

# Florida Department of Health in Charlotte County



# ANNUAL REPORT 2018





Florida Department of Health in Charlotte County  
1100 Loveland Boulevard  
Port Charlotte, Florida 33980  
<http://charlotte.floridahealth.gov>

March 2019

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## Our Mission

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

## Our Vision

To be the Healthiest State in the Nation

## Our Values

**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.

### 10 Essential Public Health Services

1. Monitor health status to identify and solve community health problems.
2. Diagnose and investigate health problems and health hazards in the community.
3. Inform, educate, and empower people about health issues.
4. Mobilize community partnerships and action to identify and solve health problems.
5. Develop policies and plans that support individual and community health efforts.
6. Enforce laws and regulations that protect health and ensure safety.
7. Link people to needed personal health services and assure the provision of health care when otherwise unavailable.
8. Assure a competent public and personal health care workforce.
9. Evaluate effectiveness, accessibility, and quality of personal and population-based health services.
10. Research for new insights and innovative solutions to health problems.

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# Health Officer's Message



Our community has grown over the past 30 years into a special place in southwest Florida. As a resident of Charlotte County since 1985, I have witnessed and had the privilege to have been a part of many of these changes. Charlotte County is special, engaged, and resilient.

The Florida Department of Health in Charlotte County has always been an engaged member of our community. Our staff of dedicated public health professionals serve to protect, promote, and improve the lives of all in our area through programs that meet the specific needs of our community.

Over the past year, our agency has dedicated itself to reinvest and reinvent ourselves for the next 30 years. The agency has increased its engagement with all sectors of our community to address issues across the lifespan. The programs include maternal and child health, WIC, oral health, epidemiology, emergency preparedness, environmental health, car seat safety, and school health to name just a few. Despite great efforts from our staff we would not be successful without the support of and collaboration with our area's medical providers, community partners, legislators, Board of County Commissioners, and volunteers.

This document is an overview of some of the great work being performed in Charlotte County covering calendar year 2018. I look forward to the next year with much optimism as we reinvest and reinvent our agency to better serve our community.

Joseph D. Pepe

# 2016 - 2018 Strategic Plan

The Florida Department of Health in Charlotte County (DOH-Charlotte) continued using the 2016-2018 Strategic Plan throughout calendar year 2018 as its primary decision-making blueprint. The five priority issues identified by the Strategic Planning Team have served as the guiding vision for the agency since 2016. This strategic plan is linked to the goals, strategies, and day-to-day activities of managers and staff, and is regularly monitored through our Performance Management System.

As of December 2018, 15 of the 18 strategies from the Strategic Plan demonstrated improvement. Some of these strategies met and/or exceeded their targets. This makes for an 83.3% improvement rate thus far. Through regular monitoring by the DOH-Charlotte Performance Management Council, the three strategies that have not yet shown improvement were identified for quality improvement projects. These projects include leveling out the OCA cash balance, completing corrective actions for information security and privacy, and increasing the number of HPV doses administered annually.

DOH-Charlotte intends to wrap up its 2016-2018 Strategic Plan at the end of the 2018 Fiscal Year (June 30, 2019). A new strategic plan began development in 2018 to cover 2019-2022. This new plan will begin implementation in July 2019.

## Priority Issue 1: Healthy Moms and Babies

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

Strategies:

1. To maintain the percent of 2-year-olds fully immunized
2. To increase the percent of WIC infants ever breastfed
3. To increase the number of pregnant women receiving a flu vaccine
4. To maintain or increase the percentage of teen family planning clients who adopt an effective or higher method of birth control

## Priority Issue 2: Long, Healthy Life

Goal: Promote healthy lifestyles, reduce chronic disease risk, and improve quality of life

Strategies:

1. To increase knowledge and change behavior of elementary school children in the areas of nutrition and physical activity
2. To reduce HPV-related cancers
3. To reduce unintentional injuries in ages 0-4

# 2016 - 2018 Strategic Plan

## Priority Issue 3: Readiness for Emerging Health Threats

Goal: Prevent the spread of communicable diseases and demonstrate readiness to protect the public from emergency disasters and health threats

Strategies:

1. To maximize readiness for emerging disease threats
2. To maximize readiness for emerging natural or manmade disasters
3. To maximize protection from environmental health hazards

## Priority Issue 4: Effective Agency Processes

Goal: Achieve operational efficiencies through sound Financial, Process Improvement and Business Practices.

Strategies:

1. To ensure a balanced operational budget
2. To ensure that actual quarterly expenditures align with budgeted expenditures
3. To maintain standards for information security and privacy
4. To improve processes
5. To meet and exceed customer satisfaction

## Priority Issue 5: Workforce Development

Goal: Foster a healthy work environment to ensure a highly competent, knowledgeable workforce with opportunities for professional growth and development

Strategies:

1. To develop an organizational strategy to capture institutional knowledge
2. To provide learning opportunities for professional growth
3. To establish a roadmap to continuous development of our workforce

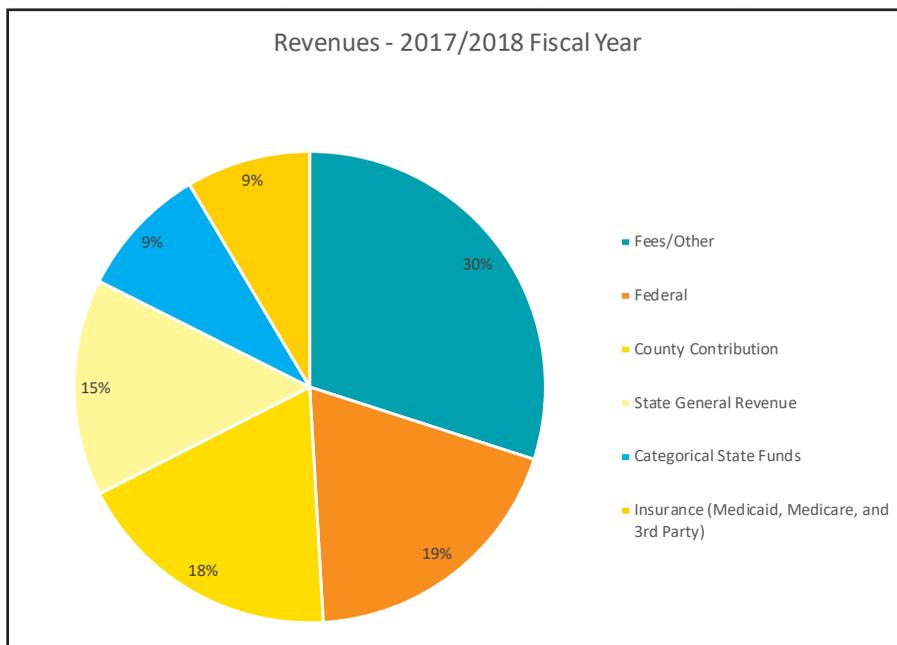
# Administrative Services

## Fiscal

### Revenues

The annual budget for DOH-Charlotte for fiscal year 2017/2018 totaled \$4,448,609, a 10% decrease from the previous fiscal year. Funding to cover these expenditures is comprised of multiple revenue streams that include:

