



Florida Department of Health in Indian River County

# STRATEGIC PLAN

January 2023 to December 2026



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# 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.





# 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 assure conditions in which people can be healthy. Public health is a well-established science that has been in practice for hundreds of years. It is based upon the social, behavioral, environmental, biological, and socioeconomic factors that impact population-wide health.

**The 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 Indian River County (DOH-Indian River) serves a population of 158,238.

**Where we live influences our health.** Demographic, socioeconomic, and environmental factors create unique community health service needs. Key characteristics that set Indian River County apart include 54 years as the average age of our residents, so chronic disease and healthy longevity are important. Indian River County’s income inequality is among the highest in the nation, the Community Health Assessment in 2020 found that the top one percent of Indian River County residents averaged \$2,921,375 in income compared to the bottom ninety nine percent at \$43,473, leaving many residents unable to afford housing Please see the data below.

Economic Indicators:	Indian River County 2020	Florida 2020
Median Owner-Occupied Housing Unit Value <sup>1</sup>	\$220,700	\$232,000
Median Household Income – White Residents <sup>1</sup>	\$59,022	\$61,065
Median Household Income- Black Residents <sup>1</sup>	\$33,948	\$43,418
Median Household Income- Hispanic Residents <sup>1</sup>	\$50,304	\$49,266

Access to Care Indicators:		
Population That Could Not See a Doctor Due to Cost <sup>2</sup>	6.5%	3.7%
Hospitalizations due to Mental Disorders per 100,000 population, percent/rate <sup>3</sup>	909.5	512.8
Limited Activities Due to Physical, Mental or Emotional Problem <sup>2</sup>	33.1%	27.1%
Obesity	38.7%	27.6%

Data Sources: 1. United States Bureau of the Census, American Community Survey, Table B19013, 2. Florida Behavioral Risk Factor Surveillance System, Centers for Disease Control and Prevention (CDC) and Florida Department of Health, 3. Florida Agency for Health Care Administration (AHCA)



**Population by Age  
Indian River County and Florida**

Age Group	County – Year		State – Year
	Total Number	Total Percentage	Total Percentage
< 5 years	6,384	4.03%	5.31%
5 - 14 years	13,744	8.69%	11.05%
15 - 24 years	14,248	9.00%	11.49%
25 - 44 years	28,499	18.01%	25.18%
<b>Subtotal</b>	<b>62,875</b>	<b>39.73%</b>	<b>53.03%</b>
45 - 64 years	41,801	26.41%	26.11%
65 - 74 years	28,007	17.71%	11.44%
> 74 years	25,555	16.15%	9.42%
<b>Subtotal</b>	<b>95,363</b>	<b>60.27%</b>	<b>46.97</b>

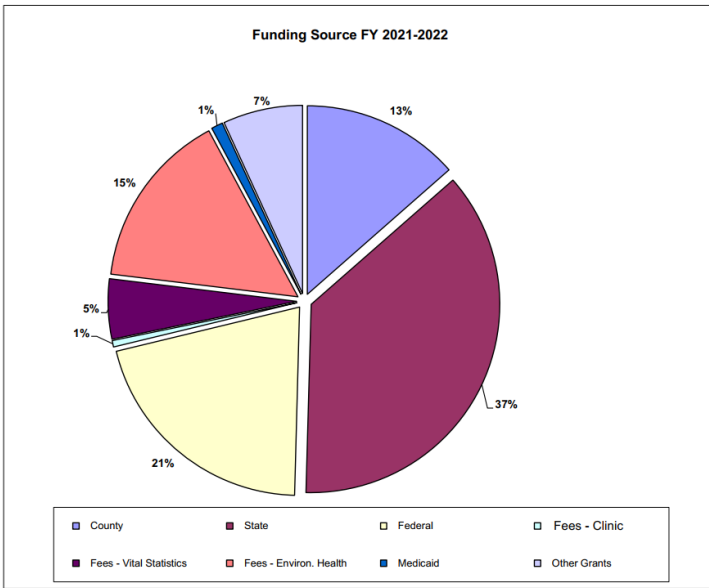
Source: FLCharts- Florida Legislature, Office of Economic and Demographic Research



## Budget and Revenue

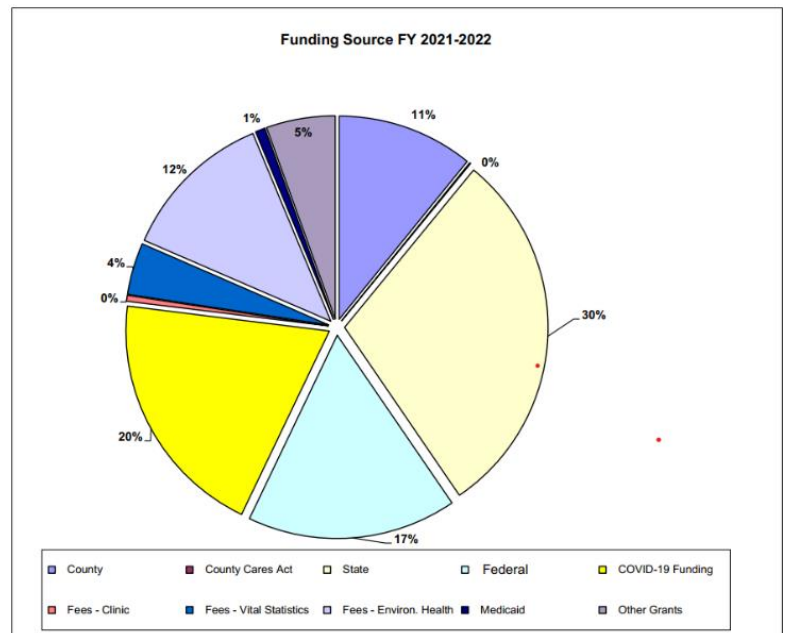
Florida Department of Health in Indian River County financial resources are provided through multiple sources. These include fees, grants, and budget allocations from the County, State and the Federal government.

### The Florida Department of Health in Indian River County Revenue Percentage by Source Fiscal Year: 2021-2022



The two funding source charts contained on this page visually demonstrate the impact of the COVID-19 pandemic on funding sources. The upper left chart resembles 2019-2021 funding percentages because COVID-19 funds have been removed from the equation. The lower right chart shows the COVID-19 funding's impact.

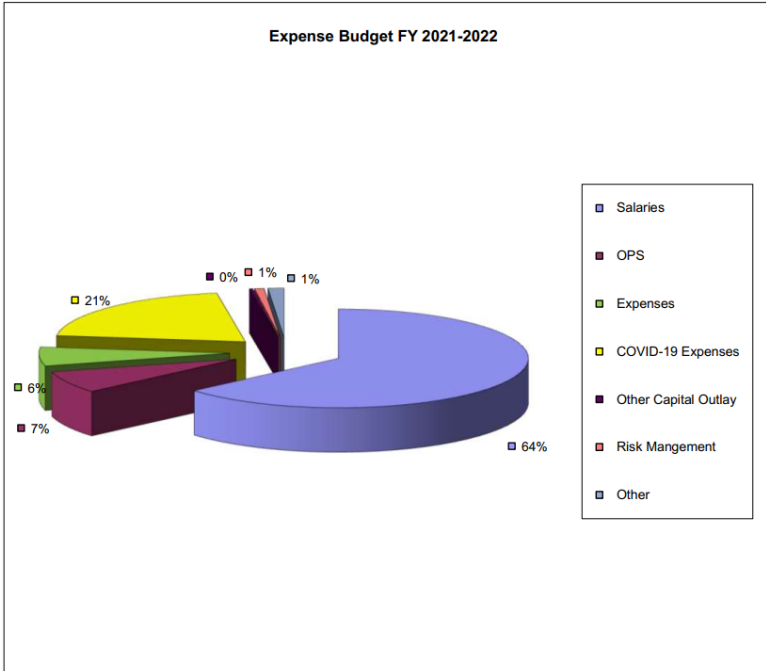
Source: Florida Accounting and Information Resource



