



Florida Department of Health in Volusia County

STRATEGIC PLAN

April 2020 – March 2023



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TABLE OF CONTENTS

Mission, Vision, and Values	1
Background & Overview	2
Demographics.....	2-4
Budget and Revenue	5-6
Programs and Services.....	7-8
Planning Summary	9-10
Strategic Planning Participants	11
Strengths, Weaknesses, Opportunities, and Threats (SWOT) Analysis	12
Strategic Priorities Strategy Map	13-16
Objectives.....	17-23
Review Process.....	24
Summary of Revisions.....	24-26
Environmental Scan Resources.....	27

Mission, Vision, and Values

Public Health Accreditation Board (PHAB) 5.3.2A.a: The strategic plan must include the health department’s mission, vision, and guiding principles/values for the health department.

• 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

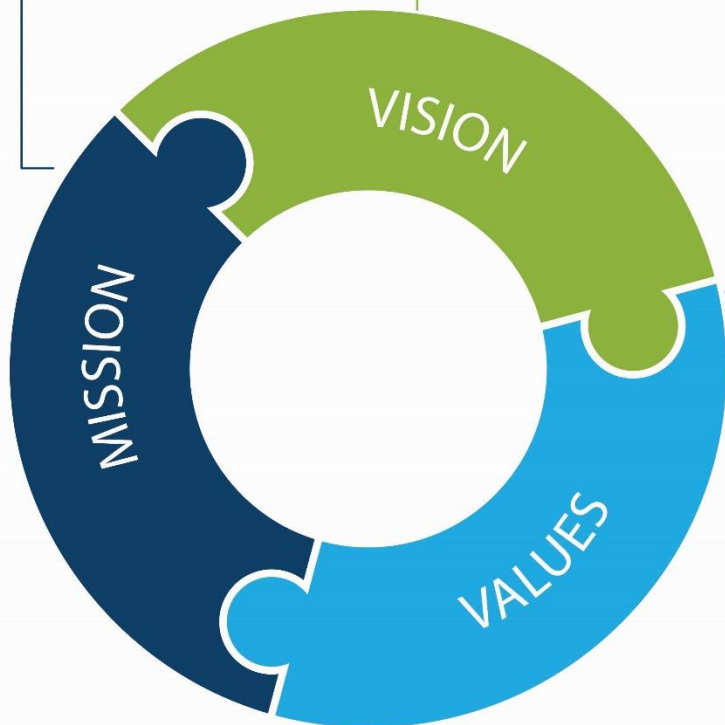
What do we want to achieve?

To be the Healthiest State in the Nation.

• OUR VALUES

What do we use to achieve our mission and vision?

- I**nnovation
We search for creative solutions and manage resources wisely.
- C**ollaboration
We use teamwork to achieve common goals and solve problems.
- A**ccountability
We perform with integrity and respect.
- R**esponsiveness
We achieve our mission by serving our customers and engaging our partners.
- E**xcellence
We promote quality outcomes through learning and continuous performance improvement.





Background and Overview

Public health touches every aspect of our daily lives. Public health aims to provide the maximum benefit for the largest number of people. It is what we do collectively to ensure conditions in which people can be healthy. Public health is a well-established science that has been in practice for hundreds of years. It is based upon the social, behavioral, environmental, biological, and socioeconomic factors that impact population-wide health.

The 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. Through research, surveillance and data analysis, we develop programs and policies that protect the health of the entire community.

Demographics

The Florida Department of Health in Volusia County serves a population of 547,538.

Where we live influences our health. Demographic, socioeconomic, and environmental factors create unique community health service needs. Key characteristics that set Volusia County apart are its large percentage of elderly residents, particularly among the White population. While 80.6% of Volusia County’s population is White, that number increases to 90.5% when assessing Volusia County residents over the age of 65. See tables below.

**Population by Age
Volusia County and Florida**

Age Group	County – 2018		State – 2018
	Total Number	Total Percentage	Total Percentage
< 5 years	25,808	4.71%	5.33%
5 - 14 years	54,148	9.89%	11.14%
15 - 24 years	61,166	11.17%	11.69%
25 - 44 years	122,036	22.29%	25.10%
Subtotal	263,158	48.06%	53.25%
45 - 64 years	150,636	27.51%	26.28%
65 - 74 years	75,141	13.72%	11.29%
> 74 years	58,603	10.70%	9.18%
Subtotal	284,380	51.94%	46.75%

Source: U.S. Census Bureau



Demographics (Cont'd)

Population by Race & Ethnicity Volusia County and Florida

Racial Group	Volusia – 2018		State – 2018	
	Percent of Total	Percent of 65+	Percent of Total	Percent of 65+
White	80.6%	90.5%	74.6%	86.5%
Black or African American	11.1%	5.6%	16.0%	9.0%
American Indian or Alaskan Native	0.4%	0.2%	0.3%	0.2%
Asian	1.8%	1.0%	2.8%	2.0%
Native Hawaiian and Other Pacific Islander	0.0%	0.0%	0.1%	0.0%
Some other race	4.5%	1.9%	3.3%	1.3%
Two or more races	1.6%	0.8%	2.9%	1.0%
Ethnic Group				
Hispanic or Latino origin (of any race)	14.5%	7.1%	26.1%	15.3%
White alone, not Hispanic or Latino	70.7%	85.8%	53.3%	73.1%

Source: U.S. Census Bureau

Socioeconomic status can lead to certain population sub-groups being disproportionately burdened by specific chronic diseases and illness. Factors such as lack of financial security, reduced access to quality health care, and limited health literacy, among other things, are at the forefront when discussing disparaging health outcomes. See the following page for common social determinants of health as well as some of their associated outcomes.

In comparison to White and Hispanic residents in Volusia County, Black Volusia County residents have the lowest high school graduation rate and median household income, as well as the highest percentage of individuals living below the poverty line.



