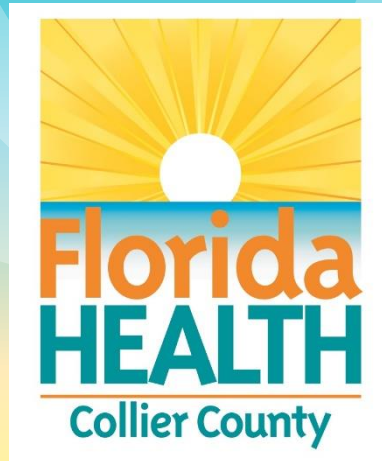


Strategic Plan Annual Progress Report

Reporting Period: January 2023 – December 2023



Florida Department of Health in Collier County

Completed: March 2024

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I. Executive Summary

This strategic plan set the direction for action at the Florida Department of Health in Collier County (DOH-Collier) for a three-year period from 2021-2023. As part of the performance management system, it identified the priority focus areas for the organization, and aligned with state and national priorities. The objectives in the plan were regularly monitored to measure progress towards reaching the objectives. The plan was reviewed and updated annually to keep up with the ever-changing public health environment.

The Performance Management Council (PMC) oversees the strategic plan and is responsible for the overall performance of the organization. This council primarily includes the senior leadership team and program managers. The PMC members are crucial in monitoring and implementing the strategic plan.

The table below summarizes the Strategic Priorities and Goals of the 2020-2023 Strategic Plan.

Statewide Strategic Priority	DOH-Collier Goal	DOH-Collier Strategies
Health Equity	Provide culturally competent access to health services for populations experiencing health disparities.	<ol style="list-style-type: none"> 1.1. Provide dental services for uninsured children. 1.2. Enhance maternal and child health education to the Black/Haitian population in Collier County. 1.3. Conduct and report data collection and analysis to identify health disparities. 1.4. Increase breastfeeding in populations with health disparities.
Long, Healthy Life	Increase healthy life expectancy through disease prevention, health policies and programs.	<ol style="list-style-type: none"> 1.1. Retain HIV cases in care to maintain their viral load suppression. 1.2. Facilitate the adoption of policies that promote healthy lifestyles. 1.3. Increase the duration of breastfeeding. 1.4. Increase community access to free HIV and STD testing.
Readiness for Emerging Health Threats	Protect Collier County residents and visitors from vaccine preventable diseases and public health emergencies.	<ol style="list-style-type: none"> 1.1. Provide COVID-19 vaccines to the community. 1.2. Improve the timeliness of infectious disease contact tracing. 1.3. Enhance public health preparedness in the community.
Effective Agency Processes	Enhance internal processes and workforce engagement to achieve service excellence.	<ol style="list-style-type: none"> 4.1. Improve communication about DOH-Collier services and activities. 4.2. Implement the workforce development plan. 4.3. Document and adopt performance management procedures. 4.4. Maximize clinic revenue.
Regulatory Efficiency	Prioritize environmental health services that have the most impact on public health.	<ol style="list-style-type: none"> 5.1. Improve completion rates for inspections of regulated facilities. 5.2. Enhance relationships with regulated entities. 5.3. Improve enforcement activities.

In 2023, DOH-Collier maintained its normal operations to protect, promote, and improve the health of all people in Collier County and demonstrated its resilience by continuing to successfully serve the community. The Environmental Health program worked on cross-training new and existing inspectors, educating the migrant farmworker community, and improving inspection processes to exceed all three of their strategic targets. The Women, Infants, and Children (WIC) clinic focused on increasing breastfeeding rates, especially in Immokalee. The HIV and STD clinics promoted their regular free testing events and exceeded their target. The workforce development committee compiled and analyzed employee satisfaction data and used them to revise the workforce development plan. The Healthy Start program re-started its prenatal classes taught in Haitian Creole and exceeded its target. All these service level increases were accomplished while recruiting, hiring, and training new employees, as the turnover rate remained relatively high.

Facilitation of the Healthy Collier Coalition resulted in continued progress on the community health improvement plan (CHIP) as four workgroups and two sub-committees met regularly to monitor and implement their community-wide objectives around mental health and substance abuse, chronic diseases, access to care, and the health of older adults. In addition, the Healthy Collier Coalition reviewed the latest health outcomes data and published a new CHIP for the 2024-2028 timeframe.

The strategic planning team compiled results from three employee surveys, conducted an all-staff SOAR analysis, compiled organizational results for an environmental scan, and facilitated an asynchronous strategic planning process to create a new strategic plan for the 2024-2028 timeframe. This report summarizes the progress made on the DOH-Collier Strategic Plan in 2023. It explains the review process and how the targets were monitored. It also provides data, trends, status, and an update on progress toward achieving each objective.

II. Communications

The Department's State Surgeon General meets regularly with the Executive Office of the Governor to brief them on the Department's activities, programs, and public health impact. This briefing may include information on the Department's performance management system and quality improvement activities (including strategic planning) and data as appropriate. Key updates from Agency Performance Management Council meetings, which include County Health Department health officer representation, may also be included as appropriate.

