



# DOH-Charlotte Strategic Plan

**2019-2022**

Effective July 1, 2019

**Florida  
HEALTH**

**Florida Department of Health in Charlotte County**

**1100 Loveland Boulevard**

**Port Charlotte, Florida 33980**

**[Charlotte.FloridaHealth.gov](http://Charlotte.FloridaHealth.gov)**

**Produced by**

**The Florida Department of Health in Charlotte County**

**Office of Strategic Planning and Communications**

**Mission:**

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



**Ron DeSantis**  
Governor

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

## Letter from Joseph Pepe, Interim Health Officer



Dear Charlotte County Residents:

A meaningful public health strategic plan involves a significant commitment from many stakeholders who share a vested interest in improving the lives of our community members. In 2018, the Florida Department of Health in Charlotte County set forth the arduous task of developing a comprehensive plan that considers all aspects of our community. The goal was to develop a plan based upon our community needs, that is data-driven, with measurable outcomes.

This strategic plan is a culmination of hundreds of hours of interviews, meetings, strategic discussions, and needs assessments with our community members and partner agencies. This document was developed with the help of honest feedback at all levels of the agency and community. I want to thank all of our partners, employees, and community members who contributed to the creation of this plan.

It is my belief that this plan will align with the fulfillment of the agency mission to protect, promote, and improve the lives of our community members through integrated state, county, and community efforts.

Sincerely,

Joseph Pepe, Ed. D., MSA  
Interim Health Officer

**Florida Department of Health in Charlotte County**

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## MISSION

### **Why do we exist?**

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

## VISION

### **What do we want to achieve?**

To be the Healthiest State in the Nation.

## VALUES

### **What do we use to achieve our mission and vision?**

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

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

**A**ccountability: We perform with integrity & respect.

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

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

# Executive Summary

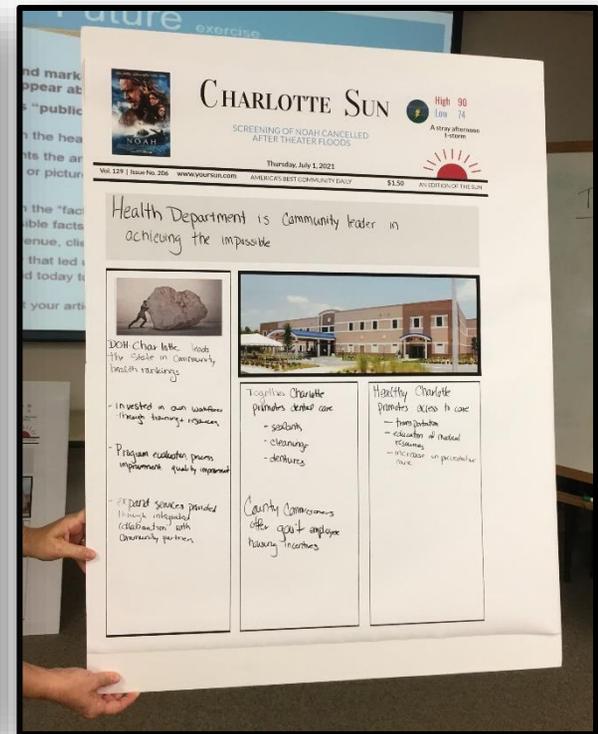
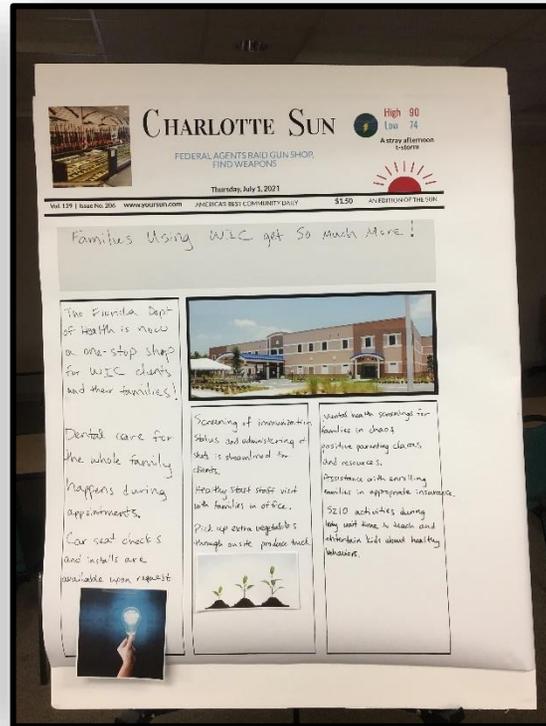
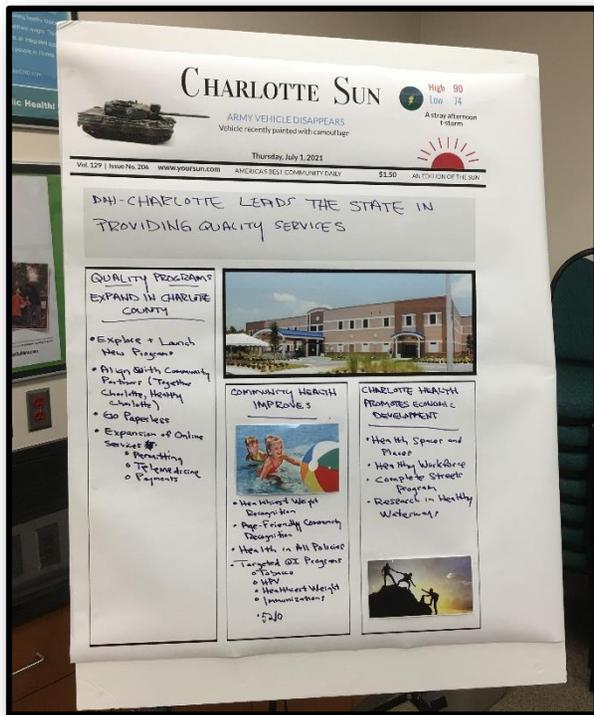
This plan presents the strategic direction for the Florida Department of Health in Charlotte County (DOH-Charlotte) to protect, promote, and improve the health of Charlotte County residents and visitors by creating the conditions for healthy living. With many local partners, DOH-Charlotte supports policy and systems change, promotes healthy behaviors, and prevents health problems, such as unintentional injuries, diabetes, and obesity.

The Strategic Plan provides the framework for developing policies; linking resources, research, budget requests and legislative initiatives to critical public health issues; and focusing attention on results and accountability. It is supported by other agency plans such as the Workforce Development and Quality Improvement plans which outline the path to train and develop a competent workforce in a variety of ways, helping to sustain a performance driven culture of quality improvement.

The 2019-2022 Strategic Plan sets forth what the organization plans to achieve in the next three years along with a roadmap for achieving it. DOH-Charlotte will use this plan to work towards achieving its vision and executing its mission. Direction for the process came from a strategic planning committee that included senior leadership, supervisors, program directors, and front-line staff.

Over a 9-month period, DOH-Charlotte's Strategic Planning Committee embarked on a process to determine the direction and course of the agency. The Committee was developed in August 2018 and dove into the planning process early in September. The first meeting laid the foundation for the work to come – starting with a visioning exercise to determine where the group wished to see DOH-Charlotte in the “headlines” five years in the future.





Across September and October, the Committee worked together to develop an internal agency motto. This motto is intended to serve as a lens through which leaders will view future decision-making opportunities.

## DOH-Charlotte Motto:

*~ Improving quality of life through positive health impacts. ~*

In addition, the group agreed to use the following themes to exemplify the 3 years of the Plan:



A broad scope of health indicator data was reviewed in October to identify the pressing health issues for Charlotte County residents. Subject matter experts were present to provide their scope of knowledge to key topics as they arose. Additional data was reviewed from the most recent Employee Feedback Survey as well.

Throughout the planning process, senior leadership was committed to hearing from staff at every level of the agency as well as local community stakeholders. During the Strengths, Weaknesses, Opportunities, and Threats (SWOT) analysis phase of strategic planning (September), all DOH-Charlotte employees were provided the opportunity to give input. Staff input was solicited at the December 2018 All Staff meeting as well, where groups were given the chance to provide input on the results of the Employee Feedback Survey.



Community feedback was solicited at two stakeholder meetings as well. The results of these assessments directly informed the strategies and objectives in this strategic plan.

Every effort was made to ensure alignment with the State Health Improvement Plan, as well as local quality improvement and workforce development plans. The identified measures will be tracked through the agency's performance management system throughout the life of the plan.

The Priorities and Goals included in this plan are:

- **Priority: Health Equity**

- **Goal:** Ensure community members have opportunities to achieve healthier outcomes.

- **Priority: Long, Healthy Life**

- **Goal:** Increase healthy life expectancy, including the reduction of health disparities to improve the health of all groups.

- **Priority: 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.

- **Priority: Operational Efficiency**

- **Goal:** Achieve operational efficiencies through sound financial, process improvement, and business practices.

- **Priority: Workforce Development**

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

Many of these priorities are interconnected and mutually supportive. They represent a comprehensive approach which focuses on population health and organizational improvement.

This strategic plan is intended to position DOH-Charlotte to operate as a sustainable local health department within Florida's integrated public health system, under the current economic environment and to give our customers high quality public health services.



*DOH-Charlotte Strategic Planning Committee*

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

## Demographics

The Florida Department of Health in Charlotte County serves a population of approximately 174,000.

