

**Brevard CHD Alignment with
Agency Strategic Plan**

Agency Strategic Plan Goal	Agency Strategic Plan Strategy No.	Agency Strategic Plan Strategy	Objective, aligned to State Strategy NOTE: Target dates for strategic objectives must be no later than Dec. 31, 2015
Protect the Population from health threats	1.1.1	Prevent and control infectious disease	By Dec. 31, 2015, increase the percentage of two-year-olds who are fully immunized from 85.7% (2008) to 90%. STATE: 86.6% (2005) to 90%.
			By Dec. 31, 2015, maintain the percentage of two-year-olds who are FL DOH - Brevard clients who are fully immunized above 95%. Baseline for 2012 98.7%
			By Dec. 31, 2015, maintain the percentage of kindergartens fully immunized in Brevard above 95%. Baseline for 2012 95.7%
			By Dec. 31, 2015, maintain the percentage of 7th graders fully immunized in Brevard above 95%. Baseline for 2012 98%
			By Dec 31, 2015, reduce the TB case rate to 1/100,000. Baseline for 2012 1.8
			By Dec. 31, 2015, maintain 100% completion of TB patients completing therapy - all cases being treated to cure. Baseline for 2012 100% (snapshot reports less than that but one pt died and could not complete tx)
			By Dec 31, 2015, maintain the infectious syphilis rate below 1/100,000. Baseline for 2012 0.7
			By Dec 31,2015, reduce the gonorrhea rate to <50/100,000. Baseline for 2012 60.7
			By Dec 31,2015, reduce the chlamydia rate to <250/100,000. Baseline for 2012 285.5
			By Dec 31,2015, continue to provide primary HIV/AIDS prevention services thorough outreach. Baseline for 2012 42 classes and 1255 reached
			By Dec 31,2015, reduce the new HIV cases to 10/100,000. Baseline for 2012 11.5
			By Dec 31,2015, reduce the AIDS case rate to 5/100,000. Baseline for 2012 7.4

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Improve maternal and child health	1.3.2	Reduce infant mortality.	By Dec 31, 2015, continue providing universal access to maternal services - regardless of ability to pay. 1) Uninsured have increased to almost 20% of clients 2) HD provides between 25-30% of all prenatal care in the county and is the only provider of uninsured care which makes up >75% of maternal high-risk
Maximize funding to accomplish the public health mission	2.2.1	Maximize Medicaid and other third party revenue to help county health departments and Children's Medical Service providers to retain the infrastructure necessary to meet the public health needs of their community.	By Dec 31, 2015, continue to provide needed clinical services we are in a position to provide based on community need and funding. 1) Adjust to primary care market shift (HMO's) and cost base reimbursement. 2) Improve dental access to adults 3) Family Planning for teens and specialty support services (colposcopy and vasectomy) 4) STD clinical services identify and treat 40% of counties morbidity 5) Immunization access services to adults and children
Assure access to health care	3.1.1	Increase access to care for underserved populations.	By Dec. 31, 2015, maintain immunization services access to all three areas of the county for high-risk adults needing vaccination.
			By Dec. 31, 2015, continue providing access to HIV testing services above 8,000 tests/y. Baseline for 2012 8,549.
			By Dec. 31, 2015, continue to provide STD treatment services at the CHD. Baseline for 2012 is 38.3% of countywide dz identification and 5,193 clinical visits

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Attract, recruit, and retain a competent and credentialed workforce.	4.1.2	Provide trainings and resources that support and develop current public health employees.	By Dec 31, 2015, continue to work to improve salaries of HD employees. Brevard is 15% below other counties in salary and almost 60% of staff are below the 50th percentile of their respective job class despite having a longevity above the average
			By Dec 31 2015, improve the work environment through facilities management. Complete the Viera project conference and education center as well as permanent home for HIV/AIDS staff. Preparation for Melbourne clinic move as the county lease expires in 2016.