

Florida Department of Health in Collier County

Strategic Plan

April 2021 - December 2023



Scott A. Rivkees, MD
State Surgeon General

Kimberly Kossler, MPH, RN, CPH
Administrator

Published: March 1, 2021
Revised: February 9, 2022

TABLE OF CONTENTS

Mission, Vision, and Values	ii
Background and Overview	1
Demographics.....	2
Budget and Revenue	7
Programs and Services.....	8
Planning Process	10
Strengths, Weaknesses, Opportunities, and Threats Analysis	11
Strategic Planning Workshops	13
Strategic Planning Meeting Schedule.....	16
Strategic Planning Participants	17
Review and Monitoring Process	18
Strategic Plan Review Process	18
2022 Priorities, Goals, Strategies, and Objectives	20
Summary of Revisions	25
Environmental Scan Resources	27

Produced by:
Florida Department of Health in Collier County
3339 Tamiami Trail East, Building H
Naples, FL 34112
<http://collier.floridahealth.gov/>
Twitter: [@HealthyCollier](https://twitter.com/HealthyCollier)

Mission, Vision, and Values

• OUR MISSION

Why do we exist?

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

• OUR VISION

What do we want to achieve?

To be the Healthiest State in the Nation.

• OUR VALUES

What do we use to achieve our mission and vision?

Innovation

We search for creative solutions and manage resources wisely.

Collaboration

We use teamwork to achieve common goals and solve problems.

Accountability

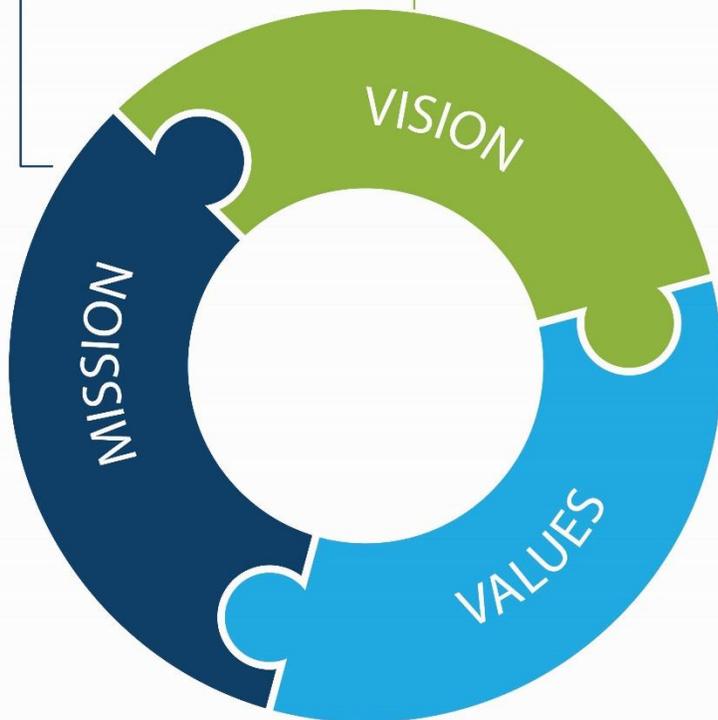
We perform with integrity and respect.

Responsiveness

We achieve our mission by serving our customers and engaging our partners.

Excellence

We promote quality outcomes through learning and continuous performance improvement.



Background and Overview

Public health touches every aspect of our daily lives. Public health experts diagnose the health of each community by listening to people who live there, and then use data, evidence, and research to offer solutions. Public health aims to provide the maximum benefit for the largest number of people and to create conditions in which people can be healthy.

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

Just like a person makes decisions that affect their health, so does a community. We need clean air and safe neighborhoods, for example. Public health experts listen to the community and look for patterns in what is affecting their health. They use science to diagnose problems and bring together everyone who can stop health threats before they start.

The Florida Department of Health in Collier County (DOH-Collier) is the only public health agency in Collier County serving a community of over 377,000 residents and 1.8 million annual visitors with 150 employees and a budget of about \$12 million.

DOH-Collier clinical and nutritional services are targeted to specific segments of the population who tend to be medically underserved and do not have medical insurance or other means to access private sector healthcare services. More than 50,000 clients are directly served by DOH-Collier annually.

Most of the residents and visitors of Collier County are unaware of core public health services provided by DOH-Collier, but still benefit from preventative services like environmental health regulations and disease surveillance. They become aware of these services only when emergency situations like hurricanes, environmental issues like beach advisories, or a disease outbreak like COVID-19 make the headlines.

DOH-Collier works with the Collier County Board of County Commissioners and numerous community partner agencies to facilitate implementation of the Healthy Collier Community Health Improvement Plan and strives to attain the vision of being the healthiest county in the nation to live, learn, work, and play.

The DOH-Collier Strategic Plan contains an overview of Collier County demographics and the DOH-Collier budget, programs, and services. This background information is followed by a summary of the process that was used to formulate the strategic plan, results and analyses of the process steps, and then the goals, strategies, and objectives of the plan.

The Strategic Plan sets the direction for actions that DOH-Collier will prioritize over a three-year cycle. As part of the performance management system, it identifies the priority focus areas for the organization to excel in its role as a community collaborator and provider of public health services and aligns with state and national priorities. The objectives in the plan are regularly monitored to measure progress towards reaching goals. The plan is reviewed quarterly and updated annually to keep up with the ever-changing environment of public health.

Demographics

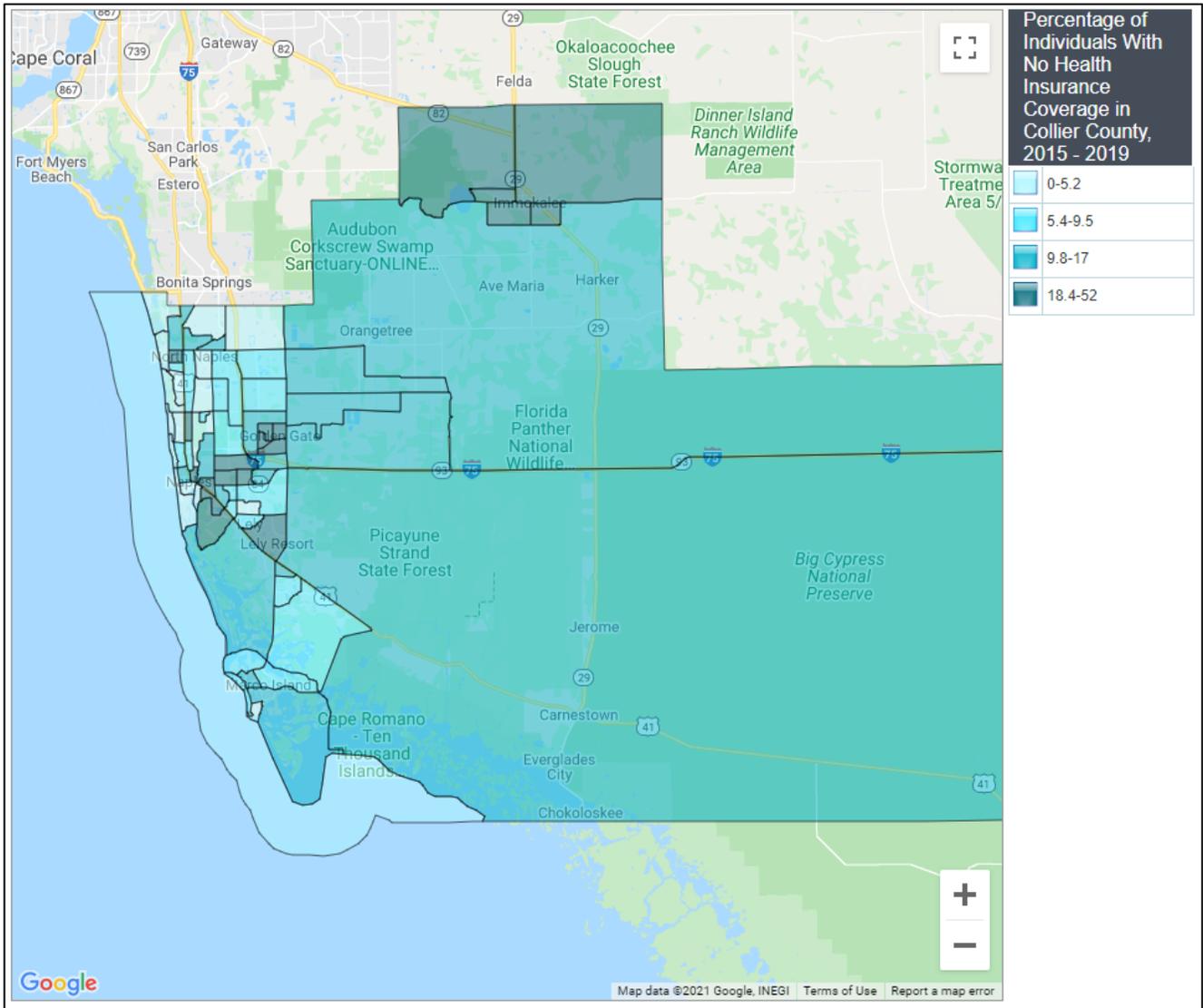
Where we live influences our health. Demographic, socioeconomic, and environmental factors create unique community health service needs. DOH-Collier serves a population of 377,700 in the county with the second largest land area in Florida, which contains urban, suburban, and rural communities. The sub-tropical climate and paradise-like setting of western Collier County attract wealthy families, retirees, seasonal residents, and visitors from around the world. This results in high property values, a lack of affordable housing, and significant income inequality.

