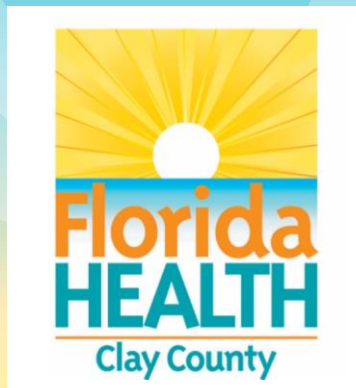


# Strategic Plan

August 2024 – December 2028



*Florida Department of Health in Clay County*

*DOH-Clay*

*Revised: August 2024*

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# DOH-Clay Profile

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## I. Mission, Vision, and Values

**Mission:** To protect, promote & improve the health of all people in Florida through integrated state, county, & community efforts.

**Vision:** To be the **Healthiest State** in the Nation.

**Clay County Motto:** Our community is empowered to make healthier lifestyle choices in partnership with the integrated public health system which promotes and advances health in all places.

**Values:**

- **Innovation:** We search for creative solutions and manage resources wisely.
- **Collaboration:** We use teamwork to achieve common goals & solve problems.
- **Accountability:** We perform with integrity & respect.
- **Responsiveness:** We achieve our mission by serving our customers & engaging our partners.
- **Excellence:** We promote quality outcomes through learning & continuous performance improvement.

**Major Roles:**

- **Educator** – To help educate the community about available resources and information, public health systems impact, and current and new healthy behaviors that will protect and promote an optimal level of health.
- **Collaborator** – To exchange information, share resources, and combine efforts to enhance linkage of health opportunities providing a higher likelihood for positive health outcomes.
- **Innovator** – To be proactive in developing, delivering, and improving health outcomes, policies, systems, and services that improve the overall health of residents.

## II. Infrastructure and Capacity Required for Efficiency and Effectiveness

**Public health touches every aspect of our daily lives.** It 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 that is based upon the social, behavioral, environmental, biological, and socioeconomic factors that impact the population.

**The over-arching goal of public health** is to protect and improve the health of communities through education, promotion of healthy lifestyles, 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.

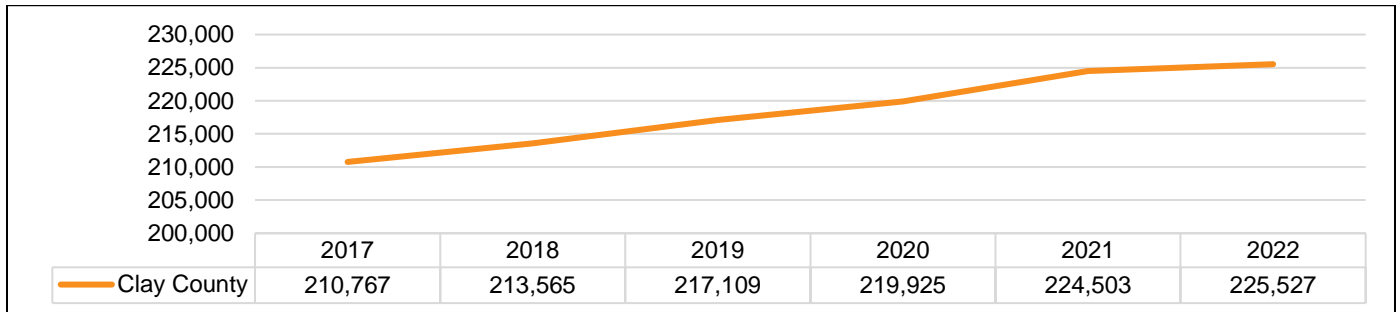
## Demographics

The Florida Department of Health in Clay County serves a population of 225,527.

**Where we live influences our health.** Demographic, socioeconomic and environmental factors create unique community health service needs. Key characteristics that set Clay County apart are County Total Population, Projected Population, Demographics, Economic Stability, County Health Rankings, Leading Causes of Death, and Essential Public Health Performance Scores.