The State Surgeon General chairs and attends the agency-wide Performance Management Council and the State Health Improvement Planning Steering Committee. As chair of these committees, he is regularly updated on performance and is available to respond to any questions that the Governor may ask. Florida has a statewide planning and budgeting process that requires the agency to report on performance improvement.

At DOH-Collier the strategic plan is reviewed at the quarterly PMC meetings. Indicators that are not on track to meet their target are discussed to identify barriers, solutions, and resource needs. In 2023, a summary of every PMC meeting was posted on SharePoint, and notification to all employees was provided on the *DOH-Collier Corner* blog site, to which all employees were subscribed.

III. Strategic Plan Review Process

The DOH-Collier Strategic Plan serves as a roadmap to protect, promote, and improve the health of all people in Collier County. As part of the performance management system, the strategic planning review cycle takes place all year with quarterly reviews of progress towards achieving goals and objectives. Annually, the Performance Management Council (PMC) evaluates the status of strategic issues, goals, and objectives and revises the strategic plan, if needed. This annual review also informs the Strategic Plan Annual Progress Report.

The Strategic Plan monitoring process is led by the Organizational Planning and Development Program and is vetted through the PMC. The process includes data collection and analysis using the Performance Improvement Management System (PIMS) to identify objectives that are on target and areas needing improvement to meet the target. If an objective is not on track to meet its target, an action plan is developed to address the issue, or a Quality Improvement project may be initiated to improve performance and achieve the objective. The progress towards goals and objectives is communicated to all staff during program staff meetings and by sharing the PMC meeting minutes on *DOH-Collier Corner*.

This year was the final year of the 2021-2023 strategic plan. The review process was incorporated into the strategic planning process that was used to develop a new plan. This was an asynchronous process that included several steps:



- An all-staff Strengths, Opportunities, Aspirations, and Results (SOAR) analysis, in which 69 front-line staff participated.
- Program managers and division directors received email assignments to review the SOAR analysis results and the environmental scan data.
- Program managers and division directors were encouraged to meet with their staff to discuss these environmental scan results and consider five-year goals for their program or division.
- Discussions also included the consideration of infrastructure and capacity required for efficiency and effectiveness, including:
 - Information management
 - Communication
 - Workforce development and financial sustainability

- The senior leadership team used the SOAR analysis, program and division goals, the Agency Strategic Plan, the core public health functions, and the agency mission, vision, and values to establish strategic goals.
- Program managers then worked with their staff to write new and revise existing strategies and objectives for each goal.
- The strategies and objectives were routed to the PMC for comment and approval.

IV. Monitoring of Strategic Plan Objectives

DOH-Collier uses PIMS to monitor the strategic plan and key performance indicators. The Organizational Planning and Development Program maintains the strategic plan data in PIMS, and PMC members have browser access to view the system. PIMS tracks status based on progress toward measurable objectives.

Each strategic plan objective is assigned to an owner who is responsible for creating, monitoring, and implementing an action plan to accomplish their assigned objective(s). PIMS is reviewed quarterly at the PMC meetings. Any objectives or action plans with a lagging indicator are discussed. Appropriate actions are assigned to resolve any issues contributing to the lagging indicator and get it back on track, which could include initiating a quality improvement project if deemed to be the best course of action. Unanticipated changes in priorities, resources, and opportunities are also addressed at this meeting when they arise.

V. Monitoring and Status of 2023 Objectives

The following table summarizes the 2023 results for each objective and includes the status, target measure, a summary of progress, the lead program and person responsible, and a description of the indicator. The table also indicates whether the objective was included in the new 2024-2028 strategic plan. Objectives that were completed or abandoned in previous annual reviews are not listed.


PIMS Status Indicators:

-  On Track
-  Not On Track
-  Completed

<p>1.2: Increase the annual number of Black/Haitian participants that receive DOH-Collier health education from 317 in 2021 to 350 by December 31, 2023.</p>	<p>↑ 390</p>	<p>350</p>	<p>The Healthy Start program developed and maintained a relationship with the FQHC maternity clinics in Collier County. The program provided educational packets, incentives, and books for the clinics to hand out to women who might qualify for Healthy Start services. The program also offered classes monthly in Haitian Creole, which were well attended.</p>	<p>Healthy Start Marie Michel</p>	<p>Cumulative number of Black/Haitian participants per calendar year. Source: Program Data Frequency: Monthly</p>
<p>1.3: Increase the cumulative number of DOH-Collier programs that completed a health disparities analysis of their target audience for the CHA annual update from 2 in 2020 to 4 by June 30, 2023.</p> <p><i>Included in the new strategic plan</i></p>	<p>↑ 5</p>	<p>4</p>	<p>DOH-Collier has completed five health outcome data analyses since 2021. The topics were Mental Health and Substance Use, Tobacco Use, WIC participation, Pediatric Obesity, and Maternal and Child Health. The last one was completed in June of 2023. We have had the most success when using Masters of Public Health student interns to conduct these studies.</p>	<p>Planning Julissa Moreland</p>	<p>Cumulative # of programs completing a HE analysis for the CHA update. Source: Program Data Frequency: Quarterly</p>
<p>1.4: Increase the % of Infants Ever Breastfed at Immokalee WIC from 71.2% in 2022 to 84.9% by September 30, 2023.</p> <p><i>Included in the new strategic plan</i></p>	<p>↑ 77.18%</p>	<p>84.90%</p>	<p>Incorporated a breastfeeding peer counselor in the Immokalee office, who contacts WIC clients via phone calls at each trimester and provides breastfeeding support by phone and in person.</p>	<p>WIC Evita Anzualda</p>	<p>Infants participating in Immokalee WIC that have ever been breastfed / All infants participating in Immokalee WIC. Source: FL WISE Frequency: Quarterly</p>

