



Community Health Improvement Plan Annual Progress Report, 2018

Florida Department of Health in Orange County

March 2018

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Introduction

This is the annual review report for the 2016 – 2020 Orange County Community Health Improvement Plan (CHIP). The activities and collaborative efforts of the Florida Department of Health in Orange County and community partners will be reflected within the report. This document will serve as a progress review of the strategies that were developed and the activities that have been implemented, as well as an illustration of accomplishments. While CHIP is a community driven and collectively owned health improvement plan, the Florida Department of Health in Orange County is charged with providing administrative support, tracking and collecting data, and preparing the annual review report.

Meetings were held at the Department of Health with all CHIP participants in previous years; however, this year's CHIP communication was only help via informal virtual communication (emails, dashboard entries). CHIP communication between DOH and community members were based on providing updates and process documentation on the work/activity they have been doing in their organizations. Other communication and meetings regarding CHIP such as, revision and extension, have been conducted under the Performance Management Council Meetings.

Overview of the Community Health Improvement Plan (CHIP)

On November of 2016, the Department of Health in Orange County convened the CHIP Planning Team. The Planning Team facilitated the CHIP process by using the National Association of City and County Health Officials Mobilizing for Action through Planning and Partnership (MAPP) strategic planning model. Subject matter experts from across a diverse group of partners conducted the four assessments suggested by the MAPP process. Individually, the assessment yielded in-depth analyses of factors and forces that impact population health. Taken together, the assessment findings contribute to a comprehensive view of health and quality of life, in Orange County.

The Planning Team developed findings and presented these findings to local community partners from different agencies. Community partners comprised a diverse leadership group representing 30 agencies and organizations in Orange County. CHIP participants set priorities through a facilitated consensus process by looking for cross-cutting strategic issues that emerged from the four assessments. CHIP Participants reached consensus on three strategic issue areas: Chronic Disease/Causes of Health, Access to Care and Built Environment. Participants worked and brainstormed Goal, objectives and activities by groups within each strategic issue based on their expertise. See Table below for Strategic Issue Areas with their goals, developed by a workgroup of subject matter experts.

A dashboard was purchased and created by DOH-Orange Office of Performance and Quality Improvement (OPQI) to track the progress of the implementation plan. This cloud based software allows each CHIP participants to have their individual username and password, to log in submit updates on their activities, and view progress on the entire plan. It an interactive way for partners to collaborate throughout the CHIP process. Updates are submitted on a quarterly basis. Meetings are also held, as a group and individually, for continuous assessing and revision of the plan.

STRATEGIC ISSUE AREA	GOAL
<i>Chronic Diseases/ Cause of Death</i>	Reduce chronic conditions through education/prevention and decrease the causes of death in our focus areas through health prevention activities.
Access to Care	Increase Access to Primary Care (including behavioral, dental & maternal health) through asset mapping, linkage, partnerships, health information exchange, and community engagement.
Built Environment	Identify and leverage existing community resources that can equitably improve, access to healthy foods, transportation and connectivity.

Summary of CHIP Annual Review Meeting

CHIP had three times during the year. It was first reviewed by the DOH-Orange Performance Management Council to approve a change request form to only monitor the objectives of the CHIP instead of the objectives and activity. The second meeting reviewed the progress of the CHIP objectives; challenges and successes were discussed. The third review was based on changes in the state level to change the departments strategic plan, and CHIP/CHA from a three-year cycle to a five-year cycle. This is in hopes for the strategic plan and the CHIP to better align with each other moving forward. These meetings were only help with the Performance Management team and other DOH staff, community partners were not involved.

Strategic Issue Area #1: Chronic Conditions/Causes of Death

Antibiotics and similar drugs, together called antimicrobial agents, have been used for the last 70 years to treat patients who have infectious diseases. Since the 1940s, these drugs have greatly reduced illness and death from infectious diseases. However, these drugs have been used so widely and for so long that the infectious organisms the antibiotics are designed to kill have adapted to them, making the drugs less effective.

Goal: Reduce chronic conditions through education/prevention, and decrease the causes of death in our focus areas through health prevention activities.