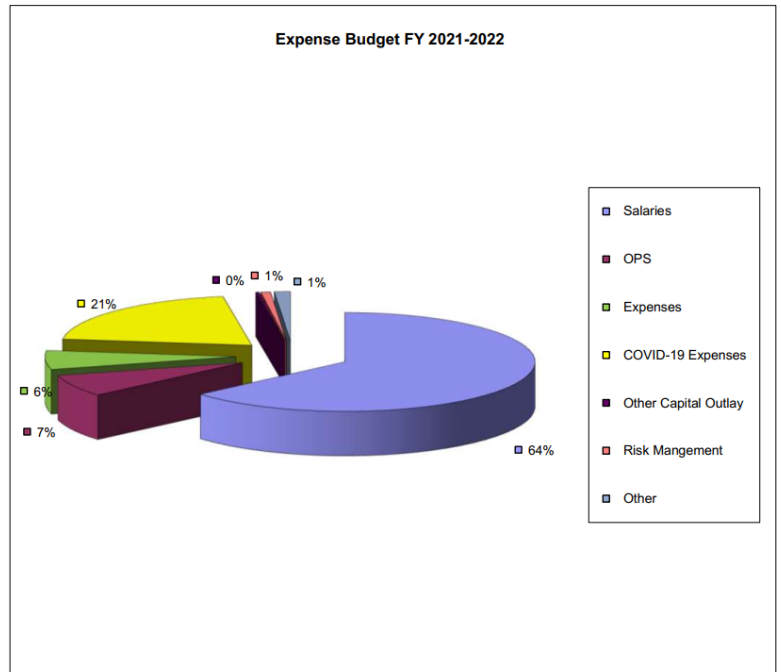


### Budget and Revenue (Cont'd)

**Budget.** Florida Department of Health in Indian River County has a variable budget (which has decreased since 2016) that covers salaries and other personal service (OPS) employees, business expenses, other expenses associated with programs, and risk management. Below are two breakdowns of the expense budget for the last two years, the first omits COVID-19 expenses and the second includes COVID-19 expenses:



Source: Florida Accounting and Information Resource



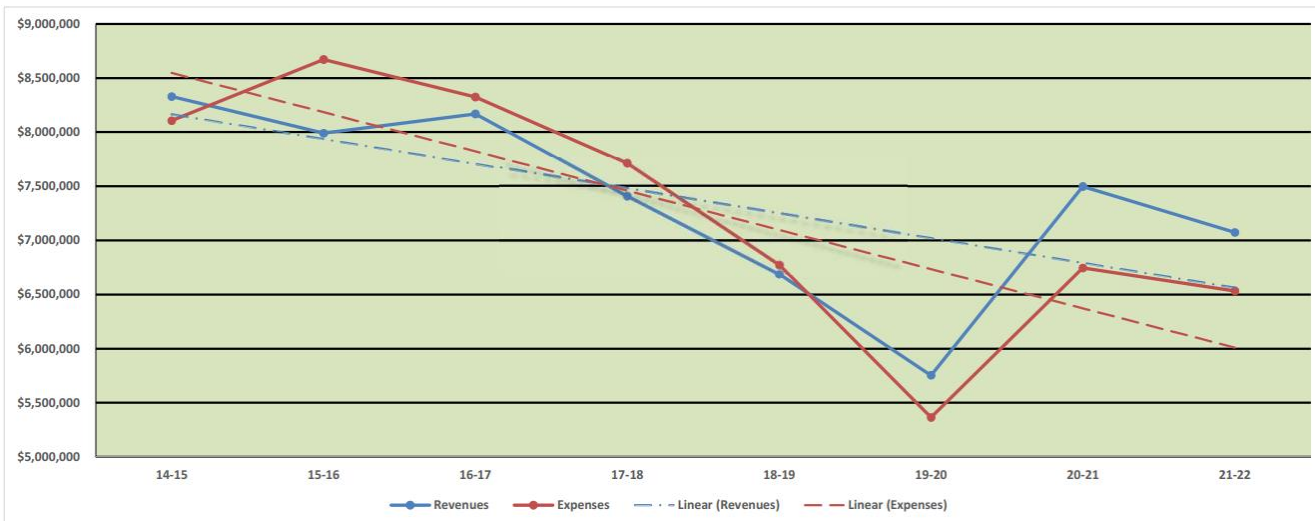
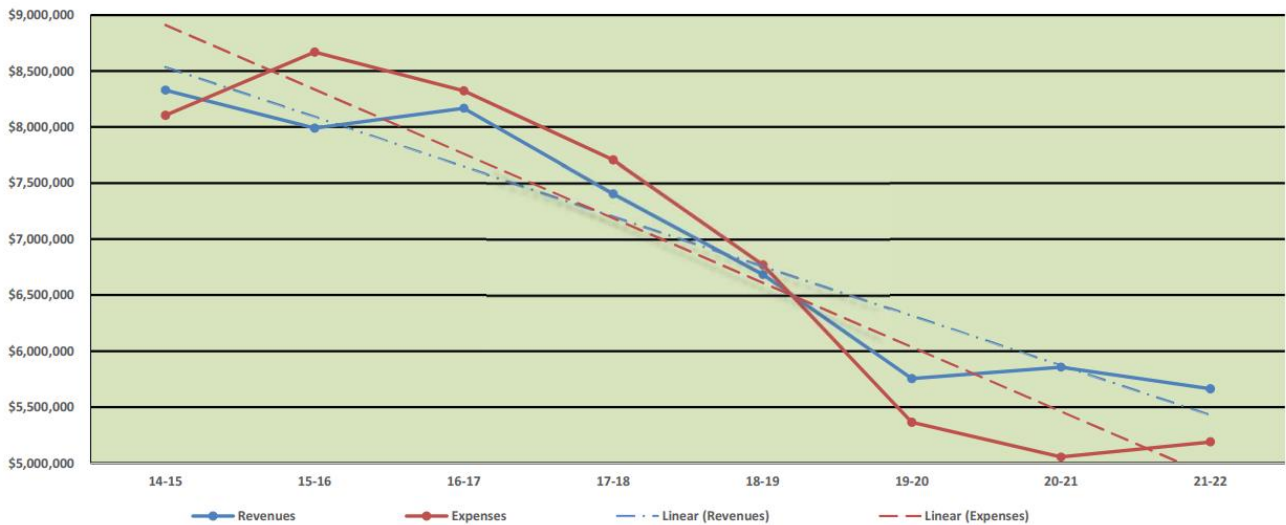




### Budget and Revenue (Cont'd)

Some of the budget and revenue changes affecting our services and programs in Indian River County include the advent of Statewide Managed Medicaid, state and federal cuts to the Florida Department of Health in Indian River County. The graph below represents our revenue and expense relationship over the past seven years. The corresponding dashed lines represent the moving average of these values, which smooths out fluctuations in data and shows the pattern or trend more clearly. As illustrated, the Florida Department of Health in Indian River County has reduced expenses commiserate with lower revenue. Below are two graphs showing revenue and expenses. The first omits COVID-19 expenses/ revenues and the second includes COVID-19 expenses/ revenues.

**The Florida Department of Health in Indian River County  
Revenue and Expenses 2014-2022**



Source: Florida Accounting and Information Resource



## 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 Indian River 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 compliance investigations and enforcing public health laws. DOH - Indian River offers the following programs and services in this department: Arbovirus Mosquito borne Illness, Biomedical Waste, Body Piercing, Built and Natural Environment, Complaint Investigations, Demolitions, Drinking Water (wells, limited use water systems), Drinking Water Laboratory, Environmental Epidemiology Investigations (Foodborne and Waterborne Illness, Tickborne Illness, Zoonotic Illness, & Toxins), Environmental Health Preparedness, Florida Healthy Beaches, Food Hygiene, Grease Interceptors, Indian River Lagoon, Indoor Air, Migrant Labor, Mobile Home Parks, Onsite Sewage Disposal, PACE-EH, Pools and Spas, Private Well Water, Rabies Surveillance (Animal Bites), Residential Facilities and Schools, Rodent Control, Seafood Consumption, Small Quantity Generators, Tanning, and Tattoo.