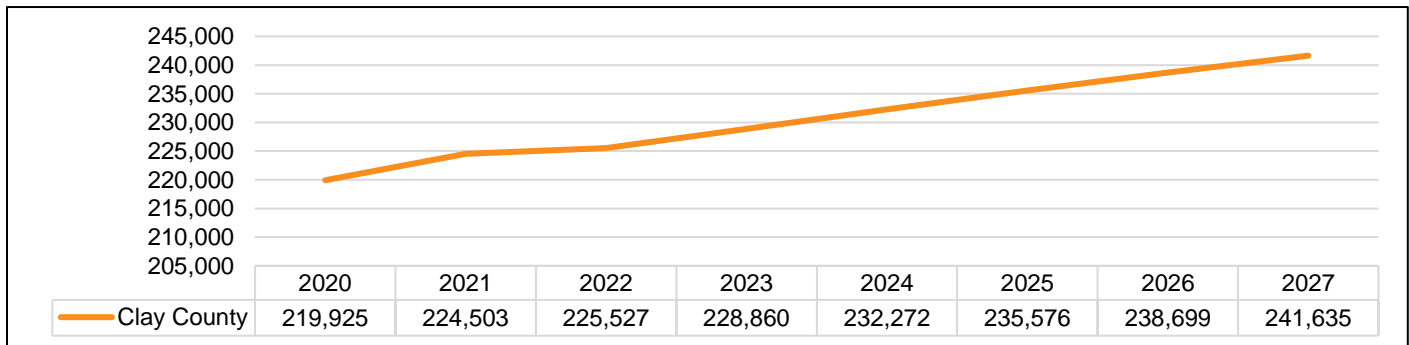
Please see the data below.

TOTAL POPULATION, CLAY COUNTY, 2017-2022



Source: [Florida Department of Health, FL Health Charts – Population Query System](#)

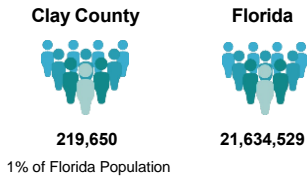
PROJECTED POPULATION GROWTH IN CLAY COUNTY, 2020-2027



Source: [Florida Department of Health, FL Health Charts – Population Query System](#)

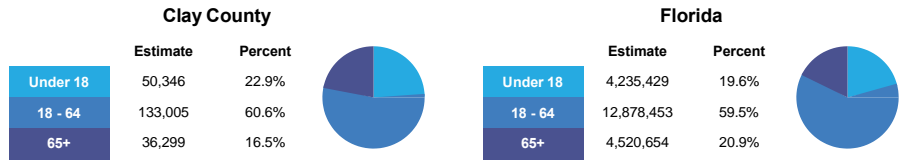
# COUNTY DEMOGRAPHICS

## Population



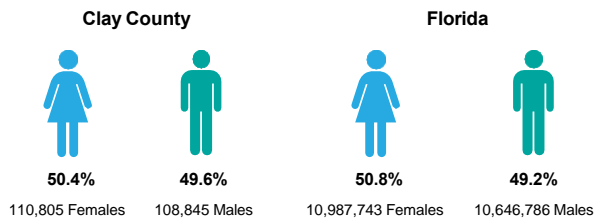
Data Source: U.S. Census Bureau, 2017-2022 American Community Survey 5-Year Estimates, DP05

## Age Groups



Data Source: U.S. Census Bureau, 2017-2022 American Community Survey 5-Year Estimates, S0101

## Gender



Data Source: U.S. Census Bureau, 2017-2022 American Community Survey 5-Year Estimates, DP05

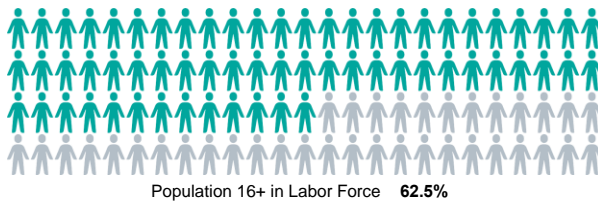
## Race / Ethnicity

	Clay County		Florida	
	Estimate	Percent	Estimate	Percent
<b>One Race</b>	201,312	92.7%	18,891,062	87.3%
White	162,097	73.8%	13,807,410	63.8%
Black or African American	25,218	11.5%	3,355,708	15.5%
American Indian & Alaskan Native	231	0.1%	59,197	0.3%
Asian	6,279	2.9%	609,900	2.8%
Native Hawaiian & Other Pacific Islander	58	0.0%	13,200	0.1%
Some other race	7,439	3.4%	1,045,557	4.1%
<b>Two or more races</b>	18,338	8.3%	2,743,467	12.7%
Hispanic or Latino (of any race)	23,711	10.8%	5,738,283	26.5%