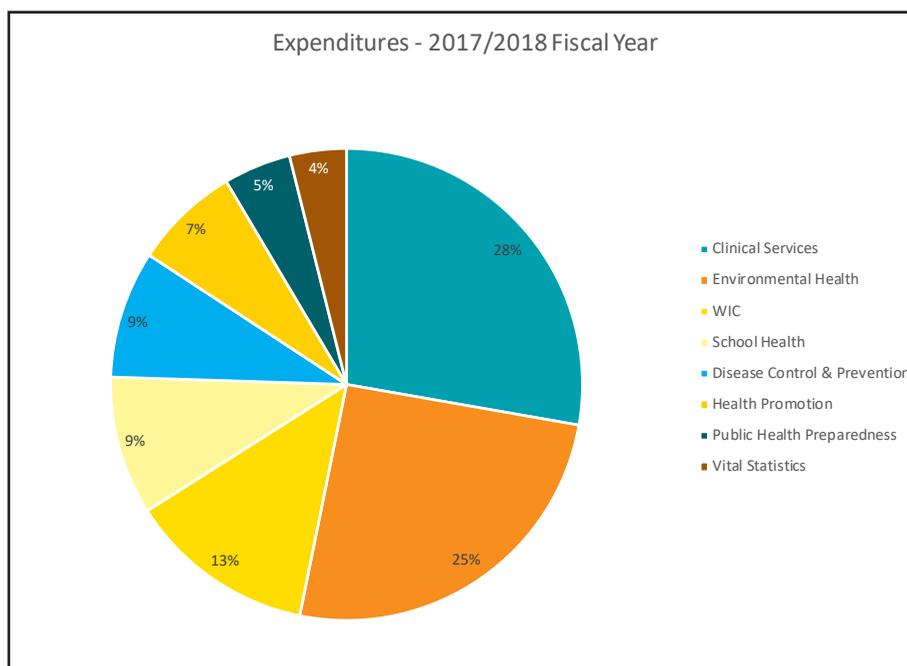
- Federal
- State General Revenue
- Categorical State funds
- County Contribution
- Fees and other revenues
- Insurance (Medicaid, Medicare, and third-party insurance)



### Expenditures

Expenditures for the fiscal year are summarized in the chart to the right for the programs that were eligible for funding. Nearly half of all expenditures were for environmental health and clinical services. While these programs create the most substantial expense for DOH-Charlotte, they also bring in revenue to offset these expenses.

During this fiscal year, DOH-Charlotte had 53 full time positions (including vacancies) and 16 filled part time positions (as well as 4 vacant part time positions).



# Administrative Services

## Front Office Operations

DOH-Charlotte prides itself on listening to the voice of the customer, and our front office staff are at the front-lines of this mission. In addition to scheduling and processing client appointments, the front office staff process medical record requests, complete financial eligibility determinations, assist in the completion of applications for temporary Medicaid assistance for pregnant women (PEPW), and provide customer service to all clients and community partners.

The front office provided the following services in 2018:

- Scheduled **6,822** appointments\*
- Verified and processed **5,441** patients for their appointments\*
- Billed and processed **14,405** patients
- Reviewed and processed **4,853** Financial eligibility applications
- Reviewed and processed **150** Presumptive Eligibility for Pregnant Women (PEPW) applications
- Reviewed and processed **49** Family Planning Waiver Applications
- Sorted and logged **19,961** pieces of outgoing mail
- Reviewed and processed **1,152** Medical Record Releases

(\*does not include dental patients)

**Birth and Death Certificates/Records are issued at:**

**Florida Department of Health in Charlotte County Office of Vital Statistics**  
1100 Loveland Boulevard  
Port Charlotte, Florida 33980

Phone: 941-624-7200  
Fax: 941-624-7296



**CERTIFICATES/RECORDS AVAILABLE:**

**Birth Certificates (anyone born in Florida)**  
1930 to Present

**Death Certificates (Florida statewide)**  
2009 to Present

For records prior to the dates listed above or marriage/divorce records:  
Department of Health - Office of Vital Statistics  
P.O. Box 210  
Jacksonville, Florida 32231  
904-359-6900

Birth Certificates only are also available at:  
Charlotte County Tax Collector  
6868 San Casa Drive  
Englewood, Florida 34224  
Phone 941-681-3710  
Additional Service Fees Apply

**HOURS OF ISSUANCE:**

**Monday - Friday**  
7:45 am - 4:00 pm

(Our office is closed on the 2nd & 5th Friday of each month from noon until 5:00 pm)

**VALID PHOTO ID NEEDED FOR ALL BIRTH CERTIFICATES**

updated 10/4/2018

The vital statistics office issues birth and death certificates for the State of Florida and processes prenatal and postnatal Healthy Start screenings, used by community partners to determine eligibility for relevant services.

In 2017, the vital statistics team:

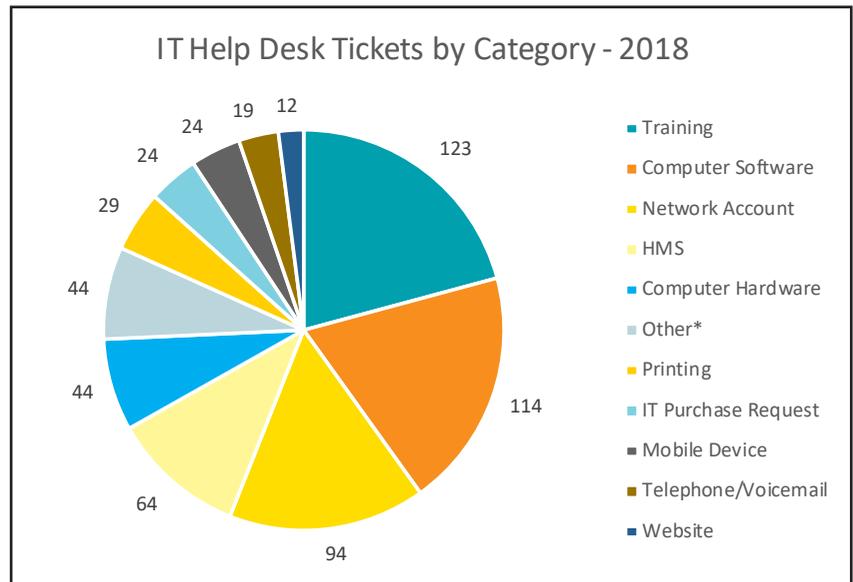
- Ensured timely filing of **1,024** birth records for Charlotte County
- Ensured timely filing of **2,839** death records for Charlotte County
- Issued **3,221** Florida birth certificates
- Issued **19,630** Florida death certificates
- Reviewed and processed **1,222** Healthy Start prenatal screening for Charlotte County residents
- Reviewed and processed **1,027** Healthy Start postnatal screenings for Charlotte County residents
- Assisted tax collector in issuance of **115** Florida birth certificates

# Administrative Services

## Management Information Systems (MIS)

Management Information Systems (MIS) improves productivity through technology by making information easy to access and use. While the DOH-Charlotte MIS team closed out 889 Help Desk tickets (as *partially* depicted by category in the chart to the right) in 2018, they provided the agency so much more than just Help Desk support.

All aspects of operations at DOH-Charlotte are touched by information technology, and rely heavily on the MIS team. MIS staff play an active role on the agency's Performance Management Council, A-Team (which provides oversight to changes at the operational level), Safety Committee, HMS Administration Workgroup, and Information, Security, and Privacy Workgroup. This close collaboration across the entire agency is crucial to successful change management.