Key Partners: DOH-Orange, FSU College of Medicine, Florida Hospital, UF/IFAS Extension, Orlando Health

Why this is important to our community: Chronic Diseases are a major risk factor of cause of death in the community. Antibiotic resistance, asthma, and chronic diseases interventions are needed to reduce rates.

Objective	Indicator	Current Level	Target	Status	Explanation of Status*
Increase the number of Hospital-Acquired Infection (HAI) collaboration projects to at least 5 by December 2019	# of Hospital-Acquired Infection (HAI) collaboration projects	4	5		The activities in this objective are progressing as desired and is on track to achieving ultimate results.
Decrease by 3% the prevalence of obesity among Orange County residents by December 2019 through culturally and linguistically appropriate nutrition education, physical activity and food access efforts (measured by reductions in Hb A1c and BMI)	% of OC residents with Hb A1c levels in "normal range" % of OC residents with BMI levels in "normal range"	No Data Available at this time	3%		The activities in this objective are progressing as desired and is on track to achieving ultimate results.

Decrease by 3% emergency department use for asthma by in Orange County by December 2019	# of Emergency Department visits due to asthma-related events	No Data Available at this time	3%		The activities in this objective are progressing as desired and is on track to achieving ultimate results.
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Strategic Issue Area #2: Access to Care

Limited access to health care services, including behavioral and oral health care, may contribute to poor health outcomes and high health care costs.

Goal: Increase Access to Primary Care (including behavioral, dental & maternal health) through asset mapping, linkage, partnerships, health information exchange, and community engagement.

Key Partners: DOH-Orange, Shepard's Hope, PCAN Network

Why this is important to our community:					
An explanation of why this is important to the community should go here (in narrative form)					
Objective	Indicator	Current Level	Target	Status	Explanation of Status
Create an asset map to include behavioral, dental, maternal health, providers, and services	Create one map to be distributed to the community	No data is available at this time	1		A list of community assets has been compiled and the survey for distribution has been completed and sent to about 50% of the organizations. There has not been any progress in this objective. There is object is in threat of not being completed.
Increase education/awareness to health services by April 15, 2018	Increase the # of efforts to educate about services per month	No data Available at this time	1 per month		This objective is in threat of not being completed.
Reduction in preventable conditions (mental health & Chronic disease) due to their inability to access care services by December 2019	% or # decrease in Mental Health & Chronic Disease rates	No data available at this time	3%		This objective is in threat of not being completed

Strategic Issue Area #3: Built Environment

Transportation is a commonly identified barrier in public health. Several studies have found transportation to be a barrier to prenatal care, preventative medical visits, cancer care, and chronic disease management, and access to healthy food establishments. Working together as a community to improve transportation options will provide a positive outcome to the health community residents especially those in a more rural, low income community.

Goal:

Key Partners: DOH-Orange, LYNX, Metro Plan, East Central Florida Regional Planning Council, Second Harvest Food Bank, Winter Park Health Foundation

Why this is important to our community:

Multimodal transportation is a barrier in many low-income communities. Assessing, evaluating and determining action plans as a community to improve multimodal options to certain communities in the county is of tremendous benefit to health and wellbeing of residents.

Objective	Indicator	Current Level	Target	Status	Explanation of Status
Ensure access to multi-modal options by providing equitable transportation alternatives to and within rural and urban areas across diverse income communities by December 2019	% Increase multi-modal options	No data is available at this time	25%		The activities in this objective are progressing as desired and is on track to achieving ultimate results.
Champion policies and partnerships that will increase availability to low cost healthy foods across communities by December 2019	% increase in low cost healthy foods	No data Available at this time	25%		The activities in this objective are progressing as desired and is on track to achieving ultimate results.

* Status indicators are as follows:

-  = Little to no movement towards objective target
-  = some progress towards meeting the objective target
-  = reached or surpassed objective target

Revisions

No revisions were made on the CHIP objective; however, the only revision made was on extending the CHIP time period from 2016-2019 to 2016-2020. This revision was approved by the DOH-Orange Performance Management Council. Documentation of the revision can be found in the Change request form.