Demographics (Cont'd)

Social Determinants of Health Volusia County, 2018

Race	High School Graduation Rate	Median Household Income	Percent Below Poverty
Black	76.4%	\$31,356	27.5%
Hispanic	81.5%	\$38,103	21.8%
White	87.3%	\$49,002	13.1%
All	84.5%	\$46,760	15.2%

Sources: Florida Department of Education; U.S. Census Bureau; U.S. Census Bureau

It is worth noting that Volusia County, regardless of race, experiences higher death rates for selected indicators than the state of Florida. Diabetes, heart disease, HIV/AIDS, and pneumonia lead to death more frequently among Black Volusia County residents when compared to White and Hispanic residents.

Race	Diabetes Death Rate		Heart Disease Death Rate		HIV/AIDS Death Rate		Pneumonia Death Rate	
	Volusia	Florida	Volusia	Florida	Volusia	Florida	Volusia	Florida
Black	49.8	38.1	229.6	169.5	12.0	11.2	17.3	10.1
White	25.7	18.3	185.5	144.9	2.4	1.5	10.3	8.0
Hispanic	22.1	18.5	125.3	116.9	2.8	1.8	12.7	7.0
All	26.9	20.4	185.7	147.7	3.0	2.9	10.7	8.3

Note: Rates are age-adjusted and per 100,000 population

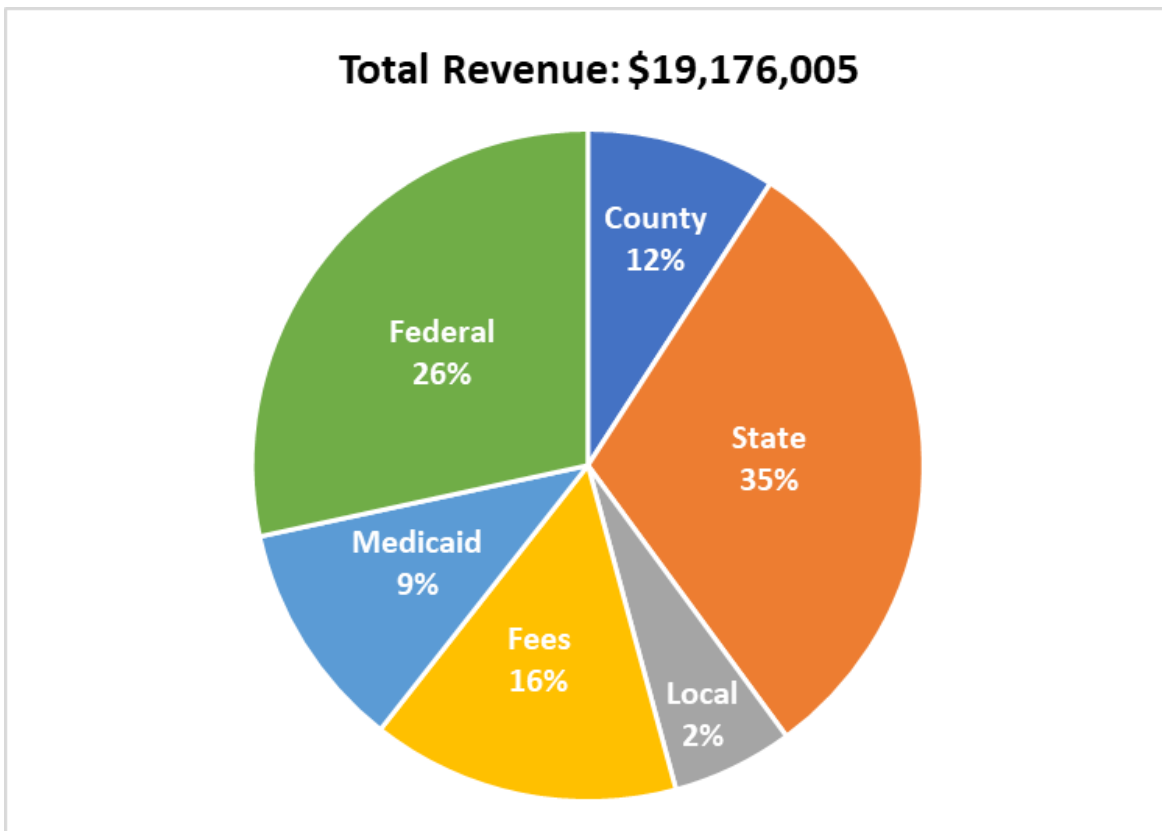
Source: Florida Department of Health, Bureau of Vital Statistics



Budget and Revenue

Financial resources for the Florida Department of Health in Volusia County are provided through multiple sources. These include fees, grants, and budget allocations from the County, State, and Federal governments. Please see the data below.