\*The Other category included tickets related to: IT (MIS) Help Desk Requests, IT Requests, Scanning, IT Project Requests, Fax, and Florida SHOTS.

DOH-Charlotte participated in a statewide pilot project to implement the Cherwell system to ensure consistent application of DOH policies and procedures. The DOH-Charlotte MIS program will use the system to improve services, reduce risks, increase the productivity of staff, provide data to identify current and emerging IT trends, determine priorities, and reduce the volume of corrections required.



The DOH-Charlotte MIS program has completed upgrades to network infrastructure to improve access to and utilization of cloud based services. The upgrades included increasing available bandwidth, improving circuit redundancy, and improving wireless connectivity. The wireless infrastructure upgrades will allow DOH-Charlotte to take advantage of improvements to wireless technology that improves the speed and security of wireless data transmissions.

Additionally in 2018, the IT training room was upgraded to include modifications to the training environment as well as new computers and equipment to support staff training needs. Furthermore, the MIS program has promoted the use of a Learning Management System that provides DOH-Charlotte staff with access to Microsoft Office 365 training.

# Clinical and Community Health

## *WIC (Women, Infants, and Children)*

This Special Supplement Nutrition Program serves low- to moderate-income women who are pregnant, breastfeeding, or postpartum; infants; and children under 5 years of age. Nearly 13,000 WIC benefits were issued in 2018.



Four WIC staff members completed the week-long certified lactation counselor training to help support our clients in breastfeeding and to promote breastfeeding. In 2018, trained WIC educators provided a total of 100 breastfeeding classes for clients on Tuesdays and Thursdays. This class was also offered by a peer counselor in a one-on-one setting to accommodate any WIC clients who cannot attend the regularly scheduled classes.

In addition to accommodating client schedules for classes, WIC listened to the voice of its clients and chose to expand its hours of operation early in 2018. The response from clients has been very positive.

WIC staff worked hard in 2018 to reduce their no-show rate, and embarked on a quality improvement project to tackle this issue. The project won a QI Wise Old Owl Award and was selected to be presented at the National Network of Public Health Institutes' (NNPHI) 2019 Open Forum for Quality Improvement and Innovation in Public Health.

## *Dental and Dental Sealant*

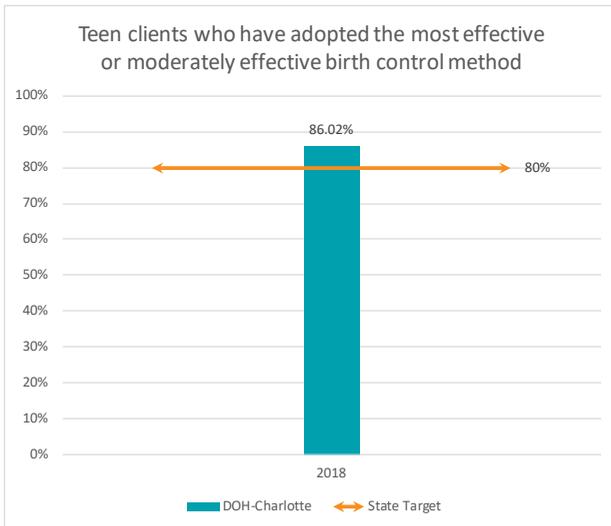
The school-based dental sealant program served 1,640 Charlotte County Public School students in 2018. The school-based dental sealant program increases the prevalence of dental sealants among children from low-income families and reduces racial and income disparities in sealant prevalence among elementary school children, Early Head Start and Head Start. The program provides dental screening, oral health education, preventative services of sealants and topical fluoride for 2nd, 3rd, and 4th grade students. Many students were referred to the DOH-Charlotte dental clinic to establish a dental home.

Additionally, 123 VPK students as well as those at the Baker Center (98 students) and the Hope Center (17 students) received education on brushing, flossing, and healthy foods. Those with parental permission also received a screening and a fluoride treatment.

In 2018, the dental clinic at DOH-Charlotte served 2180 clients, providing nearly 14,000 services. The Dental clinic serves an unmet need in the community as Charlotte County is federally designated as a Health Professional Shortage Area for dental care.

# Clinical and Community Health

## Family Planning



Charlotte County residents of child-bearing age are encouraged to utilize the services of the Family Planning program at DOH-Charlotte.

This program provides individuals with information related to their choices of family planning methods in order to assist in spacing of children. The program offers counseling, education, promotion of vaccines, screenings, referrals, and access to long-acting reversible contraceptives (LARC), and other effective methods of birth control. There are also limited funds to support irreversible birth control methods such as male (vasectomy) and female (tubal ligation) surgical sterilizations through contractual relationships with community partners.

In 2018, 865 clients were served by the Family Planning program. Teen clients in particular are strongly encouraged to adopt a birth control method that is considered the most effective or at least moderately effective. The State target is 80% of teen clients adopting the most/moderately effective birth control method. In 2018, DOH-Charlotte’s teen clients achieved a rate of 86.02% - well above the State target. This helps reduce unintended pregnancies in our county.

## School Health

The goal of school health services is to ensure that students are healthy, in school, and ready to learn. The School Health program in Charlotte County coordinates and performs routine state-mandated screenings for public and private school students in Kindergarten, 1st, 3rd, and 6th grades. These screenings evaluate physical development and include checks of height, weight, Body Mass Index, vision, and hearing.

School Health Screenings Completed School Year 2018-2019 (as of December 31, 2018)	
Vision	3,803
Hearing	2,917
Height/Weight	2,845

In the Fall of 2018 66% of Charlotte County students who were screened were at a healthy weight for their height. Sixteen percent of students were at a weight that was considered obese for their height 14% were considered overweight, and 4% were considered underweight. While all children grow at different rates, these screenings can help equip parents with the information they need as they work to develop healthy eating and physical activity habits for their families at home.

# Clinical and Community Health

## *Growing Strong Families*



Growing Strong Families (GSF) is a pilot program created by the Florida Department of Health in Charlotte County. This program addresses the social determinants of health impacting one's ability to achieve specific health goals. A registered nurse provides education and other services to young families through home visits, with special emphasis on parental bonding and increasing health literacy.

GSF provides services at no charge to women and their families in the prenatal period and to families with children from birth until the child's transition to school. Focus areas for the program are: prenatal and postpartum health, breastfeeding support, healthy relationships, addiction management, safety and child development. However, all education and services offered are based on the needs of the client.

- In 2018, 85 families received services from Growing Strong Families, totalling 308 home visits.
- Most of these families were enrolled in the Imagination Library to encourage parental bonding and child development through reading.
- 340 books were provided to families during home visits, including board books and coloring books, and other age-appropriate books.

In recent years Charlotte County has taken an active approach to tackling the issue of infants who were exposed to alcohol or illicit drugs while in the womb. DOH-Charlotte's GSF nurse sits on the Substance-Exposed Newborn (SEN) Task Force, helping to connect vulnerable families to the services they need. The overall goal of the task force is to ensure proper development on the children so that they may achieve appropriate reading levels by third grade. GSF has provided support through home visits to 8 families with substance-exposed newborns.