Accomplishments

Goal	Objective	Accomplishment
<p>1. Reduce chronic conditions through education/prevention and decrease the causes of death in our focus areas through health prevention activities.</p>	<p>Decrease by 3% emergency department use for asthma in Orange County by December 2019</p>	<p>The hospital provided \$20,545 worth of equipment to aid in services to the community. The program has been very successful un partnering with pharmaceutical companies. These companies have provided over \$2.8 million in meds.</p>
<p>How it's important for our community: Many times programs and services are not successful because of lack of funding or supplies. The generous amount of resources received by this program allowed them to better engage in secondary and tertiary preventative efforts to reduce COPD and respiratory disease. The accomplishment has allowed an increase in patient enrollment (97.44%) in pharmaceutical support programs, therefore, increasing access to services to patients with respiratory disease.</p>		
<p>2. Identify and leverage existing community resources that can equitably improve, access to healthy foods, transportation and connectivity</p>	<p>Champion policies and partnerships that will increase availability to low cost healthy foods across communities by December 2019</p>	<p>Community outreach and community engagement are an essential part in community development. Second Harvest Food Bank has done an incredible job in keeping the community outreach and community engagement momentum. They have engaged in community conversations with various entities to increase access to healthy foods, such as supporting school markets and Fresh Markets at the local public schools and engaging with Uber to refer patients to Healthy Pantry Networks. Second Harvest has always maintained a good reputation in being heavily involved in the community and developing sustainable partnerships.</p>
<p>How is it important to your community? Without access to healthy foods, a nutritious diet and good health are not obtainable. There are several food deserts in the community and residents who can't afford healthy foods, therefore the continuous engagement and conversations about supporting, implementing and expanding access to healthy foods is of great important for the overall all health and well-being of the community.</p>		

Conclusion

The CHIP serves as a roadmap for a continuous health improvement process for the local public health system, by providing a framework for the chosen strategic issue areas. It is not intended to be an exhaustive and static document. We will evaluate progress on an ongoing basis through quarterly CHIP implementation reports and quarterly discussion by community partners. We will conduct annual reviews and revisions based on input from partners and create CHIP annual reports each year by March. The CHIP will continue to change and evolve over time as new information and insight emerge at the local, state and national levels.

By working together, we can have a significant impact on the community's health, improving where we live, work and play and realize the vision of a healthier Orange County

Comprehensive List of Community Partner

- 1) American Lung Association
- 2) Center for Change
- 3) Children's Home Society of Florida
- 4) Community Coordinated Care for Children, Inc.
- 5) Early Learning Coalition of Orange County
- 6) East Central Florida Regional Planning Council
- 7) Florida Department of Health in Orange County
- 8) Florida Department of Transportation
- 9) Florida Hospital
- 10) Florida State University College of Medicine
- 11) Health Council of East Central Florida
- 12) Heart of Florida United Way
- 13) Healthy Start Coalition of Orange County
- 14) Interfaith Council of Central Florida
- 15) LYNX
- 16) Metro Plan Orlando
- 17) National Association of Chronic Disease Directors
- 18) Orange County Drug Free Coalition
- 19) Orange County Government
- 20) Orange County Head Start
- 21) Orange County Public Schools
- 22) Orlando Health
- 23) Primary Care Access Networks Inc.
- 24) Second Harvest Food Bank
- 25) Shepherds Hope
- 26) Sustainable Synergy
- 27) UF/IFAS Extension
- 28) University of Central Florida
- 29) Visionary Vanguard Group
- 30) Winter Park Health Foundation

Florida Department of Health in Orange County
Performance Management Council Meeting
Meeting Location: Central Gardenia

August 21, 2018

9:00 – 11:00 a.m.

Call-in number: 1-888-670-3525

Passcode: 766-870-4770#



AGENDA

Purpose:

Monthly Performance Management Council meeting to monitor implementation of local plans/projects, review and assign action items, and recognize practices with improved performance.

Topic

Lead

Welcome/Call to Order

Kevin Sherin

Review of Minutes

Kevin Sherin

Review Action Items

Kevin Sherin

Progress Reports

- QI Plan Updates
- Strategic Plan Updates
- PMC Score Card FY17-18
- CHA
- CHIP
- Performance Quality Management System (PQMS)

Alberto Araujo
Alberto Araujo
Alberto Araujo
Yolanda Martinez
Ellis Perez
Dan Avila

Additional Discussion Items

- PMC Survey

Alberto Araujo

Recognition of Improved Performance

All

Meeting Evaluation

Feedback: Connect to responseware.com

Alberto Araujo

Adjourn

Next meeting date:

September 18, 2018 – Central Gardenia

Florida Department of Health in Orange County
Performance Management Council Meeting

November 13, 2018

9:00 – 11:00 a.m.