**The Florida Department of Health in Volusia County
Revenue Percentage by Source
Fiscal Year 2019-2020**



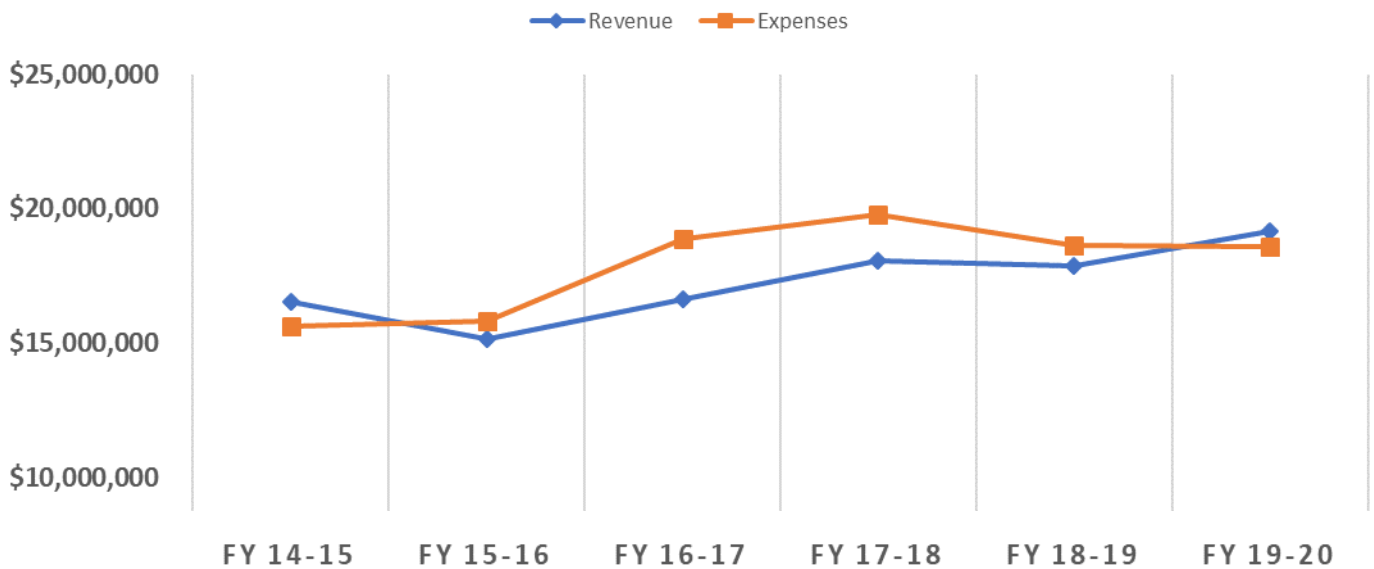
Source: 2019-2020 Funding Trend Analysis Workbook



Budget and Revenue (Cont'd)

The primary factors impacting budget and revenue changes that will affect our future services and programs in Volusia County are related to the impact COVID-19 has had (and will have) on state and local funding. The impact this will have on objectives outlined in this plan is still to be determined. The graph below represents our revenue and expense relationship over the past five years. As illustrated, strong budget management has enabled us to balance our revenue and expenses.

**The Florida Department of Health in Volusia County
Revenue and Expenses 2015 – 2020**



Source: 2014-2020 Funding Trend Analysis Workbook



Programs and Services

Some of the most effective strategies for improving public health include policies and programs that shape the environment and create opportunities for healthier behaviors. This is the basis for the Florida Department of Health in Volusia County's commitment to providing the highest standards of public health through the following core functions and services:

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. We also perform routine inspections of tanning salons, tattoo and piercing salons, and mobile home parks.

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, sexually transmitted infections (STI) detection and control, AIDS/HIV treatment and education, immunizations, and tuberculosis (TB) control. We engage the community through health fairs, testing events, presentations, and educational classes that we host.

Public Health Preparedness

We partner with the local healthcare system, emergency management, government, and the community on preparedness and response to natural and man-made disasters. The preparedness effort focuses on developing critical capabilities necessary for an effective disaster response to keep the community safe and to minimize loss.

Community Health Promotion

We plan and implement inclusive community health programs to promote healthy behaviors and reduce chronic disease through education, community outreach, and collaborative partnerships. Our programs promote ideas such as maintaining healthy weight, and worksite wellness. We perform non-clinical work, collaborating with community partners to help address social or social-emotional issues that influence health.

Health Equity

We strive to reach health equity in our 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. Our department has recently opened a new location in a community in which many individuals experiencing disparaging outcomes live. We hope providing co-located services within the community that has the greatest need will lend itself to reducing disparities in our county.

Clinical Services

We have a variety of services for expecting moms, newborn babies, infants and toddlers, school-aged children, adolescents, and adults. We also offer cost-effective dental services for community members of all ages. Our services are provided by highly qualified physicians, nurses, social workers, and other health care providers.



Programs and Services (Cont'd)

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— two main indicators of health status.

Administrative Services

We offer extensive administrative support services to our locations throughout Volusia County as well as surrounding counties. The administrative support functions include billing, purchasing, information technology, and other data support services.



Planning Summary

PHAB 5.3.1.A.b: Documentation must include a summary or overview of the strategic planning process, including the number of meetings, duration of the planning process, and the methods used for the review of major elements by stakeholders. Steps in the planning process must be described. Examples of descriptions for steps include: opportunities and threats analysis, environmental scanning process, stakeholder analysis, storyboarding, strengths and weaknesses analysis, and scenario development.

The strategic plan sets the direction for action for the Florida Department of Health in Volusia County for a three-year cycle. As part of the performance management (PM) system, it identifies the priority focus areas for the department, and aligns with state and national priorities. The Florida Department of Health in Volusia County 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 and targets for improvement.

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

- Sets organizational objectives by developing strategic health improvement, quality improvement, and workforce development plans at multiple levels across 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 Florida Department of Health in Volusia County Performance Management Council (PMC) is the foundation of the department'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 performance toward achieving strategic objectives in the health improvement, agency strategic, quality improvement, and workforce development plans.
- Make recommendations to improve performance.

The Florida Department of Health in Volusia County initiated a new strategic planning process in December 2019 to define the direction and course of the Florida Department of Health in Volusia County for consumers, employees, administrators, and legislators for the next three years. The plan will position the Florida Department of Health in Volusia County to operate as a sustainable integrated public health system and provide the Florida Department of Health in Volusia County customers with quality public health services. It is a living document that the Florida Department of Health in Volusia County will evaluate and update annually to address new challenges posed by the changing public health environment.



Planning Summary

Initially, senior leadership championed the planning process that was set to take place over a four-month period through a series of meetings. Meetings were attended by several internal stakeholders including senior leadership, program managers, and PMC members. Just prior to finalizing objectives, COVID-19 required leadership and staff to refocus our priorities away from planning. Senior leadership reconvened to finalize objectives and the plan was reviewed and approved by PMC in September 2020. The Florida Department of Health in Volusia County considered key support functions required for efficiency and effectiveness and sought to articulate what it plans to achieve as an organization, the actions it will take, and how it will measure success.

PHAB 5.3.2.A.d: The strategic plan must consider capacity for and enhancement of information management, workforce development, communication (including branding), and financial sustainability.