### **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. DOH - Indian River offers the following programs and services: Infectious Disease Services, Communicable Disease monitoring & surveillance (HIV/AIDS, Measles, STDs, and Tuberculosis), Prevention of disease through contact follow-up and health education, educational materials, and Bioterrorism preparedness.

### **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. DOH - Indian River offers the following programs and services: Developing preparedness and response plans, exercising plans to ensure their effectiveness, providing medical and environmental support prior to, during, and after disasters, and coordinating county health and medical concerns. Examples of our response efforts include working in a special needs shelter during a hurricane where our staff assist people with special medical needs, staff performing environmental assessments post-hurricane, and staff providing immunizations to populations at risk during H1N1 and COVID-19

### **Community Health Promotion**

We plan and implement programs to promote healthy behaviors and reduce chronic disease through education, community outreach, and collaborative partnerships. DOH - Indian River offers the following programs and services: PACE EH (also a part of the environmental health department of Indian River), Community Health Assessments (CHAs, done as part of accreditation and to assess the overall health of the county), Community Health Improvement Plans (with SMART objectives), Healthy Communities coordination, continue to provide nutrition education and physical activity promotion and senior wellness activities. We also partner with Senior Resource Association and Meals on Wheels to host congregate meals for seniors.



### **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. DOH - Indian River staff includes a Health Equity Coordinator and a Minority Health Liaison, and we utilize PACE EH methodology to assess issues and inform our focus. Our partnerships with multiple local and national organizations help in reaching our goal of health equity in Indian River County. Current projects include reducing issues with access to healthy food and access to care for Sickle Cell Disease

### **Clinical Services**

We have a variety of services for expecting moms, newborn babies, infants and toddlers, school-aged children, adolescents, and adults. Our services are provided by a highly qualified physician, nurses, and other health care providers. DOH - Indian River offers the following programs and services: school health and immunizations, as well as COVID-19 testing.

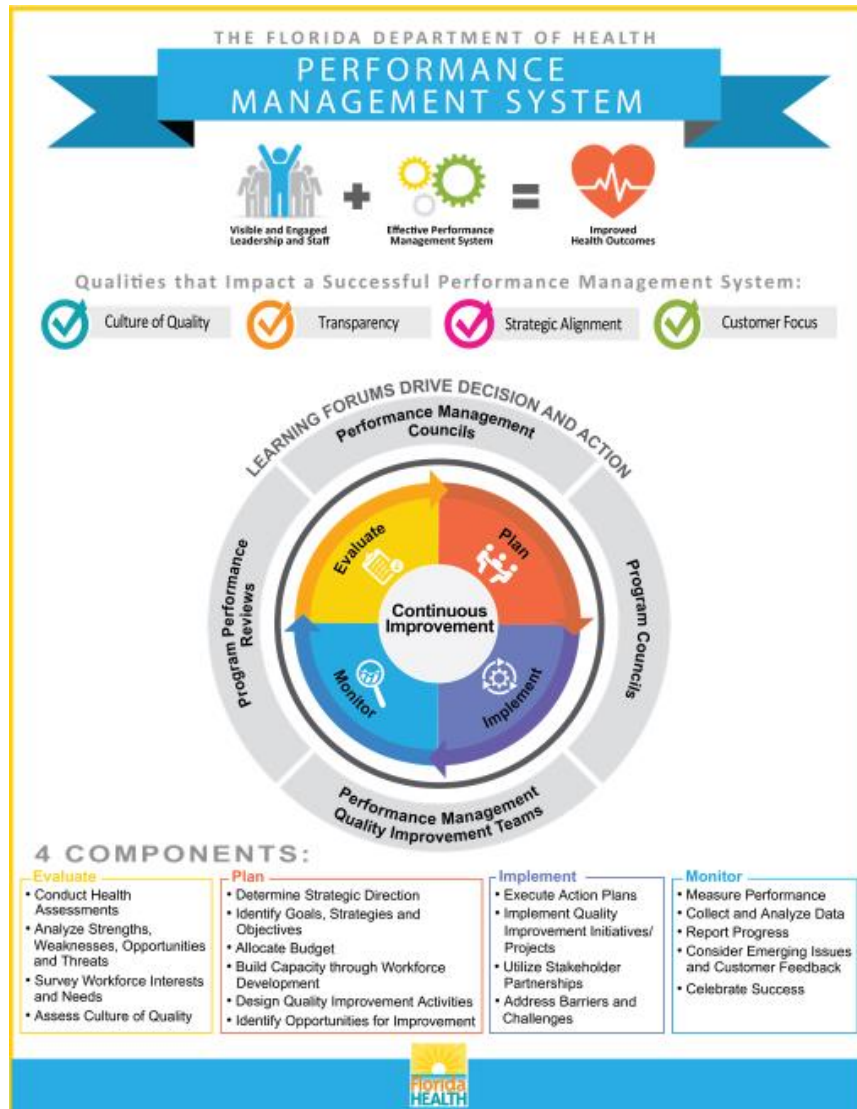
### **Vital Statistics**

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.

# 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 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 strategic plan sets the direction for action for DOH- Indian River for a four-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 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 DOH-Indian River Performance Management Council 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 the performance in achieving strategic objectives in health improvement, agency strategic, quality improvement, and workforce development plans.
- Make recommendations to improve performance.

DOH-Indian River initiated a new strategic planning process in April of 2021 to define the direction and course of DOH-Indian River for consumers, employees, administrators, and legislators for the next four years. The plan will position DOH- Indian River to operate as a sustainable integrated public health system and provide the DOH-Indian River customers with quality public health services. It is a living document that the DOH-Indian River will evaluate and update annually to address new challenges posed by the changing public health environment.

Senior leadership championed the eighteen-month planning process during nine meetings. Attending these meetings were numerous internal stakeholders including the senior leadership, program managers, and a dedicated performance management council. DOH-Indian River considered key support functions required for efficiency and effectiveness; and it sought to articulate what it plans to achieve as an organization, the actions it will take, and how it will measure success.

### **Community Health Assessment**

In 2012 and again in 2018, DOH-Indian River began a comprehensive, county-wide community health needs assessment.

#### **The goals of the assessment were:**

- Assess the population's health status
- Highlight areas of unmet need
- Present the community's perspectives
- Provide suggestions for possible interventions
- Provide recommendations to policymakers for goals and objectives for health improvement in the community

Indian River County Community Health Assessments were completed in May 2016 and December 2020. Both include analysis of local, state and national data, as well as the community's perspective, gathered through focus groups, key informant interviews and a local public health system assessment.



## Community Health Improvement Plan

Beginning in 2020, DOH-Indian River and community stakeholders convened to develop a Community Health Improvement Plan (CHIP) for Indian River County. The participants represent a broad range of community stakeholders, county and city officials and non-profit and for-profit partners, many of whom were involved in the Community and Environmental Public Health Assessments. The group was tasked with developing a set of priorities for the CHIP, using these assessments as a foundation.

### The top health priorities identified by the Community Health Advisory Council:

- Healthy Weight
- Mental Health
- Housing
- Economic Opportunity and Employment

DOH-Indian River issued the Community Health Improvement Plan in December 2021.

[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 DOH-Indian River 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 particularly deserve support.

In preparation for the strengths, weaknesses, opportunities, and threats (SWOT) analysis, staff from the DOH-Indian River summarized and presented information from the sources listed on page 27 to the performance management council. The performance management council (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 14.

The Section Administrator of Strategic Planning and Performance Tracking, Bureau of Community Health Assessment, Division of Public Health Statistics and Performance Management provided guidance on aligning DOH-Indian River's Strategic Plan with the Agency's plan and adherence to the Public Health Accreditation Board requirements for accreditation.

Performance management council members then used the SWOT analysis, the Agency Strategic Plan, and the agency mission, vision, and values to choose strategic priority areas and goals. Staff then worked with program managers and their staff to write and revise objectives for each goal area. The objectives were then routed back to the performance management council for comment and approval.