Call-in number: 1-888-670-3525

Passcode: 766-870-4770#



AGENDA

Purpose:

Monthly Performance Management Council meeting to monitor implementation of local plans/projects, review and assign action items, and recognize practices with improved performance.

Topic

Lead

Welcome/Call to Order

Kevin Sherin

Review of Minutes

Kevin Sherin

Review Action Items

Kevin Sherin

Progress Reports/Updates

- Strategic Plan
- Quality Improvement (QI) Plan
- Quality Council
- PMC Scorecard
- Community Health Assessment/
Community Health Improvement Plan(CHI/CHIP)
- Performance and Quality Management System (PQMS)

Alberto Araujo
Alberto Araujo
Alberto Araujo
Alberto Araujo
Ellis Pérez
Yolanda Martinez

Additional Discussion Items

- DOH Orange Scorecard

Yolanda Martinez

Recognition of Improved Performance

All

Next meeting date:

December 11, 2018 – Central Gardenia



Florida Department of Health in Orange County
Performance Management Council (PMC) Meeting
Meeting Location-Central Gardenia
August 21, 2018
9:00 a.m. – 11:00 a.m.

MINUTES

Purpose:

Monthly Performance Management Council meeting to monitor implementation of local plans/projects, review and assign action items, and recognize practices with improved performance.

***Members—Required**

Position	Position	In Attendance
Dr. Kevin Sherin	Chair	Yes
Yolanda Martinez	Member	
Lavern Simmons-Lesesne	Member	Yes
David Overfield	Member	Yes
Derrick Nealey	Member	Yes
Chris Collinge	Member	No
Alberto Araujo	Member, QI, Strategic Plan, Accreditation-Lead	Yes
Rossie Bonfont	Member	Yes
Daniel Avila	Member	Yes
Willie Brown	Member	Yes
Willie Carter	Member	Yes
Alvina Chu	Member	No
Debra Collinge	Member	No
Raymond Roe	Member	No
Ruthie Sirmans	Member	No
Denise Dunaway	Member	Yes
Bart Harris	Member	No
Kathy Walker	Member	Yes
Angel Aiken	Member	Yes
Nasseam James	Member	Yes
Kent Donahue	Member (on Phone)	Yes
Kara Johnson	Member	Yes

**Note: A quorum of two-thirds of members is required.*

Guest Attendees (e.g. community partners, additional DOH staff)

Name	Department/Organization

Welcome and call to order:

Dr. Sherin called meeting to order at 9:00 A.M

Review of minutes: July 2018

- June 2018 Minutes approved

Action Items	Person Responsible	Due Date	Deliverable(s)
1. <i>Healthy Babies</i>	<i>Art Howell Penny Smith</i>	<i>Ongoing</i>	<ul style="list-style-type: none"> ▪ No update at this time
2. <i>Performance and Quality Management System (PQMS)- Dashboard</i>	<i>Dan Avila</i>	<i>On going</i>	<ul style="list-style-type: none"> • Continuous improvement in EARs & CSRs • Kudos to everyone for bringing up the overall timeliness • There is a 1 day for review & certification • Expectations should roll over to the new year • HR HUB no roster yet as of completion for performance evaluation or setting up new expectations
3. <i>Community Health Improvement Board (CHIB)</i>	<i>Dr. Kevin Sherin Kent Donohue</i>	<i>On going</i>	<ul style="list-style-type: none"> • Meeting today at 2:00 PM at Lake Ellenor • Our committees are: <ul style="list-style-type: none"> • ACES & Trauma • Holden Heights • Quality of Life
4. <i>Strategic Plan</i>	<i>Alberto Araujo</i>	<i>On going</i>	<ul style="list-style-type: none"> • Received all updates • Quarterly reports sent to Tally
5. <i>Percent of CHD STD cases treated according to the most recent STD guidelines within 14 days of sample collection</i>	<i>Willie Brown</i>	<i>On going</i>	<ul style="list-style-type: none"> • 93% this month • Clock starts when lab test come back effective July 1, 2018
6. <i>Annual Comprehensive Environmental Health Score</i>	<i>David Overfield</i>	<i>1/16/18</i>	<ul style="list-style-type: none"> • Evaluation ini September • Evaluation in January 2019