The Florida Department of Health in Volusia County approached the strategic planning process with these guiding principles in mind:

- Health equity is part of every public health activity.
- Children, adults, and families are at the center of public health activities.
- Individuals, families, businesses, schools, civic organizations, faith-based groups, and local government are responsible for child, adult, family, and community health.
- Social determinants dominate health outcomes.
- Interventions to promote public health are evidence-based and supported by the community.
- Veterans and persons with disabilities particularly deserve support.

In preparation for the strengths, weaknesses, opportunities, and threats (SWOT) analysis, staff from the Florida Department of Health in Volusia County summarized and presented information from the sources listed on page 24 to PMC. PMC reviewed the findings and conducted a SWOT analysis based on the findings. The discussion included consideration of infrastructure and capacity required for efficiency and effectiveness including:

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

The SWOT analysis discussion also included the identification of external trends, events, and other factors that may impact community health or the health department. See all identified strengths, weaknesses, opportunities, and threats on page 12.

PMC members then used the SWOT analysis, the Agency Strategic Plan, and the agency mission, vision, and values to choose strategic priority areas and goals. The strategies and objectives were then routed back to the PMC for comment and approval.

The following is the strategic planning schedule of meetings: 12/9/19 - Environmental Scan, 1/22/20 - SWOT Analysis, 2/10/20 - Creation of Goals and Strategies, 3/9/20 - Creation of Objectives.

The Florida Department of Health in Volusia County staff monitor strategic plan objectives through program operational plans. A designated PM Champion collects these plans which include quarterly/annual data values on indicators and sub-indicators along with a status of completion (on track, not on track, complete, not complete or decision required). The PM Champion enters data into the department's online plan tracking system and generates reports that the Florida Department of Health in Volusia County PMC participants use as a reference when the strategic plan is discussed.



Strategic Planning Participants

PHAB 5.3.1.A.a: The strategic plan must include a list of individuals who participated in the strategic planning process and their titles. Participants must include various levels of staff as well as representatives of the health department's governing entity.

Florida Department of Health in Volusia County
Strategic Planning Participants
2020

- **Patricia Boswell,**
Administrator
- **Thomas Bryant III,**
HIV Program Director
- **Holly Smith,**
Communications Manager
- **Melanie Black,**
Preparedness Manager
- **Ethan Johnson,**
Public Health Services Manager
- **Ruhiyyih Bannister,**
Public Health Nutritionist Supervisor
- **Kristina Fasnacht,**
Administrative Assistant II – Human Resources
- **Terry Geathers,**
Research & Training Specialist
- **Regina Harris,**
Senior Database Analyst
- **Andres Natal,**
Environmental Supervisor II
- **Hildeley Rodriguez Collazo,**
Ryan White Program Assistant
- **Marvin Hall,**
Human Services Program Specialist
- **Greg Ballard,**
Assistant Director
- **Robert Maglievaz,**
Environmental Health Administrator
- **Denise Ayers,**
Community Nursing Director
- **Benjamin Juengst,**
Health Manager
- **Marisol Bahena,**
Human Services Analyst
- **Crystal Covel,**
Purchasing Director
- **Tachara Ferguson-Reid,**
Dental Program Manager
- **Akisia German,**
Health Educator
- **Kevin Keyes,**
Planning Consultant
- **Carla Owens,**
Accountant III
- **Jeanine Robinson,**
Environmental Health Facilities Program Manager
- **Ana Soto,**
Public Health Services Manager



Strengths, Weaknesses, Opportunities and Threats (SWOT) Analysis

PHAB 5.3.2.A.e-f: The strategic plan must include the identification of external trends, events, or other factors that may impact community health or the health department

Strengths (Internal)
We want to maintain and leverage strengths.
Agency Infrastructure:

- Clear Agency Vision
- Strong Partnerships
- Strong Local Administrative Infrastructure
- Integrated CHIP & CHNA
- Shared Resources Between CHDs
- Accredited Health System
- Strong Local Presence in Community

Capacity:

- Experienced Workforce
- Committed Staff
- Regionalized Services
- Client Centered Approach
- Co-Located Services
- Newly Adopted Workforce Development Plan
- Piloted Telehealth Services (TB)
- New Resources for Data Sharing

Emerging Trends:

- Advancement of Health Equity

Other:

- Organizational Flexibility and Resiliency

Opportunities (External)
We want to invest in opportunities.
Agency Infrastructure:

- Health Equity Zone in 32114
- Statutory Reputation to Do More

Capacity:

- Improve Access to Care via Telehealth
- Multi-Sector Maternal/Child Health Partnerships
- Data-Based Decision Making
- Increased Collaboration with Hospital Authority
- Grant Opportunities
- New Resources for Data Sharing
- Community Partnerships/CHIP
- Integrated Technology

Emerging Trends:

- Higher % of College Aged African-Americans

Other:

- Building More Public-Private Partnerships

Weaknesses (Internal)
We want to minimize weaknesses.
Agency Infrastructure:

- Limited Succession Planning
- Unstable Organizational Structure
- Involvement of Staff in Planning Process
- Lack of Health Advisory Board
- LCHD Role Misunderstood
- Poor Integration of Systems

Capacity:

- Insufficient Internal Communication
- Employee Morale and Engagement
- Barriers to Staff Development (i.e. Travel)
- Transformational Leadership
- Change Management

Emerging Trends:

- Limited Ability to Communicate Externally
- Recruitment & Retention of Skilled Workforce

Other:

- Strategic Community Outreach Efforts
- Alignment of Program Processes & Outcomes

Threats or Challenges (External)
We want to identify threats or challenges and understand their potential impact.
Agency Infrastructure:

- Legislative Reform
- Unfunded Mandates
- Decreased LCHD Autonomy
- Reduction of Public Health Funding

Capacity:

- Competitive External Salaries
- Lack of Licensed Health Care Providers
- Gaps in Services for Behavioral Health
- Strengthening Collaborative HIV Work

Emerging Trends:

- Increasing Population of Working Poor
- Lack of Affordable Housing
- Increased E-Cigarette Usage
- Reduction in Vaccination Rates
- Opioid Misuse & Addiction
- Demographic Shift

Other:

- Public Perception of Government
- Public Health & Governmental Decisions
- Disparity in Infant/Neonatal/Fetal Mortality
- Graduation Rates



Strategic Priorities Strategy Map

PHAB 5.3.2.A.b: The strategic plan must include the health department’s strategic priorities and goals.