Collier County is one of the most economically disparate counties in the United States with some of the wealthiest households in the nation juxtaposed against 32.5%¹ of households that are cost-burdened. There is a diverse immigrant, minority population working in the agriculture, service, and hospitality sectors and DOH-Collier serves this community by providing culturally competent services in two and sometimes three foreign languages. Throughout the county, there are two categories of immigrant populations served by the organization. The first is the diverse Hispanic population with roots in Cuba and Central and South America (28.2% of the population and growing). The second is the black Haitian community (7.4% of the population). Mixed in with these culturally distinct populations is an older adult population that makes up nearly one-third of the county's total population.

The following charts and tables highlight these key demographic features of Collier County.

¹ Source: American Community Survey 5-year estimate for 2019.

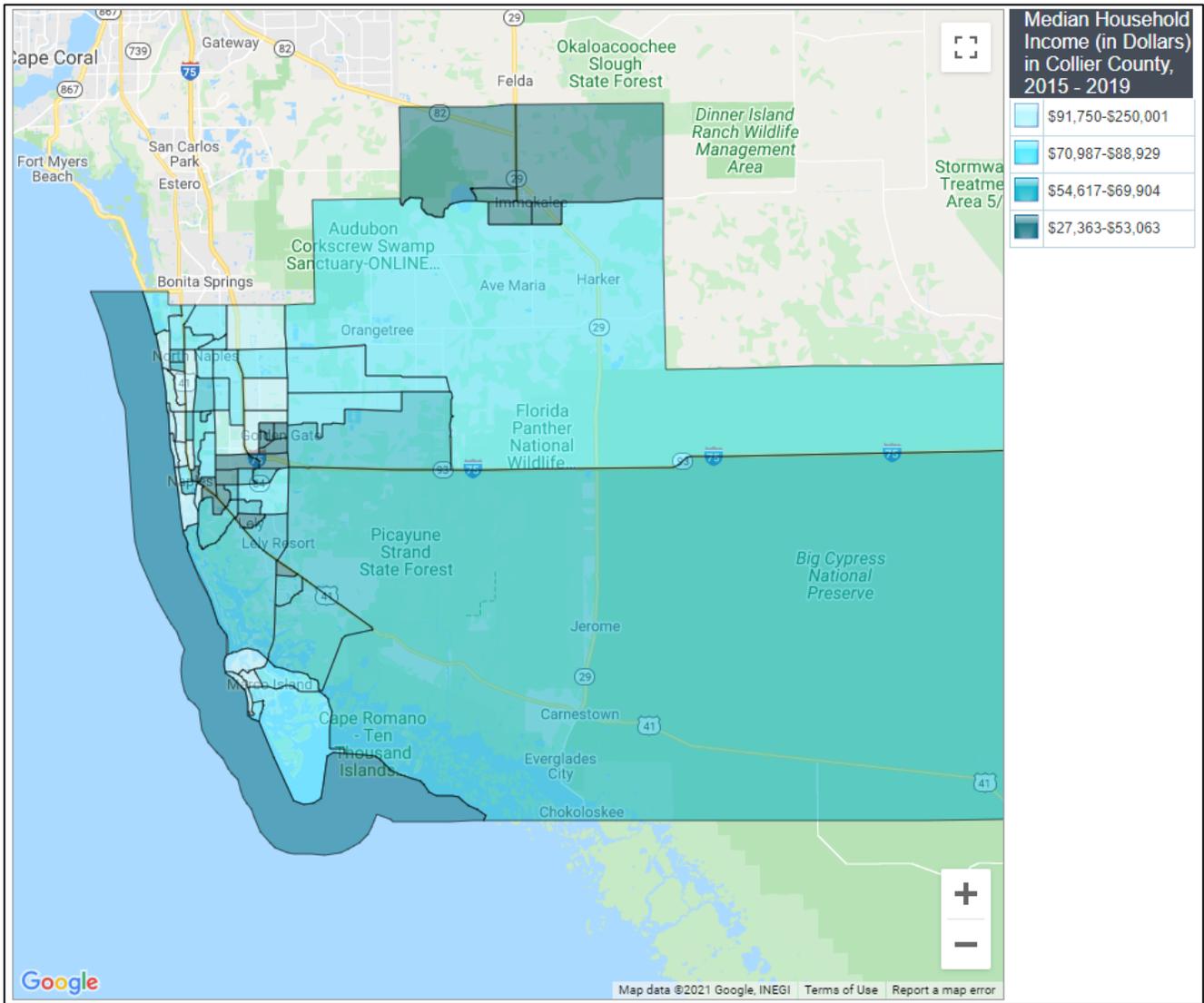
Figure 1: Percentage of Individuals with No Health Insurance Coverage in Collier County



Data Source: FLHealthCHARTS Community Map data is provided by the Florida Department of Health Bureau of Vital Statistics and the 2015 American Community Survey 5-year estimates (tables B02001, B03002, S0101, S1501, S1701, S1903, S2301, S2506, S2701)

Figure 1 shows the percentage of people without health insurance by census tract demonstrating the areas where the people most in need of public health services are concentrated.

