

# Strategic Plan

2014 - 2016



**Innovation**  
**Collaboration**  
**Accountability**  
**Responsiveness**  
**Excellence**



## Foreword

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

The Florida Department of Health's (DOH) strategic plan provides a unified vision and framework for action; as a part of this integrated health department, the Florida Department of Health in Palm Beach County (DOH-Palm Beach) strategic plan aligns with the DOH strategic plan, while addressing issues that are unique to Palm Beach County, such as those identified in the PBC Community Health Assessment (CHA) and Community Health Improvement Plan (CHIP).

Our Strategic Plan starts with a focus on our agency mission, vision, and values. It then determines strategic issues areas that identify key priorities for action. Each issue area has associated goals. Aligned to the goals are objectives that are specific, measurable, achievable, relevant, and time-bound (SMART), allowing us to track progress and make "course corrections" as needed.

In order to develop and update our plan, we have to keep answering three key questions:

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

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



Alina M. Alonso, M.D.  
Director  
Florida Department of Health in Palm Beach County





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Questions about the DOH-Palm Beach Strategic Plan? Contact the Office of Quality Improvement at (561) 671-4062.

## Who We Are



From 1920 to 1948, the City of West Palm Beach employed one part-time physician and four nurses, and a local restaurant loosely operated the health department inspection staff. The next 60 years, through the efforts of state and county governments, has seen DOH-Palm Beach grow to a staff of over 850 and an annual budget of over \$60 million. The DOH-Palm Beach is a part of the State of Florida Department of Health. Your health department serves everyone from its agricultural community in our western reaches to businesses, academic, and research organizations on the coast. Our community has grown to over 1.3 million people representing many social, cultural, and diverse groups, from the very poor to the very rich.

The DOH-Palm Beach has served as the model agency for the State of Florida and many other States throughout the country. It has led the way with innovative programs that include:

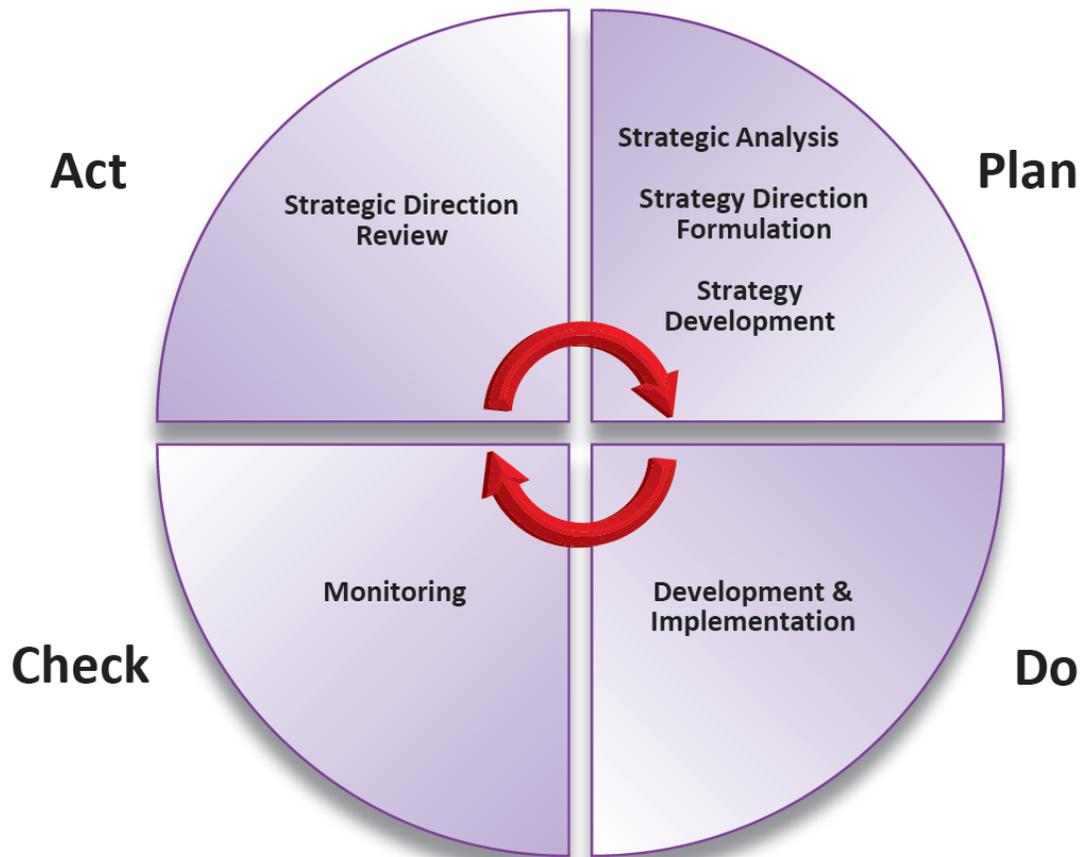
- Free immunizations for children
- Parental education in child care from pregnancy to birth and beyond
- Monitoring the land, air, and water
- Providing health education
- Monitoring and testing for potential epidemics
- Protecting our community from, and responding to, natural and man-made disasters
- Assuring quality primary health care in Palm Beach County

As we move forward, our Health Department will continue to adapt to the changing needs of the county and will remain a champion for a healthy community.