Health Equity

Goal Reduce health disparities and inequities to ensure all Volusia County residents have the opportunity to attain the highest level of health.

Strategy	HE1	Reduce racial disparity in infant mortality.
OBJECTIVES	HE1a	Increase the percentage of WIC certified pregnant or post-partum women offered multi-vitamins from 0% (2019) to 100% of eligible women, by September 30, 2021.
	HE1b	Increase the number of safe sleep materials that promote evidence-based safe sleep practices distributed from baseline 291 (March 2019) to 1520, by March 31, 2022.
	HE1c	Increase breastfeeding initiation rates of Black mothers in Volusia County from 65.3% (2018) to at least 69.0% by June 30, 2021.
	HE1d	Increase the percentage of WIC infants who are breastfed for at least 26 weeks from 34.0% (Dec 2019) to 37.0% by June 2021.
	HE1e	Decrease the rate of low birth weight (<2500 g) babies born to mothers on WIC from 9.6% (2018) to less than 8.5% by December 31, 2021.
	HE1f	Increase number of eligible pregnant women who are certified for WIC during the first trimester from 44.4 % (June 2020) to at least 50% by June 30, 2021.
Strategy	HE2	Eliminate health gaps among different communities.
OBJECTIVES	HE2a	Increase the number of women in ZIP code 32114 who receive community health nursing services (counseling, education on maternal infections, family planning, immunizations, HIV, tobacco, breastfeeding, etc.) from 0 (2019) to 100, by June 30, 2021.
	HE2b	Reduce the percentage of COVID-19 cases where race and ethnicity are unknown from 19% (9/2020) to 10% by June 30, 2021.
	HE2c	Increase the number of COVID-19 vaccinations administered at PODs located in communities disproportionately impacted by the virus by 100% from 890 (3/2021) to 1,780 by December 31, 2021.
Strategy	HE3	Reduce racial disparity in newly diagnosed cases of HIV.
OBJECTIVES	HE3a	Reduce the number of Non-Hispanic Black population HIV transmissions diagnosed in Volusia by 5% annually, from 36 (2018) to 29, by December 31, 2021.



Long, Healthy Life

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

Strategy	LHL1	Implement strategic place-based community outreach initiatives.
OBJECTIVES	LHL1a	Increase the annual number of Early Learning Centers receiving nutrition education for VPK students train-the-trainer trainings from four (2020) to eight by December 31, 2021.
	LHL1b	Increase DOH-Volusia marketing opportunities and campaigns from zero (2019) to four between April 1, 2020 and June 30, 2021.
	LHL1c	Increase Dental Outreach Program participation by increasing the number of Memoranda of Agreements with Early Learning Coalition centers from 3 to 20 by July 31, 2021.
Strategy	LHL2	Implement community-based initiatives related to Substance Use Disorder
OBJECTIVES	LHL2a	Decrease opioid overdose deaths by 2%, from 149 (2018 data most recent available) to 146 by December 31, 2020.
	LHL2b	Reduce all drug non-fatal overdose Emergency Department visits by 2%, from 1,159 (2018 data most recent available) to 1,136 by December 31, 2020.
Strategy	LHL3	Increase vaccinations among high risk populations.
OBJECTIVES	LHL3a	Increase the percentage of newly diagnosed +HCV/+HBV cases that were referred for vaccination from 0% (2019) to 10% by July 31, 2021.
	LHL3b	Increase COVID-19 vaccine coverage of persons 65+ years old from 50% (3/2020) to 85% by December 31, 2021
Strategy	LHL4	Decrease the incidence of HIV and STDs.
OBJECTIVES	LHL4a	Increase the number of HIV Take Home Test Kit/Condom distribution sites from 5 (2019) to 20 by March 31, 2022.
	LHL4b	Reduce the count of newly diagnosed HIV infections in Volusia, by 5%, from 86 (2018) to no more than 82, by December 31, 2021.
	LHL4c	Increase the number of eligible HOPWA clients in Tenant Based Rental Assistance Program from 0 (2019) to 25 by August 31, 2021.
	LHL4d	Reduce the rate of total syphilis cases per 100,000 in Volusia from 36.9 (2019) to 26.9 by December 31, 2021.



Readiness for Emerging Health Threats

Goal		Demonstrate readiness for emerging health threats.
Strategy	RET1	Develop and maintain the infrastructure needed to respond to emergency public health events to protect persons traveling and residing in Volusia County.
OBJECTIVES	RET1a	DOH-Volusia's Emergency Operation Plan will be created and meet 100% of the Public Health Accreditation Board (PHAB) reaccreditation requirements by December 31, 2020.
	RET1b	Increase number of EpiLog's (EPI newsletter) published for providers from 1 to 2 by December 31, 2020 and from 2 to 3 by December 31, 2021.
Strategy	RET2	Increase vaccination rates for children and teens.
OBJECTIVES	RET2a	Increase the percentage of students who meet the vaccine requirement for 7th grade entry from 95.3% for the 19/20 school year to 98% for the 21/22 school year.
	RET2b	Increase HPV vaccination completion rate for those age 9-26 years from 4% (2019) to 25% by December 31, 2021.
	RET2c	Increase those fully immunized age 4-6 years entering kindergarten from 92.8% (2019) to 96.7% by December 31, 2021.
	RET2d	Increase those fully immunized entering 7th grade from 94.6% (2019) to 96.6% by December 31, 2021.
Strategy	RET3	Reduce the spread of COVID-19.
OBJECTIVES	RET3a	Increase the number of partners receiving materials, masks, and/or in-person technical assistance to educate clients on safe practices to prevent the spread of COVID-19 with an emphasis on partners that serve vulnerable populations by 10%, from 254 (6/2020) to 279 by September 30, 2021.