Progress Reports

QI Plan Updates

- Report to Tallahassee due in September
- Report will be sent after our inhouse review has been completed

Alberto Araujo

Strategic Plan Updates

Alberto Araujo

PMC Score Card FY 17-18

Alberto Araujo

Scorecard:

<http://chd48vwb05/EMT/Shared%20Documents/PMC%20Scorecard/FY%202018-2019/Fiscal%202017-2018%20PMC%20Scorecard%2009182018.xlsx>

CHA

Ellis Perez

- Interviewed companies
- Will cost the agency \$10,000.00 dollars and the Hospital will cover the remainder

CHIP

Ellis Perez

- Received updates from the all partners
- Issues with Orlando Health Hospital staff responsible for providing updates (one resigned, other is on sick leave)
- A lot of activities are meeting meet
- Need to think about a work plan to upload data in the tool
- Need to build assest to do data upload
- Need to break down the PMC this is a really large group

PQMS

Dan Avila

- Program updates CSR/EARs Report:
http://chd48vwb05/EMT/Shared%20Documents/CSRs_EARs%20Reports/Program%20update%20final%20CSRs%20EARs%20PMC%208%2021%202018.pdf
- Data not available yet to score provider / client work load

Additional Discussion Items

- Main comment was meeting was taking too long
- Are you happy with the survey
- Do we want to change or use the survey
- Maybe surveyy should be done on a quarterly basis, instead of every meeting

Survey: <http://chd48vwb05/EMT/Shared%20Documents/PMC%20Survey%20Results.xlsx>

Recognition of Improved Performace

- ACES School Health / Immunizations Event – everybody involved stepped up to the plate
- Over 1300 people received services
- WIC & STD Managers worked hard with HR Staff to hurriedly get new staff on board
- Kudos to School Health staff for on-boarding of new staff
- School Health down 2 nurses and 1 HST, staff have stepped up to assist in covering the schools
- Immunizations tirelessly still working with back to school
- Immunizations down 5 positions, 3 LPNS, 1 RN, and 1 postion is not being filled
- Immunology department with collaboration with other departments
- Working with Area 7, TB, & STD to accomplish the overall job
- US Conference on AIDS be in Orlando in September
- Case Management Staff are all now HRSA certified
- New staff on board in HRSA grant roles
- Jennifer Tompkins outstanding job with teaching the dietics intern
- WIC receives excellent feedback from interns
- WIC staff for welcoming new staff
- Resilience of breast feeding team in adapting to new changes
- WIC call center staff

- TB & Refugee staff for resiliencese more patients this year then last year
- TB & Refugee staff for assisting with the Immunizations event
- 36 active TB cases
- Kudos to WIC & Family Planning at Eastside for keeping clients and staff safe
- Thanks to Neil Saville for assisting and working with getting vehicle for Area 7
- Tammy Nicholas for going through encounter forms for Prep
- Melissa Hulse for pulling data with Prep
- EVH staff assisting where needed
- EVH still short on staff
- Bart Harris organized meeting
- Water & Facilities Team have completed story boards

Next meeting September 18, 2018
Central Gardenia @ 9:00 AM



Florida Department of Health in Orange County
Performance Management Council (PMC) Meeting
Meeting Location-Central Gardenia
November 13, 2018
9:00 a.m. – 11:00 a.m

MINUTES

Purpose:

Monthly Performance Management Council meeting to monitor implementation of local plans/projects, review and assign action items, and recognize practices with improved performance.