## Introduction



The DOH-Palm Beach Strategic Plan is the result of a multi-year effort by the Department's Executive (Senior) Leadership Team and Quality Team, informed by guidance from DOH. As shown in Figure 1, the Plan-Do-Check-Act (PDCA) quality improvement technique frames the steps in the process.



**Figure 1: The DOH-Palm Beach Strategic Planning Process**

For the \*2014-2015 Strategic Plan, the DOH-Palm Beach implemented several improvements to the process and content of the plan. Major changes include:

1. As part of an integrated health department, DOH-Palm Beach has improved alignment with the Florida Department of Health Strategic Plan and Agency Quality Improvement Plan
2. Better linkage to the Palm Beach County Community Health Improvement Plan (CHIP)

Strategic planning is an integral aspect of the DOH performance management system (see Figure 2). The PDCA process used in developing the strategic plan reflects the policy of the DOH, as outlined in the Department's QI Plan, to maintain an agency wide quality improvement program that engenders a culture of quality. Specifically, the process allows for a systematic identification of opportunities for improvement, implementation of data-supported improvement initiatives, sharing of best practices, and evaluating measurable impacts on strategic priorities.

\*In November 2014, the DOH-Palm Beach Quality Team extended the Strategic Plan through December 2016.



Figure 2: The DOH Performance Management System

## Core Public Health Functions

The three Core Functions of Public Health and the Essential Public Health Services were key to developing the Strategic Plan. The Essential Public Health Services describe the public health activities that should be undertaken in all communities. The Essential Services provide a working definition of public health and a guiding framework for the responsibilities of local public health systems.

✓ **Assessment:**

- Monitor health status to identify and solve community health problems.
- Diagnose and investigate health problems and health hazards in the community.
- Inform, educate, and empower people about health issues.

✓ **Policy Development:**

- Mobilize community partnerships and action to identify and solve health problems.
- Develop policies and plans that support individual and community health efforts.

✓ **Assurance**

- Enforce laws and regulations that protect health and ensure safety.
- Link people to needed personal health services and assure the provision of health care when otherwise unavailable.
- Assure competent public and personal health care workforce.
- Evaluate effectiveness, accessibility, and quality of personal and population-based health services.
- Research for new insights and innovative solutions to health problems.



## DOH-Palm Beach Strategic Plan 2014-2016

As the local representative of the Florida Department of Health, activities conducted by DOH-Palm Beach align to the Department's single mission, vision and shared values. The relationship between DOH-Palm Beach and Palm Beach County is another guiding factor for us, and helps us identify the specific, sometimes unique, public health needs of our county. We support these needs within the context of the Florida Department of Health's mission and vision.

## Mission

The Mission of the Florida Department of Health and DOH-Palm Beach is:

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

Our Mission articulates the purpose of our organization; it is our roadmap and the reason for the existence of DOH-Palm Beach.

## Vision

The Vision of the Florida Department of Health is:

To be the **healthiest state** in the Nation.

Our Vision statement defines what we want to achieve. It provides guidance and direction in fulfilling the Mission.

## Our Values

The Florida Department of Health Values guide us in working to achieve our agency Goals.

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

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

**Accountability:** We perform with integrity and respect.

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

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

## Strategic Priorities

Key factors utilized in establishing priorities for DOH-Palm Beach are: State, Federal, and local mandates; guidance from and priorities identified by the DOH; analysis of countywide statistics that reflect key health status indicators; staffing and budget capabilities; results of the Strength-Weaknesses-Opportunities-Threats (SWOT) analysis; and ongoing customer and stakeholder input.

The 4 priorities listed below are identified as Strategic Issue Areas in this strategic plan.

- Health Protection And Promotion
- Financial And Business Excellence
- Service To Customers And Community
- Workforce Development



Strategic Goals are aligned with each area as shown in Figure 3 below.

| Strategic Issue Area  | Goals  |
|---|--|
| <p><b><i>Health Protection<br/>And Promotion</i></b></p>        | <p>1.1 Focus On Prevention</p> <p>1.2 Reduce Chronic Disease Morbidity And Mortality</p> <p>1.3 Improve Maternal And Child Health</p> <p>1.4 Assure A Community Prepared For All Hazards</p>                     |
| <p><b><i>Financial And<br/>Business Excellence</i></b></p>      | <p>2.1 Improve Efficiency And Effectiveness</p> <p>2.2 Maximize Funding To Accomplish The Public Health Mission</p> <p>2.3 Promote A Culture Of Organizational Excellence</p> <p>2.4 Optimize Communications</p> |
| <p><b><i>Service To<br/>Customers And<br/>Community</i></b></p> | <p>3.1 Promote An Integrated Public Health System</p> <p>3.2 Assure Access To Essential Public Health Services</p>   |
| <p><b><i>Workforce<br/>Development</i></b></p>                  | <p>4.1 Attract, Recruit, And Retain A Competent Workforce</p> <p>4.2 Ensure Partnerships, Systems, and Processes To Support The Future Workforce</p>   |