Effective Agency Processes

Goal **Maintain a sustainable infrastructure, which includes an informed and competent workforce, strengthened business practices and effective use of technology.**

Strategy	EAP1	Implement transformational leadership practices that address DOH-Volusia’s workplace culture from the top down.
OBJECTIVES	EAP1a	Reduce annual percentage of Career Service and SES employees voluntarily separating from employment with DOH-Volusia for reasons other than retirement from 16.77% (2019) to 12% by December 31, 2020.
Strategy	EAP2	Improve customer feedback systems.
OBJECTIVES	EAP2a	Improve customer satisfaction scores from 92.6 percent on December 31, 2019 to 97.0 percent of agree or strongly agree on overall satisfaction responses by March 31, 2023.
Strategy	EAP3	Align staff trainings with DOH-Volusia needs.
OBJECTIVES	EAP3a	Increase DOH-Volusia employees’ documented participation in Individual Development Plans from 0% to 20% by March 31, 2023.

Regulatory Efficiency

Goal **Maintain local regulatory structures and operations supported by the Department of Health.**

Strategy	RE1	Surveil, monitor, and conduct inspections for regulated entities.
OBJECTIVES	RE1a	Increase the percentage of inspections completed for all regulated entities annually from 85% (2019) to 90%, by September 30, 2021.
	RE1b	Increase the percentage of re-inspections within required programmatic timeframes from 60% (2019) to 75%, by September 30, 2021.
	RE1c	Increase the response time to all nuisance complaints from 87% (2019) to 88.5%, by September 30, 2021 (percentage is based upon response within 2 business days for all programs combined).



Objectives

Objectives

PHAB 5.3.2.A.c, g: The strategic plan must include the health department’s objectives with measurable and time-framed targets (expected products or results). It must also include linkage with the health improvement plan and the health department’s quality improvement plan. The strategic plan need not link to all elements of the health improvement plan or the quality improvement plan, but it must show where linkages are appropriate.

Objective Number and Name	Baseline Value	Target Value	Target Date	Measured Annually or Quarterly	Program Responsible	Linkages/ Alignment
HE1a: Increase the percentage of WIC certified pregnant or post-partum women offered multi-vitamins from 0% (2019) to 100% of eligible women, by September 30, 2021.	0%	100%	9/30/2021	Quarterly	WIC/Maternal Child Health	*ASP-1.1.1 *SHIP-MCH2 *CHIP-BAHS 2d
HE1b: Increase the number of safe sleep materials that promote evidence-based safe sleep practices distributed from baseline 291 (March 2019) to 1,520, by March 31, 2022.	291	1,520	3/31/2022	Annually	WIC/Maternal Child Health	ASP-1.1.1 SHIP-MCH1.1 CHIP-SE1a
HE1c: Increase breastfeeding initiation rates of Black mothers in Volusia County from 65.3% (2018) to at least 69.0% by June 30, 2021.	65.3%	69.0%	6/30/2021	Annually	WIC/Maternal Child Health	ASP-1.1.2 SHIP-MCH2 CHIP-BAHS 2d
HE1d: Increase the percentage of WIC infants who are breastfed for at least 26 weeks from 34.0% (Dec 2019) to 37.0% by June 30, 2021.	34.0%	37.0%	6/30/2021	Annually	WIC/Maternal Child Health	ASP-1.1.2 SHIP-MCH2 CHIP-BAHS 2d



Objectives

Objective Number and Name	Baseline Value	Target Value	Target Date	Measured Annually or Quarterly	Program Responsible	Linkages/ Alignment
HE1e: Decrease the rate of low birth weight (<2500 g) babies born to mothers on WIC from 9.6% (2018) to less than 8.5% by December 31, 2021.	9.6%	<8.5%	12/31/2021	Annually	WIC/Maternal Child Health	ASP-2.1.1 SHIP-MCH2 CHIP-SEI 1a
HE1f: Increase number of eligible pregnant women who are certified for WIC during the first trimester from 44.4 % (June 2020) to at least 50% by June 30, 2021.	44.4%	≥ 50%	6/30/2021	Quarterly	WIC/Maternal Child Health	ASP-1.1 SHIP-MCH2 CHIP-BAHS 2d
HE2a: Increase the number of women in ZIP code 32114 who receive community health nursing services (counseling, education on maternal infections, family planning, immunizations, HIV, tobacco, breastfeeding, etc.) from 0 (2019) to 100 by June 30, 2021.	0	100	6/30/2021	Annually	Clinical Services	ASP-1.1.2 SHIP-MCH2 CHIP-BAHS 2d
HE2b: Reduce the percentage of COVID-19 cases where race and ethnicity are unknown from 19% (9/2020) to 10% by June 30, 2021.	19%	10%	06/30/2021	Annually	Epidemiology	ASP-2.1 *PMQI-2
HE2c: Increase the number of COVID 19 vaccinations administered at PODs located in communities disproportionately impacted by the virus by 100% from 890 (3/2021) to 1,780 by December 31, 2021.	890	1,780	12/31/2021	Annually	Clinical Services	ASP-3.1.1
HE3a: Reduce the number of Non-Hispanic Black population HIV transmissions diagnosed in Volusia, by 5% annually, from 36 (2018) to 29, by December 31, 2021.	36	29	12/31/2021	Annually	HIV/AIDS	ASP-2.1.5 SHIP-ID2