The program also expanded its reach in 2018 to include outreach efforts at the local medication-assisted treatment clinic, Operation PAR. After developing a Memorandum of Agreement with the clinic, the GSF nurse provided 64 vaccinations to clients and provided 99 books to children who accompanied their parents to the clinic.

In addition to providing education and services directly to Operation PAR's clients, the GSF nurse collaborated with nurses from Bayfront Health to provide education to Operation PAR's counselors, nurses, and doctor. Education for this audience focused on substance-exposed newborns, treatment post-delivery, prevention of, and normal discomforts of pregnancy versus the signs of opioid withdrawal.

# Clinical and Community Health

## Health Promotion

The Health Promotion Department is responsible for promoting health and preventing chronic diseases, acts of violence, and injuries in Charlotte County. Health Educators in this department plan and coordinate the use of educational resources in the community to motivate and assist individuals and groups to adopt and maintain healthful practices and lifestyles. Over 12,000 community members received health education at twenty-five events throughout Charlotte County in 2018.

In addition to community outreach, the team worked diligently to protect, promote, and improve the health of Charlotte County residents across a variety of programs.

### 5-2-1-0 Let's Go!

5-2-1-0 Let's Go! is a nationally recognized childhood obesity prevention program. Health Promotions staff at DOH-Charlotte offers this program in partnership with schools, childcare programs as well as out-of-school programs to change environments where children and families live, learn, work, and play.

Students learn the importance of eating a variety of fruits and vegetables every day, as well as avoiding sugary drinks. Physical activity is encouraged over sedentary screen-based entertainment.

The framework for 5-2-1-0 is strongly encouraged and supported in the Department of Health workplace as well, as DOH-Charlotte staff try to set the example for living a healthy lifestyle.

### Violence and Injury Prevention

The Violence and Injury Prevention Program seeks to prevent and reduce intentional and unintentional injuries and death to create a healthy and safe Florida.

Health Educators go into the public schools to provide education to students on bicycle safety, water safety, how to prevent and handle bullying and cyberbullying, and over-the-counter medication safety.

**5-2-1-0**

829 second graders and 530 third graders received information on healthy eating and active living habits:

- 5 servings of fruits and vegetables daily
- 2 hours or less of recreational screen time
- 1 hour (or more) of physical activity
- 0 sugary drinks

# Clinical and Community Health

## Health Promotion

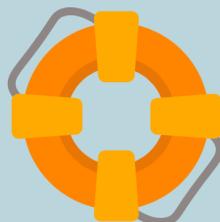


Students were taught bicycle safety, including the importance of always wearing a bicycle helmet to protect themselves from serious injury when on a bicycle, scooter, or even while in-line skating or roller skating. Wearing a helmet can reduce the risk of head injury to bicyclists by as much as 85%.

Helmets were fitted to each child's head to ensure a snug, protective fit. In 2018, 154 children were fitted with helmets. We also promote bicycle and pedestrian safety in our community outreach efforts.



Drowning prevention is important for all ages, but especially for young children who may not yet be skilled swimmers. With this in mind, DOH-Charlotte works diligently to ensure our youngest public school students know how to be safe around water.



### Water Safety

581 kindergartners received water safety information

### Bullying & Cyberbullying

519 fourth grade students educated



Fourth grade students were introduced to the harmful effects of bullying and cyberbullying. Students were taught how to prevent bullying and what to do when they witness bullying - in-person or online.

Medications are the leading cause of child poisoning. Health Educators took this knowledge into the classroom and engaged Charlotte County fifth graders in a critical conversation about responsible medicine use.



### Over-the-Counter Medication Safety

605 fifth graders received medication safety information

# Clinical and Community Health

## Health Promotion

### Child Passenger Safety

18 classes were taught to 76 caregivers of young children

128 child restraints were checked by trained technicians

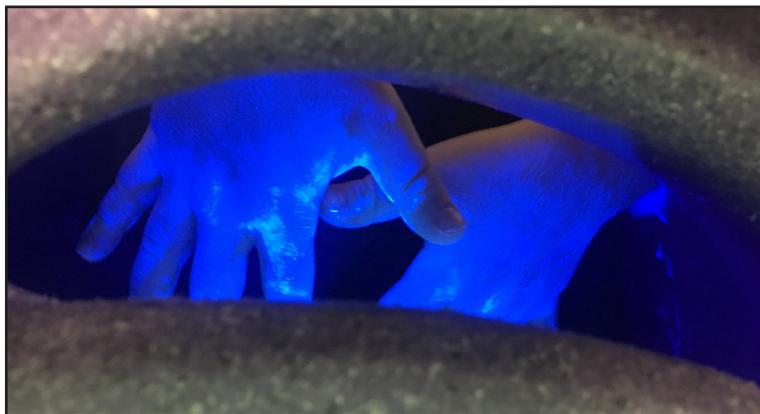


In addition to educating students to prevent injury in the community, trained Child Passenger Safety Technicians provide education to parents and caregivers during our Playing It Safe car seat class on the proper use, care, and installation of car seats. DOH-Charlotte also acts as a referral source for families that need car seat checks and/or car seats due to income or special circumstances.

### Be a Hero Program

The Health Promotion team partnered with other community organizations to teach fourth graders about emergency preparedness as it relates to Charlotte County. DOH-Charlotte's role in the Be a Hero Program is to teach proper hand hygiene.

Students used the GlitterBug Hand Show materials to see how important it is to wash your hands thoroughly to prevent the spread of germs. The GlitterBug products are invisible to the naked eye but they glow when placed under UV light. Seeing these "germs" under the UV light provides a fun and memorable way for students to learn about hand washing, hand sanitizing and cross-contamination.



### National Diabetes Prevention Program

One out of every 10 adults in the U.S. has diabetes, and 1 out of every 3 has prediabetes. But losing weight, through healthy eating and moving more, can cut the risk of diabetes in HALF. The Health Promotions team partners with community organizations and members to offer the *Prevent T2* Diabetes Prevention Program.



### Diabetes Prevention

25 classes were taught

# Clinical and Community Health

## Health Promotion

### Dental Health Program

In close partnership with DOH-Charlotte's dental clinic, Health Educators spent time with first grade students to encourage good dental hygiene. Students learn the importance of regular brushing and flossing, and how eating sugary foods can impact the health of our teeth.



### iChoose - Sexual Risk Avoidance Program

In Charlotte County, the Department of Health has utilized the iChoose curriculum for its adolescent health and sexual risk avoidance education since 2015. The iChoose program provides a

holistic health message that includes goal setting, healthy relationships (romantic and non), positive peer pressure, self-efficacy, and so much more. Health educators who teach the program aim to decrease associated risk behaviors, and increase the comfort of teachers and parents to communicate with teens on issues related to sexual risk avoidance, drugs, alcohol and how to develop healthier long-term relationships.