Figure 3: DOH-Palm Beach Strategic Issue Areas and Goals

## Health Protection and Promotion

### Goal 1.1: Focus on prevention

#### Objectives:

- 1.1.1 Maintain the percent of 2-year-old CHD clients fully immunized at greater than 90% annually.
- 1.1.2 By December 31, 2016, increase the annual influenza immunization percentage rate for employees from 60.9% to 70.0%.
- 1.1.3 On an annual basis, maintain the percent of CHD STD cases treated according to the most recent STD guidelines within 14 days of diagnosis at 90% or above.
- 1.1.4 On an annual basis, maintain greater than or equal to 85% of clients who routinely picked up ADAP medications each month of the year.
- 1.1.5 By December 31, 2016, increase the percent of active TB patients completing therapy within 12 months of initiation of treatment from 91.4% to greater than 93%.
- 1.1.6 By December 31, 2016, increase the percent of contacts to sputum AFB smear-positive TB patients who are evaluated for infection and disease from 70.7% to greater than 80%.
- 1.1.7 By December 31, 2016, increase the percent of newly diagnosed contacts with LTBI that completed treatment from 47.8% to greater than 50%.
- 1.1.8 Maintain a Composite Annual Score of Core Epidemiology Measures at greater than 80%.
- 1.1.9 Maintain an Annual Comprehensive Environmental Health Score (ACEHS) score of greater than 90%.
- 1.1.10 On a quarterly basis, maintain less than 1% of licensed child care facilities cited for a Class I violation.
- 1.1.11 On a quarterly basis, maintain a minimum of 90% satisfactory routine inspection results for all regulated facilities (non-child care).
- 1.1.12 On a quarterly basis, maintain less than 10% of water treatment facilities found to be non-compliant.
- 1.1.13 By December 31, 2014, complete the Environmental Public Health Performance Assessment, use data to determine gaps and opportunities, and create health plans.
- 1.1.14 Maintain the rate of deaths from all causes of external injury among Palm Beach County resident children ages 0-14 at <6 per 100,000.

## Goal 1.2: Reduce chronic disease morbidity and mortality

### Objectives:

- 1.2.1 By December 31, 2016, reduce current cigarette use among youth, ages 11-17, from 5.5% to 5.3%.
- 1.2.2 By December 31, 2016, reduce the percentage of youth ages 11-17, who use tobacco products other than cigarettes from 8.6% to 7.0%. (Other tobacco products include smokeless tobacco, snus, and cigars.)
- 1.2.3 By December 31, 2016 reduce the percentage of adults in the county who are overweight or obese from 61.3% to 59%. (See also Palm Beach County Community Health Improvement Plan 2012, Measure 1.1.1.)

## Goal 1.3: Improve maternal and child health

### Objectives:

- 1.3.1 By December 31, 2016, increase the percent of teen CHD family planning clients who adopt an effective or higher method of birth control from 63.9% to 80%.
- 1.3.2 By December 31, 2016, increase the percent of WIC infants who are ever breastfed from 74.5% to greater than 77.8%. (See also Palm Beach County Community Health Improvement Plan 2012, Measure 1.3.1.)
- 1.3.3 By December 31, 2016, reduce the black infant mortality rate from 9.2 per 1,000 live births to 8.
- 1.3.4 Maintain Live Births Under 2500 Grams (Low Birth Weight) at less than 8.6%.
- 1.3.5 Maintain Preterm Births (less than 37 weeks gestation) at less than or equal to 13% on an annual basis.

## Goal 1.4: Assure a community prepared for all hazards

### Objectives:

- 1.4.1 Maintain a Composite Annual Preparedness Score of 5, as measured by the annual CHD Preparedness Expectations Survey.
- 1.4.2 On an annual basis, achieve an average of greater than 95% of data backed up daily and stored offsite.
- 1.4.3 Achieve 100% recovery of data on the annual electronic data recovery test.

## Financial and Business Excellence

### Goal 2.1: Improve efficiency and effectiveness

- 2.1.1 By September 30, 2015, implement an electronic asset tracking system for desktop computers and complete an inventory.
- 2.1.2 On an annual basis, implement 100% of applicable County Health Department activities outlined in the DOH Information Technology Strategic Plan.
- 2.1.3 Maintain the rate of worker's compensation incidents per 100 employees at less than 8.8.