## Planning Summary

The following is the strategic planning schedule of meetings:

Meeting Date	Meeting Topic
4/27/2021	PMC: Environmental scan data reviewed- strategic plan priorities discussed
5/25/2021	PMC: Strategic plan priorities draft presented
6/22/2021	PMC: Strategic plan development timeline presented
8/10/2021	PMC: SWOT survey results presented; plan priorities reviewed
8/23/2021	Expanded Management Team: Strategic plan priorities presented/ reviewed
9/28/2021	PMC: COVID-19 effects on DOH-Indian River and strategic planning
1/25/2022	PMC: Strategic plan priorities alignment with SHIP goals and objectives
5/24/2022	PMC: Strategic plan progress update
9/20/2022	QI Committee: Strategic plan priorities review
9/27/2022	PMC: Strategic plan draft review
11/22/2022	PMC: Strategic plan approval

The DOH-Indian River staff monitor strategic plan objectives, track action steps and review data. A designated Program Management (PM) Champion communicates with staff and leadership, reviewing 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 DOH- Indian River PMC participants use as a reference when the strategic plan is discussed.

The PMC discusses any need for changes in the focus or direction of the strategic plan based on data or changes circumstance and makes changes to the plan to insure it accurately reflects the needs of the community and the organization.

Any changes to the Strategic Plan, progress towards strategic plan objectives, strategies and action steps are communicated to all employees in DOH- Indian River's QI Connection newsletter. Current editions of all foundational plans are posted on the DOH-Indian River's SharePoint site.



# 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 Indian River Strategic Planning Participants 2023

### The DOH-Indian River **Performance**

#### **Management Council** (PMC) includes:

- Miranda Hawker, Health Officer
- Avie "Rose" Parker, Executive Community Health Nursing Director
- Mayur Rao, Business Manager
- Julianne Price, Environmental Administrator
- Stacy Brock, Public Health Preparedness Coordinator, Public Information Officer, Safety Coordinator
- Molly "Mary" Steinwald Community Improvement Manager and Accreditation Lead
- Sarah Howard, Administrative Assistant II
- Margaret Kearney, Performance Improvement Manager

### The **Quality Improvement Committee** (QIC)

#### includes:

- Cheryl Alberts, BS, RN, Senior Community Health Nurse
- Rudy Alvarado, Government Operations Consultant I
- Brenda Bennett, Registration Clerk
- Cindy Boyle, Medical Records Supervisor
- Stacy Brock, Public Health Preparedness Coordinator, Public Information Officer, Safety Coordinator
- Marian Callahan, RN, Senior Community Health Nurse
- Darlene Gordon, Nursing Program SPI, School Health
- John "Michael" Gray, Purchasing Agent III

- DaJuane Harris, Environmental Supervisor II
- Sandra Harris, Senior Public Health Nutritionist
- Sarah Howard, Administrative Assistant II
- Margaret Kearney, Performance Improvement Manager
- Juan Ornelas, Health Services Representative
- Cathy Papitto, Accountant II
- Avie "Rose" Parker, Executive Community Nursing Director
- Julianne Price, Environmental Administrator
- Holly Roberson, Environmental Specialist II
- Molly "Mary" Steinwald, Community Improvement Manager and Accreditation Lead
- Maridel Vitrano, Nutrition Educator, WIC

### The **Expanded Management Team** includes:

- Cindy R Boyle, Medical Records Supervisor
- Stacy S Brock, Public Health Preparedness Coordinator, Public Information Officer
- Darlene Gordon, Senior School Health Nursing Supervisor
- DaJuane Harris, Environmental Supervisor II
- Miranda C Hawker, Health Officer
- Stephen A Marion, Information Technology
- Avie "Rose" Parker, Executive Community Health Nursing Director
- Julianne Price, Environmental Administrator
- Mayur K Rao, Business Manager
- Tracey Schafer, Nursing Program Specialist
- Sara Torres-Laluz, Accountant Supervisor





# 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:

- Diversity
- Experience of staff and public health presence

Capacity:

- Partnerships and collaboration
- People/staff- warm friendly, caring and dedicated

Emerging Trends:

- Programming & services responsive to emerging threats
- Legal authority to provide public health services

Other:

- Healthy workplace
- Fair and responsive leadership

**Opportunities (External)**  
*We want to invest in opportunities.*

Agency Infrastructure:

- Improved internal communication
- Grow infrastructure & technological capabilities

Capacity:

- Increased public health impact
- Increase capability to deal with a multi-lingual population

Emerging Trends:

- Improved community outreach, education, marketing & communication
- Develop partnerships with community organizations

Other:

- Identify additional funding sources
- Reduce health disparities

**Weaknesses (Internal)**  
*We want to minimize weaknesses.*

Agency Infrastructure:

- Challenges of internal & external communication
- Redundancies & complicated service delivery

Capacity:

- Demand for services exceeds funding
- Retaining good employees

Emerging Trends:

- Lack of external resources & support
- Minimal staffing doesn't allow for training

Other:

- Special needs shelter staff shortage
- Interpreters

**Threats or Challenges (External)**  
*We want to identify threats or challenges that need to be addressed and understand their potential impact.*

Agency Infrastructure:

- Staffing levels
- Information management

Capacity:

- Retaining good employees
- Lack of funding for public health services

Emerging Trends:

- Lack of communication about services offered
- Outbreak / pandemic preparedness

Other:

- Response to emerging and reemerging threats
- Providing unfunded, required services



# 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.

<b>Priority 1: Healthy Thriving Lives</b> Increase the life expectancy for your and adults through healthy weight, healthy heart and chronic disease prevention. Minimize emerging health threats through prevention and intervention strategies that promote healthy children, teens and adults.						
<b>Goal 1: Enhance Health Promotion Activities</b>						
Objectives:	Baseline Value (Baseline Date)	Target Value (Target Date)	Lead Entity Responsible	Objective Status	Alignment	
<b>1.1.1:</b> By January 30, 2023, increase the number of nutrition education workshops from six in 2022 to 6 per month through December 2025  <b>Data Source:</b> Florida Blue grant data collection	6 (2022)	72 (12/30/2025)	Julianne Price / Community Health / Health Equity	On Track	<b>Agency Plans:</b> AEOP- N/A APMQI- Goal 1 ASP- 1.1 AWFD- Goal 1 SHIP- Priority 2	<b>CHD Plans:</b> CHIP- Obj. 1.B.1 EOP- N/A PMQI- Goal 7 WFD- Goal 6
<b>1.1.2:</b> By June 30, 2026, increase the number of implemented Workplace Wellness initiatives from 2 in 2022 to 5  <b>Data Source:</b> DOH-Indian River Activities Log	2 (2022)	5 (6/30/2026)	Julianne Price / Community Health / Wellness Committee / Quality Improvement	On Track	<b>Agency Plans:</b> AEOP-N/A APMQI-Goal 3 ASP-2.1 AWFD-Goal 2 SHIP- Priority 5	<b>CHD Plans:</b> CHIP- Obj. 1.B.!, 1.B.2 EOP- N/A PMQI- Goal 3 WFD- Goal 1

ASP- Agency Strategic Plan  
 AEOP-Agency Emergency Operations Plan  
 APMQI-Agency Performance Management and Quality Improvement  
 CHIP-Community Health Improvement Plan  
 AWFD-Agency Workforce Development Plan

SHIP- State Health Improvement Plan  
 EOP-County Health Department Emergency Operations Plan  
 PMQI-County Health Department Performance Management and Quality Improvement Plan  
 SP-County Health Department Strategic Plan  
 WFD-County Health Department Workforce Development PI



## Objectives

### Priority 1: Healthy Thriving Lives

Increase the life expectancy for your and adults through healthy weight, healthy heart and chronic disease prevention. Minimize emerging health threats through prevention and intervention strategies that promote healthy children, teens and adults.