Demographic, socioeconomic, and environmental factors create unique community health service needs. A key characteristic that sets Charlotte County apart is that it ranks second in the Nation with over 35% of people who are 65 and older; preceded only by Sumter County, FL with over 53%.

## Population by Age

### Charlotte County and Florida

	County – 2017		State – 2017
Age Group	Total Number	Total Percentage	Total Percentage
< 5	5,443	3.1	5.5
5 – 14	12,192	7.0	11.2
15 – 24	13,237	7.6	12.0
25 – 44	26,371	15.2	25.0
<b>Subtotal</b>	<b>57,243</b>	<b>32.9</b>	<b>53.7</b>
45 – 64	49,142	28.2	26.6
65 – 74	37,009	21.3	11.0
> 74	30,562	17.6	8.8
<b>Subtotal</b>	<b>116,713</b>	<b>67.1</b>	<b>46.4</b>
<b>Total</b>	<b>173,956</b>	<b>100.0</b>	

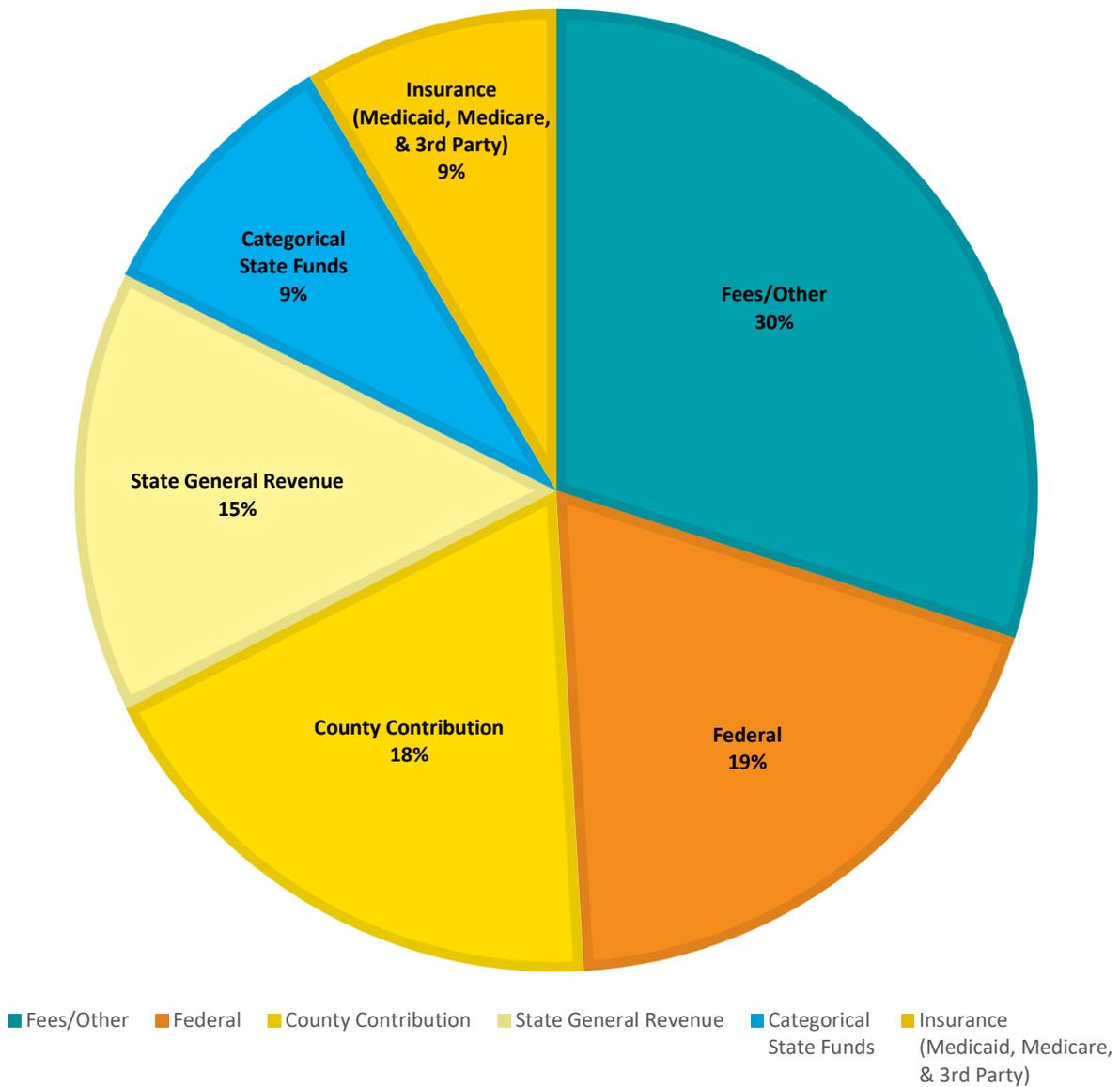
Source: Florida Legislature, Office of Economic and Demographic Research (EDR).

# Background and Overview

## Budget and Revenue

Florida Department of Health in Charlotte County financial resources are provided through multiple sources. These include fees, grants, and budget allocations from the County, State and Federal governments.

**The Florida Department of Health in Charlotte County  
Revenue Percentage by Source  
State Fiscal Year 2017-2018**

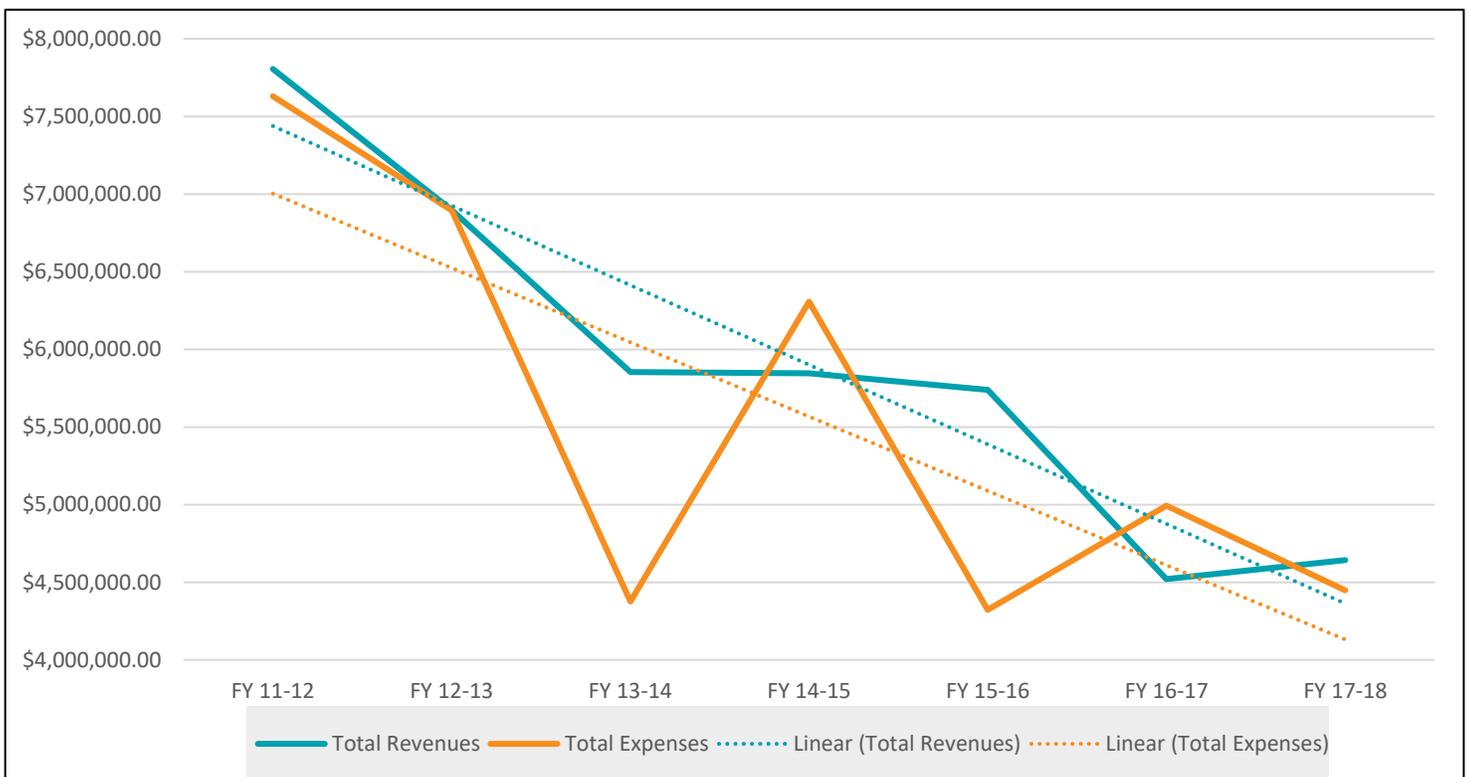


# Background and Overview

## Revenue and Expenses

The graph below represents our revenue and expense relationship over the past seven years. The corresponding dashed lines represent the trend of these values.

**The Florida Department of Health in Charlotte County  
Revenue and Expenses  
State Fiscal Year 2011 – 2018**



## **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 Charlotte County's commitment to providing the highest standards of public health through the following core functions and services:

### **ENVIRONMENTAL HEALTH**

We monitor and regulate 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, healthy beach water, complaint investigations and enforcement of public health laws.

### **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.

### **QUALITY IMPROVEMENT (QI)**

We continually seek to improve the quality of the programs and services we offer and maintain Accreditation standards aligning our goals & objectives to QI (Appendix D).