### Goal 2.2: Maximize funding to accomplish the public health mission

- 2.2.1 Achieve an annual average cash balance within the range of 7-9.5%.
- 2.2.2 Maintain an annual administrative rate of less than 15%.
- 2.2.3 Maintain the percent of vaccine wasted/spoiled/expired at 3% or less.
- 2.2.4 Maintain the dollar value of vaccine wasted/spoiled/expired on a calendar year basis at \$5,000 or less.
- 2.2.5 On an annual basis, maintain family planning clients with unknown income at less than 5%.
- 2.2.6 By December 31, 2016, increase the percent CHD family planning clients served who have documentation of race and ethnicity in their records from 71.2% to 95%.
- 2.2.7 By June 30, 2016, increase the number of licensed volunteers for the Volunteer Health Care Provider Program from 947 to 1,000.
- 2.2.8 By June 30, 2016, increase the total value of contributions through the Volunteer Health Care Provider Program (VHCPP) from \$5.9 million to \$6.5 million.

### Goal 2.3: Promote a culture of organizational excellence

- 2.3.1 On an annual basis, maintain greater than 90% of completed customer satisfaction surveys reflect a satisfactory or better rating.
- 2.3.2 On an annual basis, maintain 100% of documented customer complaints are acknowledged by the end of next business day.
- 2.3.3 On an annual basis, maintain the percent of items in compliance with DOH information security and privacy standards, as defined in the annual information security and privacy assessment, at 100%.
- 2.3.4 Maintain an annual fixed asset loss rate below 2%, based on acquisition cost.
- 2.3.5 By December 31, 2015, DOH-Palm Beach will be accredited by the Public Health Accreditation Board.



## Goal 2.4: Optimize communications

2.4.1 On an annual basis, meet 90% of the County Health Department requirements outlined in the DOH strategic communication plan.

2.4.2 By December 31, 2014, evaluate internal and external communications tools and resources.

## Service to Customers and Community



### Goal 3.1: Promote an integrated public health system

3.1.1 By December 31, 2015, complete greater than 80% of the tasks (10 of 13) of the Protocol for Assessing Community Excellence in Environmental Health (PACE-EH) process in a new community.

### Goal 3.2: Assure access to essential public health services

3.2.1 By December 2016, reduce the percentage of the uninsured population in Palm Beach County from 16.3% to 15.3%. (See also Palm Beach County Community Health Improvement Plan 2012, Measure 2.1.1.)

3.2.2 By July 1, 2013, take actions toward improving the understanding of the barriers and gaps related to access mental health services in Palm Beach County. (See also Palm Beach County Community Health Improvement Plan 2012, Measure 3.1.2.)

## Workforce Development

### Goal 4.1: Attract, recruit, and retain a competent workforce

- 4.1.1 Increase the percent of current employees who complete the annual mandatory DOH training in accordance with the DOH Training Policy from 99.4% to 100%.
- 4.1.2 By December 31, 2014, develop a personal computer-based Microsoft Office and Microsoft Windows Operating System competency test for applicants for employment.
- 4.1.3 By December 31, 2016, increase the response rate on the periodic DOH Employee Satisfaction Survey from 50.1% to greater than 70%.

### Goal 4.2: Ensure partnerships, systems and processes to support the future workforce

- 4.2.1 Achieve a pass rate of 75% for Public Health Medical Residents taking the Preventive Medicine Board Exams within 18 months of completing the program.
- 4.2.2 By June 30 of each year, 90% of County Health Department activities identified in the Agency Workforce development plan are complete or are on an established schedule.

## Appendices

### Appendix A: Strengths–Weaknesses–Opportunities–Threats (SWOT) Assessment

The Florida Department of Health in Palm Beach County conducted its agency SWOT assessment on April 24, 2013. Participants included 47 staff members, primarily from the Executive (Senior) Leadership Team and Quality Team. The workshop was facilitated by the Quality Improvement Manager with the assistance of several Quality Team members. Included among the documents reviewed were the DOH-Palm Beach Strategic Plan 2011-2013; DOH Strategic Plan summary (draft); DOH-Palm Beach Quality Improvement Plan; 2012 Palm Beach County (PBC) Local Public Health System Assessment Summary; PBC Community Health Assessment (CHA); PBC Community Health Improvement Plan (CHIP); Florida State Health Improvement Plan (SHIP); 2012 County Health Department Performance Snapshot for DOH-Palm Beach; and DOH-Palm Beach Strategic Planning Database reports.

Staff were assigned to groups based on each of the SWOT elements. A “SWOT Guide” was developed that gave specific instructions on the process, including listing specific issues to consider, (e.g., Core Functions of Public Health) and several general items, (e.g., Technological and other key innovations or changes that might affect our services and how we operate, as well as the rate of that innovation). Each table had a binder with references and conducted a review of the data. Analysis was conducted and documented using a “SWOT Worksheet,” results grouped using an affinity diagram technique, and a formal brief-out was conducted.

After the workshop, Quality Improvement staff consolidated input and categorized items using an affinity diagram technique. Results were reviewed and clarified by the DOH-Palm Beach Quality Team on May 31, 2013. The Quality Team subsequently developed a strategic plan alignment matrix that included using the SWOT results to assist in identifying/validating strategic issue areas and goals. SWOT results, strategic issue areas, and goals were approved by the Senior Leadership Team on July 24, 2013. Listed below are the major groupings for each SWOT element; the specific items for each grouping are on file in the DOH-Palm Beach Office of Quality Improvement.