### Goal 2: Enhance Prevention Activities

Objectives:	Baseline Value (Baseline Date)	Target Value (Target Date)	Lead Entity Responsible	Objective Status	Alignment	
<p><b>1.2.1:</b> By December 30, 2026, partner with community organizations to increase the number of promoted and conducted health screening events from 8 in 2022 to a total of 36</p> <p><b>Data Source:</b> Attendance logs at screening events</p>	0 (2022)	36 (12/30/2026)	Rose Parker/ Nursing & Clinical Services	On Track	<p><b>Agency Plans:</b> AEOP- II.C.1a APMQI- Goal 1 ASP- 1.1 AWFD- Goal 1 SHIP- Priority 2</p>	<p><b>CHD Plans:</b> CHIP- Obj. 1.A.3 EOP- N/A PMQI- Goal 4 &amp; 5 WFD- Goal 6</p>
<p><b>1.2.2:</b> By September 30, 2026, decrease the age adjusted melanoma incidence rate from 45.4 per 100,000 population (2016-18) to 40.86</p> <p><b>Data Source:</b> FLCharts <a href="https://www.flhealthcharts.gov/ChartsDashboards/rdPage.aspx?rdReport=nonVitalInd.Dataviewer&amp;cid=0447">https://www.flhealthcharts.gov/ChartsDashboards/rdPage.aspx?rdReport=nonVitalInd.Dataviewer&amp;cid=0447</a></p>	45.4 (2018)	40.86 (9/30/2026)	Rose Parker/ Nursing & Clinical Services, Community Health	On Track	<p><b>Agency Plans:</b> AEOP-N/A APMQI-N/A ASP-1.1 AWFD-Goal 1 SHIP- Priority 2</p>	<p><b>CHD Plans:</b> CHIP-Obj. 1.B.2 EOP- N/A PMQI- Goal 11 WFD- Goal 6</p>

ASP- Agency Strategic Plan  
 AEOP-Agency Emergency Operations Plan  
 APMQI-Agency Performance Management and Quality Improvement  
 CHIP-Community Health Improvement Plan  
 AWFD-Agency Workforce Development Plan

SHIP- State Health Improvement Plan  
 EOP-County Health Department Emergency Operations Plan  
 PMQI-County Health Department Performance Management and Quality Improvement Plan  
 SP-County Health Department Strategic Plan  
 WFD-County Health Department Workforce Development PI



## Objectives

### Priority 1: Healthy Thriving Lives

Increase the life expectancy for you and adults through healthy weight, healthy heart and chronic disease prevention. Minimize emerging health threats through prevention and intervention strategies that promote healthy children, teens and adults.

### Goal 2: Enhance Prevention Activities

Objectives:	Baseline Value (Baseline Date)	Target Value (Target Date)	Lead Entity Responsible	Objective Status	Alignment	
<p><b>1.2.3:</b> By September 30, 2026, decrease the prostate cancer death rate per 100,000 population from 21.6 (2018-20) to 19.4</p> <p><b>Data Source:</b> FLCharts- <a href="https://www.flhealthcharts.gov/ChartsDashboards/rdPage.aspx?rdReport=Death.Dataviewer&amp;cid=0093">https://www.flhealthcharts.gov/ChartsDashboards/rdPage.aspx?rdReport=Death.Dataviewer&amp;cid=0093</a></p>	21.6 (2020)	19.4 (09/30/2026)	Rose Parker/ Nursing & Clinical Services, Community Health	On Track	<p><b>Agency Plans:</b> AEOP- N/A APMQI- N/A ASP- 1.1 AWFD- Goal 1 SHIP- Priority 2</p>	<p><b>CHD Plans:</b> CHIP- Obj. 1.B.2 EOP- N/A PMQI- Goal 11 WFD- Goal 6</p>
<p><b>1.2.4:</b> By December 30, 2026, increase the number of individuals in Indian River County certified for Mental Health First Aid from 600 in August 2022 to 1200.</p> <p><b>Data Source:</b> Mental Health Collaborative records</p>	600 (2022)	1200 (12/30/2026)	Julianne Price / Mental Health Collaborative, Community Health Promotion	On Track	<p><b>Agency Plans:</b> AEOP-N/A APMQI-Goal 3 ASP-1.1 AWFD- Goal 1 SHIP- Priority 5</p>	<p><b>CHD Plans:</b> CHIP- Obj. 1.A.2, 1.A.3 EOP- N/A PMQI- Goal 11 WFD- Goal 1</p>

ASP- Agency Strategic Plan

AEOP-Agency Emergency Operations Plan

APMQI-Agency Performance Management and Quality Improvement

CHIP-Community Health Improvement Plan

AWFD-Agency Workforce Development Plan

SHIP- State Health Improvement Plan

EOP-County Health Department Emergency Operations Plan

PMQI-County Health Department Performance Management and Quality Improvement Plan

SP-County Health Department Strategic Plan

WFD-County Health Department Workforce Development PI



## Objectives

Priority 2: Access to Equitable Care Build an equitable, exceptional public health system that is grounded in human rights and social justice, through training, research and advocacy						
Goal 1: Improve public health in rural, minority and underserved communities						
Objectives:	Baseline Value (Baseline Date)	Target Value (Target Date)	Lead Entity Responsible	Objective Status	Alignment	
<p><b>2.1.1:</b> By December 30, 2023, increase the number of community partners who receive targeted, annual health equity communications from 0 (2021) to 20 and maintain through December 30, 2026</p> <p><b>Data Source:</b> DOH Indian River Health Equity Plan</p>	0 (2021)	20 (12/30/2026)	Julianne Price / Rose Parker Health Equity, Community Health, Nursing & Clinical Services	On Track	<p><b>Agency Plans:</b> AEOP- II.C.1d APMQI- Goal 1 ASP- 1.1 AWFD- Goal 1 SHIP- Priority 6</p>	<p><b>CHD Plans:</b> CHIP- Obj. 2.A.2, Goal 2.B EOP- N/A PMQI- Goal 11 WFD- Goal 6</p>
<p><b>2.1.2:</b> By December 30, 2025, enhance interagency and community collaboration by increasing the size of the Health Equity Coalition, from 54 (2022) to 75.</p> <p><b>Data Source:</b> DOH- Indian River Health Equity Plan</p>	54 (2022)	75 (12/30/2025)	Julianne Price / Health Equity, Community Health	On Track	<p><b>Agency Plans:</b> AEOP-# APMQI-Goal 1 ASP-4.1 AWFD- Goal 1 SHIP- Priority 6</p>	<p><b>CHD Plans:</b> CHIP-Goal 2B EOP- N/A PMQI- Goal 5 WFD- Goal 5</p>
Goal 2: Identify and implement strategies to minimize disparities in social determinants of health						
Objectives:	Baseline Value (Baseline Date)	Target Value (Target Date)	Lead Entity Responsible	Objective Status	Alignment	
<p><b>2.2.1:</b> By December 30, 2025, increase the percentage of prenatal clients enrolled in WIC in their 1<sup>st</sup> trimester from 53.54% in March 2021 to 63.54%</p> <p><b>Data Source:</b> DOH-Indian River WIC Nutrition Contact Report</p>	53.54% (2021)	63.54% (12/30/25)	Rose Parker / Sandra Harris / Nursing & Clinical Services/Health Equity	On Track	<p><b>Agency Plans:</b> AEOP-# APMQI-Goal 1 ASP-4.1 AWFD- Goal 1 SHIP- Priority 6</p>	<p><b>CHD Plans:</b> CHIP-Goal 2B EOP- N/A PMQI- Goal 5 WFD- Goal 5</p>