Figure 2: Median Household Income in Collier County

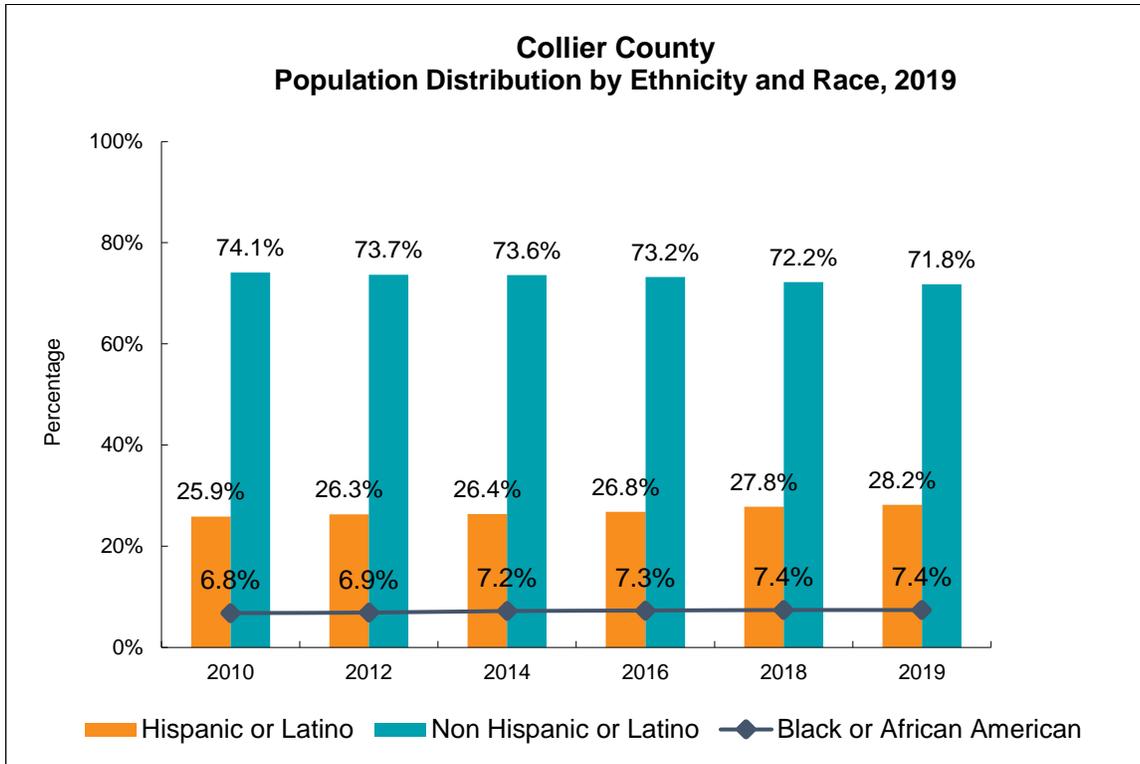


Data Source: FLHealthCHARTS Community Map data is provided by the Florida Department of Health Bureau of Vital Statistics and the 2015 American Community Survey 5-year estimates (tables B02001, B03002, S0101, S1501, S1701, S1903, S2301, S2506, S2701)

Figure 2 presents the median household income in Collier County by census tract demonstrating the areas with the highest concentrations of cost-burdened households.

Looking at the two maps together, the areas with the lowest median income coincide with the areas with the highest percentage of residents without health insurance, which demonstrates where public health services are most needed in the county.

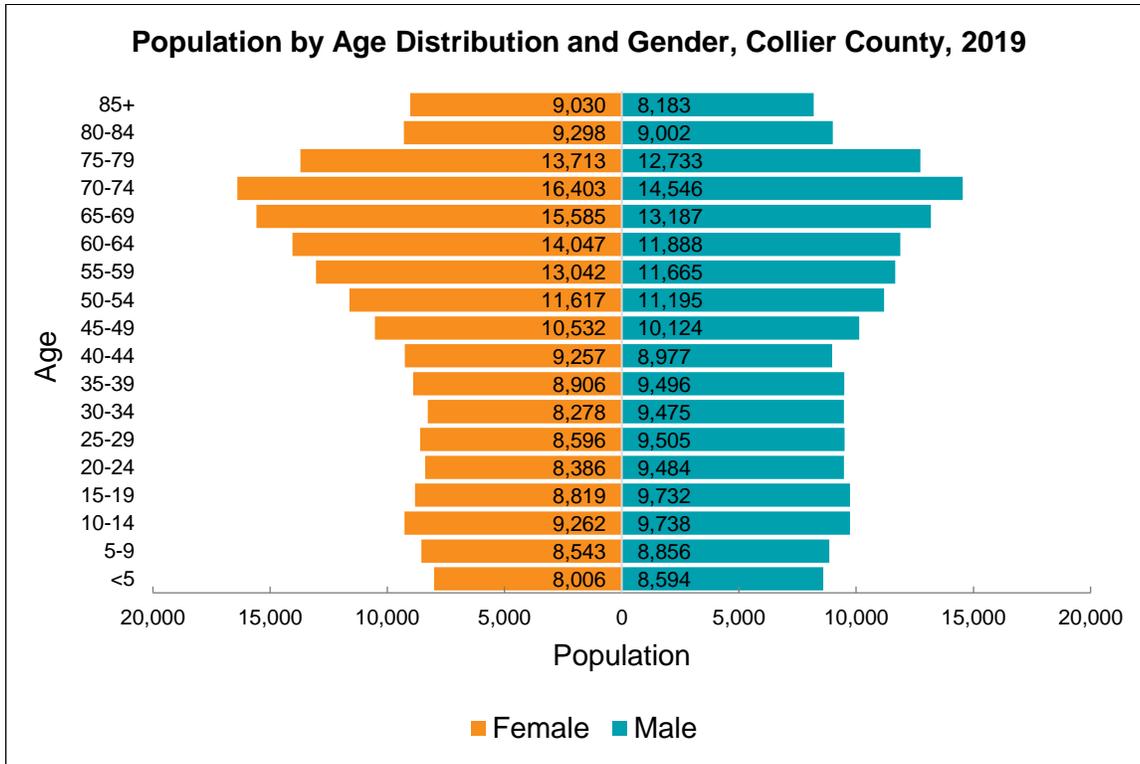
Figure 3: Collier County Population Distribution by Ethnicity and Race, 2019



Source: Florida Legislature, Office of Economic and Demographic Research

Figure 3 shows the percentages of Hispanic and non-Hispanic residents in Collier County along with the percentage of Black or African American residents. The proportion Hispanic residents has been increasing steadily over the period shown, while the percentage of Black or African-American residents has remained nearly the same over the past five years.

Figure 4: 2019 Collier County Population by Age Distribution and Gender



Source: Florida Legislature, Office of Economic and Demographic Research

Figure 4 depicts the population of Collier County by age and gender showing that the number of people in the age groups from 60 - 79 is notably higher than those in the younger age groups and that there are more females in those older age groups.

Figure 5: Older Adult Population Percentage Comparison by Jurisdiction

Jurisdiction	% of Total Population age 65+
Collier County	32.2%
Florida	20.5%
United States	16.5%

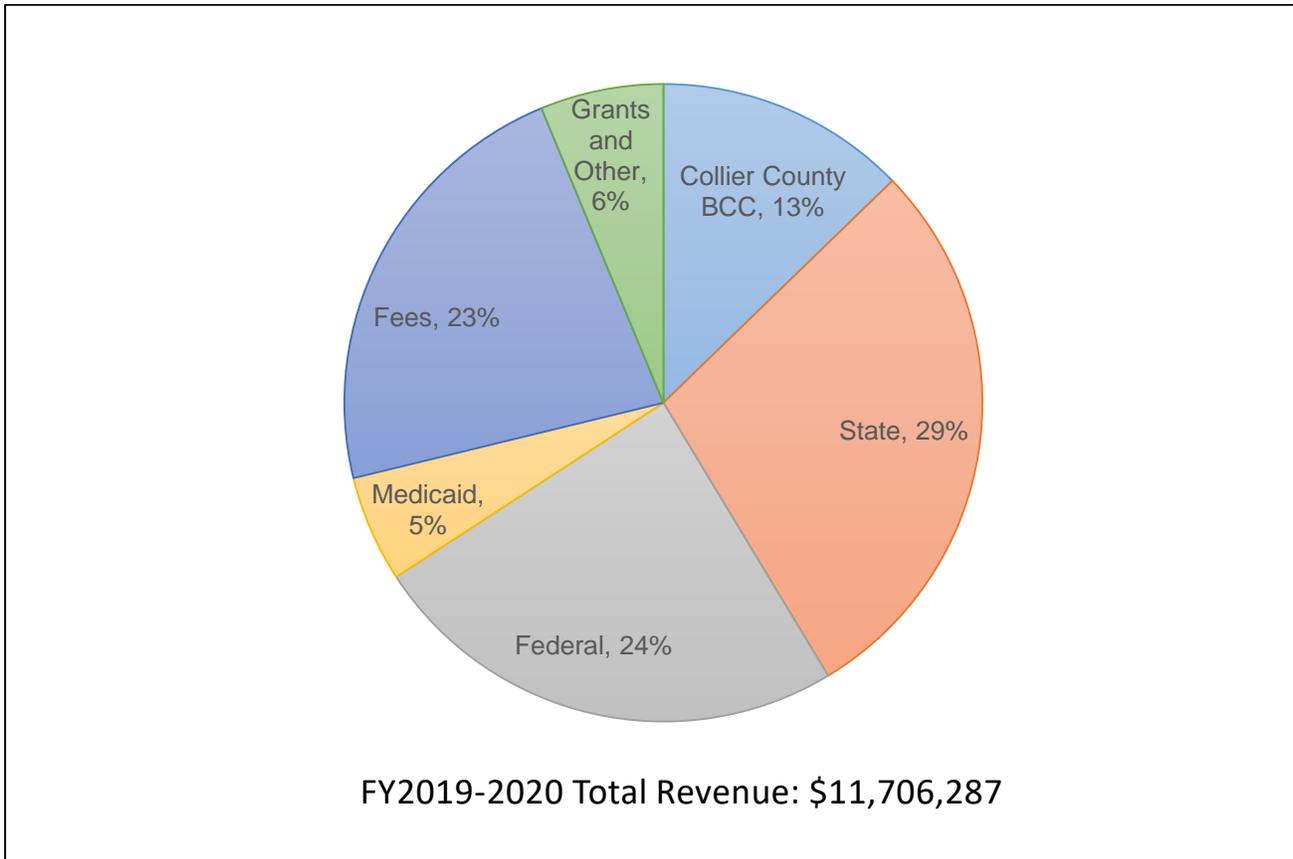
Source: American Community Survey 5-year estimate for 2019.