Goals of the sexual risk avoidance program include:

- To make abstinence more realistic for today's youth through conversations about life and relationships
- Increase the comfort of teachers' and parents' communication with teens on issues related to sexual risk avoidance
- Reduce teenage sexual activity, teenage pregnancy, birth to unwed teens, and transmission of sexually transmitted diseases
- Facilitate discussions on the consequences of engaging in sexual activity such as sexually transmitted diseases
- Facilitate discussions on the effects of drugs and alcohol on decision making

# Disease Control and Prevention

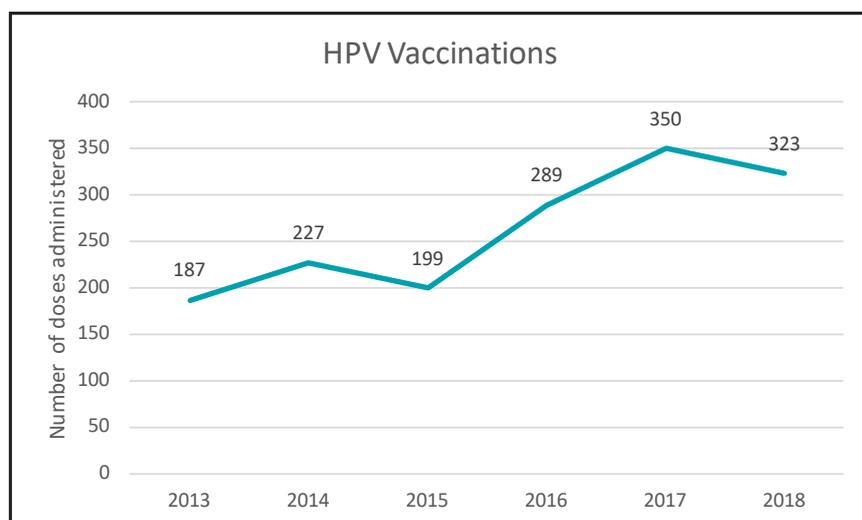
## *HIV and Sexually Transmitted Diseases*

DOH-Charlotte regularly conducts screenings for HIV and other sexually transmitted diseases (STDs) at multiple locations in the community. When a positive STD test is identified, staff provide treatment for the client.

In 2018, DOH-Charlotte's HIV and STD program provided a total of 2,739 services to 546 STD clients, and provided 12 services to 8 HIV/AIDS clients.

In its ongoing commitment to prevent the spread of communicable diseases, DOH-Charlotte rolled out its PrEP program beginning in the summer of 2018. The goal of PrEP (Pre-Exposure Prophylaxis) is to prevent HIV infection from taking hold once exposure to the virus occurs. When taken every day, PrEP provides a high level of protection against HIV, and is even more effective when combined with condoms and other prevention tools.

## *Immunizations*



Immunization is a key primary prevention tool used in public health as it is one of the most cost-effective means of public health promotion and disease prevention. Vaccines prevent disease, disability, and death in children and adults. In 2018, vaccinations were administered by DOH-Charlotte staff to 4,370 clients.

Of the vaccinations administered in 2018, 323 doses were for the HPV vaccine, which protects against cancers caused by the human papillomavirus

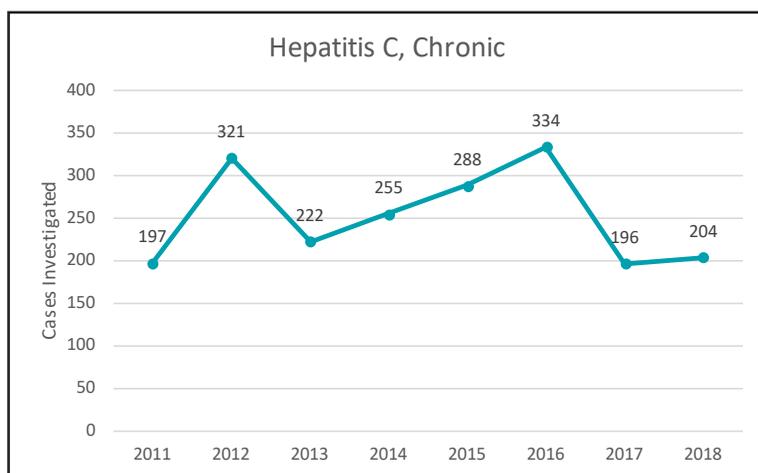
(HPV). In addition to promoting the HPV vaccine to both boys and girls (typically given at ages 11 and 12; 2 doses 6 months apart), DOH-Charlotte staff administered 1,405 doses of the flu vaccine.

# Disease Control and Prevention

## Epidemiology

Epidemiology is the study of the distribution and determinants of health-related states or events (including disease), and the application of this study to the control of diseases and other health problems. DOH-Charlotte conducts disease surveillance and investigates suspected occurrences of infectious diseases and conditions that are reported from hospitals, physician’s offices, laboratories and other medical providers and community partners.

DOH-Charlotte’s Epidemiologist, Nathalie Moise, also serves as a consultant to the medical community on issues of communicable diseases, and provides general education to the community and community based organizations.



In 2018, DOH-Charlotte’s epidemiology program investigated over 200 confirmed, probable, or suspect cases of chronic Hepatitis C, a long-term, contagious liver disease which is spread primarily through contact with the blood of an infected person, often through sharing needles or other equipment to inject drugs. Hepatitis C virus infection can last a lifetime and lead to serious liver problems. The Hepatitis C cases investigated in Charlotte County in 2018 totalled 204, just slightly up from 196 cases investigated in 2017.

Notably, in 2018 DOH-Charlotte investigated 216 animal bites reports, 49 lead exposure cases, and 30 confirmed, probable, or suspect cases of chronic Hepatitis B. Other cases investigated included enteric diseases, zoonotic diseases, waterborne diseases, mosquito-borne viruses, and vaccine preventable diseases (such as pertussis/whooping cough and varicella/chicken pox).

DOH-Charlotte’s epidemiology program collaborates with other State agencies as appropriate to investigate possible outbreaks in the community such as foodborne complaints, flu outbreaks, and contagious illnesses in daycare or long term care facilities. The table to the right indicates the numbers for 2018 outbreak investigations.

Outbreak Investigations Conducted in 2018	
Foodborne complaints	9
Influenza confirmed outbreaks	7
Hand, foot, and mouth in daycare	4
Scabies linked to long term care facility	3
Foodborne outbreaks linked to restaurants	2
Scombroid fish poisoning linked to restaurant	1

# Public Health Preparedness

The Public Health Preparedness program at DOH-Charlotte aims to align with our strategic goals, specifically Priority Issue #3: Readiness for Emerging Health Threats. To this aim, we promote preparedness in the community and in our organization.

## Special Needs Shelter

While DOH-Charlotte has not had to open the Special Needs Shelter since Hurricane Irma, staff are routinely trained and drilled on shelter deployment and operations. In order to streamline the time needed for initial deployment to the shelter, the Preparedness Program developed an enhanced logistics approach that will reduce the time it takes to set up the shelter in an emergency.

In addition, DOH-Charlotte began collaboration with the Department of Elder Affairs, the Agency for Health Care Administration (AHCA), Charlotte Behavioral Health Care, and Charlotte County Emergency Management to better facilitate response, recovery, and evacuation of our special needs residents in an emergency.

## CEMPs

The Department of Health is responsible for providing guidance in the development of Comprehensive Emergency Management Plans (CEMPs) for nurse registries, durable medical equipment providers, hospice and home health agencies. New legislation mandates the Department to also review and provide approval for CEMPs for these agencies. In September 2018 DOH-Charlotte partnered with DOH-Sarasota as well as both Charlotte County and Sarasota County Emergency Management to provide a workshop to providers on this new mandate as well as expectations for this new review and approval process. Over 100 participants attended the workshop.