Members—Required

Position	Position	In Attendance
Dr. Kevin Sherin	Chair	Yes
Yolanda Martinez	Member	Yes
Lavern Simmons-Lesesne	Member	Yes (Phone)
David Overfield	Member	Yes
Derrick Nealey	Member	Yes
Chris Collinge	Member	Yes
Alberto Araujo	Member, QI, Strategic Plan, Accreditation-Lead	Yes
Rossie Bonfont	Member	Yes
Daniel Avila	Member	
Willie Brown	Member	Yes
Willie Carter	Member	Yes
Alvina Chu	Member	
Debra Collinge	Member	Yes
Raymond Roe	Member	
Terrolyn Huckaby	Member	
Denise Dunaway	Member	
Bart Harris	Member	
Kathy Walker	Member	
Angel Aiken	Member	
Nasseam James	Member	Yes
Kent Donahue	Member	Yes
Samantha Turk	Member	Yes (Phone)
Jose Otero Marrero	Member	
Rosarito Rivera Sanchez	Member	
Susannah Bowersox	Member	Yes

**Note: A quorum of two-thirds of members is required.*

Guest Attendees (e.g. community partners, additional DOH staff)

Name	Department/Organization
Ellis Perez	OPQI

Welcome and call to order:

Meeting was called to order by Yolanda Martinez at 9:04am.

Review of minutes: September minutes were reviewed and approved.

- Action Register reviewed and updated.

Action Items	Person Responsible	Due Date	Deliverable(s)
7. <i>Healthy Babies</i>	<i>Art Howell Penny Smith</i>	<i>Ongoing</i>	<ul style="list-style-type: none"> No update at this time
8. <i>Performance and Quality Management System (PQMS)- Dashboard</i>	<i>Dan Avila</i>	<i>On going</i>	<ul style="list-style-type: none"> CSRs were below target for August and September
9. <i>Community Health Improvement Board (CHIB)</i>	<i>Dr. Kevin Sherin Kent Donohue</i>	<i>On going</i>	<p>At the September 2018 meeting of the Community Health Improvement Board (CHIB), Maria Bledsoe, Chief Executive Officer of Central Florida Cares Health System, spoke about substance abuse and mental health services. Also at the September meeting, Tim McKinney, Chief Executive Officer of the United Global Outreach, gave an overview of his organization’s efforts to transform the community of Bithlo in east Orange County.</p> <p>There was no October meeting. Instead, CHIB members were encouraged to attend the City of Orlando’s panel discussion and screening of the documentary “Leftovers” that highlights the issues of seniors and their struggle to maintain health with limited financial resources.</p> <p>Future plans for the CHIB including forming the 501 (c) (3) nonprofit organization called “Peace4Orlando.” In additional, plans are in the works to launch a Peace4Orlando web site to serve as a community resource for information on Adverse Childhood Experiences (ACEs) and building a trauma informed community.</p>
10. <i>Strategic Plan</i>	<i>Alberto Araujo</i>	<i>On going</i>	<ul style="list-style-type: none"> Strategic Plan Status Report for CYQ3 was completed and sent to Tally at the beginning of November.
11. <i>Percent of CHD STD cases treated according to the most recent STD guidelines within 14 days of sample collection</i>	<i>Willie Brown</i>	<i>On going</i>	<p>September numbers at 82%. Too early for October numbers, will update next meeting.</p>

12. Annual Comprehensive Environmental Health Score	David Overfield	1/16/18	92.5 from 84.
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Progress Reports

- **Strategic Plan**

- **Status Report:** The annual report is due to Tally by March 2019, Alberto will start collecting information by middle of January. He will send a reminder email for FY 2019 data also in January.

Link to Report:

http://chd48vwb05/qualitycouncil/StrategicOperationalPlanning/2015_2018_Strategic_Plan_Implementation/Reports/ORANGE_STRATPLANPROGRESS_REPORT_09282018.pdf

- **Updates:**

- Alberto presented a change request by Penny Smith to remove objective CE4.2 activity 2 because that program was reassigned Family Planning Prenatal Health (reporting change). Request was denied.
- Alberto presented the list of goals and objectives for the current Strategic Plan and requested that the same goals and objectives should be used for the extended plan with targets to be updated for the next 2 years. During discussion Dr. Sherin wanted to make sure we are aligned to Tally and Alberto responded yes. Approved.
- Alberto requested to add two new objectives Voice of the Customer and Internal Communication projects. Declined until further communication with project leads is held. The request consisted on identifying specific objectives to determine level of burden on L4 managers if accepted. Information to be presented at January meeting.