Objectives

Objective Number and Name	Baseline Value	Target Value	Target Date	Measured Annually or Quarterly	Program Responsible	Linkages/ Alignment
LHL1a: Increase the annual number of Early Learning Centers receiving nutrition education for VPK students train the trainer trainings from 4 (2020) to 8 by December 31, 2021.	4	8	12/31/2021	Annually	Community Health	ASP-2.1.1 SHIP-HW1.1 CHIP-HEPA 1a
LHL1b: Increase DOH-Volusia marketing opportunities and campaigns from 0 (2019) to 4 between April 1, 2020 and June 30, 2021.	0 (Not currently conducted)	4	6/30/2021	Quarterly	Communications	ASP-4.1 SHIP-3.1 PMQI-9
LHL1c: Increase Dental Outreach Program participation by increasing the number of Memoranda of Agreements with Early Learning Coalition centers from 3 to 20 by July 31, 2021.	3	20	7/31/2021	Quarterly	Dental	ASP-2.1 CHIP CDD1
LHL2a: Decrease opioid overdose deaths by 2%, from 149 (2018 data most recent available) to 146 by December 31, 2020.	149	146	12/31/2020	Annually	OD2A	ASP-2.1 SHIP-ISV1, BH2
LHL2b: Reduce all drug non-fatal overdose emergency department visits by 2%, from 1,159 to 1,136 by December 31, 2020.	1,159	1,136	12/31/2020	Annually	OD2A	ASP 2.1 SHIP-ISV1, BH2
LHL3a: Increase the percentage of newly diagnosed +HCV/+HBV cases that were referred for vaccination from 0% (2019) to 10% by July 31, 2021.	0%	10%	7/31/2021	Annually	Clinical Services	ASP-3.1.1 SHIP-IM2
LHL3b: Increase COVID-19 vaccine coverage of persons 65+ years old from 50% (3/2020) to 85% by December 31, 2021.	50%	85%	12/31/2021	Annually	Clinical Services	ASP-3.1.1d



Objectives

Objective Number and Name	Baseline Value	Target Value	Target Date	Measured Annually or Quarterly	Program Responsible	Linkages/ Alignment
LHL4a: Increase the number of HIV Take Home Test Kit/Condom distribution sites from 5 (2019) to 20 by March 31, 2022.	5	20	3/31/2022	Annually	HIV/AIDS	ASP-2.1.5 SHIP-ID2
LHL4b: Reduce the count of newly diagnosed HIV infections in Volusia, by 5%, from 86 (2018) to 82, by December 31, 2021.	86	82	12/31/2021	Annually	HIV/AIDS	ASP-2.1.5 SHIP-ID2
LHL4c: Increase the number of eligible HOPWA clients in Tenant Based Rental Assistance Program from 0 (2019) to 25 by August 31, 2021.	0	25	8/31/2021	Annually	HOPWA	ASP-2.1.5 CHIP-SEI 2b
LHL4d: Reduce the rate of total syphilis cases per 100,000 in Volusia from 36.9 (2019) to 26.9 by December 31, 2021.	36.9	26.9	12/31/2021	Annually	STD	ASP-1.1 SHIP-ID1
RET1a: DOH-Volusia's Emergency Operation Plan will be created and meet 100% of the Public Health Accreditation Board (PHAB) reaccreditation requirements by December 31, 2020.	0%	100%	12/31/2020	Annually	Emergency Preparedness	ASP-3.1
RET1b: Increase number of EpiLog's (EPI newsletter) published for providers from 1 to 2 by December 31, 2020 and from 2 to 3 by December 31, 2021.	1	2 3	12/31/2020 12/31/2021	Annually	Epidemiology	ASP-4.1
RET2a: Increase the percentage of students who meet the vaccine requirement for 7th grade entry from 95.3% for the 19/20 school year to 98% for the 21/22 school year.	95.3%	98%	8/31/2021	Annually	Clinical Services	ASP-3.1.1 SHIP-IM2



Objectives

Objective Number and Name	Baseline Value	Target Value	Target Date	Measured Annually or Quarterly	Program Responsible	Linkages/ Alignment
RET2b: Increase HPV vaccination rate completion for those age 9-26 years from 4% (2019) to 25% by December 31, 2021.	HPV vaccinations provided in 2019=1,225 1st dose=836 2nd dose=340 3rd dose=35 Percent fully immunized completed 2 or 3 dose series = 375 (4%)	25%	12/31/2021	Annually	Clinical Services	ASP-3.1.1 SHIP-IM2.1.2
RET2c: Increase those fully immunized age 4-6 years entering kindergarten from 92.8% (2019) to 96.7% by December 31, 2021.	92.8%	96.7%	12/31/2021	Annually	Clinical Services	ASP-3.1.1 SHIP-IM2
RET2d: Increase those fully immunized entering 7th grade from 94.6% (2019) to 96.6% by December 31, 2021.	94.6%	96.6%	12/31/2021	Annually	Clinical Services	ASP-3.1.1 SHIP-IM2.1.2



Objectives

Objective Number and Name	Baseline Value	Target Value	Target Date	Measured Annually or Quarterly	Program Responsible	Linkages/ Alignment
RET3a: Increase the number of partners receiving materials, masks, and/or in-person technical assistance to educate clients on safe practices to prevent the spread of COVID-19 with an emphasis on partners that serve vulnerable populations by 10%, from 254 (6/2020) to 279 by September 30, 2021.	254 (Non-duplicate community partners receiving masks, and in-person assessments conducted with long-term care facilities.)	279 (Non-duplicate community partners receiving masks in bulk, and in-person assessments conducted with long-term care facilities.)	9/30/2021	Annually	Community Health Environmental Health	ASP-2.1.7 SHIP-HE3
EAP1a: Reduce annual percentage of Career Service and SES employees voluntarily separating from employment with DOH-Volusia for reasons other than retirement from 16.77% (2019) to 12% by December 31, 2020.	16.77%	12%	12/31/2020	Annually	Performance Management	ASP-4.1 PMQI-9
EAP2a: Improve customer satisfaction scores from 92.6 percent on December 31, 2019 to 97.0 percent of agree or strongly agree on overall satisfaction responses by March 31, 2023.	92.6%	97.0%	3/31/2023	Quarterly	Performance Management	ASP-4.1 PMQI-8
EAP3a: Increase DOH-Volusia employees' documented participation in Individual Development Plans from 0% to 20% by March 31, 2023.	0%	20%	3/31/2023	Annually	Performance Management	ASP-4.1 *WFD-2a
RE1a: Increase the percentage of inspections completed for all regulated entities annually from 85% (2019) to 90%, by September 30, 2021.	85%	90%	9/30/2021	Annually	Environmental Health	ASP-5