<p>2.1: Increase the percentage of Collier County HIV clients retained in care (ADAP) at least 6 months with suppressed viral load from 95% in 2020 to 92% by December 31, 2023.</p>	<p>↑ 91.00</p>	<p>92.00</p>	<p>During 2023 program staff called all ADAP clients monthly to remind them of labs due and to ensure they did not have any problems ordering refills and picking up their medications. They were also called to schedule appointments for Ryan White and ADAP eligibility re-enrollments, ensuring no certification due dates were missed.</p>	<p>HIV Ryan White Nilda Proenza</p>	<p># of CHD HIV clients retained in care for 6 months with suppressed viral load / # of CHD HIV clients. Source: ADAP Frequency: Monthly</p>
<p>2.4. Increase the annual number of free HIV, HEP, and STD tests provided by DOH-Collier from 173 in 2020 to 500 by December 31, 2023.</p> <p><i>Included in the new strategic plan</i></p>	<p>↑ 691</p>	<p>500</p>	<p>Free testing events were promoted and conducted on a consistent schedule for the whole year at both the Naples and Immokalee clinics.</p>	<p>HIV/HEP Isidra Gomes</p>	<p>Cumulative total of free tests provided per calendar year. Source: HMS Frequency: Monthly</p>
<p>4.1: Increase the annual number of website (internet and SharePoint) updates from 109 in 2020 to 600 by December 31, 2023.</p>	<p>↑ 547</p>	<p>600</p>	<p>The purpose of this strategy is to ensure up-to-date internal and external communication on SharePoint and the public website. The leadership team and communications staff continued to emphasize the importance of keeping web pages updated. Although the target was not reached, there was a positive trend, and this indicator remained on track.</p>	<p>Information Systems Roccio Bershadski</p>	<p># of tickets in the Website Updates category. Source: Cherwell Frequency: Quarterly</p>

<p>4.2: Increase the percentage of workforce development plan objectives completed from 0% in 2020 to 50% by December 31, 2023.</p> <p><i>Included in the new strategic plan</i></p>	<p>68.80%</p> <p>↑</p>	<p>50.00%</p>	<p>We consolidated the results of several employee satisfaction surveys and spent much of 2023 creating a new workforce development plan that began in August 2023. This metric accounts for the objectives of the outgoing plan that were completed before the new plan took effect.</p>	<p>Planning</p> <p>Julissa Moreland</p>	<p># of WFD plan objectives completed per calendar year / # of WFD plan objectives with target completion dates in the same year.</p> <p>Source: Program data Frequency: Quarterly</p>
<p>5.1: Increase the annual percentage of completed inspections from 64% in 2020 to 75% by December 31, 2023.</p> <p><i>Included in the new strategic plan</i></p>	<p>92.00%</p> <p>↑</p>	<p>75.00%</p>	<p>The program struggled with employee turnover during 2023, but successfully hired and trained several new inspectors and cross-trained existing inspectors to make it possible to exceed the target.</p>	<p>EH</p> <p>Erika Barraza</p>	<p># of inspections completed per year / # of inspections required per year.</p> <p>Source: EH Data System Frequency: Annual</p>
<p>5.2: Increase the annual number of hours delivering educational information to community partners from 6 in 2020 to 12 by December 31, 2023.</p> <p><i>Included in the new strategic plan</i></p>	<p>↑ 16.00</p>	<p>12.00</p>	<p>The Environmental Health program met this objective by implementing the following activities and delivering content in plain language and vocabulary relevant to the farmworkers:</p> <ul style="list-style-type: none"> • Informal education at outreach events and migrant farmworker housing locations. • Presentations at parent meetings of farmworker childcare centers. • Migrant housing program posters at grocery stores and laundry mats with tear-off tabs containing EH contact information. 	<p>EH</p> <p>Erika Barraza</p>	<p>Cumulative # of hours delivering educational information per calendar year.</p> <p>Source: Program Data Frequency: Quarterly</p>

<p>5.3: Increase the annual percentage of complaint investigations initiated within 2 days from 84% in 2020 to 90% by December 31, 2023.</p>	<p>94.92% </p>	<p>90.00%</p>	<p>We cross-trained one new inspector, implemented a process to check for new complaints every morning, and made some improvements to the investigation process.</p>	<p>EH Erika Barraza</p>	<p># of investigations initiated within two days per calendar year / # of total complaints received. Source: EH Data System Frequency: Quarterly</p>