Figure 5 demonstrates that the percentage of the population 65 and older in Collier County is significantly higher than in Florida and the United States.

Budget and Revenue

Financial resources for DOH-Collier are provided through multiple sources. These include fees, grants, and budget allocations from the County, State, and Federal governments.

Figure 6: DOH-Collier Revenue Percentage by Source, Fiscal Year 2019-2020



Source: Florida Department of Health Financial Information Reporting System

Programs and Services

The most effective strategies for improving public health include policies and programs that shape the environment and create opportunities for healthier behaviors. DOH-Collier strives to create health equity in Collier County. Achieving health equity requires valuing everyone equally with focused and ongoing societal efforts to address avoidable inequalities, historical and contemporary injustices, and the elimination of health and health care disparities. All DOH-Collier's programs and services are provided in a culturally competent manner with staff and resources that can communicate with customers and stakeholders in a language they can understand.

DOH-Collier is committed to providing the highest standard of public health services to protect, promote, and improve the health of all residents and visitors of Collier County through the following core functions and programs:

Environmental Health

We protect the health of the community by monitoring and regulating environmental activities which may contribute to the occurrence or transmission of disease by ensuring safe drinking water, safe food, proper sewage disposal, clean swimming pools, as well as conducting complaint investigations and enforcing public health laws.

Communicable Disease and Epidemiology

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

Clinical Services

We offer a variety of services and programs for expecting moms, newborn babies, infants and toddlers, school-aged children, adolescents, and adults. Our services are provided by highly qualified physicians, dentists, nurses, social workers, nutritionists and other health care providers. These programs and services include Healthy Start, WIC, a pediatric dental clinic, child immunizations, family planning, adult emergency dental services, and adult immunizations.

Public Health Preparedness

We partner with the local healthcare system, emergency management, government, and community organizations to ensure preparedness to respond to natural and man-made disasters. The preparedness effort focuses on developing critical capabilities necessary to protect the health and safety of the most vulnerable members of the community and to minimize loss.

Community Health Promotion

We plan and implement programs to promote healthy behaviors and reduce chronic disease through education, community outreach, and collaborative partnerships with organizations like the Tobacco Free Collier Partnership, Blue Zones Project of Southwest Florida, and the Leadership Coalition on Aging.

Community Health Planning and Statistics

We assess the health status of the community and collaborate with all, multi-sector agencies that make up the local public health system to develop goals and strategies to achieve better overall community health outcomes. This is accomplished by continuously assessing the community through focus groups, surveys, community meetings, and analysis of local public health data. We maintain and annually update the Collier County Community Health Assessment, the Healthy Collier Community Health Improvement Plan, and the DOH-Collier Strategic Plan.

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 can assist the state with tracking causes of morbidity and mortality, which are two main indicators of community health status.

Planning Process

The Strategic Plan sets the direction for actions that DOH-Collier will prioritize over a three-year cycle. As part of the performance management system, it identifies the priority focus areas for the organization to excel in its role as a community collaborator and provider of public health services and aligns with state and national priorities. The DOH-Collier performance management system is designed to ensure continuous improvement and progress toward goals. The system allows the department to track performance by systematically collecting and analyzing data. It also includes forums for routinely discussing performance to identify opportunities for improvement.

The performance management system is integrated into the operations and practices of the organization. The system does the following:

- Sets organizational objectives by developing strategic health improvement, quality improvement, and workforce development plans for the department that are aligned with the overall agency goals and objectives.
- Identifies performance indicators and establishes processes to measure and report on progress toward achieving objectives on a regular basis.
- Identifies areas where achieving objectives requires focused quality improvement processes.
- Provides visible leadership for ongoing performance management.

The DOH-Collier Performance Management Council is the foundation of the organization's performance management system. The primary functions of the Council are to:

- Advise and guide the creation, deployment, and continuous evaluation of the performance management system and its components.
- Continuously and routinely monitor and evaluate the performance in achieving strategic objectives in health improvement, agency strategy, quality improvement, and workforce development plans.
- Make recommendations to improve performance.

DOH-Collier initiated a new strategic planning process in January of 2019 to define the direction and course of the organization for customers, employees, administrators, and legislators for the next three years. The plan will position DOH-Collier to operate as a sustainable component of an integrated public health system and provide its customers and stakeholders with quality public health services. It is a living document that DOH-Collier will evaluate and update annually to address new challenges posed by the changing public health environment.

Senior leadership championed the planning process during seven meetings. The process began in December of 2019 with the objective of completing a new strategic plan in March of 2020. However, shortly after the SWOT analysis was completed in January 2020, the COVID-19 emergency response effort dramatically affected the normal operations of all DOH-Collier programs and activities. The planning process resumed in October 2020 with the organization and scheduling of a virtual SWOT analysis exercise and virtual strategic planning workshops.

Numerous internal stakeholders attended these meetings and workshops including the PMC, made up of senior leadership and program managers, and over 100 other staff members who participated in two SWOT analysis exercises. During the planning process, DOH-Collier leaders considered key support functions required for efficiency and effectiveness. The Strategic Plan articulates DOH-Collier priorities, the actions it will take, and how it will measure success.

Strengths, Weaknesses, Opportunities, and Threats Analysis

DOH-Collier conducted three separate strengths, weaknesses, opportunities, and threats (SWOT) exercises during the extended strategic planning process. The first exercise was conducted during the December 18, 2019 Performance Management Council (PMC) meeting. The second exercise was conducted during an all-staff meeting on January 31, 2020, and the third exercise was conducted virtually using Microsoft Teams on November 5, 2020.



The results from the December 2019 PMC and January 2020 All-Staff SWOT exercises were categorized and combined, and then presented to leadership. The senior leadership team reviewed the results and added items that were important from their perspective of the organization. The discussion included consideration of infrastructure and capacity required for efficiency and effectiveness including:

- Information management
- Communication (including branding)
- Workforce development
- Financial sustainability

This review resulted in some additions to the strengths and weaknesses categories based on senior leaders’ knowledge about financial and technology resources, as well as combining some items into broader categories. Then at the February 2020 PMC meeting, members reviewed the final SWOT analysis summary report and suggested a couple of minor changes for clarification purposes. The finalized SWOT Analysis report was published on *DOH-Collier Corner* to provide access to all employees.

