

**Seminole CHD Alignment with  
Agency Strategic Plan**

Agency Strategic Plan Goal	Agency Strategic Plan Strategy No.	Agency Strategic Plan Strategy	Department of Health - Seminole County
Protect the Population from health threats	1.1.1	Prevent and control infectious disease	1.1.3: By Dec. 31, 2015, reduce the number of new HIV infections in Seminole from 7.9 (2009) per year to 5.0 per year with particular focus on the elimination of racial and ethnic disparities in new HIV infections.
Protect the Population from health threats	1.1.2	Prevent and reduce illness, injury and death related to environmental factors	1.1.4: By Dec. 31, 2015, reduce the bacterial STD case rate among females 15-34 years of age from 2,016.6 per 100,000 (2010) to 1800 per 100,000.
Protect the Population from health threats	1.1.2	Prevent and reduce illness, injury and death related to environmental factors	1.1.5: By Dec. 31, 2015, reduce the TB case rate from 2.4 per 100,000 (2010) to 1.0 per 100,000.
Protect the Population from health threats	1.1.2	Prevent and reduce illness, injury and death related to environmental factors	1.1.7: By Dec. 30, 2013, and annually ensure that 90% of illness outbreaks associated with a regulated facility have an environmental assessment or inspection done within 48 hours of initial outbreak report. □
Protect the Population from health threats	1.1.3	Minimize loss of life, illness, and injury from natural or man-made disasters	
Protect the Population from health threats	1.1.4	Prevent and reduce intentional and unintentional injuries.	1.1.6: By Dec. 31, 2015, reduce the rate of deaths from all causes of external injury among Seminole County resident children ages 0–14 from 6.0 per 100,000 to 5.0 per 100,000.
Protect the Population from health threats	1.1.4	Prevent and reduce intentional and unintentional injuries.	1.2.1 By Dec. 31, 2015, decrease the amount of motor vehicle crash deaths from 11% to 8.5% by 2015.
Protect the Population from health threats	1.1.4	Prevent and reduce intentional and unintentional injuries.	1.2.2. Reduce excessive drinking from 20% to 15% by 2015.
Reduce chronic disease morbidity and mortality	1.2.1	Increase the proportion of adults and children who are at a healthy weight.	2.1A By Dec. 31, 2015, decrease the percentage of adults who are overweight from 45.0% (2010) to 38.4% (healthy weight is BMI of 18.5 to 24.9).
Reduce chronic disease morbidity and mortality	1.2.1	Increase the proportion of adults and children who are at a healthy weight.	2.1B By Dec. 31, 2015, decrease the percentage of WIC children aged 2 and above who are overweight or at risk of overweight from 26.2% (2010) to 24.2%.
Reduce chronic disease morbidity and mortality	1.2.2	Reduce illness, disability, and death related to tobacco use and secondhand smoke exposure.	2.2A By Dec. 31, 2015, reduce current smoking rates among adults from 18% (2010) to 15%.

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Reduce chronic disease morbidity and mortality	1.2.2	Reduce illness, disability, and death related to tobacco use and secondhand smoke exposure.	2.2B By Dec. 31, 2015, reduce current cigarette use among youth, ages 11-17, from 7.5% (2010) to 6.5%.
Reduce chronic disease morbidity and mortality	1.2.2	Reduce illness, disability, and death related to tobacco use and secondhand smoke exposure.	2.2C By Dec. 31, 2015, reduce the percentage of youth, ages 11-17, who were exposed to secondhand smoke in a room or car during the past 7 days from 39.1% (2010) to 35.0%.
Reduce chronic disease morbidity and mortality	1.2.2	Reduce illness, disability, and death related to tobacco use and secondhand smoke exposure.	2.2D By June 30, 2015, reduce the percentage of youth, ages 11-17, who use tobacco products *other than cigarettes from 10.6% (2010 Florida Youth Tobacco Survey) to 8.6%.*Other tobacco products include smokeless tobacco, snus, and cigars □
Improve maternal and child health	1.3.1	Reduce infant mortality.	3.1A By Dec. 31, 2015, reduce the infant mortality rate from 6.8 (2011) per 1,000 live births to 5.8.
Improve maternal and child health	1.3.1	Reduce infant mortality.	3.1B By Dec. 31, 2015, reduce the black infant mortality rate from 17.1 (2011) per 1,000 live births to 12.0.
Improve maternal and child health	1.3.2	Meet special health care needs of children.	
Improve efficiency and effectiveness	2.1.1	Use information technology and systems to efficiently support disease prevention, intervention and epidemiological activities.	5.1A By June 30, 2013, deploy DOH rebranding to support unified messaging
Improve efficiency and effectiveness	2.1.1	Use information technology and systems to efficiently support disease prevention, intervention and epidemiological activities.	5.1B By Dec. 31, 2015, complete 95% of objectives in the DOH Strategic Communications Plan.
Improve efficiency and effectiveness	2.1.1	Use information technology and systems to efficiently support disease prevention, intervention and epidemiological activities.	5.1C: By Dec. 31, 2015, evaluate internal and external communications tools and resources.
Improve efficiency and effectiveness	2.1.2	Use public health information technology and systems to efficiently improve business practices	4.2B: By July 31, 2014, the DOH Seminole will establish a mechanism for sharing data and information about community assessment work across organizations.