## Respiratory Protection Program

In October 2018, DOH-Charlotte expanded its respiratory protection program to include airway protection fit-testing for our coastal community partners. The testing process included both education on airway protection as well as testing a variety of N95 respirator masks to identify the mask that would best mitigate exposure to airborne particulates for each individual. Each individual was able to take the appropriate N95 mask and associated informational literature home with them following the fit test.



## Hurricane Michael

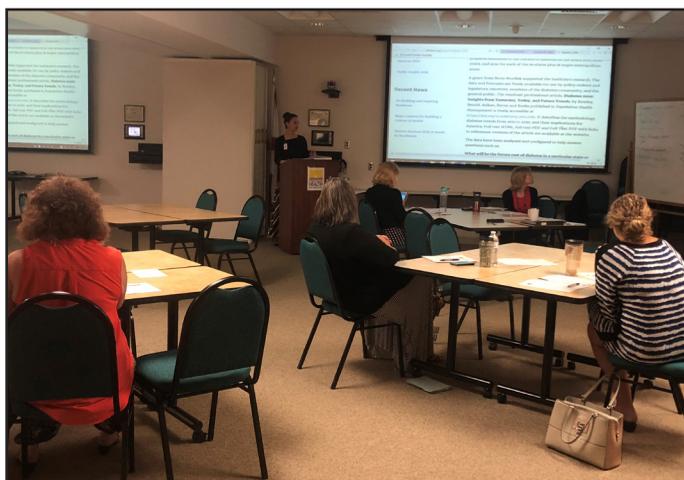
Hurricane Michael made landfall as a high-end Category 4 hurricane, with maximum sustained winds of 155 mph on October 10, in Bay County, Florida. Three of our own staff volunteered for deployment to assist in recovery efforts. All three took lead roles: Joe Pepe (Incident Commander), Shawn Wilson (EH Strike Team Member), and Bonnie Saxman (Medical Section Chief).

# Community Health Improvement Plan

The Charlotte County Community Health Improvement Plan (CHIP) is the result of a multi-year collaborative effort that includes local residents, healthcare professionals, and organizations vested in making Charlotte County a healthy community. The collaborative, known as Healthy Charlotte, grew from its 2012 inception to cover five strategic issue areas by 2018, each with their own subcommittee: Access to Healthcare, Chronic Disease Prevention, Maternal and Child Health, Mental Health, and Positive Aging.



In 2018, some of the key initiatives that were implemented by the groups included 5-2-1-0, Screen-Free Week, Signs of Suicide education, Community-Based Mental Health First Aid for Youth training, and the Positive Aging Symposiums (more detail on these are on the following pages).

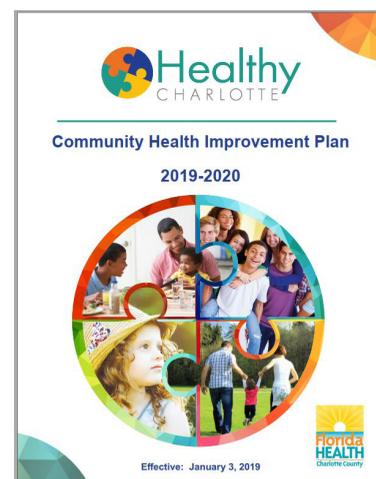


As the established initiatives for the current CHIP were concluded in 2018 by the five subcommittees, the need for a new plan arose. To facilitate the process of creating a new CHIP, DOH-Charlotte developed an abbreviated version of the Community Health Status Assessment. This Community Health Status Assessment included updates to secondary health indicators as well as preliminary information on emerging trends. This local health data was presented to community partners and members of the community in September 2018 at a Healthy Charlotte Steering Committee meeting.

Upon a thorough review of the health indicators and emerging trends, Steering Committee members narrowed the health issues down to those that were most pressing. Each health issue was reviewed in detail by the Healthy Charlotte Stakeholder group and members offered their thoughts and feedback on the possibility of developing initiatives to address these issues.

The group agreed that focusing their collaborative work directly on reducing Adverse Childhood Experiences (ACEs) in Charlotte County would bring the largest return, as it would also positively impact the other identified health issues and so much more.

A new CHIP was developed to be implemented in 2019-2020 with a focus on reducing ACEs through growing a resilient and trauma-informed community in Charlotte County. This plan was developed utilizing the basic framework of **Growing Resilient Communities 2.0**, that is recommended by the social network ACEs Connection (which is funded in part by the Robert Wood Johnson Foundation to accelerate the global ACEs science movement).



# Community Health Improvement Plan

## 5-2-1-0

5-2-1-0 Let's Go! is a nationally recognized childhood obesity prevention program. The 5-2-1-0 curriculum, which reached all 10 Charlotte County public elementary schools in 2018 through the efforts of Healthy Charlotte and DOH-Charlotte, promotes regular screen-free time, physical activity, and healthy eating habits.



## Screen-Free Week

Healthy Charlotte coordinated events during the annual Screen-Free Week to encourage families to eliminate recreational screen time for an entire week, and find other ways to have fun! Multiple businesses and community partners participated in Screen-Free Week by offering fun, family events for Charlotte County residents to enjoy. Healthy Charlotte believes that Screen-Free Week is a great way to jump-start our kids into more reading, learning, and active play. And it's also a lot of fun!

Activities for Screen-Free Week 2018 included Make-A-Book at Copperfish Books in Punta Gorda, Family Beach Night at Port Charlotte Beach Park, Dodgeball at Harold Avenue Park, and a Chalk Art Contest at Tringali Park in Englewood.



Following Screen-Free Week, families are challenged to take one night each week to find screen-free activities for their families, and turn off those screens! Family-friendly activities throughout Charlotte County are promoted regularly on the Screen-Free Charlotte Challenge Facebook page.

## Signs of Suicide

The Mental Health subcommittee also continued its work in offering the Signs of Suicide program in Charlotte County's public schools. The curriculum is taught by mental health professionals from Charlotte Behavioral Health Care. In the course, students are encouraged to reach out to a trusted adult if they suspect a friend is considering suicide or suffering from depression.

# Community Health Improvement Plan

## *Community-Based Mental Health First Aid for Youth*

Healthy Charlotte also coordinated a youth mental health first aid training, which is designed to provide guidance on how to help an adolescent who is experiencing a mental health or addictions challenge or is in crisis. In addition to teaching about common mental health challenges for youth, mental health first aid also offered a 5-step action plan for how to help in both crisis and non-crisis situations.

This training was held in April 2018 at Bayfront Health Punta Gorda in collaboration with Charlotte Behavioral Health Care and the Mental Health subcommittee of Healthy Charlotte.

## *Positive Aging Symposiums*

In 2018 Charlotte County was given two opportunities to advance their knowledge on elder issues - with a Positive Aging Symposium in February and a Positive Aging Symposium in September.

The February Symposium, held at the Port Charlotte Beach Complex, focused on staying engaged and the physiology of aging. Presenters included Dr. Maureen Mickus, Ph.D., from Western Michigan University and Erin McLeod, President and CEO of Friendship Centers.



The September Symposium, Putting Your Best Fork Forward, provided participants with tips for mindful eating, diabetes prevention, and education on how to find healthy food on a fixed income.