DOH-Collier Corner

2020
3/16

DOH-Collier SWOT Analysis Results

by Johnson, Breanna at 8:47 AM in [Reports and Data](#)

Thanks to everyone who participated in the SWOT analysis exercises. You can read the complete results [here](#).

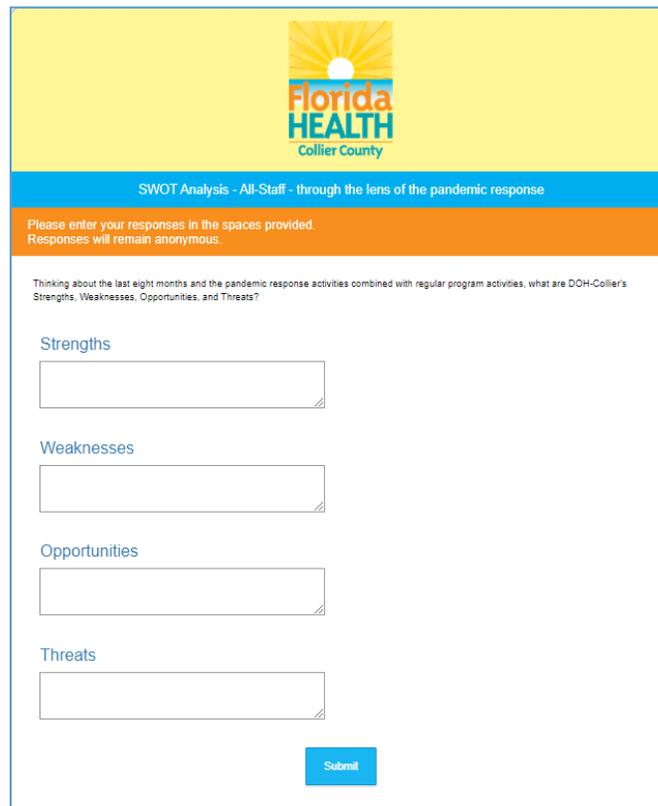
If you have any questions about the results, please talk with your supervisor.

This is the final summary for the DOH-Collier Strategic Plan	
Strengths	Weaknesses
<ul style="list-style-type: none"> • Organizational culture - "We are family" • Staff expertise in public health • Diverse and culturally competent workforce • Disaster preparedness • Community partnerships • Training opportunities • Employment benefits • Quality Improvement Culture • Customer focused • Programs and services • Internships with local colleges and universities 	<ul style="list-style-type: none"> • Budget constraints • Difficulty recruiting and retaining skilled workforce • Limited career advancement opportunities • Slow to adopt new technologies • Central office sets policies and expectations, which can limit local initiatives • Internal communication about programs and services • Integration of services across programs • Limited resources for community outreach
Opportunities	Threats
<ul style="list-style-type: none"> • Grant funding • Educate the public and policy makers about public health services • Increase community partnerships • Increase use of new technologies • Increase cooperative initiatives for the older adult population • Increase internships with local colleges and universities • Professional development 	<ul style="list-style-type: none"> • Reduced public health funding • Rapid increase in proportion of 65+ population • Limited awareness of public health services • Legislative policy changes • Disparity in pay between public and private sectors • Cost of Living in Collier County • Increased need for behavioral health services • Unfunded mandates • Emerging public health threats

After 10 months of COVID-19 response activities, the senior leadership team decided to do another check-in with staff before proceeding with the strategic planning process. All DOH-Collier staff members were invited to participate in a Microsoft Teams virtual meeting on November 5, 2020 to conduct the third SWOT analysis exercise.

The purpose of this SWOT analysis exercise was to identify changes that may have occurred since the COVID-19 pandemic began dominating DOH-Collier’s daily operations in March 2020. In November, when this SWOT exercise was conducted, COVID-19 response activities were mostly routine, and most staff were back to working on their regular operational priorities. However, many were also assisting with pandemic response activities for some portion of their time and a small proportion of staff members were assigned solely to pandemic response duties.

For this exercise, participants were asked to consider the organization’s strengths, weaknesses, opportunities, and threats through the lens of the pandemic response. There were 55 participants in the virtual meeting, who were invited to open a Survey Monkey link and type their thoughts about DOH-Collier’s strengths, weaknesses, opportunities, and threats. Shortly after the virtual meeting, the survey link was sent by email to all DOH-Collier staff members, inviting those who were not able to attend the virtual meeting to participate by submitting their responses before Noon on November 6. In total, 45 responses to each survey question were received.



The screenshot shows a survey form with a yellow header containing the Florida Health Collier County logo. Below the header is a blue bar with the text "SWOT Analysis - All-Staff - through the lens of the pandemic response". An orange bar contains the instruction: "Please enter your responses in the spaces provided. Responses will remain anonymous." The main content area is white and contains the question: "Thinking about the last eight months and the pandemic response activities combined with regular program activities, what are DOH-Collier's Strengths, Weaknesses, Opportunities, and Threats?". There are four text input fields, one for each category: Strengths, Weaknesses, Opportunities, and Threats. A blue "Submit" button is located at the bottom right of the form.

On November 9, 2020 the performance management council reviewed and verified the combined results of the three SWOT exercises. The final SWOT Analysis report was published on *DOH-Collier Corner* to provide access to all employees.

DOH-Collier SWOT Analysis Results

Strengths	Weaknesses
<ul style="list-style-type: none"> • Organizational culture - “We are family”, Teamwork & Comradery • Staff expertise in public health, flexibility & resilience • Diverse and culturally competent workforce • Disaster preparedness • Community partnerships • Training opportunities • Employment benefits • Quality improvement culture • Customer focused • Programs and services • Internships with local colleges, technical schools, and universities 	<ul style="list-style-type: none"> • Pandemic response challenges • Budget constraints • Difficulty recruiting and retaining skilled workforce • Limited career advancement opportunities • Slow to adopt new technologies • Central office sets policies and expectations, which can limit local initiatives • Internal communication about programs and services • Integration of services across programs • Limited resources for community outreach
Opportunities	Threats
<ul style="list-style-type: none"> • Develop an improvement plan based on lessons learned from the pandemic response • Grant funding • Educate the public and policy makers about public health services • Increase community partnerships • Increase use of new technologies • Increase cooperative initiatives for the older adult population • Increase internships with local colleges, technical schools, and universities • Professional development 	<ul style="list-style-type: none"> • Staff turnover and burn-out • Workforce safety • Reduced public health funding • Rapid increase in proportion of 65+ population • Limited awareness of public health services • Legislative policy changes • Disparity in pay between public and private sectors • Cost of living in Collier County • Increased need for behavioral health services • Unfunded mandates • Emerging public health threats