## Objectives

Priority 3: Emerging Health Threats						
Strengthen capacity to prevent, detect and control infectious diseases						
Goal 1: Reduce the transmission of communicable diseases						
Objectives:	Baseline Value (Baseline Date)	Target Value (Target Date)	Lead Entity Responsible	Objective Status	Alignment	
<p><b>3.1.1:</b> By December 30, 2025, increase the percentage of adults who received a flu shot in the past year to 40% from 36.3% in 2019</p> <p><b>Data Source:</b> DOH- <a href="https://ewww.flhealthcharts.gov/ChartsReports/rdPage.aspx?rdReport=BrfssCounty.Dataviewer&amp;bid=0022">https://ewww.flhealthcharts.gov/ChartsReports/rdPage.aspx?rdReport=BrfssCounty.Dataviewer&amp;bid=0022</a></p>	36.3% (2019)	40% (12/30/2025)	Rose Parker / Clinical & Nutritional Services,	On Track	<p><b>Agency Plans:</b>            AEOP- N/A            APMQI- N/A            ASP-2.1.1            AWFD- Goal 1            SHIP- Priority 7</p>	<p><b>CHD Plans:</b>            CHIP- Obj. 1.B.2            EOP- N/A            PMQI- Goal 4            WFD- Goal 6</p>
<p><b>3.1.2:</b> By December 30, 2025, increase the percentage of children in public and private kindergarten certified as meeting vaccination requirements to 95% from 87.8% in 2021-22</p> <p><b>Data Source:</b>  <a href="https://www.flhealthcharts.gov/ChartsDashboards/rdPage.aspx?rdReport=School-agedChildandAdolescent.Report">https://www.flhealthcharts.gov/ChartsDashboards/rdPage.aspx?rdReport=School-agedChildandAdolescent.Report</a></p>	87.8% (2021-22)	95% (12/30/2025)	Rose Parker / Clinical & Nutritional Services, Community Health	On Track	<p><b>Agency Plans:</b>            AEOP- N/A            APMQI- N/A            ASP-2.1.1            AWFD- Goal 1            SHIP- Priority 7</p>	<p><b>CHD Plans:</b>            CHIP- Obj. 1.B.2            EOP- N/A            PMQI- Goal 4            WFD- Goal 6</p>



## Objectives

Priority 3: Emerging Health Threats						
Strengthen capacity to prevent, detect and control infectious diseases						
Goal 1: Reduce the transmission of communicable diseases						
Objectives:	Baseline Value (Baseline Date)	Target Value (Target Date)	Lead Entity Responsible	Objective Status	Alignment	
<b>3.1.3:</b> By December 30, 2026, increase the percentage of patients with PrEP indications on a prescribed regimen from 25% in 2022 to 75%  <b>Data Source:</b> DOH- Indian River Clinic records	25% (2022)	75% (12/30/2026)	Dr. Ryan /Clinical & Nursing Services	On Track	<b>Agency Plans:</b> AEOP- N/A APMQI- N/A ASP-2.1.1 AWFD- Goal 1 SHIP- Priority 7	<b>CHD Plans:</b> CHIP- Obj. 1.B.2 EOP- N/A PMQI- Goal 4 WFD- Goal 6
<b>3.1.4:</b> Through December 30, 2026, maintain the percentage of people linked to care within one month after HIV infection diagnosis at 100% from year 2021  <b>Data Source:</b> DOH- Indian River Clinic records	100% (2021)	100% maintained (12/30/2026)	Rose Parker / Clinical & Nursing Services,	On Track	<b>Agency Plans:</b> AEOP-N/A APMQI-N/A ASP-2.1.1 AWFD Goal 1 SHIP Priority 7	<b>CHD Plans:</b> CHIP- Obj. 1B.2 EOP- N/A PMQI- Goal 4 WFD- Goal 6
Goal 2: Increase and enhance partnerships with external preparedness and response entities						
<b>3.2.1:</b> By December 30, 2026, increase the number of preparedness and response organizations that are engaged with the Community Health Improvement/ Health Equity Coalition from 1 in 2022 to 4.  <b>Data Source:</b> CHIP/HE Coalition Meeting minutes	1 (2022)	4 (12/30/2026)	Julianne Price / Community Health Improvement /Health Equity	On Track	<b>Agency Plans:</b> AEOP- II.C.1a APMQI- Goal 1 ASP- 3.1 AWFD- N/A SHIP- Priority 6	<b>CHD Plans:</b> CHIP- Obj. 2.B.2 EOP-III-2 PMQI- Goal 5 WFD- Goal 6

ASP- Agency Strategic Plan  
 AEOP-Agency Emergency Operations Plan  
 APMQI-Agency Performance Management and Quality Improvement  
 CHIP-Community Health Improvement Plan  
 AWFD-Agency Workforce Development Plan

SHIP- State Health Improvement Plan  
 EOP-County Health Department Emergency Operations Plan  
 PMQI-County Health Department Performance Management and Quality Improvement Plan  
 SP-County Health Department Strategic Plan  
 WFD-County Health Department Workforce Development PI



## Objectives

### Priority 4: Communication and Partnership Capacity Building

Establish a sustainable infrastructure, which includes a competent workforce, standardized business practices and effective use of technology, ensuring that partnerships, systems and processes support the future workforce

#### Goal 1: Enhance interagency and community collaboration

Objectives:	Baseline Value (Baseline Date)	Target Value (Target Date)	Lead Entity Responsible	Objective Status	Alignment	
<p><b>4.1.1:</b> By December 30, 2025, increase the number of individuals accessing information about DOH services and programs via DOH-Indian River website by 10% from 240,380 page visits per year in 2021 to 264,418</p> <p><b>Data Source:</b> DOH- Website analytics ( Google)</p>	240,380 (2021)	264,418 (6/30/2025)	Mayur Rao /Public Information Office, QI Committee	On Track	<p><b>Agency Plans:</b> AEOP- N/A APMQI-Goal 2 ASP- 4.1 AWFD- N/A SHIP- N/A</p>	<p><b>CHD Plans:</b> CHIP- N/A EOP- IV-4 PMQI- Goal 11 WFD- Goal 6</p>
<p><b>4.1.2:</b> By December 30, 2026, increase the number of local media offerings in DOH-IR priority public health issues and services from 0 in 2021 to 18</p> <p><b>Data Source:</b> DOH-Indian River Activity Documentation Log</p>	0 (2021)	18 (12/30/2026)	Miranda Swanson /Stacy Brock/ Public Information, Community Health, Nursing & Clinical Services	On Track	<p><b>Agency Plans:</b> AEOP-II.C.1f APMQI- Goal 1 ASP-4.1 AWFD- Goal 1 SHIP- Priorities 2,3,4,5,6</p>	<p><b>CHD Plans:</b> CHIP- Goals 1.A, 1.B EOP- N/A PMQI- Goal 10 WFD- Goal 6</p>





## Objectives

### Priority 4: Communication and Partnership Capacity Building

Establish a sustainable infrastructure, which includes a competent workforce, standardized business practices and effective use of technology, ensuring that partnerships, systems and processes support the future workforce

### Goal 2: Promote a culture of performance management and quality improvement

Objectives:	Baseline Value (Baseline Date)	Target Value (Target Date)	Lead Entity Responsible	Objective Status	Alignment	
<p><b>4.2.1:</b> By June 30, 2024, increase the number of customer service surveys that are submitted by 75% from 61 to in 2021 to 107 and maintain or increase that number through December 2026</p> <p><b>Data Source:</b> DOH-Indian River Survey Monkey data</p>	61 (2021)	107 (12/30/2026)	Miranda Swanson / QI Committee, PMC	On Track	<p><b>Agency Plans:</b>            AEOP-N/A            APMQI- 6.1            ASP-4.1.A            AWFD- Goal 4            SHIP-N/A</p>	<p><b>CHD Plans:</b>            CHIP-N/A            EOP- N/A            PMQI- Goal 12            WFD- Goal 3</p>

### Goal 3: Cultivate a diverse, competent and engaged workforce

Objectives:	Baseline Value (Baseline Date)	Target Value (Target Date)	Lead Entity Responsible	Objective Status	Alignment	
<p><b>4.3.1:</b> By December 30, 2023, increase the percentage of DOH- Indian River staff that have received cultural competency training from 22% in 2021 to 100% and maintain that level through December 30, 2026</p> <p><b>Data Source:</b> DOH-Indian River Survey Monkey data</p>	22% (2021)	100% (12/30/2026)	Miranda Swanson / QI Committee, PMC	On Track	<p><b>Agency Plans:</b>            AEOP-N/A            APMQI- 4.1            ASP-1.1.2            AWFD- Goal 1            SHIP-Priority 6</p>	<p><b>CHD Plans:</b>            CHIP-N/A            EOP- N/A            PMQI- Goal 12            WFD- Goal 3</p>



## Objectives

### Priority 4: Communication and Partnership Capacity Building

Establish a sustainable infrastructure, which includes a competent workforce, standardized business practices and effective use of technology, ensuring that partnerships, systems and processes support the future workforce