### **FAMILY PLANNING**

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

### **VITAL STATISTICS**

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

### **COMMUNICABLE DISEASE CONTROL**

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

### **DENTAL CLINIC**

We provide needed oral health care services for both children and adults in our community.

### **GROWING STRONG FAMILIES**

We empower at-risk women to change behavior in order to improve their quality of life and that of their children and families.

### **COMMUNITY HEALTH PROMOTION**

We plan and implement programs to promote healthy behaviors and reduce chronic disease through education, 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 board to improve student health by offering immunizations, dental sealants, vision and hearing screenings, and tracking of physical development in all children.

# SWOT Analysis\*

## Strengths (Internal)

- Knowledgeable & Compassionate Staff
- Motivated & Experienced Staff
- Educated & Innovative Staff
- We care about the community
- Our Community Services
- Nice Facility
- Small Agency
- Leadership that recognizes the core social/psychological issues
- Working with others
- Our Adaptability
- Our passion for public health
- Teamwork to improve anything & everything

## Opportunities (External)

- New technology
- Salaries
- Increase staff levels
- Increase EH septic fees
- More training & education
- Maximize partnerships
- Helping customers
- Lead the state in decreasing rates of maternal smoking
- Education program with partners
- Community engagement/outreach
- Marketing

## Weaknesses (Internal)

- Low paying jobs
- Turn over
- Communication inconsistencies
- Low staff coverage
- Need for team building
- Need for timely training
- Lengthy hiring process
- Need of WIC office in Punta Gorda
- More training and education prior to doing the job
- Lack of advancement opportunities
- Policy restrictions impacts ability to perform effectively in some areas

## Threats or Challenges (External)

- Rising supply costs
- Politics
- Miscommunication
- Funding
- Severe national disasters
- Budget cuts
- Need of leadership in key roles
- Health insurance for people who retire
- Safety
- Loss of staff due to low salary

\*This listing is a condensed version of the SWOT Analysis. A full listing of the process and results is available in Appendix B.

# Strategic Priorities

## Priority 1: Health Equity

**Goal:**

Ensure community members have opportunities to achieve healthier outcomes.

**Strategy:**

1. To strengthen our capacity to work collaboratively with communities to reduce disparities in Social Determinants of Health (SDOH) and advance Health Equity.
2. To develop a framework that supports and builds networks that foster resilience against Adverse Childhood Experiences (ACEs).
3. To reduce health inequities due to gaps in communication.
4. To enhance community and workforce knowledge, capacity, and understand of issues pertaining Health Equity, cultural competency and sensitivity and SDOH.

## Priority 2: Long, Healthy Life

**Goal:**

Increase healthy life expectancy, including the reduction of health disparities to improve the health of all groups.

**Strategy:**

1. To improve the health of moms and babies in our community.
2. To prevent and reduce unintentional injuries and deaths.
3. To improve the food environment and nutrition habits.
4. To prevent diseases related to tooth decay and oral health.
5. To increase promotion of and access to immunizations for vaccine-preventable diseases.
6. To prevent new HIV infections in our community.
7. To increase awareness of behavioral and mental health services.

## Priority 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

**Strategy:**

1. To educate and protect from environmental health hazards.
2. To demonstrate readiness to surveil and investigate existing and emerging infectious disease threats.
3. To maximize readiness for emerging natural or manmade disasters.

## Priority 4: Operational Efficiency

**Goal:**

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

**Strategy:**

1. To ensure a balanced operational budget.
2. To ensure financial sustainability.
3. To maximize the utilization of technology.
4. To sustain and promote a culture of Quality Improvement
5. To bolster customer service and satisfaction.

## Priority 5: Workforce Development

**Goal:**

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

**Strategy:**

1. To foster a continued communication and feedback-driven environment.
2. To maintain a positive work environment and a sustainable workforce.
3. To provide and promote a culture of health for team members.

# Goals, Strategies & Objectives

## Priority 1: Health Equity

**Goal 1:** Ensure community members have opportunities to achieve healthier outcomes.

Strategy	Objectives
<p>1.1: Strengthen our capacity to work collaboratively with communities to reduce disparities in Social Determinants of Health (SDOH) and advance Health Equity.</p>	<p>1.1 A: By December 31, 2020 work collaboratively with community partners to identify environmental health issues of concern in an under-resourced community for a project using Protocol for Assessing Community Excellence in Environmental Health (PACE-EH).  <b>As measured by:</b>            Re-assessing the environmental issues that were identified in an underserved community in 2015, consulting with community partners and re-prioritizing. From 0% in 2018 to:            50% completion in 2019            100% completion in 2020</p>
<p>1.2: To develop a framework that supports and builds networks that foster resilience against Adverse Childhood Experiences (ACEs).</p>	<p>1.2 A: By December 31, 2019 and annually thereafter, maintain Healthy Charlotte Facebook page to include posting about presentations, new partner agencies, and community successes.  <b>As measured by:</b>            New Facebook posts and/or “Shares” from partner organizations’ pages related to ACEs.            From 0 in 2018 to:            24 in 2019            1.2 B: By December 31, 2019 and annually thereafter, develop press releases at least quarterly to maintain community awareness of initiative.  <b>As measured by:</b>            Number of Healthy Charlotte press releases published regarding the ACEs initiative.            From 0 in 2018 to:            4 in 2019</p>
<p>1.3: To reduce health inequities due to gaps in communication.</p>	<p>1.3 A: By December 31, 2021, develop a series of communication campaigns to provide education to the community on public health issues and on DOH-Charlotte’s programs and services.  <b>As measured by:</b>            From 0 in 2018 to:            1 campaign in 2019 (<i>Red Tide</i>)            4 campaigns in 2020            6 campaigns in 2021</p>
<p>1.4: Enhance community and workforce knowledge, capacity, and understanding of issues pertaining Health Equity, cultural competency and sensitivity and Social Determinants of Health (SDOH).</p>	<p>1.4 A: By December 2020, staff will complete Cultural Awareness online training: Introduction to Organizational Cultural Competence and Addressing Health Equity: A Public Health Essential.  <b>As measured by:</b>            Training completion from 0 in 2018 to:            50% in 2019            75% in 2020            100% in 2021</p>

# Goals, Strategies & Objectives

## Priority 2: Long, Healthy Life

**Goal 2:** Increase healthy life expectancy, including the reduction of health disparities to improve the health of all groups

Strategy	Objectives
<p>2.1: Improve the health of moms and babies in our community.</p>	<p>2.1 A: By December 31, 2021 implement WIC initiatives that promote breastfeeding activities  <b>As measured by:</b>                      Percent of WIC infants ever breastfed from 82.4% in 2018 to:                      82.5% in 2019                      82.7% in 2020                      83% in 2021                      2.1 B: By December 2020 achieve a gold level standard for breastfeeding work place.  <b>As measured by:</b>                      2019 100% Gold Level Standard achieved                      2020 100% Platinum Level Standard achieved</p>
<p>2.2: Prevent and reduce unintentional injuries and deaths.</p>	<p>2.2 A: By December 31, 2020 reinforce child passenger safety to reduce the number of child passenger injuries and deaths from motor vehicle accidents  <b>As measured by:</b>                      Increase the average car seat class attendance from 37% capacity in 2018 to:                      50% of capacity by 2019                      62% of capacity by 2020                      75% of capacity by 2021                      2.2 B: By December 31, 2021 reinforce drowning prevention by promoting water safety education and messaging in the community.  <b>As measured by:</b>                      Increase number of sectors reached with water safety education and materials from 1 in 2018 to                      2 in 2019                      3 in 2020                      4 in 2021</p>
<p>2.3: Improve the food environment and nutrition habits.</p>	<p>2.3 A: By December 31, 2019 increase knowledge and change behavior of elementary school children in the areas of nutrition and physical activity.  <b>As measured by:</b>                      Increasing the number of students exposed to 5-2-1-0 from 924 in 2018 to:                      1,500 in 2019                      Increasing the number of sectors educated on 5-2-1-0 from 2 in 2018 to:                      ≥ 4 in 2021</p>

# Goals, Strategies & Objectives

<p>2.4: Prevent diseases related to tooth decay and oral health.</p>	<p>2.4. A: By December 31, 2021 reduce the incidence of dental decay in children in both primary and secondary dentition by providing the School Based Dental Sealant Program, and promoting access to the FDOH Charlotte County Dental Clinic.  <b>As measured by:</b>            Increasing the % of children participating in the dental sealant program from 1,640 in 2018 to 5% each year: 1,734 in 2019            1,826 in 2020            1,922 in 2021</p> <p>2.4 B: By December 31, 2021 decrease the number of tooth extractions while increasing access to restorative dental care for adults (21+) in our community.  <b>As measured by:</b> Decreasing the % of adult tooth extractions from 400 in 2018 by 5% each year.            380 in 2019            361 in 2020            343 in 2021</p>
<p>2.5: Increase promotion of and access to immunizations for vaccine-preventable diseases.</p>	<p>2.5 A: By December 31, 2020 reduce the HPV related cancers by promoting HPV vaccination among eligible individuals.  <b>As measured by:</b> The number of HPV doses provided from 323 in 2018 to: 335 in 2019            350 in 2020</p> <p>2.5 B: By December 31, 2020 increase the percentage of 2-year-olds, CHD clients, who are fully immunized  <b>As measured by:</b> The percentage of 2-year-olds, CHD clients, fully immunized provided from 93% in 2018 to: 95% (State goal) in 2019            100% in 2020</p> <p>2.5 C: By December 31, 2021 increase the rate of 11-12-year-olds who have completed the first dose of HPV vaccine.  <b>As measured by:</b> The number of doses provided from 264 in 2018 to:            270 in 2019            275 in 2020            280 in 2021</p> <p>2.5 D: By December 31, 2020 increase the number of children 6 months-18 years and pregnant women who receive seasonal flu vaccine.  <b>As measured by:</b> The number of vaccines provided:  <u>Children:</u> From 1,167 in 2018 to:            1,182 in 2019            1,200 in 2020            1,215 in 2021  <u>Pregnant Women:</u> From 34 in 2018 to:            44 in 2019            50 in 2020            55 in 2021</p>