Strategic Planning Workshops

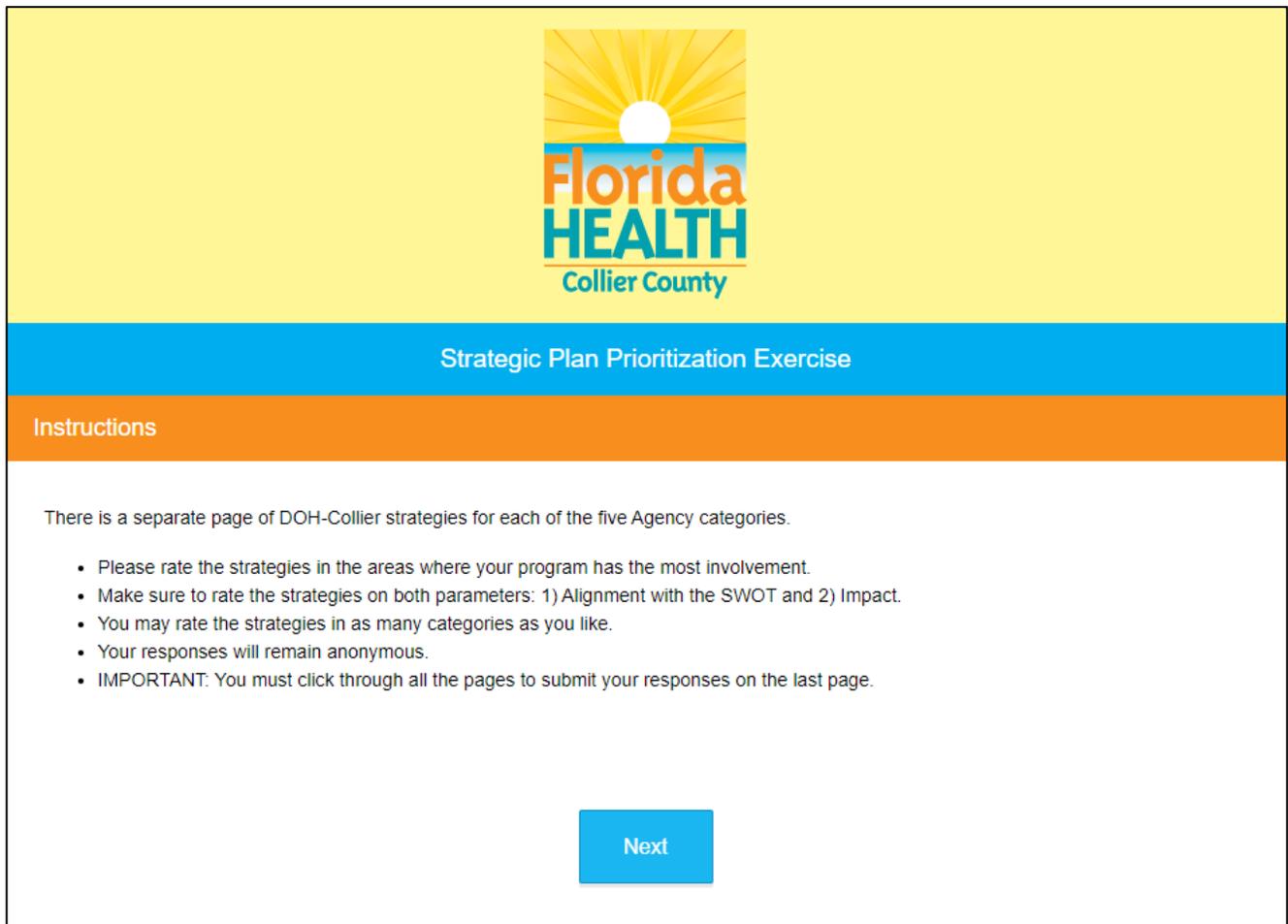
After completing the SWOT analysis, the DOH-Collier PMC participated in three virtual strategic planning workshops on November 9 and 18, and December 9, 2020. PMC members completed an assignment to prepare for each workshop. In the first workshop, the PMC verified the SWOT Analysis results and the facilitator described the exercises and assignments that would be used during the workshop series to develop the plan. The facilitator also explained the structure for the new strategic plan and how it would align with the five strategic priorities in the Agency Strategic Plan.

Next an electronic survey was sent to all program managers asking them to list up to 10 of their current program activities. At the November 18, 2020 workshop, PMC members worked together to categorize the submitted program activities into the five Agency Strategic Plan priority areas. Participants then reviewed the results of the environmental scan research and reached consensus that the common themes were correct.

Next, the group decided on two parameters to use for a prioritization matrix exercise:

1. Impact on the community and/or organization, and
2. Alignment with the SWOT analysis results

After the workshop, the facilitator categorized the SWOT analysis results into the validated common themes and included the categorized SWOT matrix in an electronic survey that was sent to PMC members. The survey asked them to rank the listed program activities on each of the two parameters.



The screenshot shows a survey interface with a yellow header containing the Florida Health Collier County logo. Below the header is a blue bar with the text "Strategic Plan Prioritization Exercise". Underneath is an orange bar with the word "Instructions". The main content area is white and contains the following text and list:

There is a separate page of DOH-Collier strategies for each of the five Agency categories.

- Please rate the strategies in the areas where your program has the most involvement.
- Make sure to rate the strategies on both parameters: 1) Alignment with the SWOT and 2) Impact.
- You may rate the strategies in as many categories as you like.
- Your responses will remain anonymous.
- IMPORTANT: You must click through all the pages to submit your responses on the last page.

At the bottom center of the page is a blue button with the text "Next".

The responses were analyzed by calculating the total score for each program activity, and then ranking them from highest to lowest score within each of the five Agency priority areas.

Strategic Plan Prioritization Exercise

Health Equity

Strengths	Weaknesses
<ul style="list-style-type: none"> • Community Partnerships • Internal Processes <ul style="list-style-type: none"> • Disaster preparedness • Quality Improvement Culture • Customer focused • Programs and services • Workforce Training and Engagement <ul style="list-style-type: none"> • Organizational culture - “We are family”, <i>Teamwork and Comradery</i> • Staff expertise in public health, <i>flexibility and resilience</i> • Diverse and culturally competent workforce • Training opportunities • Employment benefits • Internships with local colleges, technical schools and universities 	<ul style="list-style-type: none"> • Internal Processes <ul style="list-style-type: none"> • <i>Pandemic response challenges</i> • Budget constraints • Slow to adopt new technologies • Central office sets policies and expectations, which can limit local initiatives • Communication <ul style="list-style-type: none"> • Internal communication about programs and services • Integration of services across programs • Limited resources for community outreach • Workforce Engagement <ul style="list-style-type: none"> • Difficulty recruiting and retaining skilled workforce • Limited career advancement opportunities
Opportunities	Threats
<ul style="list-style-type: none"> • Community Partnerships <ul style="list-style-type: none"> • Increase community partnerships • Increase cooperative initiatives for the older adult population • Internal Processes <ul style="list-style-type: none"> • <i>Develop an improvement plan based on lessons learned from the pandemic response</i> • Grant funding • Communication <ul style="list-style-type: none"> • Educate the public and policy makers about public health services • Workforce Training and Engagement <ul style="list-style-type: none"> • Increase use of new technologies • Increase internships with local colleges and universities • Professional development 	<ul style="list-style-type: none"> • Community Partnerships <ul style="list-style-type: none"> • Increased need for behavioral health services • Rapid increase in proportion of 65+ population • Internal Processes <ul style="list-style-type: none"> • Legislative policy changes • Unfunded mandates • Emerging public health threats • Communication <ul style="list-style-type: none"> • Limited awareness of public health services • Reduced public health funding • Workforce Training and Engagement <ul style="list-style-type: none"> • <i>Staff turnover and burn-out</i> • <i>Workforce safety</i> • Disparity in pay between public and private sectors • Cost of Living in Collier County

Rate each of the listed strategies on its **Alignment with the SWOT results.**

Does it:

- Use a Strength or Opportunity?
- Ease a Weakness or Threat?

	1 - No Alignment with SWOT	2	3	4	5 - Very Strong Alignment with SWOT
School health hearing screenings	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
HIV viral load suppression and retention in care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

In the December 9, 2020 workshop, the facilitator asked participants to look at the ranked program activities and suggest changes to create a balance of activities in each category that represented the organization’s priorities.

After the program activities were agreed upon, participants brainstormed a goal statement for each category. The strategic plan facilitator compiled the results from these workshops, converted the program activities into strategy statements, refined the goal statements, and drafted SMART objectives. This draft strategic plan was sent to the senior leadership team for review and comment.

Senior leaders decided that there were some priority areas not represented in this initial draft. Therefore, another exercise was conducted to capture the missing pieces. The facilitator asked all program managers to list their two highest priority program objectives. These objectives were compared to the strategic plan draft and then used to fill in the gaps.