#### **Strengths:**

- Community partnerships
- Visionary leadership
- Disaster preparedness
- Workforce development and training
- Public health expertise
- Infrastructure base
- Strategic and data-driven planning
- Financial Stability
- Technology & Information Management
- Client access
- Employee wellness

**Weaknesses:**

- Communication & Branding
- Access and services
- Workforce issues
- Process management

**Opportunities:**

- Financial Stability
- Marketing
- Integrated state health department
- Partnerships
- Increased access to health care
- Technology & Information Management
- Workforce development

**Threats:**

- Financial Stability
- Environment
- Administration

As shown in Figure 4, the Quality Council further categorized the SWOT analysis to aid staff both in developing Strategic Objectives and guiding activities conducted in their respective programs. For example, in the Human Resources category, the SWOT identified “Training in new technology” as a challenge. The expectation for leaders is to review their areas of responsibility, and identify if and where this type of training is required, and identify a plan to implement the appropriate training for their work units so they can address this challenge. The implementation will vary depending on the work unit. For example, Information Technology training staff would identify training needs for IT staff and the agency, then develop and conduct training.



| TYPE           | CHALLENGES   | ADVANTAGES   |
|----------------|--|--|
| ORGANIZATIONAL | <ul style="list-style-type: none"> <li>• Marketing:               <ul style="list-style-type: none"> <li>➤ Our “brand” (Florida Health) as public health experts</li> <li>➤ Standardization of brand (for brochures, website, etc.)</li> <li>➤ Core public health role in community</li> <li>➤ Our services</li> </ul> </li> <li>• Introduction of new technology:               <ul style="list-style-type: none"> <li>➤ New office software</li> <li>➤ Electronic health record</li> <li>➤ Tablets/smart phones</li> </ul> </li> <li>• Health care reform</li> <li>• Funding reductions</li> <li>• Integrated state health department: Standardized processes</li> </ul> | <ul style="list-style-type: none"> <li>• Visionary leadership</li> <li>• Financial management</li> <li>• Technology</li> </ul>   |
| OPERATIONAL    | <ul style="list-style-type: none"> <li>• Disaster response over a large geographical area</li> <li>• Internal/external communication</li> <li>• Standardization and review of processes and procedures</li> </ul>  | <ul style="list-style-type: none"> <li>• Disaster preparedness</li> <li>• Public health expertise</li> <li>• Client access</li> <li>• Infrastructure base</li> <li>• Strategic and data-driven planning</li> </ul> |
| HUMAN RESOURCE | <ul style="list-style-type: none"> <li>• Recruitment process:               <ul style="list-style-type: none"> <li>➤ Opportunities to streamline/improve process</li> <li>➤ Supervisors understanding the process</li> </ul> </li> <li>• Limited opportunities for raises and rewards</li> <li>• Training in new technology</li> <li>• Succession planning</li> <li>• Cross-training of staff</li> </ul>   | <ul style="list-style-type: none"> <li>• Workforce development and training</li> <li>• Employee wellness</li> </ul>  |

| TYPE              | CHALLENGES  | ADVANTAGES  |
|-------------------|---|---|
| COMMUNITY-RELATED | <ul style="list-style-type: none"> <li>• Implementation of comprehensive community health improvement plans:               <ul style="list-style-type: none"> <li>➤ Facilitating implementation of plan but share actual implementation activities with community partners</li> <li>➤ Utilizing community resources</li> <li>➤ Focusing on partnerships that support core public health services</li> </ul> </li> </ul> | <ul style="list-style-type: none"> <li>• Community partnerships and linkages</li> </ul>                               |
| SUSTAINABILITY    | <ul style="list-style-type: none"> <li>• Unfunded mandates and changes in funding streams:               <ul style="list-style-type: none"> <li>➤ Opportunities for new revenue streams to support the core functions of public health</li> </ul> </li> <li>• Fee schedules</li> <li>• Joint opportunities with community partners</li> </ul>   | <ul style="list-style-type: none"> <li>• Strategic and data-driven planning</li> <li>• Infrastructure base</li> </ul> |

Figure 4: SWOT Analysis for Action

## Appendix B: Strategic Planning Process

Several teams were involved in the development of the plan:

Strategy and Performance Improvement Leadership (SPIL) Team:

- Health Officer
- Assistant CHD Director, Chief of Operations
- Assistant CHD Director, Chief of Performance Improvement & Preparedness
- Assistant CHD Director, Chief Medical Director and Epidemiologist
- Human Resources Director
- Chief Financial Officer
- Accreditation Liaison (also responsible for implementation of the Community Health Improvement Plan)
- Quality Improvement Coordinator

Quality Team: SPIL Team, other staff members identified for QI expertise.

Senior Leadership Team: SPIL Team, Division Directors, Health Center Directors/Administrators, and CHD Managers. This team is referred to as the Executive Leadership Team (ELT) in older documents.