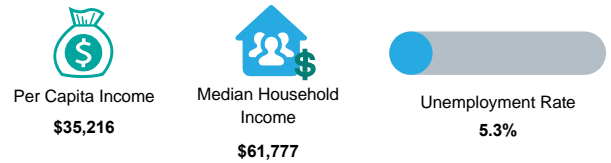
Data Source: U.S. Census Bureau, 2017-2022 American Community Survey 5-Year Estimates, DP05

# ECONOMIC STABILITY

## Clay County



## Florida



Data Sources: U.S. Census Bureau, 2017-2021 American Community Survey 5-Year Estimates, DP03; Florida Health CHARTS, Individuals Below Poverty Level, 2021; Florida Health CHARTS, Children in Foster Care (Aged 0-17 Years), 2021; Florida Department of Elder Affairs Profile of Older Adults, 2022

## COUNTY HEALTH RANKINGS, CLAY COUNTY, 2023

Overall Rankings	Health Outcomes: 21st out of 67 counties			
	Health Factors: 12th out of 67 counties			
Breakdown of Health Factors Rankings	<b>HEALTH BEHAVIORS</b>	<b>CLINICAL CARE</b>	<b>SOCIO-ECONOMIC</b>	<b>PHYSICAL ENVIRONMENT</b>
	Tobacco Diet and Exercise Alcohol Use High-Risk Sex	Access to Care Quality of Care	Education Employment Income Family/Social Support Community Safety	Air Quality Built Environment Access to Healthy Food Liquor Stores
	Clay Rank: 27th *improved from 2022	Clay Rank: 20th *declined from 2022	Clay Rank: 5th *declined from 2022	Clay Rank: 34th *improved from 2022

*Data Source: Robert Wood Johnson Foundation (2023); retrieved from County Health Rankings and Roadmaps*