The senior leadership team reviewed and accepted the revised draft. The facilitator then sent this version to the program managers, who were designated as objective owners, and requested that they complete their SMART statements with baseline and target data for their objectives. This task resulted in a change to one objective and justifications for the removal of three objectives.

With the SMART statements for the objectives completed and justifications for the removal of three objectives added to the document, the facilitator sent a final review version to the PMC. At the February 24, 2021 meeting, the PMC discussed the Strategic Plan and approved it for publication.

Strategic Planning Meeting Schedule

The following table presents the strategic planning schedule of meetings:

Meeting Date	Meeting Topic
December 18, 2019	PMC SWOT Analysis Exercise
January 31, 2020	All-Staff SWOT Analysis Exercise
November 5, 2020	All-Staff Virtual SWOT Analysis Exercise, “through the lens of the pandemic”
November 9, 2020	PMC Strategic Planning Workshop 1
November 18, 2020	PMC Strategic Planning Workshop 2
December 9, 2020	PMC Strategic Planning Workshop 3
February 24, 2021	PMC Final Review and Approval of DOH-Collier 2021-2023 Strategic Plan

Strategic Planning Participants

DOH-Collier Strategic Planning Participants, 2020-2021

Name	Title
Kimberly Kossler	Administrator
Stephanie Vick	Former Administrator
Muhammad Abbasi	Communicable Disease Control & Prevention Director
Jennifer Gomez	Community Health Promotion Director
Mark Lemke	Immokalee Division Director
Selena Lucas	Family and Personal Health Division Director
Kathleen Marr	Former Preparedness Coordinator
Alan Portis	Finance & Accounting Director
Rachel VanBlaricom	Environmental Health Director
John Drew	Organizational Planning & Development Program Consultant
Erika Barraza	EH Facilities Programs Manager
Julissa Cuthbert	Community Health Improvement Planning Program Manager
Devinci Davis	STD Supervisor
Adam Fundora	School Health Program Manager
Cris Labra	Tobacco Prevention Program Manager
Terri Harder	Epidemiology Program Manager
Laura Johnson	Vital Statistics Program Manager
Justin Mahon	EH OSTDS Program Supervisor
Ann O'Hara	Nursing Program Specialist
Sharon Patterson	Family Planning Program Consultant
Nilda Proenza	HIV/AIDS Program Manager
Donna VanTol	Immunizations Program Manager
Laarni West	Nursing Program Specialist
Renee Williams	WIC Program Manager
Reggie Wilson	Healthy Communities Program Manager
Kristine Hollingsworth	Public Information Officer
Sofia Saiz	EH Water Programs Supervisor
Alexandrea Tellez-Santoyo	Dental Office Operations Manager
Other	Over 100 staff members from all areas of the organization participated in two all-staff SWOT analysis exercises.

Review and Monitoring Process

DOH-Collier uses a Performance Scorecard to monitor strategic plan objectives and key performance indicators. The scorecard is managed by the Organizational Planning and Development Program and stored on the DOH-Collier Quality Improvement SharePoint site where all employees can view it. The scorecard tracks progress toward measurable objectives.

Each strategic plan objective is assigned to an owner that is responsible for creating, monitoring, and implementing an action plan to accomplish their assigned objective. Each month, one week prior to the PMC meeting, the owners receive a reminder to update the action plan and the indicator data for their objective.

The performance scorecard is reviewed quarterly at PMC meetings. Any strategic plan objectives or key performance indicators with a lagging indicator are brought forward for discussion. Appropriate actions are assigned to resolve any issues contributing to the lagging indicator and get it back on track. Corrective actions could include initiating a quality improvement project if a solution is not evident. Unanticipated changes in priorities, resources, and opportunities are also addressed at this meeting when they arise. The progress towards goals and objectives is communicated to all staff during program staff meetings and by sharing the PMC meeting minutes on the *DOH-Collier Corner*.

Annually in November, the PMC conducts a formal review of the strategic plan and makes revisions if needed. This review begins with evaluating annual progress towards the strategic plan goals and objectives. The Council also assesses opportunities and threats and systematically considers actions to address them. The results of the annual review and revisions to the plan are reported in the Strategic Plan Annual Progress Report. Revisions are also tracked in the Summary of Revisions section of this document.

Strategic Plan Review Process

The strategic plan annual review process was conducted in three sessions during PMC meetings in November and December 2021 and January 2022. All PMC members and strategic plan objective owners participated in the review process. In addition, 51 other employees participated by responding to the annual SWOT analysis survey. The full review process included the following steps:

1. Four days prior to the November PMC meeting, an email was sent to the strategic plan objective owners, which explained that they would be assigned to break out rooms with 6-8 people in each room and they would report on and discuss their objective(s) within those break out rooms. A copy of the break out room facilitation guide was provided, which included the questions that they should be prepared to answer.
2. During the meeting, PMC members were divided into small, mixed groups with one or more strategic plan objective owner in each group. A facilitator for each group was designated and the groups were provided with a copy of the facilitation guide, the strategic plan goals, strategies and objectives, and the scorecard results for the past three years for the strategic plan objectives.
3. Strategic plan objective owners in each group discussed the status of their objectives with the other members by following the facilitation guide:

- a. Read your objective to the group
 - b. Describe your 2020 results compared to your 2021 results
 - c. Talk about any challenges or accomplishments you have experienced in 2021
 - d. CAN WE WEAVE HEALTH EQUITY INTO THE OBJECTIVE? Discuss whether there's a known group experiencing a health disparity related to the objective. If there is, can we change the objective to focus on that group?
 - e. Tell the group your recommendation
 - i. No changes, or
 - ii. Explain any changes you think need to be made
4. The designated facilitators for each break out room recorded the discussion notes and provided them to the organizational planning and development program consultant. The discussion notes, along with status updates from the strategy action plan, were used to write status updates for each objective in the strategic plan annual progress report.
 5. All strategic plan objective owners were invited back to the December PMC meeting. Objective owners who were not present at the November PMC meeting reported on their objectives to the whole group. Also, objective owners who did not finish the facilitation guide process in the November PMC meeting completed the process with the whole group at the December meeting.
 6. After the December PMC meeting, an all-staff SWOT analysis survey was conducted.
 7. A full draft of the strategic plan annual progress report was emailed to members one week prior to the January PMC meeting to review for accuracy. Suggested changes to the annual progress report were discussed and the report was approved.
 8. Results of the all-staff SWOT survey were presented during the January PMC meeting and members were asked to consider whether the results of the SWOT analysis warrant any additions or modifications to the strategic plan for 2022. Suggested changes to the 2022 strategic plan revision were discussed and the plan was approved.



2022 Priorities, Goals, Strategies, and Objectives

Strategic Priority	Goal	Strategy	Objective	Responsible Unit Owner	Alignment*
Health Equity	1.0. Provide culturally competent access to health services for populations experiencing health disparities.	1.1. Provide dental services for uninsured children.	1.1. Increase the annual monthly average of new uninsured dental patients treated, who are less than 18 years old, from 4.2 in CY2020 to 9.5 5.0 by June 30, 2023.	Dental Alex Tellez-Santoyo	ASP 2.1
		1.2. Enhance maternal and child health education to the Black/Haitian population in Collier County.	1.2. Increase the annual number of Black/Haitian participants that receive DOH-Collier health education from 20 in 2020 to 50 220 by December 31, 2023.	Healthy Start Laarni West	ASP 2.1 SHIP MCH1.1, MCH1.2 MCH2.2 HW1.1
		1.3. Conduct and report data collection and analysis to identify health disparities.	1.3. Increase the cumulative number of DOH-Collier programs that completed a health equity analysis of their target audience for the CHA annual update from 2 in 2020 to 5 by June 30, 2023.	Health Improvement Planning Julissa Moreland	ASP 1.1.2 SHIP HE3.3



