5% (W)</p>	<p>11.5% (H) 14.5% (W)</p>	<p>Goal 1 H & W</p>		<p>Goal 2.1</p>	<p>Dec. 31, 2018</p>	<ul style="list-style-type: none"> • School Health • HHTF Chronic/Obesity • WCHIP Diabetes/Obesity • Healthiest Weight (HW) work group
<p>1.1.3 Decrease the unintentional injury death rate from 51.28% (Washington 2014) to 38.06% to 43.28% (Washington)</p> <p>Florida CHARTS Injury & Violence 2012-14 39.9% (FL)</p>	<p>51.28% (W)</p>	<p>43.28% (W)</p>	<p>Goal 2 (W)</p>		<p>Goal 2.1</p>	<p>Dec. 31 2018</p>	<ul style="list-style-type: none"> • WCHIP Injury/Violence Prevention • Washington CTST
<p>1.1.4 Decrease births to women age 15-19 from 61.2% (Holmes 2013) & 60.6% (Washington 2013) to 59.7% (Holmes) & 59.1% (Washington)</p> <p>Florida CHARTS Maternal & Child health 2014 59.9% (FL)</p>	<p>61.2% (H) 60.6% (W)</p>	<p>59.7% (H) 59.1% (W)</p>	<p>Goal 3 H & W</p>		<p>Goal 1.1</p>	<p>Dec. 31 2018</p>	<ul style="list-style-type: none"> • WCHIP Maternal/Child • HHTF Maternal/Child • Holmes/Washington School Health • Clinic Management Team
<p>1.1.5 Decrease the number of adults smoking from 23.8% (Holmes 2013) & 20.3% (Washington 2013) to 22.6% (Holmes) & 19.3% (Washington)</p> <p>Florida CHARTS BRFSS 2013 16.8% (FL)</p>	<p>23.8% (H) 20.3% (W)</p>	<p>22.6% (H) 19.3% (W)</p>			<p>Goal 2.1</p>	<p>Dec. 31, 2018</p>	<ul style="list-style-type: none"> • Washington TFF Partnership • Holmes TFF Partnership • Clinic Management Team

Strategic Issue Area: Service to Customers & Community

Objective	Baseline	Target	CHIP Alignment	QI Plan Alignment	Agency Strategic Plan Alignment	Due Date	Responsibility
2.1.1A By June 30, 2017 increase dental services to adults by 2% HMS Dental Service Report July 1, 2015	3,752 services (June, 2015)	3,827 services			Goal 2.1	June 30, 2017	<ul style="list-style-type: none"> Holmes & Washington Dental Staff
2.1.1B: By June 30, 2017 increase dental services to children by 2% HMS Dental Service Report July 1, 2015	9,199 services (June, 2015)	9,383 services			Goal 2.1	June 30, 2017	<ul style="list-style-type: none"> Holmes & Washington Dental Staff
2.1.2: Completion of two QI projects in accordance with PHAB and State requirements PHAB Binders		2 projects		Goal 3		May 31 2016	<ul style="list-style-type: none"> QI Liaison HW Subgroup
2.1.3: Conduct an annual evaluation of the QI program each year including the CHIP, strategic plan processes, and annual QI plan. Annual Reports		Annual		Goal 6		July 31 2016	<ul style="list-style-type: none"> Admin QI Liaison SPIL Team

Strategic Issue Area: Workforce-Staff Training & Development

Objective	Baseline	Target	CHIP Alignment	QI Plan Alignment	Agency Strategic Plan Alignment	Due Date	Responsibility
3.1.1:By December 31, 2018, 50% of Holmes & Washington employees will have participated in one or more professional development opportunities TRAIN Report	0	50%		Goal 2	Goal 4.1	Dec 31 2018	<ul style="list-style-type: none"> • SPIL Team • Leadership Team
3.1.2A: By January 30, 2016, survey staff on their recommendations for staff development Staff Survey	0	1 survey per county		Goal 2		Jan 30, 2016	<ul style="list-style-type: none"> • SPIL Team • Holmes/Washington Employee Satisfaction Teams
3.1.2.B: By January 30, 2016, provide staff with a mechanism to share ideas and concerns anonymously SPIL Team Meeting Minutes	0	1 mechanism				Jan 30, 2016	<ul style="list-style-type: none"> • SPIL Team • Holmes/Washington Employee Satisfaction Teams
3.1.3: By June 30, 2016, implement at least 1 staff engagement project recommended through employee satisfaction committees at each Health Department SPIL Team Meeting Minutes	0	1 project				June 30, 2016	<ul style="list-style-type: none"> • SPIL Team • Leadership Team • Holmes/Washington Employee Satisfaction Teams

Strategic Issue Area: Business & Finance

Objective	Baseline	Target	CHIP Alignment	QI Plan Alignment	Agency Strategic Plan Alignment	Due Date	Responsibility
4.1.1A: By June 30, 2016, implement a process to annually exchange between newly ordered disaster supplies and those close to expiration Annual Disaster Inventory Log	0	1 annually			Goal 4.1	June 30 2016	<ul style="list-style-type: none"> • MMA Team • Disaster Planner • Holmes/Washington Logistics • DON
4.1.1B: By June 30, 2016, enter all newly acquired disaster supplies into IRMS system IRMS	0	100% of newly acquired disaster supplies			Goal 4.1	June 30, 2016	<ul style="list-style-type: none"> • MMA Team • Disaster Planner • DON • IRMS Coordinators
4.1.2: By June 30, 2016, 100% of programs will operate within their annual operating budgets FIRS	90%	100%			Goal 4.1	June 30, 2016	<ul style="list-style-type: none"> • Admin • Business
4.1.3A: Annually, complete process to analyze all state and local fees to ensure alignment with actual program costs MMA Team Meeting Minutes		1 Annual Review			Goal 4.1	June 30, 2016	<ul style="list-style-type: none"> • Admin • Business

<p>4.1.3B Annually review and update fee policies and fee schedules</p> <p>MMA Team Meeting Minutes</p>		<p>1 Annual Review</p>			<p>Goal 4.1</p>	<p>June 30 2016</p>	<ul style="list-style-type: none"> • Admin • Business
<p>4.1.3C: Complete required components of the Rapid Process Improvement (RPI) process</p>	<p>50%</p>	<p>100%</p>			<p>Goal 4.1</p>	<p>Jan 1, 2016</p>	<ul style="list-style-type: none"> • Admin • Business • MMA Team

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.