### Goal 3: Cultivate a diverse, competent and engaged workforce

Objectives:	Baseline Value (Baseline Date)	Target Value (Target Date)	Lead Entity Responsible	Objective Status	Alignment	
<p><b>4.3.2:</b> By December 30, 2024, increase the number of staff assessments to determine the level of understanding of health equity from 0 in 2021 to 1</p> <p><b>Data Source:</b> DOH-Indian River Health Equity Plan</p>	0 (2021)	1 (12/30/2024)	Miranda Swanson / QI Committee, PMC	On Track	<p><b>Agency Plans:</b> AEOP-N/A APMQI-2.1 ASP-1.1.2 AWFD- Goal 1 SHIP-Priority 6</p>	<p><b>CHD Plans:</b> CHIP-N/A EOP- N/A PMQI- Goal 12 WFD- Goal 3</p>
<p><b>4.3.3:</b> By December 30, 2025, update the employee recognition policy to increase the number of applications for recognition awards from 0 in 2021 to 2 annually through December 30, 2026</p> <p><b>Data Source:</b> DOH-Indian River PMC Meeting Minutes</p>	0 (2021)	2 (12/30/2026)	Miranda Swanson / QI Committee, PMC	On Track	<p><b>Agency Plans:</b> AEOP-N/A APMQI-2. ASP-4.1A AWFD- Goal 4 SHIP-N/A</p>	<p><b>CHD Plans:</b> CHIP-N/A EOP- N/A PMQI- Goal 12 WFD- Goal 3</p>



## Objectives

### Priority 4: Communication and Partnership Capacity Building

Establish a sustainable infrastructure, which includes a competent workforce, standardized business practices and effective use of technology, ensuring that partnerships, systems and processes support the future workforce

### Goal 4: Promote improved health outcomes through expanded and improved data sharing, access and visualization

Objectives:	Baseline Value (Baseline Date)	Target Value (Target Date)	Lead Entity Responsible	Objective Status	Alignment	
<p><b>4.4.1:</b> By June 30, 2024, promote and expand SDOH programming on DOH-IR webpage to share community resources and services to county residents, increasing the number of pages dedicated to data sharing from 7 to 10</p> <p><b>Data Source:</b> DOH-IR webpage inventory</p>	7 (2022)	10 (6/30/2024)	Mayur Rao / Stacy Brock/ Health Equity, Community Health	On Track	<p><b>Agency Plans:</b> AEOP- II.C.1d APMQI- Goal 1 ASP- 1.1.2 AWFD- Goal 1 SHIP- Priorities 5 &amp; 6</p>	<p><b>CHD Plans:</b> CHIP-Obj. 2.B.2 EOP- N/A PMQI- Goal 11 WFD- 6.1</p>
<p><b>4.4.2:</b> By December 2023, Increase the number of active employee communications platforms from 0 in 2022 to 2 within the calendar year and maintain that rate through December 2026</p> <p><b>Data Source:</b> DOH-Indian River Activity Documentation Log</p>	0 (2022)	2 (12/30/2027)	Miranda Swanson / Julianne Price / Wellness, QI, Health Equity	On Track	<p><b>Agency Plans:</b> AEOP-N/A APMQI-Goal 3 ASP-4.1 AWFD- Goal 2 SHIP-N/A</p>	<p><b>CHD Plans:</b> CHIP- N/A EOP- N/A PMQI- Goal 3 WFD- 2.2</p>

ASP- Agency Strategic Plan

AEOP-Agency Emergency Operations Plan

APMQI-Agency Performance Management and Quality Improvement

CHIP-Community Health Improvement Plan

AWFD-Agency Workforce Development Plan

SHIP- State Health Improvement Plan

EOP-County Health Department Emergency Operations Plan

PMQI-County Health Department Performance Management and Quality Improvement Plan

SP-County Health Department Strategic Plan

WFD-County Health Department Workforce Development PI



# Review Process

Reviews of the strategic plan take place during the DOH-Indian River's Performance Management Council meetings. The council are responsible for measuring, monitoring, and reporting the progress achieved on the goals, strategies, and objectives of the CHIP, Strategic Plan, Workforce Development Plan, and PMQI Plan, also known as foundational plans. Plan reviews are a standing agenda item on the PM Council meeting agenda and a plan review tracking sheet is part of the meeting summary template that is utilized to track review dates.

The Performance Improvement Manager (PIM) tracks progress of all objectives and strategies towards stated goals. Any objective that is falling below anticipated milestones is analyzed by the PIM and the objective's area supervisor to determine the cause(s). The area supervisor recommends curative measures based on the analysis and area leadership or the PIM presents the recommendations to the PMC and asks them to assign an appropriate manager or supervisor to work with staff to improve results.

DOH-Indian River also tracks progress toward reaching the Strategic Plan, Workforce Development Plan and PMQI Plan goals, strategies and objectives using the Performance Improvement Management System (PIMS) by ClearPoint. The system is updated quarterly and reviewed by the PMC after each update.

Foundational plan reports are also included in DOH-Indian River's QI Connection newsletter to ensure communication about progress towards achieving plan objectives and goals, any changes to goals or objectives and any challenges that are impeding advancement. The newsletter is distributed to all employees via email and is also available in print format.

Annually, Indian River submits an Annual Strategic Plan Progress Report assessing progress toward reaching goals, strategies, objectives, and achievements for the year. To the Bureau of Performance Assessment and Improvement (BPAI).



# Summary of Revisions

On the first anniversary of the Strategic plan, the Department of Health in Indian River Performance Management Council will conduct an annual review. The council will discuss progress achieved and obstacles encountered for each objective.

The table below will depict revisions to objectives from the review. Strikethrough indicates deleted text and underline indicates added text.

Date of Review Revisions		
Objective Number	Revisions to Objective	Rationale for Revisions
#	Revision to objective	Rationale for revision
#	Revision to objective	Rationale for revision
#	Revision to objective	Rationale for revision
#	Revision to objective	Rationale for revision



# Environmental Scan Resources

1. [Agency Strategic Plan, 2016-2021](#)
2. [Agency Quality Improvement Plan, 2018-2022](#)
3. [Behavioral Risk Factor Surveillance System \(BRFSS\)](#)
4. [Centers for Disease Control and Prevention](#)
5. [DOH-Indian River Employee SWOT Analysis Survey, 2021](#)
6. [DOH-Indian River Employee Wellness Survey- 2022](#)
7. [DOH-Indian River Health Equity Plan, 2022-2025](#)
8. [DOH-Indian River Quality Improvement Plan, 2017-2023](#)
9. [DOH-Indian River Workforce Development Plan, 2019-2023](#)
10. [Florida Agency for Health Care Administration \(AHCA\)](#)
11. [Florida Community Health Assessment Resource Tool Set \(CHARTS\)](#)
12. [Florida Department of Health Long Range Program Plan, Fiscal Years 2021-2026](#)
13. [Florida Department of Health, Office of Inspector General Annual Report 2022](#)
14. [Florida Department of Health \(FDOH\) website](#)
15. [Florida Department of Health Workforce Development Plan, 2019-2023](#)
16. [Florida Department of Law Enforcement \(FDLE\) website](#)
17. [Florida Environmental Public Health Tracking](#)
18. [Florida State Health Improvement Plan, 2022](#)
19. [Florida Middle School Health Behavior Survey Results, 2021](#)
20. [Florida Strategic Plan for Economic Development, 2018-2023](#)
21. [Florida Vital Statistics Annual Report,](#)
22. [Healthy People 2030 / health.gov](#)
23. [Indian River County Collaborative Community Health Needs Assessment 2020](#)
24. [Indian River County Community Health Improvement Plan, 2022](#)
25. [Indian River County Snapshot Report, 2021](#)
26. [NACCHO Culture of Quality Survey, 2021](#)
27. [Public Health Accreditation Board](#)
28. [Public Health Workforce Interests and Needs Survey \(PH WINS\), 2022](#)
29. [United States Census Bureau Website](#)



# Strategic Priorities Strategy Map

PHAB 5.3.2.A.b-c: The strategic plan must include the health department’s strategic priorities and goals. The health department’s goals and objectives must be measurable and with time-framed targets (expected products or results).