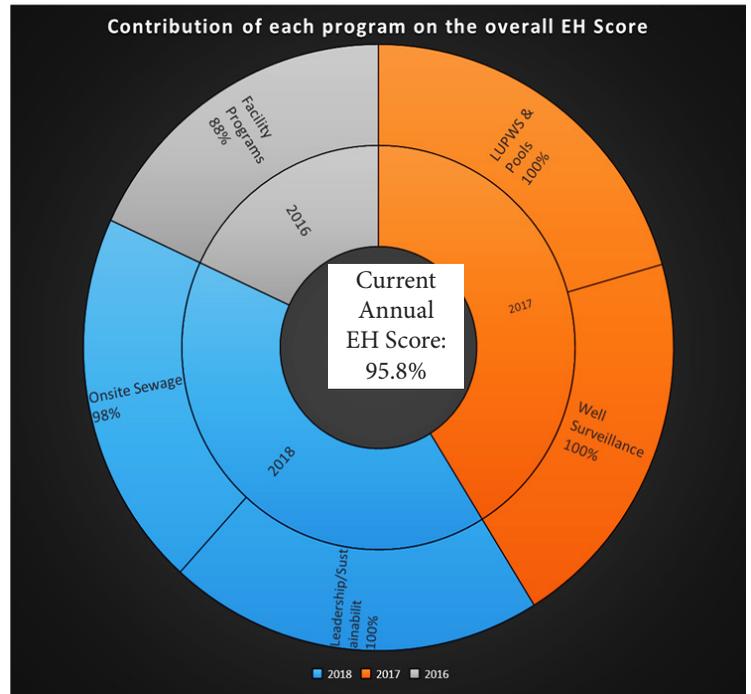
DOH - Charlotte's Program Administrator for Community Health Promotions, Abbey Ellner, provided the audience with an interactive presentation on diabetes prevention with a focus on healthy eating, and Tania Garcia of Green Living, Green Planet engaged participants with a cooking demonstration. The event was held at the Cultural Center, which provided a delicious, healthy lunch for all who attended.



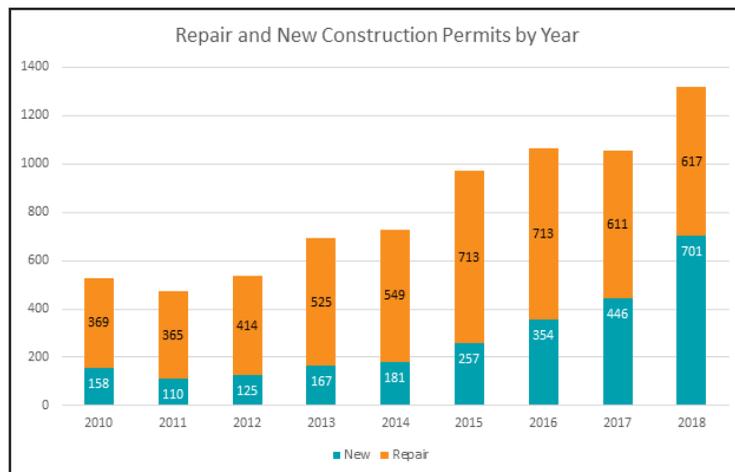
# Environmental Health

The Environmental Health department is responsible for safety, sanitation, and enforcement of public health laws in the community. The services provided by Environmental Health staff are focused on preventing disease outbreaks and protecting the public. The Department is very broad in scope and covers fourteen separate programs governed by Florida Statutes and Florida Administrative Codes.

The image to the right depicts the Comprehensive Environmental Score, which is an annual performance measure for all Environmental Health programs. The score is weighted as follows: Facilities - 30%, Onsite Sewage (OSTDS) - 30%, Water - 30%, and the EHLS - 10%. The current annual EH score for DOH-Charlotte is 95.8%.



## Facilities



In 2018 program evaluations were completed for all facility programs. They included inspections, plan reviews, investigations, equipment and personnel reviews. The Environmental Health Facility programs include 13 programs such as food hygiene, public swimming pools, water, group care, biomedical waste, tattoo, body piercing, mobile home parks, well surveillance, and nuisance complaints.

Facility staff work closely with Epidemiology staff and other agencies such as the Department of Hotels and Restaurants, Department of Agriculture and Department of Children and Families to investigate reports of outbreaks related to foodborne illnesses in the County.

Environmental Health staff also monitored area beaches under the Florida Healthy Beaches Program. Significant challenges were experienced in 2018 with incidents of red tide along the coast of Charlotte County. Bacteriological beach samples were collected by staff every other week at nine locations in Charlotte County and sent to a laboratory for testing.

# Environmental Health

By monitoring the level of bacteria, DOH-Charlotte is able to advise residents and visitors when it is unsafe to go into the water. The department also monitored water quality for wells and cisterns for residents of Little Gasparilla.

Staff member Gino Pierre obtained certification as an Associate Safety Professional in 2018 and intends to become a Certified Safety Professional early in 2019. Safety Professionals perform worksite assessments to determine risks, potential hazards and controls, evaluating risks and hazard control measures, investigating incidents, maintaining and evaluating incident and loss records, and preparing emergency response plans, among other duties. DOH-Charlotte is proud to support its staff in professional growth through obtaining certifications such as these.

## OSTDS

The largest section of the Environmental Health program is Onsite Sewage. Due to increased building activity in the County, the program experienced significant increases in permitting for new septic systems. The trend is likely to continue for the near future. Charlotte County currently has approximately 40,000 septic systems including approximately 2,500 aerobic treatment units which need to be inspected annually.

The Onsite Sewage program also covers managed septic systems which are aimed to assist home owners manage their systems more efficiently while protecting vulnerable wetlands and drinking water supplies.



## PACE-EH



The PACE-EH (Protocol for Assessing Community Excellence in Environmental Health) program involves community-based environmental health assessments, issue identification, prioritization and strategic action planning. It is based upon community collaboration and environmental justice principles.

In 2018 the program continued to collaborate with the Trabue Woods United Association in Punta Gorda to build a fresh food market and garden for residents of the area.

# Quality Improvement

DOH-Charlotte completed another successful year of Quality Improvement projects in 2018. A total of 11 QI projects were completed throughout the agency. Four of these projects were programmatic and 7 were administrative. Each project was presented at an all-staff meeting to celebrate the successes and to share lessons learned. Staff were then asked to prioritize the projects in order to identify the top three which would receive the 2018 Wise Old Owl Award, as well as to select the projects that would be submitted for national competitions.



The winning projects were:

- **New-Hire QI Training Process** (Administrative Project - to ensure every new-hire is enrolled in and completes in-house QI training within the first twelve months of hire) by Janet Jaeger
- **Decreasing WIC Clients No-Show Rates** (Programmatic Project - to maximize provision of WIC services by improving appointment scheduling) by Sarah McWhirter
- **Growing Strong Families** (Programmatic Project - Streamlined Documentation for Routine Home Visits (to implement lean practices in documentation) by Ann Monville



The team leader of each winning project was presented with a Wise Old Owl Trophy. These trophies will serve as visual reminders of the culture of quality improvement at DOH-Charlotte.

Additionally, 3 projects were selected to be presented at the National Network of Public Health Institutes' (NNPHI) 2019 Open Forum for Quality Improvement and Innovation in Public Health.