# Goals, Strategies & Objectives

<p>2.6: Prevent new HIV infections in our community.</p>	<p>2.6 A: By December 31, 2020 increase the number of at-risk for HIV infection clients who initiate PrEP/nPEP services.  <b>As measured by:</b>            Clients at risk for HIV infection who initiate PrEP/nPEP services from 5 in 2018 to:            10 in 2019            20 in 2020            30 in 2021</p>
<p>2.7: Increase awareness of behavioral and mental health services.</p>	<p>2.7 A: By December 31, 2021, in partnership with community organizations promote awareness of and ways to access Mental Health Services in the community.  <b>As measured by:</b>            Organizing a symposium on behavioral and mental health awareness. From 0 in 2018 to:            1 in 2019            2.7 B: By December 31, 2021, develop and disseminate a comprehensive guide to behavioral and mental health services in Charlotte County.  <b>As measured by:</b>            From 0 guides in 2018 to:            1 guide developed in 2020            1 guide disseminate in 2021</p>

## Priority 3: Readiness for Emerging Health Threats

**Goal 3:** Prevent the spread of communicable diseases and demonstrate readiness to protect the public from emergency disasters and health threats.

Strategy	Objectives
<p>3.1: Educate and protect from environmental health hazards.</p>	<p>3.1 A: By December 31, 2021 and annually thereafter the Environmental Health program will achieve excellence in services, to prevent and reduce illness/injuries due to environmental health factors.  <b>As measured by:</b>            Maintaining the state's standard for the Comprehensive Environmental Health score <math>\geq</math> 90 percent.            3.1 B: By December 31, 2020 and annually thereafter the Environmental Health OSTDS program will maintain or exceed excellence issuing new and repair permits within state guidelines.  <b>As measured by:</b>            Annually Issuing repair permits <math>\leq</math> 2 days; new permits <math>\leq</math> 8 days            3.1 C: By December 31, 2020 and annually thereafter the Environmental Health facility programs will maintain or exceed excellence issuing all operating permits within state guidelines.  <b>As measured by:</b>            Annually issuing all operating permits in <math>\leq</math> 30 days 98.94% in 2018; 100% in 2019</p>

# Goals, Strategies & Objectives

	<p>3.1 D: By December 31, 2020 and annually thereafter the Environmental Health program will maintain or exceed excellence conducting complaint investigations within state guidelines.</p> <p><b>As measured by:</b> Annually conducting complaint investigations in ≤ 48 hours 85% in 2018; 90% in 2019</p>
<p>3.2: Demonstrate readiness to surveil and investigate existing and emerging infectious disease threats.</p>	<p>3.2 A: By December 31, 2020, investigate and respond to cases, outbreaks and other public health events to protect persons residing in Charlotte County, and implementing control measures and interventions as appropriate.</p> <p><b>As measured by:</b> Maintaining the state's standard for the Epidemiology annual score ≥75 percent.</p>
<p>3.3: Maximize readiness for emerging natural or manmade disasters.</p>	<p>3.3 A: By December 31, 2021 demonstrate significant or full ability to prepare and deliver on critical preparedness functions (SpNS pre-triage and operations, POD, Mass prophylaxis, Emergency evacuation by internal staff, active shooter, body mechanics).</p> <p><b>As measured by:</b> Conducting training and preparing staff on how to appropriately deliver services during critical preparedness functions. From 0 in 2018 to: 4 staff (representation from multiple departments) attending regional response trainings with planning consultant in 2019 6 staff (representation from multiple departments) attending regional response trainings with planning consultant in 2020</p> <p>3.3 B: By December 2020 conduct exercise/drill/training annually or as needed from 1 in 2018 to: 2 in 2019 3 in 2020</p> <p>3.3 C: By December 31, 2020 work collaboratively with community partners to educate citizens and promote appropriate levels of preparedness for emerging natural or manmade disasters.</p> <p><b>As measured by:</b> Conducting a safety and preparedness public education activity annually (in collaboration with healthcare coalition member or regional planners). From 0 in 2018 to: 1 in 2019 2 in 2020</p>

# Goals, Strategies & Objectives

## Priority 4: Operational Efficiency

**Goal 4:** Achieve operational efficiencies through sound Financial, Process Improvement and Business Practices.

Strategy	Objectives
4.1: Balanced operational budget.	4.1 A: By December 31, 2019 and annually thereafter, ensure all programs are operating within their budgets and are monitoring budget variances to ensure appropriate spend down of budget allocations. <b>As measured by:</b> Program annual operational variance from 9% in 2018 to: ≤ 5% by the end of FY 2019.
4.2: Ensure financial sustainability.	4.2 A: By December 31, 2019 and annually thereafter, ensure compliance with Accounts Receivable (AR) measures. <b>As measured by:</b> The total outstanding AR balances will not exceed the total billing <u>over</u> the last 12 months. From 12% in 2018 to: ≤8% in 2019 4.2 B: By June 30, 2020 and annually thereafter, pursue alternative sources of revenue and resources. <b>As measured by:</b> From applying for 4 grants outside of Schedule C in 2018 for DOH-Charlotte to: 5 grants in 2019 6 grants in 2020
4.3: Maximize the utilization of technology.	4.3 A: By December 31, 2021 and annually thereafter, improve business processes using technology. <b>As measured by:</b> Information Technology equipment meeting current IT standards from 73.65% in 2018 to: >93% in 2021
4.4: Sustain and promote a culture of Quality Improvement.	4.4 A: By June 30, 2020 continue implementation of the Quality Improvement Plan. <b>As measured by:</b> Sustain implementation of the objectives outlined on the plan from 100 in 2018 to: 100% in 2019 100% in 2020 4.4 B: By June 30, 2020 and annually thereafter complete full PDCA cycle quality and/or process improvement projects and Annual Wise Owl Award recognition event. <b>As measured by:</b> Completion of QI projects from average of 10 in 2018 mainly administrative projects to: 6 in 2019 (3 programmatic and 3 administrative) 6 in 2020 (3 programmatic and 3 administrative)
4.5: Bolster customer service and satisfaction.	4.5 A: By December 31, 2019 design an integrated process to gather, review, and address customer's feedback and recognize team members who exceed their expectations. <b>As measured by:</b> Designing and implementing a process to gather feedback and recognize staff from 0 in 2018 to: 1 design in 2019 & 1 implementation in 2020

# Goals, Strategies & Objectives

## Priority 5: Workforce Development

**Goal 5:** Foster a healthy work environment to ensure a highly competent, satisfied, knowledgeable workforce with opportunities for professional growth and development.

Strategy	Objectives
5.1: Foster a continued communication and feedback-driven environment.	<p>5.1 A: By December 31, 2021 improve the % on Employee Feedback Survey in multiple sections:  <b>As measured by:</b>            Improving Leadership and Workforce Focus sections from 58.6% Agree or Strongly Agree in 2018 to 65.0%; and 72.1% in 2018 to 75.0% in 2019 respectively.            Improving Strategic Planning and Operations Focus sections from 50.9% in 2018 to 65.0%; and from 66.2% in 2018 to 70.0% in 2020 respectively.            Improving the Results section from 63.8% in 2018 to 70.0% in 2021.</p> <p>5.1 B: By December 31, 2019 and every year thereafter % of items in compliance with DOH information security and privacy standards, as defined in the annual information security and privacy assessment.  <b>As measured by:</b>            The % of items in compliance with DOH information and privacy standards, as defined in the annual information security and privacy assessment.            From 83% in 2018 to 90% in 2019 to 95% in 2020 to 100% 2021.</p>
5.2: Maintain a positive work environment and a sustainable workforce.	<p>5.2 A: By December 31, 2021 implement the Workforce Development Plan.  <b>As measured by:</b>            Meeting the objectives outlined on the plan from 0 in 2018 to:            3 in 2019            4 in 2020            7 in 2021</p> <p>5.2 B: By December 31, 2019 and every year thereafter expand the employee recognition program to include employee of the year recognition based on criteria developed by the employees themselves.  <b>As measured by:</b>            Employee of the year award presented at the Fall All Staff Meeting from 0 in 2018 to:            1 in 2019.</p>
5.3: Provide and promote a culture of health for team members.	<p>5.3 A: By December 31, 2019 and every year thereafter implement a comprehensive and sustainable Worksite Wellness program that enriches team members' physical, mental, emotional, financial, and/or occupational well-being.  <b>As measured by:</b>            Senior Leadership will establish and implement an annual schedule of presentations/classes available to all staff.            From 0 in 2018 to:            2 in 2019            3 in 2020            4 in 2021</p>

# Appendix A

## Department of Health in Charlotte County Strategic Planning Committee Members



**Joseph D. Pepe Ed. D., MSA**  
DOH-Interim Department Administrator



**Alberto Perez**  
Financial Administrator



**Elena Eastman**  
Nursing Director



**Karl Henry**  
Environmental Administrator



**Glama Carter**  
Strategic Planning, Communications Director



**Abbey Ellner**  
Health Promotion Manager



**Joshua Hughes**  
Distributed Computer Systems Administrator



**Jennifer S. Sexton**

Public Information Officer and Health Planner



**Janet Jaeger**

Administrative Assistant



**Paula Allison**

WIC Coordinator



**Corinna Jensen**

Operations & Management Consultant



**Olivia Hilliard**

Community Planner



**Richard Cocchieri**

Dental Clinic Director



**Yamilet Santana-Reyes**

Planning Consultant



**Leslie Beauchamp**

Environmental Supervisor

The Strategic Planning Committee is comprised of senior leadership, supervisors, program directors, and front-line staff with the purpose of creating the Strategic Plan. All members of the Performance Management Council are also part of the Strategic Planning Committee.