Strategic Priority	Goal	Strategy	Objective	Responsible Unit Owner	Alignment*
Long, Healthy Life	2.0. Increase healthy life expectancy through disease prevention and health policies and programs.	2.1. Retain HIV cases in care to maintain their viral load suppression.	2.1. Increase the percentage of Collier County HIV clients retained in care (ADAP) at least 6 months with suppressed viral load from 95% in 2020 to 96% by December 31, 2024 2022 .	HIV Nilda Proenza	ASP 2.1.5 SHIP ID2.2
		2.2. Facilitate the adoption of policies that promote healthy lifestyles.	2.2.1. Increase the annual number of healthy eating, healthy minds, physical activity, and/or chronic disease prevention education presentations to faith-based organizations in Collier County from 0 in 2020 to 8 by December 31, 2023.	Healthy Communities Reggie Wilson	CHIP 2.0 ASP 2.1 SHIP HE3.4, HW1.1
			2.2.2. Increase the total number of multi-unit housing properties in Collier County with adopted tobacco prevention policies from 8 in 2020 to 10 by June 30, 2023.	Tobacco Prevention Cris Labra	CHIP 2.0 ASP 3.1.4 SHIP CD1.3
		2.3. Increase the duration of breastfeeding.	2.3. Increase the rate of all Collier WIC Infants currently being breastfed at 26-52 weeks of age from 35.77% in 2020 to 42% 40% by September 30, 2023.	WIC Renee Williams	ASP 2.1.1 SHIP HW1.2
		2.4. Increase community access to free HIV and STD testing.	2.4. Increase the annual number of free HIV, HEP, and STD tests provided by DOH-Collier from 173 in 2020 to 500 by December 31, 2024 2022 .	Adult Health Isidra Gomes	ASP 2.1.5 SHIP ID1.1, ID1.2, ID2.1



Strategic Priority	Goal	Strategy	Objective	Responsible Unit Owner	Alignment*
Readiness for Emerging Health Threats	3.0. Protect Collier County residents and visitors from vaccine preventable diseases and public health emergencies.	3.1. Provide COVID-19 vaccines to the community.	3.1. Increase the monthly percentage of COVID-19 vaccine administered from 99.2% in January 2021 87.3% in 2021 to 99.8% by December 31, 2021 95% by December 31, 2022.	Immunizations Donna VanTol	ASP 3.1.9D SHIP IM2.1
		3.2. Improve the timeliness of infectious disease contact tracing.	3.2. Increase the percentage of COVID-19 priority cases interviewed within 2 days of becoming a case from 56% in 2020 to 80% by December 31, 2021.	Epidemiology Terri Harder	ASP 3.1.5
		3.3. Enhance public health preparedness in the community.	3.3. Increase the annual percentage of licensed agency Comprehensive Emergency Management Plan (CEMP) reviews completed within the required timeframe, from 90% in 2020 to 100% by December 31, 2023.	Disaster Preparedness Carl Alvarez	ASP 3.1.9



Strategic Priority	Goal	Strategy	Objective	Responsible Unit Owner	Alignment*
Effective Agency Processes	4.0. Enhance internal processes and workforce engagement to achieve service excellence.	4.1. Improve communication about DOH-Collier services and activities.	4.1. Increase the annual number of website (internet and SharePoint) updates from 109 in 2020 to 300 250 by December 31, 2023.	Information Systems Rocio Bershadski	ASP 2.1.7
		4.2. Implement the workforce development plan.	4.2. Increase the annual percentage of workforce development plan objectives completed from 0% in 2020 to 100% by December 31, 2023.	Health Improvement Planning Julissa Moreland	PMQI 2.2, 2.3 ASP 4.1
		4.3. Document and adopt performance management procedures.	4.3. Increase the number of adopted written performance management written procedures from 0 in 2020 to 6 by June 30, 2023.	Organizational Planning and Development John Drew	PMQI 3.3 ASP 4.1.1
		4.4. Maximize clinic revenue	4.4. Decrease the annual percentage of denied third party insurance claims from 5.6% in fiscal year 2020 to 2.5% 5% by June 30, 2023.	Health Information Systems Teresa De Armas	ASP 4.1.2



Strategic Priority	Goal	Strategy	Objective	Responsible Unit Owner	Alignment*
Regulatory Efficiency	5.0. Prioritize environmental health services that have the most impact on public health.	5.1. Improve completion rates for inspections of regulated facilities.	5.1. Increase the annual percentage of required inspections completed from 64% in 2020 to 75% by December 31, 2023.	Environmental Health Sofia Saiz	ASP 5
		5.2. Enhance relationships with regulated entities.	5.2. Increase the annual number of hours delivering educational information to community partners from 6 in 2020 to 12 by December 31, 2023.	Environmental Health Erika Barraza	ASP 5
		5.3. Improve enforcement activities	5.3. Increase the annual percentage of complaint investigations initiated within 2 days from 84% in 2020 to 90% by December 31, 2023.	Environmental Health Justin Mahon	ASP 5

*** Alignment Abbreviations**

SHIP = State Health Improvement Plan

ASP = Agency Strategic Plan

PMQI = Performance Management Quality Improvement Plan

CHIP = Healthy Collier Community Health Improvement Plan

Summary of Revisions

On November 19 and December 17, 2021, the DOH-Collier Performance Management Council conducted an annual review of the strategic plan. The council discussed progress achieved and obstacles encountered for each objective.

The table below depicts a summary of revisions made to the objectives from this review. These revisions are also added to the table on the previous pages. Strikethrough indicates deleted text and **bold underline** indicates added text.

December 2021.1 Revisions		
Objective Number	Revisions to Objective	Rationale for Revisions
1.1	Target changed to 5.0	Original target was too ambitious
1.2	Target changed to 220	Original target was surpassed.
2.1	Changed target date to 12/31/2022	Targets are set annually for this objective
2.2.1	Objective removed	The program associated with this objective changed its focus and work plan from faith-based organizations to early learning and child care facilities
2.3	Target changed to 40%	To match WIC Program Plan 2021-2023 Breastfeeding Goal
2.4	Changed target date to 2022	Targets are set annually for this objective
3.1	Change baseline to the 2021 rate of 87.3% Changed target to 95%	Original baseline was set after only two months of data were available. New baseline is based on one year of data. The original target was based on the original baseline and adjusted after the more accurate baseline was set.
3.2	Objective removed	COVID-19 contact tracing guidelines continuously changed during the year and Central Office stopped tracking this indicator.
4.1	Target changed to 250	The increase in internet and SharePoint updates can be attributed to COVID-19 press releases. Assuming that COVID-19 updates will be less frequent in 2022, the target is being adjusted accordingly.
4.3	Changed the objective from “adopted” procedures to “written” procedures.	The performance management procedures are being written into one overarching performance management policy, which will be reviewed and adopted once.



December 2021.1 Revisions

Objective Number	Revisions to Objective	Rationale for Revisions
4.4	Changed target to 5%	Original target was too ambitious

Environmental Scan Resources

1. [Agency Strategic Plan, 2016-2020](#)
2. [Agency Quality Improvement Plan, 2018-2020](#)
3. [Florida State Health Improvement Plan, 2017-2021](#)
4. Healthy Collier Community Health Assessment, 2019
5. Collier County Community Health Improvement Plan, 2020
6. DOH-Collier Quality Improvement Plan, 2017
7. DOH-Collier Workforce Development Plan, 2020
8. DOH-Collier Emergency Operations Plan, 2019
9. DOH-Collier Customer Feedback Report, 2020
10. DOH-Collier Organizational Performance Report, 2020
11. DOH-Collier PHAB Readiness Assessment, 2019
12. Florida Sterling Council, Governor's Sterling Award Feedback Report, 2019
13. [County Health Rankings and Roadmaps](#)
14. [Florida Community Health Assessment Resource Tool Set \(CHARTS\)](#)
15. [Florida Department of Health Long Range Program Plan, Fiscal Years 2019-2023](#)
16. [Florida Department of Health Workforce Development Plan](#)