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Improve efficiency and effectiveness	2.1.3	Adopt certified electronic health record software	4.5A: By Dec. 1, 2013, 100% electronic health records will be implemented in available departments and programs.
Improve efficiency and effectiveness	2.1.3	Adopt certified electronic health record software	4.5B: By July 1, 2014, FDOH, Seminole County will see a 40 % increase in reimbursement because of the electronic health records system.
Improve efficiency and effectiveness	2.1.4	Connect agency providers and electronic health record systems in a network that consists of a state-level Health Information Exchange, Direct Secured Messaging and local health information exchanges and gateways	
Improve efficiency and effectiveness	2.1.5	Implement tools, processes and methods that support accountability and provide transparency in DOH administrative management systems.	4.4D: By July 1, 2014, FDOH, Seminole County will deploy an interactive intranet to improve internal education and communication.
Improve efficiency and effectiveness	2.1.5	Implement tools, processes and methods that support accountability and provide transparency in DOH administrative management systems.	4.4E: By July 1, 2013, FDOH, Seminole County will implement TRAIN, the new employee training system.
Improve efficiency and effectiveness	2.1.5	Implement tools, processes and methods that support accountability and provide transparency in DOH administrative management systems.	4.4F: By December 31, 2013, FDOH, Seminole County will have a fully functional Sharepoint site.

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Agency Strategic Plan Goal	Agency Strategic Plan Strategy No.	Agency Strategic Plan Strategy	Department of Health - Seminole County
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.	4.5C: By June 1, 2015, the Executive Leadership Team will validate 100% non-public health essential programs and services for sustainability.
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.	5.2C: By July 1, 2014, FDOH, Seminole County will integrate priorities into annual budget process to ensure priorities have necessary funding/resources.
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.	5.2E: By July 1, 2014, FDOH, Seminole County will seek additional resources (internal and external) to impact community health priorities.
Maximize funding to accomplish the public health mission	2.2.2	Review and update fee policies and fee schedules.	5.2C: By July 1, 2014, FDOH, Seminole County will integrate priorities into annual budget process to ensure priorities have necessary funding/resources.
Promote a culture of organizational excellence.	2.3.1	Collect, track and use performance data to inform business decisions and continuously improve.	4.5H: By December 31, 2013, the Management Advisory Council (MAC) members will prioritize selected areas for improvement and implement process changes.
Promote a culture of organizational excellence.	2.3.2	Maintain a sustainable performance management framework.	3.2G: Provide equal access to culturally and linguistically competent care.
Promote a culture of organizational excellence.	2.3.2	Maintain a sustainable performance management framework.	4.4A: Identify and promote workforce cross training opportunities for dental, immunizations, family planning, STD, refugee, and prenatal.

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Promote a culture of organizational excellence.	2.3.2	Maintain a sustainable performance management framework.	4.5B: By July 1, 2014, 25% of the select exempt service (SES), career service (CS) and other personnel service (OPS) employees will be cross-trained.
Promote a culture of organizational excellence.	2.3.3	Develop, implement and sustain integrated quality improvement processes throughout organizational practice, programs, processes and interventions.	4.6: Develop, implement and sustain integrated quality improvement processes throughout organizational practice, programs, processes and interventions.
Promote a culture of organizational excellence.	2.3.3	Develop, implement and sustain integrated quality improvement processes throughout organizational practice, programs, processes and interventions.	4.6A: By June 30, 2014, and annually, 95% of activities identified in the Agency Quality Improvement Plan are complete based on established schedule.
Promote a culture of organizational excellence.	2.3.3	Develop, implement and sustain integrated quality improvement processes throughout organizational practice, programs, processes and interventions.	4.6B: By April 2014, complete two quality improvement evaluations of programs.
Optimize communications.	2.4.1	Develop, implement and improve internal and external communication strategies and plans.	4.4D: By July 1, 2014, FDOH, Seminole County will deploy an interactive intranet to improve internal education and communication.
Promote an integrated public health system.	3.1.1	Implement and link health improvement planning at state and local levels.	4.1A: By March 31, 2015, DOH-Seminole will have produced an update community health improvement plan.
Promote an integrated public health system.	3.1.1	Implement and link health improvement planning at state and local levels.	4.1B: By September, 2013, DOH-Seminole health improvement plan will be aligned with the state.
Promote an integrated public health system.	3.1.2	Integrate planning and assessment processes to maximize partnerships and expertise of a community in accomplishing its goals.	4.2A: By Dec. 31, 2013, increase public health presence in the local planning process by ensuring all CHDs will attend a minimum of one county planning board, planning review committee, or regional planning meeting.