# Appendix B

## Planning Summary

The Department of Health in Charlotte County’s Strategic Planning Committee, in collaboration with the Performance Management Council (PMC), oversaw the development of the Strategic Plan following the Performance Management Planning Cycle (Appendix F). A total of 13 meetings took place over the 9-month (August 2018 - May 2019) strategic planning process.

The following is the Strategic Plan Schedule of Meetings:

MEETING DATE	MEETING TOPIC
August 24, 2018	Establish Strategic Planning Committee, review the process and create the project timeline.
September 6, 2018	Kick off meeting. Review roles and responsibilities, mission, vision, and “Road Map”.
September 14, 2018	All staff to participate in an interactive exercise during the All Staff Meeting to conduct a SWOT analysis.
October 10, 2018	1 <sup>st</sup> Data analysis (Employee Feedback Survey, Environmental Scan Exercise, FL CHARTS, BRFSS, Snap Shot).
November 14, 2018	2 <sup>nd</sup> Data analysis (SHIP, Agency Strategic Plan, Emerging Trends/CDC report, County Strategic Plan).
November 16, 2018	1 <sup>st</sup> Public engagement and feedback meeting. Discuss preliminary direction, present timeline, vision, mission and potential key strategic areas. Present “local motto”.
December 14, 2018	All staff to participate in an interactive exercise during the All Staff Meeting to provide feedback and suggestions on the Employee Feedback Survey results.
December 19, 2018	Strategic Planning Committee meeting to incorporate staff’s feedback and vet initiatives for goals and objectives.
January 9, 2019	Strategic Planning Committee meeting to incorporate staff’s feedback and refine goals and objectives in preparation of draft plan.
February 14, 2019	2 <sup>nd</sup> Public engagement and feedback meeting. Strategic Planning Committee community presentation of the Strategic Plan draft.
March 20, 2019	Strategic Planning Committee meeting to incorporate public feedback, align the plan to the budget, and prepare final draft of the plan.
April 16, 2019	Final review and approval of the 2019-2022 Strategic Plan.
May 3, 2019	Unveil the 2019-2022 Strategic Plan at the All Staff Meeting.

In preparation for the strengths, weaknesses, opportunities and threats (SWOT) analysis, staff conducted an environmental scan exercise and summarized data from the Charlotte Community Health Assessment, Charlotte Community Health Improvement Plan (CHIP), State Health Improvement Plan (SHIP), Agency Strategic Plan, Employee Feedback Survey, Customer Satisfaction data, emerging trends, FL CHARTS, BRFSS and Snap Shot among others. Further, they evaluated financial data, and customer feedback.

The Strategic Planning Committee reviewed the environmental scan findings and facilitated an agency SWOT analysis discussion. Data presented included information management, communications, programs and services, budget (financial sustainability), and workforce development as agenda items for discussion during the SWOT analysis meeting.

The SWOT analysis exercise was held during an All-Staff meeting (September 14, 2018) having participation from 53 of our staff members representing all areas of operations, front-line, supervisory and management. The exercise was conducted over a two-hour period in a very dynamic and interactive exercise.

The Strategic Planning Committee utilized the SWOT analysis and the agency mission, vision and values to create a draft document containing strategic issues and agency goals and objectives. The draft document was summarized and presented to staff and community stakeholders during a community presentation (February 14, 2019).

Feedback from these meetings informed the selection of the final strategic priorities. After final review and alignment of the Strategic Plan to the State Strategic Plan, Community Health Improvement Plans, and to the local budget, the following strategic priority issues were identified:

- Priority 1 – Health Equity
- Priority 2 - Long, Healthy Life
- Priority 3 - Readiness for Emerging Health Threats
- Priority 4 – Operational Efficiency
- Priority 5 – Workforce Development

The final report was reviewed and approved by the Performance Management Council (PMC).

### **Monitoring Summary**

The Performance Management Council (PMC) is responsible for measuring, monitoring and reporting progress on the goals and objectives of the Strategic Plan. On a quarterly basis, the PMC conducts a thorough Performance Measures review which includes the Strategic Plan Score Card, among multiple others, to monitor progress toward goals and objectives. On an annual basis, the Strategic Plan Progress Report is created assessing the progress toward achieving the goals and objectives of the plan. The report is then reviewed and approved by the PMC prior to formal submittal to Central Office. Also annually, the PMC reviews and revises (if necessary) the Strategic Plan based on an assessment of available resources, new data, emerging trends, community readiness and feedback, alignment of goals, and overall progress.

# Appendix C

## Partners Engagement

The Department of Health in Charlotte County has been working diligently to maintain transparency throughout the Strategic Planning process. The department has engaged multiple community partners and stakeholders throughout the planning process for feedback and prioritization exercises.

On October 22, 2018 DOH-Charlotte participated in the Charlotte County Board of County Commissioners Strategic Planning process. This was an interactive exercise in which community partners, staff, and elected officials worked together to identify strategic issues and established priorities for the county. This information was utilized to inform the DOH-Charlotte Strategic Plan and its direction aligning with local priorities.

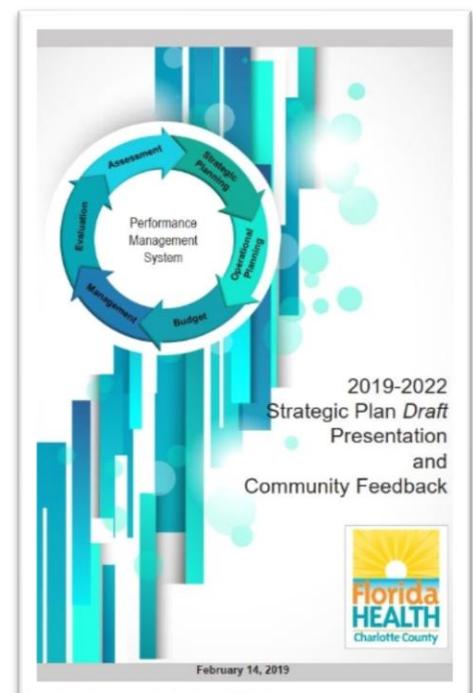
On November 16, 2018 DOH-Charlotte conducted the first partners engagement and feedback meeting to discuss the preliminary direction of the plan, present a timeline, discuss the vision, mission and potential key strategic areas of the plan. This meeting included members of the local health improvement group, Healthy Charlotte. In addition, the local motto, developed by staff, was presented to the partners to gather their feedback. The result was a motto that reflected a common sentiment regarding the strategic plan's overall purpose:

*~ Improving quality of life through positive health impacts ~*

On February 14, 2019 the DOH-Charlotte strategic planning committee conducted its second partners engagement and feedback meeting. Community partners, County Commissioners, and community members were invited to attend the presentation at the Department of Health.

The Strategic Planning Committee delivered an educational and interactive community presentation of the Strategic Plan draft. Participants were provided a handout which included the key components of the draft plan.

A formal question and answer session was established at the end of the presentation which was led by Interim Health Officer, Joe Pepe. Participants were also given the opportunity to provide their feedback on specific aspects of the plan during this time.



# Our Community Partners



**Mission:**

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

# Appendix D

## Work Plan Alignment

### Priority 1: Health Equity

Objective	Baseline	Target	Agency Strategic Plan Alignment	CHIP Alignment	QI Alignment	Budget Alignment	Report Frequency	Owner
1.1 A: By December 31, 2020 work collaboratively with community partners to identify environmental health issues of concern in an under-resourced community for a project using Protocol for Assessing Community Excellence in Environmental Health (PACE-EH).	0% of PACE- EH Assessment Process in 2018	50% of PACE- EH Assessment Process in 2019  100% of PACE- EH Assessment Completed in 2020	State priority #1 Goal 1.1 Strategy 1.1.2	SHIP Goal HE 3  CHIP Objectives # 2 & 3	N/A	Salary OCA: GR .3 FTE L4: 70	Quarterly	Karl Henry (Environmental Health)
1.2 A: By December 31, 2019 and annually thereafter, maintain Healthy Charlotte Facebook page to include posting about presentations, new partner agencies, and community successes.	0 Posts and/or Shares in 2018	24 Posts and/or Shares in 2019	State priority #2 Goal 2.1	SHIP Goal HE 3  CHIP Objective #4	N/A	Salary: OCA: CIP 18 & GR L4: 06	Quarterly	Glama Carter/ Olivia Hilliard (Strategic Planning & Communications)
1.2 B: By December 31, 2019 and annually thereafter, develop press releases at least quarterly to maintain community awareness of initiative.	0 Healthy Charlotte ACEs press releases in 2018	4 press releases in 2019	State priority #2 Goal 2.1	SHIP Goal HE 3  CHIP Objective #1	N/A	Salary: OCA: CIP 18 & GR L4: 06	Quarterly	Glama Carter/ Olivia Hilliard (Strategic Planning & Communications)
1.3 A: By December 31, 2021, develop a series of communication campaigns to provide education to the community on public health issues and on DOH-Charlotte's programs and services.	0 communication campaigns in 2018	1 campaign in 2019  4 campaigns in 2020  6 campaigns in 2021	State priority #1 Goal 1.1	SHIP Goal HE 1 & 2  CHIP Objective #1	N/A	Expense: OCA: GR L4:06	Quarterly / Cumulative	Glama Carter/ Jennifer S. Sexton (Strategic Planning & Communications)
1.4 A: By December 2020, staff will complete Cultural Awareness online training: Introduction to Organizational Cultural Competence and Addressing Health Equity: A Public Health Essential.	0% of staff completing training in 2018	50% of staff in 2019  75% of staff in 2020  100% of staff in 2021	State priority #1 Goal 1.1	SHIP Goal HE 1 & 2  CHIP Objective #2 & 3	N/A	Expense: OCA: GR L4:06	Biannually	Glama Carter/ Janet Jaeger (Strategic Planning & Communications)