The DOH-Palm Beach Strategic Planning Group consisted of the staff listed in Figure 5 below.

| <b>Name</b>             | <b>Title</b>                             |
|-------------------------|--|
| Adamson, Rosemary       | Information Security                     |
| Alford, Samantha, MD    | Health Center Physician                  |
| Alonso, Alina, MD       | DOH-Palm Beach Health Officer (Director) |
| Bilger, Philippe        | Dental Director                          |
| Cabrera, Mary Ann, MD   | Health Center Physician                  |
| Campbell, John          | Chief Financial Officer                  |
| Chirinos, Peter         | Administrative Support                   |
| Coleman-Miller, Vicky   | Attorney                                 |
| Cook, Usleur            | WIC Director                             |
| De Carvalho, Helena, MD | Health Center Physician                  |
| Dionne, Steve           | Budget Manager                           |
| Durant, Mitchell        | HIV/AIDS Manager                         |
| Edwards, Andy           | Health Center Administrator              |
| Englestad, Chris        | Maternal Child Health Director           |
| Fishbane, Marsha, MD    | Community & School Health Director       |
| Gillinov, Shelton, MD   | Health Center Director                   |
| Grammond, Susan         | Nutrition Manager                        |
| Grasso, Al              | Preparedness Manager                     |
| Graziani, Darrel J      | Environmental Administrator              |

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| Name                      | Title  |
|---------------------------|--|
| Greene, Sharon            | Health Promotion & Education Manager               |
| Gribkoff, Yanick          | ARNP   |
| Hacker, Carol             | Nurse Trainer                                      |
| Harp, Louise              | Environmental Health Supervisor                    |
| Hogan, Deborah            | Immunization Manager                               |
| Johnson, Barbara F        | Epidemiology Nurse Supervisor                      |
| Kist, Anne                | School Nurse Supervisor                            |
| Kumar, Savita             | Public Health Residency Director                   |
| Lee, Rong, MD             | Medical Resident                                   |
| Levy, Shoshana, MD        | Medical Resident                                   |
| Lobban-Marsan, Jacqueline | Health Access Division Director                    |
| Martinez, Alma            | Customer Service Advocate                          |
| Mayer, Timothy            | Environmental Public Health Director               |
| McCarthy, Paul            | Quality Improvement Manager                        |
| McCullough, Lynn          | Facilities Manager                                 |
| Montalvo, Elba            | TB Manager   |
| Morin, Manon              | Health Center Nursing Manager                      |
| Newman, Joanne            | Maternal Child Health Supervisor                   |
| Nine, Suzette             | Medical Records Supervisor                         |
| O'Connor, Tim             | Public Affairs Officer                             |
| Parkes, Robert, MD        | Epidemiology & Communicable Disease Director       |
| Persaud, Paul             | Information Technology Manager                     |
| Phillpotts, Luzan, DO     | Medical Resident                                   |
| Poitier, Lanora           | Vital Statistics Manager                           |
| Reback, Adam              | Accreditation Coordinator/Community Health Planner |
| Schneyer, John            | Maternal Child Health Supervisor                   |
| Schwaid, Gregory, MD      | Medical Resident                                   |
| Steinberg, Ellen          | Maternal Child Health Nurse Supervisor             |
| Stormer, Jim              | Environmental Health Program Manager               |
| Strock, Diane             | Environmental Health Program Manager               |
| Taylor Williams, Dolores  | Human Resources Director                           |
| Treadwell, Cynthia        | Health Center Nursing Manager                      |
| Upshaw, Constance         | Health Center Nursing Manager                      |
| Walker, Andy              | General Services Manager                           |

Figure 5: DOH-Palm Beach Strategic Planning Group

Figure 6 lists the Strategic Plan development process schedule of meetings:

| Dates                                  | Activities  | Participants   |
|--|---|--|
| February 12, 2013                      | Alignment training workshop   | Quality Team   |
| April 24, 2013                         | Workshop: (1) Strategic Planning refresher training (2) Conduct SWOT  | Senior Leadership Team                               |
| May 31, 2013                           | (1) Finalize SWOT results (2) Identify Strategic Issues (3) Identify Strategic Challenges and Advantages (4) Identified Goals | Quality Team   |
| July 24, 2013                          | (1) Identified Strategic Issues (2) Validated/ updated Goals  | Senior Leadership Team                               |
| September 25, 2013                     | Develop SMART Objectives  | Senior Leadership Team                               |
| During month of October 2013           | Review draft SP, and final approval from Director   | Quality Team (electronic review)                     |
| During month of November 2013          | Updated Strategic Planning Database with Goals, Objectives, staff responsible for each, etc.                                  | Quality Improvement and Information Technology staff |
| November 12, 2013                      | Quality Team updated the alignment matrix   | Quality Team   |
| November 20, 2013                      | SP presentation to leaders and discussion on next-steps   | Senior Leadership Team                               |
| November 18, 2014                      | Annual Review   | Quality Team   |
| March 1, 2015                          | Revised SP Published  | Quality Team   |
| August 27, 2015 and September 24, 2015 | Review and approve revisions to ensure alignment with DOH and Public Health Accreditation requirements                        | SPIL Team  |

Figure 6: DOH-Palm Beach Strategic Plan Development Process

**Monitoring Summary:**

DOH-Palm Beach has developed a Strategic Planning Database (SPDB) that tracks progress on achieving SP objectives. Each objective in the SP is assigned an owner, (i.e. person responsible for the objective). For each objective, the SPDB includes frequency of measurement, status (red-yellow-green), trend, a chart, detailed historical data, a comment section that can be used to document activities conducted as part of the plan of work, and other information; several reports are available.