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Promote an integrated public health system.	3.1.2	Integrate planning and assessment processes to maximize partnerships and expertise of a community in accomplishing its goals.	4.2B: By Dec. 31, 2014, the DOH-Seminole will establish a mechanism for sharing data and information from the local county health departments about community assessment work across organizations.
Promote an integrated public health system.	3.1.2	Integrate planning and assessment processes to maximize partnerships and expertise of a community in accomplishing its goals.	4.3A: By Dec 31, 2013, DOH-Seminole will forge partnerships with Housing and Urban Development and other local, regional and federal funding agencies to develop a model program for improving housing conditions for vulnerable populations
Promote an integrated public health system.	3.1.2	Integrate planning and assessment processes to maximize partnerships and expertise of a community in accomplishing its goals.	5.2A: By July 1, 2014, the Health Officer will engage with the Healthy Seminole Committee and partners to promote population health in Seminole County.
Promote an integrated public health system.	3.1.2	Integrate planning and assessment processes to maximize partnerships and expertise of a community in accomplishing its goals.	5.2B: By 2015, the Health Officer will work with the Healthy Start Coalition to be self-sustaining. <input type="checkbox"/>
Promote an integrated public health system.	3.1.2	Integrate planning and assessment processes to maximize partnerships and expertise of a community in accomplishing its goals.	5.2C: By December 31, 2013, FDOH, Seminole County will identify essential services that align with the Community Health Assessment.
Promote an integrated public health system.	3.1.2	Integrate planning and assessment processes to maximize partnerships and expertise of a community in accomplishing its goals.	5.2E: By July 1, 2014, FDOH, Seminole County will seek additional resources (internal and external) to impact community health priorities.
Promote an integrated public health system.	3.1.3	Support local efforts to revitalize communities.	4.2A: By Dec. 31, 2014, increase public health presence in the local planning process by attending a minimum of one county planning board, planning review committee, or regional planning meeting.

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Assure access to health care	3.2.1	Increase access to care for underserved populations.	3.2E: By Dec. 31, 2014 increase access to care for underserved populations by 10%.
Assure access to health care	3.2.1	Increase access to care for underserved populations.	3.2B: By Jan. 1, 2014, and annually, conduct a local safety net primary health care provider assessment.
Assure access to health care	3.2.1	Increase access to care for underserved populations.	3.2F: By July 1, 2014, DOH-Seminole in conjunction with local coalitions will develop a written plan to address the county's safety net primary health care needs. The plan should address primary care and oral health care provider roles in the community based on the assessment completed.
Assure access to health care	3.2.2	Provide equal access to culturally and linguistically competent care.	3.2G: Provide equal access to culturally and linguistically competent care.
Expediently license all healthcare professionals who meet statutorily mandated standards of competency.	3.3.1	Provide an efficient licensure process that meets statutory requirements.	
Attract, recruit, and retain a competent and credentialed workforce.	4.1.1	Implement a competency-based framework for recruitment and training.	4.4C: By June 30, 2014, train a culturally and linguistically workforce.
Attract, recruit, and retain a competent and credentialed workforce.	4.1.2	Provide trainings and resources that support and develop current public health employees.	4.4A: Identify and promote workforce cross training opportunities for dental, immunization, family planning, STD, refugee, and prenatal.

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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.	4.4B: By July 1, 2014, 25% of the select exempt service (SES), career service (CS) and other personnel service (OPS) employees will be cross-trained.
Ensure partnerships, systems and processes to support the future workforce.	4.2.1	Develop, sustain and improve an Agency Workforce Development Plan to ensure continuity of competent and credentialed workforce.	4.4A: Identify and promote workforce cross training opportunities for dental, immunization, family planning, STD, refugee, and prenatal.
Ensure partnerships, systems and processes to support the future workforce.	4.2.1	Develop, sustain and improve an Agency Workforce Development Plan to ensure continuity of competent and credentialed workforce.	4.4C: By June 30, 2014, train a culturally and linguistically workforce.
Ensure partnerships, systems and processes to support the future workforce.	4.2.1	Develop, sustain and improve an Agency Workforce Development Plan to ensure continuity of competent and credentialed workforce.	4.4B: By July 1, 2014, 25% of the select exempt service (SES), career service (CS) and other personnel service (OPS) employees will be cross-trained.