## Priority 1: Healthy Thriving Lives

### Goal #1 Enhance Health Promotion Activities

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**OBJECTIVE 1.1.1** By January 30, 2023, increase the number of nutrition education workshops from six in 2022 to six per month through December 2025 72 per year

**Key Action Steps/Strategies:**

- Work with SRAQ to provide nutrition education to congregate meal clients
- Partner with Head Start to provide nutrition education classes
- Include Nutrition education as part of workplace wellness activities

**OBJECTIVE 1.1.2** By June 30, 2026, increase the number of implemented Workplace Wellness initiatives from 2 in 2022 to 5

**Key Action Steps/Strategies:**

- Update and Activate Microsoft Teams as source of Wellness information
- Develop a framework for workplace wellness and implement the program

### Goal #2 Enhance Prevention Activities

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**OBJECTIVE 1.2.1:** By December 30, 2026, partner with community organizations to increase the number of promoted and conducted health screening events from 8 in 2022 to a total of 36

**Key Action Steps/Strategies:**

- Partner with local hospitals and medical care organizations to schedule events’
- Increase access to WIC services within communities

**OBJECTIVE 1.2.2** By September 30, 2026, decrease the age adjusted melanoma incidence rate from 45.4 per 100,000 population (2016-18) to 40.86

**Key Action Steps/Strategies:**

- Promote and participate in an awareness campaign
- Increase opportunities for screening

**OBJECTIVE 1.2.3** By December 30, 2026, decrease the prostate cancer death rate per 100,000 population from 21.3 (2018-20) to 19.4

**Key Action Steps/Strategies:**

- Promote and participate in an awareness campaign
- Coordinate screening at community outreach events

**OBJECTIVE 1.2.4** By December 30, 2026, increase the number of individuals in Indian River County certified for Mental Health First Aid (MHFA) from 600 in August 2022 to 1200

**Key Action Steps/Strategies:**

- Participate in Mental Health Collaborative program of training
- Promote MHFA program inside and outside of DOH



Priority 2: Access to Equitable Care

**Goal #1 Improve public health in rural, minority and underserved communities**

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**OBJECTIVE 2.1.1** By December 30, 2023, increase the number of community partners who receive targeted, annual health equity communications from 0 (2021) to 20 and maintain through December 30, 2026  
**Key Action Steps/Strategies:**

- Identify organizations and events that would be receptive to communication
- Create Health Equity promotional materials and presentations
- Include Health Equity content in interactions with clients

**OBJECTIVE 2.1.2** By December 30, 2025, Enhance interagency and community collaboration by increasing the size of the Health Equity Coalition, from 54 (2022) to 75  
**Key Action Steps/Strategies:**

- Identify and interact with local agencies
- Provide Health Equity promotional materials to local agencies
- Involve local agencies in Health Equity educational activities

**Goal 2 Identify and implement strategies to minimize disparities in social determinants of health**

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**OBJECTIVE 2.2.1** By December 30, 2025, increase the percentage of prenatal clients enrolled in WIC in their 1st trimester from 53.54% in March 2021 to 63.54%  
**Key Action Steps/Strategies:**

- Increase client contacts
- Increase access to services within communities

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Priority 3: Emerging Health Threats

**Goal #1 Reduce the transmission of communicable diseases**

---

**OBJECTIVE 3.1.1** By December 30, 2025, increase the percentage of adults who received a flu shot in the past year to 40% from 36.3% in 2019  
**Key Action Steps/Strategies:**

- Promote and participate in an education campaign
- Coordinate with local partners to provide vaccination events

**OBJECTIVE 3.1.2** By December 30, 2025, increase the percentage of children in public and private kindergarten certified as meeting vaccination requirements to 95% from 87.8% in 2021-22  
**Key Action Steps/Strategies:**

- Promote and participate in an education campaign through WIC, NFP, Head Start, DOH school health nurses, day care facilities.
- Provide Health Equity promotional materials to local agencies
- Coordinate with local provides to provide vaccinations





Priority 3: Emerging Health Threats (cont'd)

Goal #1 Cont'd Reduce the transmission of communicable diseases

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OBJECTIVE 3.1.3 By December 30, 2026, increase the percentage of patients with PrEP indications on a prescribed regimen from 25% in 2022 to 75%

Key Action Steps/Strategies:

- Increase client interaction and follow up
- Promote and participate in an education campaign

OBJECTIVE 3.1.4 Through December 30, 2026, maintain the percentage of people linked to care within one month after HIV infection diagnosis at 100% from year 2021

Key Action Steps/Strategies:

- Continue HIV/AIDS outreach events
- Continue client follow up and linkage to care

Goal #2 Increase and enhance partnership with external preparedness and response entities

---

OBJECTIVE 3.2.1 By December 30, 2027, increase the number of preparedness and response organizations that are engaged with the Community Health Improvement/ Health Equity Coalition from 1 in 2022 to 4

Key Action Steps/Strategies:

- Promote and expand the DOSE program
- Expand collaborations formed for Special Needs Shelter
- Promote training of first responders in MHFA

Priority 4: Communication and Partnership Capacity Building

Goal #1 Enhance interagency and community collaboration

---

OBJECTIVE 4.1.1 By December 30, 2025, increase the number of individuals accessing information about DOH services and programs via DOH-Indian River website by 10% from 240,380 page visits per year in 2021 to 264,418

Key Action Steps/Strategies:

- Evaluate current website content for ways to improve
- Increase variety of information and frequency of updates

OBJECTIVE 4.1.2 By December 30, 2027, increase the number of local media offerings in DOH-IR priority public health issues and services from 0 in 2021 to a total of 18

Key Action Steps/Strategies:

- Utilize radio time and print outlets
- Provide community partners with information that is tailored to their organizations needs and interests



Priority 4: Communication and Partnership Capacity Building (cont'd)

**Goal #2 Promote a culture of performance management and quality improvement**

**OBJECTIVE 4.2.1** By June 30, 2024, increase the number of customer service surveys that are submitted by 75% from 61 in 2021 to 107 and maintain or increase that number through December 2026

**Key Action Steps/Strategies:**

- Use multiple methods to distribute surveys including passive and active means
- Continue to provide internal feedback on customer responses

**Goal #3 Cultivate a diverse, competent and engaged workforce**

**OBJECTIVE 4.3.1** By December 30, 2023, increase the percentage of DOH- Indian River staff that have received cultural competency training from 22% in 2021 to 100% and maintain that level through December 30, 2026

**Key Action Steps/Strategies:**

- Create an approved list of training choices
- Assign yearly training
- Track completion rates

**OBJECTIVE 4.3.2** By December 30, 2024, increase the number of staff assessments to determine the level of understanding of health equity from 0 in 2021 to 1

**Key Action Steps/Strategies:**

- Identify, evaluate and chose an assessment
- Educate staff on the process and importance of participation
- Administer the assessment
- Evaluate results and communicate to staff

**OBJECTIVE 4.3.3** By December 30, 2025, update the employee recognition policy to increase the number of applications for recognition awards from 0 in 2021 to 2 annually through December 30, 2026

**Key Action Steps/Strategies:**

- Review existing policy
- Research incentives
- Submit policy revisions to QI committee and PMC for approval

**Goal #4 Promote improved health outcomes through expanded and improved data sharing, access and visualization**

**OBJECTIVE 4.4.1** Promote and expand SDOH programming on DOH-IR webpage to share community resources and services to county residents, increasing the number of pages dedicated to data sharing from 7 to 10 by June 30, 2024

**Key Action Steps/Strategies:**

- Evaluate current website listings- identify gaps in information
- Develop content for approval and submit for posting

**OBJECTIVE 4.4.2** By December 30, 2023, increase the number of active employee communications platforms from 0 in 2022 to 4 within the calendar year and maintain those platforms through December 2026

**Key Action Steps/Strategies:**

- Revamp and activate existing wellness Teams site
- Rehab bulletin boards for more effective messaging
- Research effective email communication methods and apply
- Establish regular staff meetings