Objectives

Objective Number and Name	Baseline Value	Target Value	Target Date	Measured Annually or Quarterly	Program Responsible	Linkages/ Alignment
RE1b: Increase the percentage of re-inspections within required programmatic timeframes from 60% (2019) to 75% by September 30, 2021.	60%	75%	9/30/2021	Annually	Environmental Health	ASP-5
RE1c: Increase the response time to all nuisance complaints from 87% (2019) to 88.5% by September 30, 2021 (percentage is based upon response within 2 business days for all programs combined).	87%	88.5%	9/30/2021	Annually	Environmental Health	ASP-5

*SHIP = State Health Improvement Plan *ASP = Agency Strategic Plan *PMQI = Agency Performance Management Quality Improvement Plan

*WFD = DOH-Volusia Workforce Development Plan *CHIP = Community Health Improvement Plan



Review Process

Reviews of the strategic plan take place during the Florida Department of Health in Volusia County PMC meetings. Quarterly, the lead entity for each objective provides updates on objectives that are not on track, not completed, or require a decision. Annually, the leads report progress and status for all objectives.

Summary of Revisions

The Florida Department of Health in Volusia County PMC will conduct annual reviews of the strategic plan. The council will discuss progress achieved and obstacles encountered for each objective.

The table below depicts revisions made to objectives.

Revisions		
Objective/Plan Section	Revisions to Objective	Rationale for Revisions
Alignments	ASP linkages added to each objective 11/19/20	PHAB requirement
HE1a	Objective target date changed 4/12/2021	Revised due to COVID-19
HE1b	Objective target date changed 10/11/2021	Revised due to COVID-19
HE1e	Added month and day to target date 10/11/2021	Revised to be consistent
HE2a	Target value revised 4/12/2021	Changed to match contract requirements
HE2b	Target date revised 4/12/2021 Target value changed 10/11/2021	Revised due to COVID-19
HE3a	Objective numbering changed 11/19/20 Target date changed 10/11/2021	Numbering inconsistent Revised due to COVID-19
LHL1a	Revised objective regarding delivery method of training 4/12/2021	ELC's do not have the capacity to host virtual learning activities. COVID-19 caused virtual environment.
LHL1b	Target date revised 5/10/2021 Target date revised 10/11/2021	Revised due to COVID-19 Revised to align with SP cycle
LHL1c	Target date revised 10/11/2021	Revised due to COVID-19



Summary of Revisions

LHL2a	Target date revised 10/11/2021	Revised to align with SP cycle
LHL2b	Revised objective and baseline and target values 5/10/2021 Target date revised 10/11/2021	Match state's Opioid Dashboard Revised to align with SP cycle
LHL3a	Target date revised 10/11/2021	Revised to align with SP cycle
LHL4a	Target date revised 10/11/2021	Revised due to COVID-19
LHL4b	Target date revised 10/11/2021	Revised to align with SP cycle
LHL4c	Target date revised 10/11/2021	Revised to align with SP cycle
LHL4d	Target date revised 10/11/2021	Revised to align with SP cycle
RET1b	Target value and target dates revised 5/10/2021 Target value and target dates revised 10/11/21	Revised due to COVID-19 Revised to align with SP cycle
RET2a	Delete Objective 5/10/2021	No longer receive the Tobacco Prevention Grant that funds these activities.
RET2b	Delete tobacco objective 5/12/2021	No longer receive the Tobacco Prevention Grant that funds these activities.
RET2b	Target value changed 10/11/2021	Revised due to COVID-19
RET3a	Target date changed 10/11/2021	Revised due to COVID-19
EAP1a	Target date changed 10/11/2021	Revised to align with SP cycle
EAP2a	Target date changed 4/12/2021 Target date changed 2/15/2022	Revised due to COVID-19 Revised to extend plan
EAP3a	Target date changed 2/15/2022	Revised to extend plan
RE1a	Target date changed 10/11/2021	Revised to align with SP cycle
RE1b	Target value and date changed 10/11/2021	Revised to align with SP cycle



Summary of Revisions

RE1c	Target value and date changed 10/11/2021	Revised to align with SP cycle
HE2c	New objective regarding COVID vaccinations 4/12/2021	Vaccinations began 1 year after plan was implemented
LHL1c	New objective - Dental Outreach with ELC 4/12/2021	Replace School-based Sealant Program
LHL3b	New objective – Vaccines for persons 65+ 4/12/2021	Vaccinations began 1 year after plan was implemented
EAP2a		



Environmental Scan Resources

1. [Agency Strategic Plan, 2016-2020](#)
2. [Agency Quality Improvement Plan, 2018-2020](#)
3. [Behavioral Risk Factor Surveillance System \(BRFSS\), 2016](#)
4. [DOH-Volusia Community Health Assessment, 2019](#)
5. [DOH-Volusia Community Health Improvement Plan, 2016-2019](#)
6. DOH-Volusia BARHII Organizational Self-Assessment, 2018
7. [DOH-Volusia Quality Improvement Plan, 2017-2020](#)
8. [DOH-Volusia Workforce Development Plan, 2020-2022](#)
9. [Florida Community Health Assessment Resource Tool Set \(CHARTS\)](#)
10. [Florida Department of Health Workforce Development Plan](#)
11. [Florida State Health Improvement Plan, 2017-2021](#)
12. [Florida Pregnancy Risk Assessment Monitoring System](#)
13. [Florida Youth Risk Behavior Survey Results, 2019](#)
14. [Florida Youth Substance Abuse Survey, 2019](#)
15. [Florida Youth Tobacco Survey, 2019](#)
16. [Volusia-Flagler United Way ALICE Report, 2018](#)