Open Forum is a place where attendees can learn about compelling, innovative, and emerging content from their peers around a wide variety of topics in performance improvement and innovation in public health.

## *NEW Advanced Quality Improvement Training*

2018 also marked the development and roll-out of **QI 104 Training: Process Mapping vs. Value Stream Mapping**. Staff learned that process mapping looks at the micro level while value stream looks at the macro level.

The first round of training educated 10 staff members on how to calculate Process Cycle Efficiency with the goal of fulfilling our 2016-2018 Strategic Plan priority of providing our customers with effective agency processes.

# Quality Improvement

The projects selected for the NNPHI Open Forum were:

1. Sharing Best Practices
2. Decreasing WIC Clients No-Show Rate
3. Improving the Performance Management Cycle Process

## Best Practice Sharing Structure (Administrative Project)

Team Leader Glama Carter

DOH - Charlotte QI Project (Administrative)  
Best Practice Sharing Structure

**Team Leader:** Glama Carter  
**Team Members:** Janet Jaeger, Jennifer Sexton and Jacqueline Martin

**AIM Statement:** An opportunity exists to establish a best practice sharing process by June 30, 2018 that will result in the increase of SAT Sub-element 6.5 score from a 2.71 to a minimum of 5.0 by year 2020.

**Data (Graph):** [Line graph showing SAT Sub-element 6.5 score trends]

**Problem Statement:** Lack of having a standardized best practice sharing process in the organization has led to missed opportunities for improvement including a low score of 2.71 in SAT 6.5 sub-element.

**Root Cause:** Lack of standardized structure or process to document, share, and sustain best practices.

**Improvement Action Steps:** Research NACCHO, inquire with QI Consortia, discuss with A-Team, determine best vehicle to promote best practices, develop form, disseminate information, and educate on process.

**Results (Graph):** [Flowchart showing process flow]

**Lessons Learned:** Without the adoption of a formal best practice process and the support and buy-in of management and supervisors, the efforts would have been nullified. Follow up on implementation of the process, combined with an IOP will be vital to success.

**Next Steps:** Adopt  Adapt  Abandon   
Create an Internal Operating Procedure (IOP)

DOH-Charlotte QI Project (Programmatic)  
Decreasing Clients' WIC Appointment No-Show Rate

**Team Leader:** Sarah McWhirter  
**Team Members:** Monica Allison, Kathy Chervinski, Sattie Longchamp, Sheila Couvrenter

**AIM Statement:** To decrease the No-Show Rate percentage for the Port Charlotte WIC Office from the baseline average of 30.15% for April to June 2017 to 15.85% by March 2018.

**Problem Statement:** The No-Show rate percentage is higher than general clinic standards at average of 30.15% for April to June 2017.

**Root Cause:**

- WIC office schedules clients too far out from appointment date.
- Staff did not update phone number at last client and staff interaction.

**Improvement Action Steps:**

- Schedule clients no later than 1 week out, from the time they call, to their requested appointment date.
- Verify the clients phone number during each interaction.

**Results (Graph):** No-Show Percentage Quarter Averages April 2017 to March 2018. [Bar chart showing decrease from 30.15% to 23%]

**Lessons Learned:**

- It is extremely important to update client's contact info, each client-staff interaction.
- Keeping the time between scheduling and an appointment as short as possible is important. The closer an appointment is made to the date of appointment, the risk for no-showing for an appointment decreases.
- Not all clients will want to make their appointment close to the date of the suggested appointment; some clients continue to prefer scheduling 3 months in advance.

**Next Steps:** Adopt  Adapt  Abandon

## Decreasing Clients' WIC Appointment No-Show Rate (Programmatic Project)

Team Leader Sarah McWhirter

DOH-Charlotte QI Project (Administrative)  
InsightVision for Performance Management

**Team Leader:** Jacqueline Martin  
**Team Members:** Glama Carter, Joshua Hughes, Jennifer Sexton

**AIM Statement:** An opportunity exists to streamline and consolidate multiple Performance Management reports to reduce the number of steps taken by 50% to update and prepare quarterly reports by June 30, 2018.

**Number of Measures/Steps Duplicated Before InsightVision:** [Bar chart showing high duplication]

**Problem Statement:** There are multiple and complex steps associated with updating Performance Management, CHIP, Strategic Plan, and QI reports that are being duplicated.

**Root Cause:** There are not enough licenses and training available for all needed users.

**Improvement Action Steps:**

- Purchase additional licenses for appropriate staff.
- InsightVision Training in small group and 1:1 training to staff.
- Implementation for FY17-18 of QI projects, CHIP, Strategic Plan, PNC Measures of Success, and Snapshot Measures.

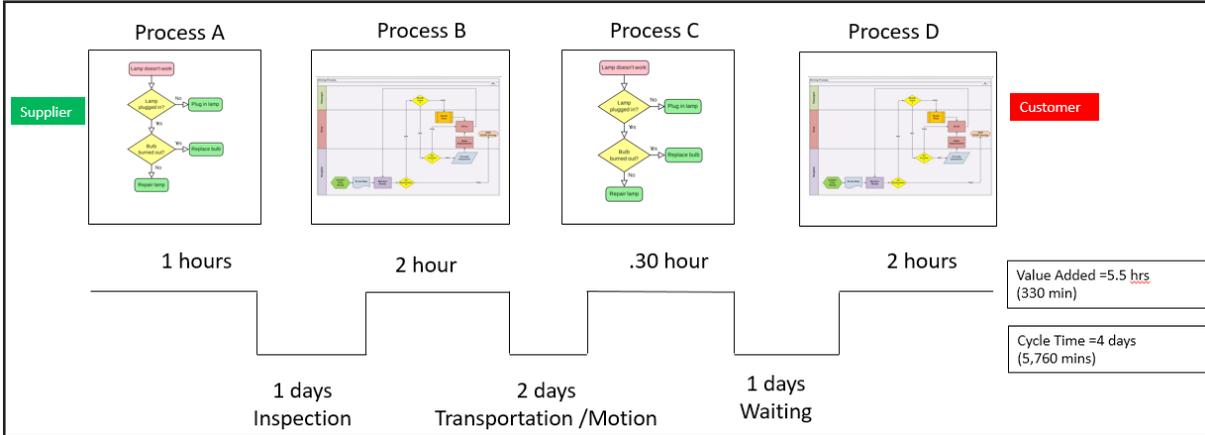
**Total Number of Measures/Steps to Enter in InsightVision:** [Line graph showing reduction]

**Lessons Learned:** Better training and understanding of InsightVision is needed. Updates from InsightVision to be incorporated into next training. InsightVision training to become part of QI training.

**Next Steps:** Adopt  Adapt  Abandon   
Feedback Survey to be used for training improvements in next PDCA cycle

## InsightVision for Performance Management (Administrative Project)

Team Leader Jacqueline Martin





# Florida Department of Health in Charlotte County

The mission of the Florida Department of Health is to protect, promote, and improve the health of all people in Florida through integrated state, county, and community efforts.

**Administrative/Main Office**  
1100 Loveland Blvd.  
Port Charlotte, Florida 33980

**WIC (Englewood)**  
6868 San Casa Road  
Englewood, Florida 34224

941-624-7200

<http://charlotte.floridahealth.gov/>

**Improving quality of life through positive health outcomes.**