## LEADING CAUSES OF DEATH

### Clay County



#### CANCER

Number of Deaths = 463  
Percent of Deaths = 19.82



#### HEART DISEASE

Number of Deaths = 409  
Percent of Deaths = 17.51



#### UNINTENTIONAL INJURY

Number of Deaths = 166  
Percent of Deaths = 7.11



#### CHRONIC LOWER RESPIRATORY DISEASE

Number of Deaths = 127  
Percent of Deaths = 5.44



#### STROKE

Number of Deaths = 120  
Percent of Deaths = 5.14

### Florida



#### HEART DISEASE

Number of Deaths = 49,836  
Percent of Deaths = 20.86



#### CANCER

Number of Deaths = 46,978  
Percent of Deaths = 19.66



#### UNINTENTIONAL INJURY

Number of Deaths = 17,123  
Percent of Deaths = 7.17



#### STROKE

Number of Deaths = 16,372  
Percent of Deaths = 6.85

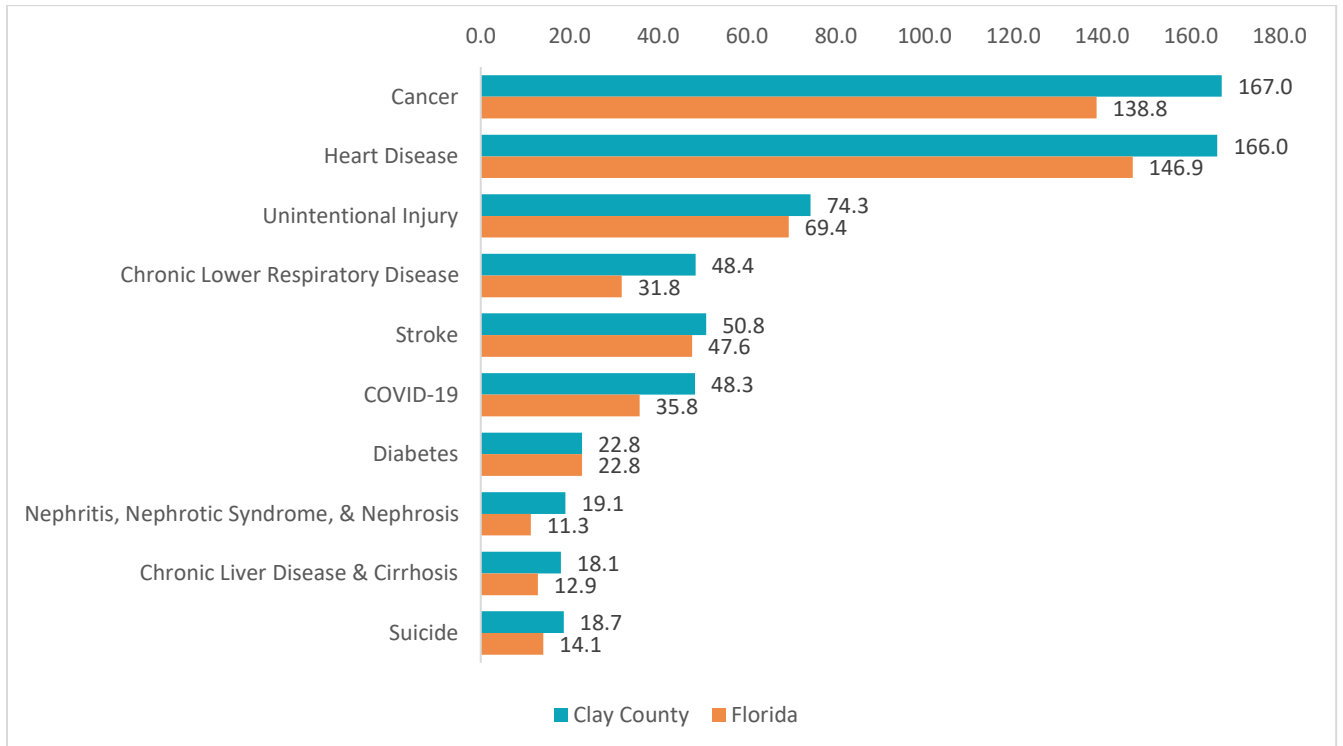


#### COVID-19

Number of Deaths = 12,158  
Percent of Deaths = 5.09

Data Source: Florida Health CHARTS, Leading Causes of Death Profile, 2022

## LEADING CAUSES OF DEATH, CLAY COUNTY & FLORIDA, AGE-ADJUSTED RATE PER 100,000, 2022



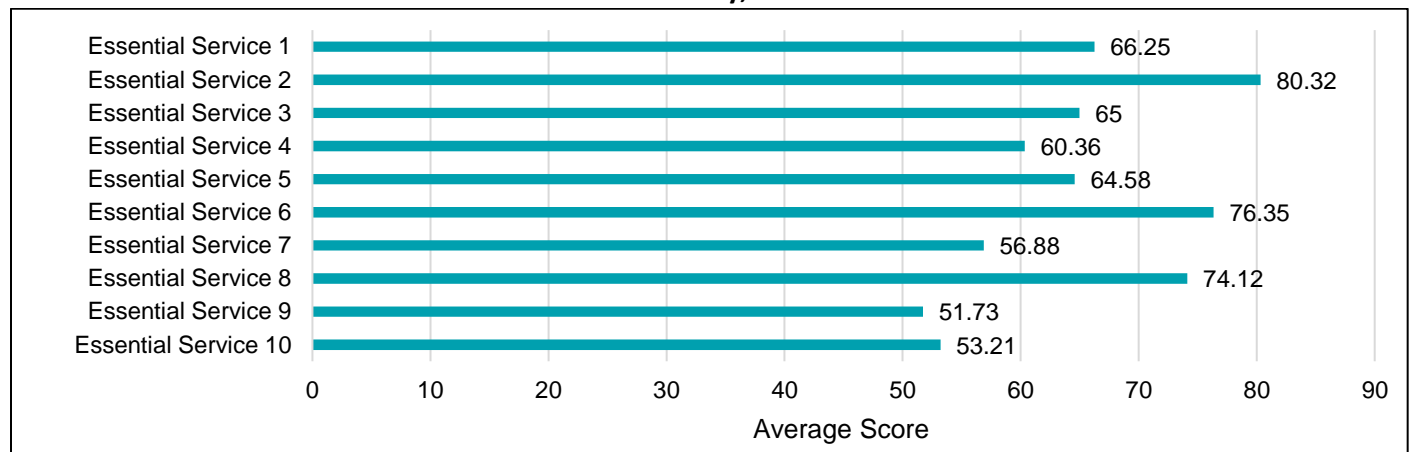
Source: [Florida Department of Health, Bureau of Vital Statistics](#)

## ESSENTIAL PUBLIC HEALTH SERVICE PERFORMANCE SCORE SUMMARY, 2023

The *10 Essential Public Health Services* outline the public health activities that all communities should undertake, providing the fundamental framework for the LPHSA (CDC, 2023d). The LPHSA instrument is divided into ten sections, assessing the local public health system’s ability to provide each essential service. The 10 Essential Public Health Services are:

1. **Monitor** health status to identify community health problems
2. **Diagnose and investigate** health problems and health hazards in the community
3. **Inform, educate, and empower** people about health issues
4. **Mobilize** community partnerships to identify and solve health problems
5. **Develop policies and plans** that support individual and community health efforts
6. **Enforce** laws and regulations that protect health and ensure safety
7. **Link** people to needed personal health services and assure the provision of health care when otherwise unavailable
8. **Assure** a competent public and personal health care workforce
9. **Evaluate** effectiveness, accessibility, and quality of personal and population-based health services
10. **Research** for new insights and innovative solutions to health problems

### Essential Public Health Service Performance Score Summary, 2023



### Summary of Notes from Clay County LPHSA Discussions

Optimal Activity	76-100%
Significant Activity	51-75%
Moderate Activity	26-50%
Minimal Activity	1-25%
No Activity	0%

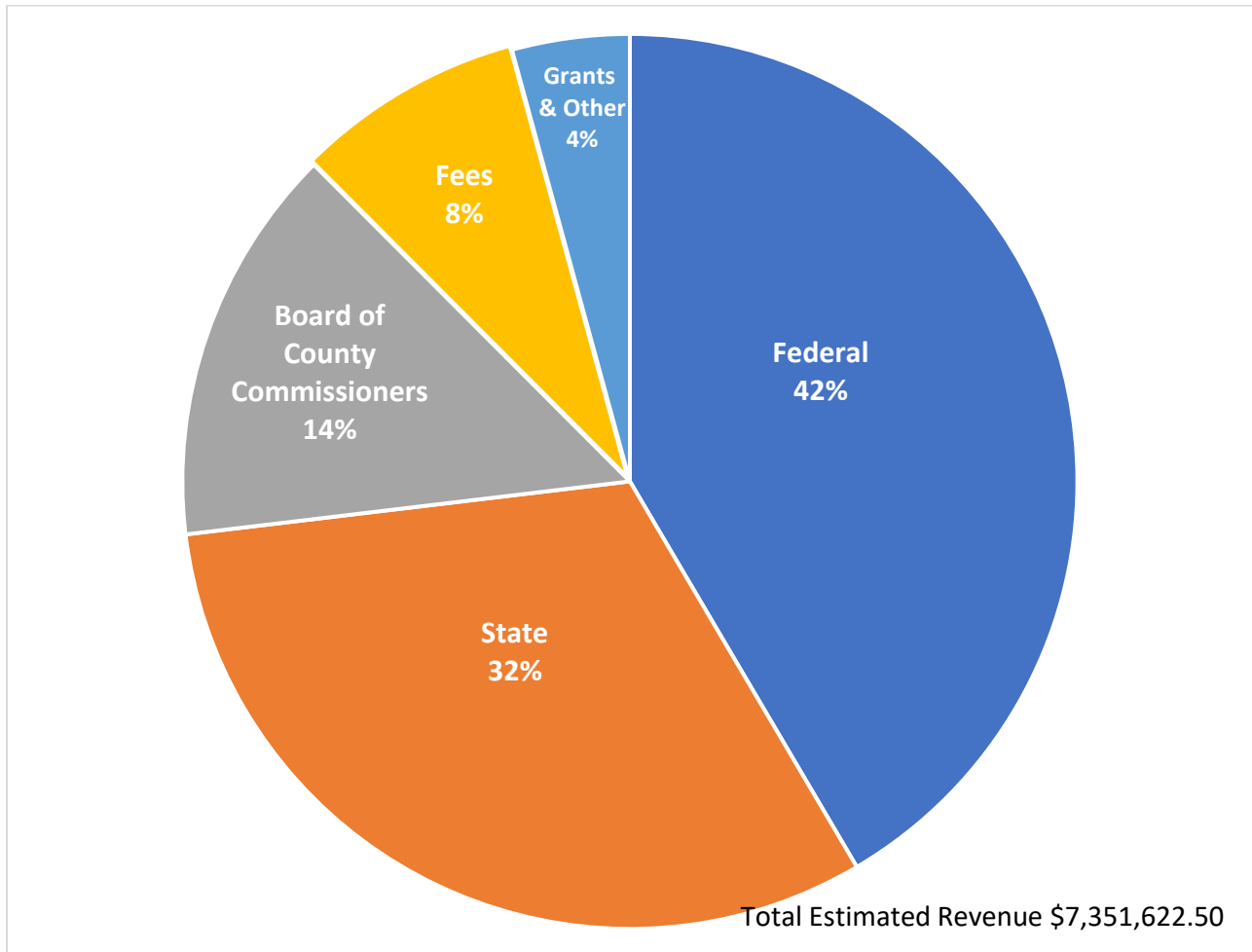
Note: This chart provides the overall score for each of the 10 Essential Services, as determined by the LPHSA workgroup members in July and August 2023. These scores consider the county’s complete public health/safety net services system and are not limited to activities performed directly by the county health department. Based on this cross-sectional self-assessment of a group of local public health system partners, the Clay County local public health system achieved an average overall score of 67.21 (out of a potential 100), which reflects significant activity. All Essential Service scores reflected either significant activity or optimal performance toward the specified Essential Service. Clay County performs best in Essential Services 2, 6, and 8, and scores lowest in Essential Services 7, 9, and 10.