**Priority 2: Long Healthy Life**

Objective	Baseline	Target	Agency Strategic Plan Alignment	CHIP Alignment	QI Alignment	Budget Alignment	Report Frequency	Owner
2.1 A: By December 31, 2021 implement WIC initiatives that promote breastfeeding activities	82.4% percent of WIC infants ever breastfed in 2018	82.5% percent of WIC infants ever breastfed in 2019 82.7% percent of WIC infants ever breastfed in 2020 83% percent of WIC infants ever breastfed in 2021	State priority #2 Goal 2.1	SHIP Goal MCH 1 & 2  CHIP Objective #1	QI Plan 18 – 19	Salary: OCA: BPC 18 & 19 L4: 25	Quarterly	Paula Allison (WIC)
2.1 B: By December 2020 achieve a Platinum level for breastfeeding work place.	Silver level in 2018	Gold level in 2019  Platinum level in 2020	State priority #2 Goal 2.1	SHIP Goal MCH 1 & 2  CHIP Objective #1	QI Plan 18 – 19	Salary: OCA: GR L4: 40	Annually	Abbey Ellner (Health Promotions)
2.2 A: By December 31, 2020 reinforce child passenger safety to reduce the number of child passenger injuries and deaths from motor vehicle accidents.	37% average of the capacity of car seat class attendance in 2018	50% average of capacity of car seat class attendance in 2019 62% average of capacity of car seat class attendance in 2020 75% average of capacity of car seat class attendance in 2021	State priority #2 Goal 2.1	SHIP Goal ISV 1	N/A	Salary: OCA: GR L4: 40	Quarterly	Abbey Ellner (Health Promotions)
2.2 B: By December 31, 2021 reinforce drowning prevention by promoting water safety education and messaging in the community.	1 sector reached in 2018	2 sectors reached in 2019 3 sectors reached in 2020 4 sectors reached in 2021	State priority #2 Goal 2.1	SHIP Goal ISV 1	N/A	Salary: OCA: GR L4: 40	Quarterly/ Cumulative	Abbey Ellner (Health Promotions)
2.3 A: By December 31, 2019 increase knowledge and change behavior of elementary school children in the areas of nutrition and physical activity.	Students exposed to 5210: 924 in 2018	Students exposed to 5210: 1,500 in 2019	State priority #2 Goal 2.1	SHIP Goal HW 1  CHIP 2019	N/A	Salary: OCA: GR L4: 40	Annually	Abbey Ellner (Health Promotions)
	Sectors educated: 2 in 2018	Sectors educated: ≥ 4 in 2019						
2.4. A: By December 31, 2021 reduce the incidence of dental decay in children in both primary and secondary dentition by providing the School Based Dental Sealant Program and promoting access to the DOH Charlotte County Dental Clinic.	1,640 children participating in 2018	1,734 children participating in 2019 1,826 children participating in 2020 1,922 children participating in 2021	State priority #2 Goal 2.1	SHIP Goal HE 3 Objective HE 3.3.1	N/A	Salary: OCA: GR & DNSPJ & SCHSP L4: 11 & 60	Quarterly/ Cumulative	Richard Cocchieri (Dental)

Objective	Baseline	Target	Agency Strategic Plan Alignment	CHIP Alignment	QI Alignment	Budget Alignment	Report Frequency	Owner
2.4 B: By December 31, 2021 decrease the number of tooth extractions while increasing access to restorative dental care for adults (21+) in our community.	400 tooth extractions in 2018	380 tooth extractions in 2019 361 tooth extractions in 2020 343 tooth extractions in 2021	State priority #2 Goal 2.1	SHIP Goal HE 3 Objective HE 3.3.1	N/A	Salary: OCA: GR & DNSPJ & SCHSP L4: 11 & 60	Quarterly/ Cumulative	Richard Cocchieri (Dental)
2.5 A: By December 31, 2020 reduce the HPV related cancers by promoting HPV vaccination among eligible individuals.	323 HPV doses provided in 2018	335 HPV doses provided in 2019 350 HPV doses provided in 2020	State priority #2 Goal 2.1	SHIP Goal IM 1 & 2	QI Plan 18 – 19	Salary & Expenses OCA: MIMM 19/20. GR	Quarterly	Elena Eastman
2.5 B: By December 31, 2020 increase the percentage of 2-year-olds, CHD clients, who are fully immunized	93% fully immunized in 2018	95% fully immunized in 2019 100% fully immunized in 2020	State priority #2 Goal 2.1	SHIP Goal IM 1 & 2	QI Plan 18 – 19	Salary & Expenses OCA: MIMM 19/20. GR	Annually	Elena Eastman
2.5 C: By December 31, 2021 increase the rate of 11-12-year-olds who have completed the first dose of HPV vaccine.	264 doses provided in 2018	270 doses provided in 2019 275 doses provided in 2020 280 doses provided in 2021	State priority #2 Goal 2.1	SHIP Goal IM 1 & 2	QI Plan 18 – 19	Salary & Expenses OCA: MIMM 19/20. GR L4: 20	Quarterly	Elena Eastman
2.5 D: By December 31, 2020 increase the number of children 6 months-18 years and pregnant women who receive seasonal flu vaccine.	Children with flu vaccine: 1,167 in 2018	1,182 with flu vaccine in 2019 1,200 with flu vaccine in 2020 1,215 with flu vaccine in 2021	State priority #2 Goal 2.1	SHIP Goal IM 1 & 2	QI Plan 18 – 19	Salary & Expenses OCA: FMP20, FMPGR, GSFAM, Program 17 L4: 40 & 26	Quarterly	Elena Eastman
	Pregnant Women with flu vaccine: 34 in 2018	44 with flu vaccine in 2019 50 with flu vaccine in 2020 55 with flu vaccine in 2021						
2.6 A: By December 31, 2020 increase the number of at-risk for HIV infection clients who initiate PrEP/nPEP services.	5 initiated PrEP/nPEP in 2018	10 initiate PrEP/nPEP in 2019 20 initiate PrEP/nPEP in 2020 30 initiate PrEP/nPEP in 2021	State priority #2 Goal 2.1	SHIP Goal ID 2 Strategy ID2.1	QI Plan 18 – 19	Expenses & Salary OCA: 4BAPS, PCG00, PRV 19/20 L4: 19 & 20	Quarterly/ Cumulative	Elena Eastman

Objective	Baseline	Target	Agency Strategic Plan Alignment	CHIP Alignment	QI Alignment	Budget Alignment	Report Frequency	Owner
2.7 A: By December 31, 2021, in partnership with community organizations promote awareness of and ways to access Mental Health Services in the community.	0 symposiums in 2018	1 symposium in 2019	State priority #2 Goal 2.1	SHIP Goal BH 4  CHIP 2019	N/A	Expenses & Salary OCA: GR L4: 01	Annually	Joseph Pepe (Administration)
2.7 B: By December 31, 2021, develop and disseminate a comprehensive guide to behavioral and mental health services in Charlotte County.	0 guides in 2018	1 guide developed in 2020	State priority #2 Goal 2.1	SHIP Goal BH 4  CHIP 2019	N/A	Salary OCA: NCGRV L4: 01	Annually	Joseph Pepe (Administration)
		1 guide disseminated in 2021						

### Priority 3: Readiness for Emerging Health Threats

Objective	Baseline	Target	Agency Strategic Plan Alignment	CHIP Alignment	QI Alignment	Budget Alignment	Report Frequency	Owner
3.1 A: By December 31, 2021 and annually thereafter the Environmental Health program will achieve excellence in services, to prevent and reduce illness/injuries due to environmental health factors.	95.8% on the comprehensive EH score in 2018	≥ 90% on the comprehensive EH score	State priority #3 Goal 3.1	SHIP Goal ISV 1	QI Plan 18 – 19	Salary OCA: ENVFE & ENVLF & GR L4: 70	Annually	Karl Henry (Environmental Health)
3.1 B: By December 31, 2020 and annually thereafter the Environmental Health OSTDS program will maintain or exceed excellence issuing new and repair permits within state guidelines.	Repair Permits: 3 weeks in 2018	Repair Permits: ≤ 2 days	State priority #3 Goal 3.1	SHIP Goal ISV 1	QI Plan 18 – 19	Salary OCA: ENVFE & ENVLF & GR L4: 70	Quarterly	Karl Henry (Environmental Health)
	New Permits: 5 weeks in 2018	New Permits: ≤ 8 days						
3.1 C: By December 31, 2020 and annually thereafter the Environmental Health facility programs will maintain or exceed excellence issuing all operating permits within state guidelines.	98.94% permits issued within guidelines in 2018	100% permits issued within guidelines in 2019	State priority #3 Goal 3.1	SHIP Goal ISV 1	QI Plan 18 – 19	Salary OCA: ENVFE & ENVLF & GR L4: 70	Quarterly	Karl Henry (Environmental Health)