Link to Plan Matrix:

[http://chd48vwb05/qualitycouncil/StrategicOperationalPlanning/Shared%20Documents/2016-2018%20Strategic%20Plan/2016%20-%202018%20DOH-Orange%20Strategic%20Plan%20Matrix%20Rev%20\(v1.2\).pdf](http://chd48vwb05/qualitycouncil/StrategicOperationalPlanning/Shared%20Documents/2016-2018%20Strategic%20Plan/2016%20-%202018%20DOH-Orange%20Strategic%20Plan%20Matrix%20Rev%20(v1.2).pdf)

- **Quality Improvement (QI) Plan:**

- Cash Flow project is due on 12/31/18, Derrick checking the project for final approval. Karen is waiting on data to compare the before and after. Karen will present findings during the January meeting.
- White Belt Training was completed on 10/3 at Lake Ellenor, 35 people attended.
- The Voice of the Customer (VoC) project will be added to the QI Plan.

Link to report:

<http://chd48vwb05/qualitycouncil/Shared%20Documents/Quality%20Improvement%20Plans/2017-2020/2017-2020%20QI%20Plan%20Implementation%20Tracking%2011132018.xlsx>

- **Quality Council** - To ensure that we are not duplicating efforts, we are proposing cancelling the Quality Council (QC) Workgroup. All QC workgroups will provide updates to PMC on a quarterly basis. Alberto will review all workgroup charters with teams and eliminate any redundancies or workgroups not fulfilling their charge. Approved.
- **PMC Scorecard:**
 - We skipped the October meeting due to conflicts and Hurricane Michael.
 - 18 (PMC) - Trained in White Belt
 - 27 (L4 Managers - some duplications with PMC members) - Trained in White Belt.
 - Alberto requested to extend the deadline for training L4 managers. Approved and extended to 3/31/19.
 - Alberto requested number of engagement survey to be provided to him to update scorecard.

Scorecard Link:

<http://chd48vwb05/EMT/Shared%20Documents/PMC%20Scorecard/FY%202018-2019/Fiscal%202018-2019%20PMC%20Scorecard%2011132018.xlsx>

- **Community Health Assessment (CHA)/Community Health Improvement Plan (CHIP):**
 - Florida Hospital hosted the CHNA kick off meeting on Oct 12th, held by Strategy Solutions INC (SSI).
 - Ellis Perez is the designated lead contact for DOH Orange regarding any communication about CHNA with SSI.
 - We have provided SSI with a list of stakeholders to interview and Focus group locations.
 - Biweekly calls will be held from Nov 12, 2018 to May 2019

- The current CHIP will also be extended. It is currently 2016-2019 and will now be extended one more year (2016-2020) to align with the strategic plan.
 - With the extension the CHIP objectives will remain the same, however, based on the new CHNA there is possibility or room for changing or adding new activities to reflect the new information.
 - Once the CHNA is completed a Face to Face CHIP meeting will be held with all CHIP participants.
- **PQMS**
 - CSRs were below target for August and September. Yolanda Martinez, Dan Avila and Alberto Araujo met with Jose Otero Marrero met to discuss actions needed to address score for July, August and Sept. Jose has already implemented a corrective action plan that has addressed the issue for October.
- **Additional Discussion Items:**
 - **DOH-Orange Scorecard:**
 - Indicator 1: Administrative Responsibilities – No updates for October.
 - Indicator 2: Strategic Plan - updated for October
 - Indicator 3: Health Protection and Promotion – ACEHS is 92.5%
 - Indicator 4: CHD Administrator Performance Expectations – in process to be completed via a separate document.
 - Indicator 5: Staff Training and Development – results due in December.
 - **Recognition of Improved Performance and KUDOS –**
 - David Overfield gave kudos to the OSTDS scored 99% in the latest program review. It is the highest score in 16 years.
 - Rossie Bonfont gave kudos to her breastfeeding team who reached a score of 80.02%, the highest score since 2014.
 - Dr. Sherin and Deborah Collinge gave kudos to all of the staff who participated in the two recent hurricanes (Florence and Michael).
 - Willie Brown gave kudos to Sunshine Care Center and TB clinic for helping with the PreP.
 - Kudos to the staff that completed White Belt training.

Next meeting date: December 11, 2018
 9:00 AM – 11:00 AM
 Lk Ellenor Auditorium