The Senior Leadership Team meets monthly. At these meetings, the Health Officer reviews the Health Status Indicators Report produced by the SPDB. The Assistant CHD Director, Chief of Performance Improvement & Preparedness, reviews the Administrative Indicators report produced by the SPDB. Prior to the meeting, the Health Officer selects a SP objective owner to provide a detailed report on an objective using a standard DOH-Palm Beach template.

The SPIL Team is responsible for measuring, monitoring, and reporting of progress on the goals and objectives of the Strategic Plan, which is monitored through the Senior Leadership Team meetings and monthly SPIL Team meetings. The SPIL Team reviews the SP Detailed Summary Report produced by the SPDB annually (in November), assesses progress toward reaching goals and objectives, and reviews achievements for the year. The revised Strategic Plan is published annually by January of the year following the annual review. Revisions are based on an assessment of availability of resources and data, community readiness, current progress, and the alignment of goals.

### **Revision History**

- In November 2014, the DOH-Palm Beach Quality Team extended the Strategic Plan through December 2016; this revised version was published in March 2015. The timelines and targets for several Objectives were updated, and 2 Objectives were deleted. The Organizational Chart was also updated.
- In August/September 2015 the Strategy and Performance Improvement Leadership (SPIL) Team approved further revisions to ensure alignment with DOH and Public Health Accreditation requirements. These revisions include the addition of Appendices B and C.
- The November 2015 Annual Review conducted by the SPIL Team changed the wording for Objective 1.3.2 to demonstrate alignment with the CHIP; replaced the text for Objective 3.2.1 to align with changes made by the CHIP Council; deleted Objective 3.2.2 to align with changes made by the CHIP Council and address the transfer of most DOH-Palm Beach dental functions to the Health Care District of Palm Beach County; and renumbered Objective 3.2.3 to 3.2.2. Appendix C was updated to reflect CHIP changes. Updated alignment to the FDOH Agency Strategic Plan 2016-2018 will occur with publication of the DOH-Palm Beach Strategic Plan 2017-2019.

## Appendix C: Alignment to Other Plans

| Agency Strategic Plan Strategy Number | Agency Strategic Plan Strategy  | DOH-Palm Beach CHD Objective Number | CHIP Alignment | QI Plan Alignment   |
|---------------------------------------|---|-------------------------------------|----------------|---|
| 1.3.2                                 | Meet special health care needs of children.   | 1.1.1                               |                |   |
| 1.1.1                                 | Prevent and control infectious disease  | 1.1.2                               |                |   |
| 1.1.1                                 | Prevent and control infectious disease  | 1.1.3                               |                |   |
| 1.1.1                                 | Prevent and control infectious disease  | 1.1.4                               |                |   |
| 1.1.1                                 | Prevent and control infectious disease  | 1.1.5                               |                |   |
| 1.1.1                                 | Prevent and control infectious disease  | 1.1.6                               |                |   |
| 1.1.1                                 | Prevent and control infectious disease  | 1.1.7                               |                |   |
| 1.1.1                                 | Prevent and control infectious disease  | 1.1.8                               |                |   |
| 1.1.2                                 | Prevent and reduce illness, injury and death related to environmental factors               | 1.1.9                               |                |   |
| 1.1.4                                 | Prevent and reduce intentional and unintentional injuries.                                  | 1.1.10                              |                |   |
| 1.1.2                                 | Prevent and reduce illness, injury and death related to environmental factors               | 1.1.11                              |                |   |
| 1.1.2                                 | Prevent and reduce illness, injury and death related to environmental factors               | 1.1.12                              |                |   |
| 1.1.3                                 | Minimize loss of life, illness, and injury from natural or man-made disasters               | 1.1.13                              |                |   |
| 1.1.4                                 | Prevent and reduce intentional and unintentional injuries.                                  | 1.1.14                              |                |   |
| 1.2.2                                 | Reduce illness, disability, and death related to tobacco use and secondhand smoke exposure. | 1.2.1                               |                | Fax To Quit Protocol QI Project                                     |
| 1.2.2                                 | Reduce illness, disability, and death related to tobacco use and secondhand smoke exposure. | 1.2.2                               |                | Fax To Quit Protocol QI Project                                     |
| 1.2.1                                 | Increase the proportion of adults and children who are at a healthy weight.                 | 1.2.3                               | 1.1.1          | - Healthiest Weight QI Project<br>- Fax To Quit Protocol QI Project |
| 1.3.1                                 | Reduce infant mortality.  | 1.3.1                               |                |   |
| 1.3.2                                 | Meet special health care needs of children.   | 1.3.2                               |                |   |
| 1.3.1                                 | Reduce infant mortality.  | 1.3.3                               |                |   |
| 1.3.1                                 | Reduce infant mortality.  | 1.3.4                               |                |   |
| 1.3.1                                 | Reduce infant mortality.  | 1.3.5                               |                |   |
| 1.1.3                                 | Minimize loss of life, illness, and injury from natural or man-made disasters               | 1.4.1                               |                |   |