3.1 D: By December 31, 2020 and annually thereafter the Environmental Health program will maintain or exceed excellence conducting complaint investigations within state guidelines.	85% complaints investigated within guidelines in 2018	90% complaints investigated within guidelines in 2019	State priority #3 Goal 3.1	SHIP Goal ISV 1	QI Plan 18 – 19	Salary OCA: ENVFE & ENVLF & GR L4: 70	Quarterly	Karl Henry (Environmental Health)
3.2 A: By December 31, 2020, investigate and respond to cases, outbreaks and other public health events to protect persons residing in Charlotte County, and implementing control measures and interventions as appropriate.		≥ 75% on the Epi annual score	State priority #3 Goal 3.1	SHIP Goal ID 3	QI Plan 18 – 19	ENVFE & ENVLF & GR L4: 70	Quarterly	Karl Henry (Environmental Health)
3.3 A: By December 31, 2021 demonstrate significant or full ability to prepare and deliver on critical preparedness functions (SpNS pre-triage and operations, POD, Mass prophylaxis, Emergency evacuation by internal staff, active shooter, body mechanics).	0 staff attended preparedness trainings in 2018	4 staff to attend trainings (in addition to Planning Consultant) in 2019  6 staff to attend trainings (in addition to Planning Consultant) in 2020	State priority #3 Goal 3.1	SHIP Goal ID 3	N/A	Expenses: OCA: PHCP9 19/20 L4: 16	Quarterly/ Cumulative	Yamilet Santana-Reyes (Preparedness)
3.3 B: By December 2020 conduct exercise/drill/training annually or as needed	1 exercise/drill/training conducted in 2018	2 exercises/drills/trainings conducted in 2019  3 exercises/drills/trainings conducted in 2020	State priority #3 Goal 3.1	SHIP Goal ID 3	N/A	Expenses: OCA: PHCP9 19/20 L4: 16	Annually	Yamilet Santana-Reyes (Preparedness)
3.3 C: By December 31, 2020 work collaboratively with community partners to educate citizens and promote appropriate levels of preparedness for emerging natural or manmade disasters.	0 education activities conducted in 2018	1 education activity conducted in 2019  2 education activities conducted in 2020	State priority #3 Goal 3.1	SHIP Goal ID 3	N/A	Expenses: OCA: PHCP9 19/20 L4: 16	Quarterly	Yamilet Santana-Reyes (Preparedness)

**Priority 4: Effective Agency Processes**

Objective	Baseline	Target	Agency Strategic Plan Alignment	CHIP Alignment	QI Alignment	Budget Alignment	Report Frequency	Owner
4.1 A: By December 31, 2019 and annually thereafter, ensure all programs are operating within their budgets and are monitoring budget variances to ensure appropriate spend down of budget allocations.	9% operational variance in 2018	≤ 5% operational variance by end of FY 2019	State priority #4 Goal 4.1	N/A	QI Plan 18 -19	Salary: OCA: NCGRV L4: 02	Quarterly	AI Perez (Finance)
4.2 A: By December 31, 2019 and annually thereafter, ensure compliance with Accounts Receivable (AR) measures.	12% of total outstanding AR balances in 2018	≤ 8% total outstanding AR balances in 2019	State priority #4 Goal 4.1	N/A	N/A	Salary: OCA: NCGRV L4: 02	Quarterly/ Cumulative	AI Perez (Finance)
4.2 B: By June 30, 2020 and annually thereafter, pursue alternative sources of revenue and resources.	4 grants in 2018	5 grants in 2019  6 grants in 2020	State priority #4 Goal 4.1	N/A	N/A	Salary OCA: GR L4: N/A	Annually	All Sr. Leaders Abbey Ellner/ Lauren Schmidt
4.3 A: By December 31, 2021 and annually thereafter, improve business processes using technology.	73.65% IT equipment meeting current standards in 2018	> 93% IT equipment meeting current standards in 2021	State priority #4 Goal 4.1	N/A	QI Plan 18 – 19	Expenses, Salary, Contracted Service, Other, OCO OCA: GR L4: N/A	Quarterly	All Sr. Leaders Alberto Perez/ Joshua Hughes
4.4 A: By June 30, 2020 continue implementation of the Quality Improvement Plan.	100% of QI Plan objectives implemented in 2018	100% of QI Plan objectives implemented in 2019  100% of QI Plan objectives implemented in 2020	State priority #4 Goal 4.1	N/A	QI Plan 18 – 19	Expense: OCA: GR L4:06	Quarterly	Glama Carter (Strategic Planning & Communications)
4.4 B: By June 30, 2020 and annually thereafter complete full PDCA cycle quality and/or process improvement projects and Annual Wise Owl Award recognition event.	10 full PDCA cycles completed in 2018	6 full PDCA cycles completed in 2019  6 full PDCA cycles completed in 2020	State priority #4 Goal 4.1	N/A	QI Plan 18 – 19	Expense: OCA: GR L4:06	Annually	Glama Carter (Strategic Planning & Communications)
4.5 A: By December 31, 2019 design an integrated process to gather, review, and address customer's feedback and recognize team members who exceed their expectations.	0 processes to gather feedback in 2018	1 process designed to gather feedback in 2019  1 process implemented to gather feedback in 2020	State priority #4 Goal 4.1	N/A	N/A	Salary: OCA: CIP 18 & GR L4: 06  Expense: OCA: GR L4:06	Annually	Glama Carter & Olivia Hilliard (Strategic Planning & Communications)

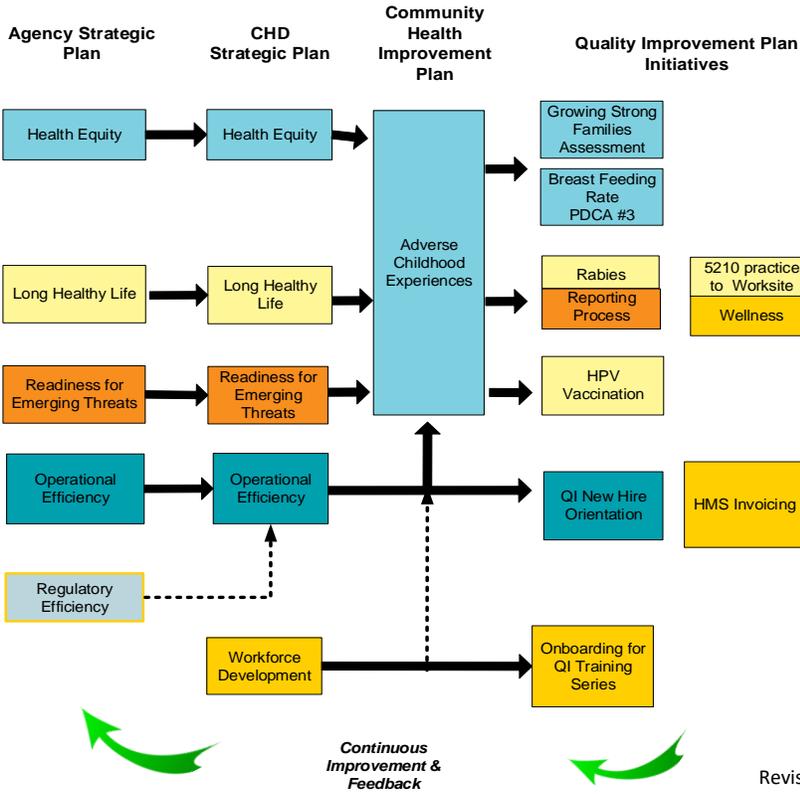
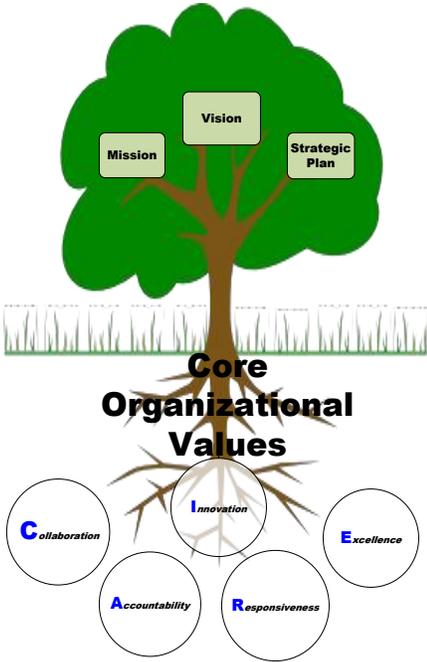
**Priority 5: Workforce Development**