| Agency Strategic Plan Strategy Number | Agency Strategic Plan Strategy  | DOH-Palm Beach CHD Objective Number | CHIP Alignment | QI Plan Alignment                           |
|---------------------------------------|---|-------------------------------------|----------------|---|
| 2.1.2                                 | Use public health information technology and systems to efficiently improve business practices  | 1.4.2                               |                |   |
| 2.1.2                                 | Use public health information technology and systems to efficiently improve business practices  | 1.4.3                               |                |   |
| 2.1.2                                 | Use public health information technology and systems to efficiently improve business practices  | 2.1.1                               |                |   |
| 2.1.2                                 | Use public health information technology and systems to efficiently improve business practices  | 2.1.2                               |                |   |
| 2.3.3                                 | Develop, implement and sustain integrated quality improvement processes throughout organizational practice, programs, processes and interventions.  | 2.1.3                               |                |   |
| 2.2.1                                 | Maximize Medicaid and other third party revenue to help county health departments and Children's Medical Service providers to retain the infrastructure necessary to meet the public health needs of their community. | 2.2.1                               |                | Rapid Process Improvement Budget QI project |
| 2.3.3                                 | Develop, implement and sustain integrated quality improvement processes throughout organizational practice, programs, processes and interventions.  | 2.2.2                               |                | Rapid Process Improvement Budget QI project |
| 2.3.3                                 | Develop, implement and sustain integrated quality improvement processes throughout organizational practice, programs, processes and interventions.  | 2.2.3                               |                |   |
| 2.3.3                                 | Develop, implement and sustain integrated quality improvement processes throughout organizational practice, programs, processes and interventions.  | 2.2.4                               |                |   |
| 2.2.2                                 | Review and update fee policies and fee schedules.   | 2.2.5                               |                |   |
| 2.3.1                                 | Collect, track and use performance data to inform business decisions and continuously improve.  | 2.2.6                               |                |   |
| 3.2.1                                 | Increase access to care for underserved populations.  | 2.2.7                               |                |   |
| 2.2.1                                 | Maximize Medicaid and other third party revenue to help county health departments and Children's Medical Service providers to retain the infrastructure necessary to meet the   | 2.2.8                               |                |   |
| 2.3.3                                 | Develop, implement and sustain integrated quality improvement processes throughout organizational practice, programs, processes and interventions.  | 2.3.1                               |                |   |
| 2.3.3                                 | Develop, implement and sustain integrated quality improvement processes throughout organizational practice, programs, processes and interventions.  | 2.3.2                               |                |   |
| 2.3.3                                 | Develop, implement and sustain integrated quality improvement processes throughout organizational practice, programs, processes and interventions.  | 2.3.3                               |                |   |
| 2.3.1                                 | Collect, track and use performance data to inform business decisions and continuously improve.  | 2.3.4                               |                |   |
| 2.3.2                                 | Maintain a sustainable performance management framework.  | 2.3.5                               |                |   |
| 2.4.1                                 | Develop, implement and improve internal and external communication strategies and plans.  | 2.4.1                               |                |   |
| 2.4.1                                 | Develop, implement and improve internal and external communication strategies and plans.  | 2.4.2                               |                |   |

| Agency Strategic Plan Strategy Number | Agency Strategic Plan Strategy  | DOH-Palm Beach CHD Objective Number | CHIP Alignment | QI Plan Alignment                |
|---------------------------------------|---|-------------------------------------|----------------|----------------------------------|
| 3.1.3                                 | Support local efforts to revitalize communities.  | 3.1.1                               |                |                                  |
| 3.2.1                                 | Increase access to care for underserved populations.  | 3.2.1                               | 2.1.1          |                                  |
| 3.2.1                                 | Increase access to care for underserved populations.  | 3.2.2                               | 3.3.1          |                                  |
| 4.1.2                                 | Provide trainings and resources that support and develop current public health employees.                                       | 4.1.1                               |                |                                  |
| 4.1.1                                 | Implement a competency-based framework for recruitment and training.  | 4.1.2                               |                |                                  |
| 4.1.2                                 | Provide trainings and resources that support and develop current public health employees.                                       | 4.1.3                               |                | Employee Satisfaction QI Project |
| 4.2.1                                 | Develop, sustain and improve an Agency Workforce Development Plan to ensure continuity of competent and credentialed workforce. | 4.2.1                               |                |                                  |
| 4.2.1                                 | Develop, sustain and improve an Agency Workforce Development Plan to ensure continuity of competent and credentialed workforce. | 4.2.2                               |                | Employee Satisfaction QI Project |



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