Objective	Baseline	Target	Agency Strategic Plan Alignment	CHIP Alignment	QI Alignment	Budget Alignment	Report Frequency	Owner
5.1 A: By December 31, 2021 improve the % on Employee Feedback Survey in multiple sections:	Leadership: 58.6% in 2018	Leadership: 75% in 2019	State priority #4 Goal 4.1	N/A	QI Plan 18 – 19	Salary & Expenses OCA: GR L4: N/A	Annually	All Sr. Leaders Glama Carter/ Jennifer S. Sexton (Strategic Planning & Communications)
	Operations: 50.9% in 2018	Operations: 70% in 2020						
	Results: 63.8% in 2018	Results: 70% in 2021						
5.1 B: By December 31, 2019 and every year thereafter % of items in compliance with DOH information security and privacy standards, as defined in the annual information security and privacy assessment.	86% items in compliance with DOH information & privacy standards in 2018	95% items in compliance with DOH information & privacy standards in 2019  100% items in compliance with DOH information & privacy standards in 2020	State priority #4 Goal 4.1	N/A	QI Plan 18 – 19	Salary & Expenses OCA: GR L4: N/A	Annually	All Sr. Leaders Joseph Pepe/ Corinna Jensen
5.2 A: By December 31, 2021 implement the Workforce Development Plan.	0 objectives met in the plan in 2018	3 objectives met in the plan in 2019  4 objectives met in the plan in 2020  7 objectives met in the plan in 2021	State priority #4 Goal 4.1	N/A	QI Plan 18 – 19	Expense: OCA: GR L4:06	Quarterly/ Cumulative	Glama Carter / Jennifer S. Sexton (Strategic Planning & Communications)
5.2 B: By December 31, 2019 and every year thereafter expand the employee recognition program to include employee of the year recognition.	0 employee of the year award presented at the Fall All Staff meeting in 2018	1 employee of the year award presented at the Fall All Staff meeting in 2019	State priority #4 Goal 4.1	N/A	QI Plan 18 – 19	Expense: OCA: GR L4:06	Annually	Janet Jaeger (Administration)
5.3 A: By December 31, 2019 and every year thereafter implement a comprehensive and sustainable Worksite Wellness program that enriches team members' physical, mental, emotional, financial, and/or occupational well-being.	0 Worksite Wellness presentations/classes in 2018	2 Worksite Wellness presentations/classes in 2019  3 Worksite Wellness presentations/classes in 2020  4 Worksite Wellness presentations/classes in 2021	State priority #2 Goal 2.1	N/A	QI Plan 18 – 19	Expenses & Salary OCA: GR L4: N/A	Quarterly/ Cumulative	All Sr. Leaders Abbey Ellner

# Appendix E



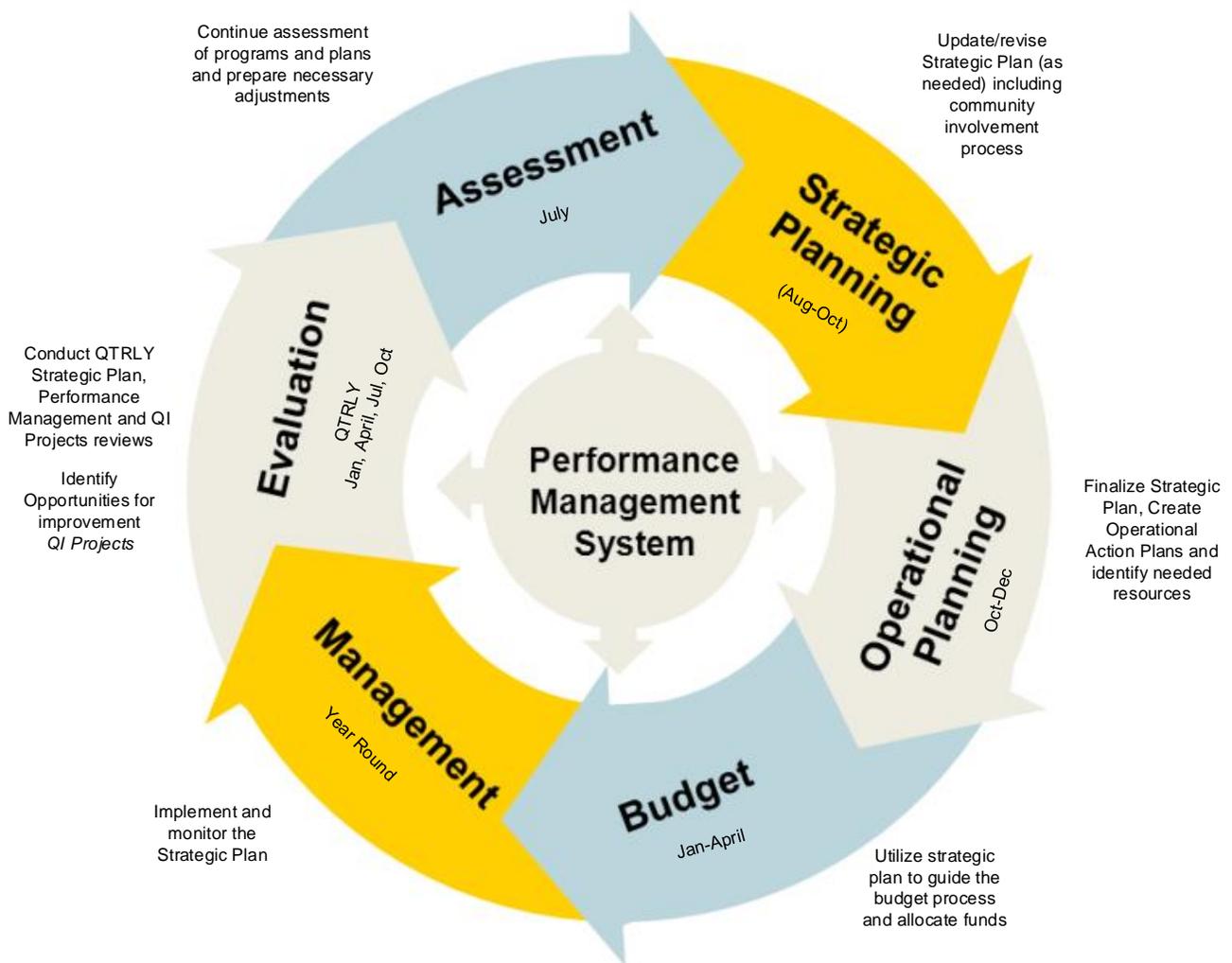
## Healthy and Strong Organization



Revised 3/28/19

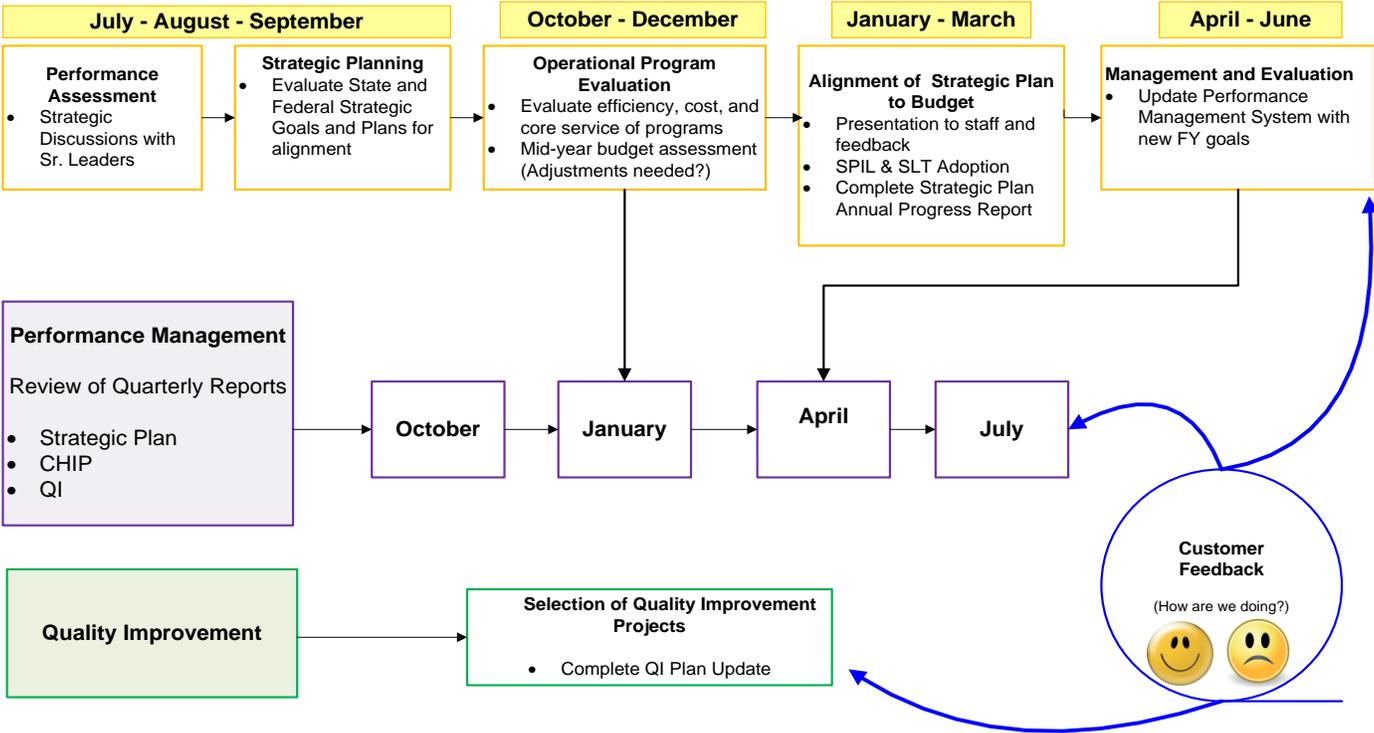
# Appendix F

## PMC PERFORMANCE MANAGEMENT SYSTEM CYCLE



# Appendix G

## STRATEGIC PLANNING TIMELINE



*To be the Healthiest State in the Nation...*