## Budget and Revenue

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

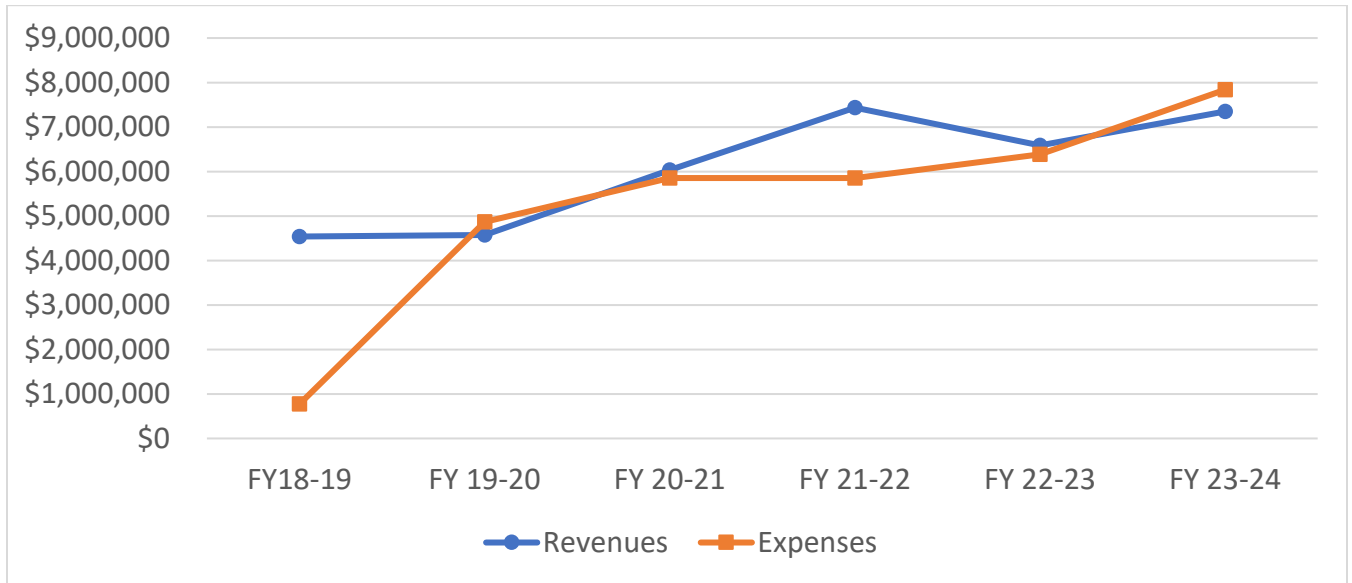
**The Florida Department of Health in Clay County  
Fiscal Year: 2023-2024**



Source: [CHD Core Contract Management System](#)

The graph below represents our county health department's revenue and expense relationship over the past 5 years.

**The Florida Department of Health in Clay County  
Revenue and Expenses FY 2023-2024**



Source: [CHD Core Contract Management System](#)

## 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. The following core functions and services form the basis for the Florida Department of Health in Clay County's commitment to providing the highest standards of public health:

### Environmental Health

We protect the health of the community by monitoring and regulating environmental activities which may contribute to the occurrence or transmission of disease by ensuring safe drinking water, safe food, proper sewage disposal, clean swimming pools, as well as conducting complaint investigations and enforcing public health laws

Clay County:

- Regulation of public water systems (non-Safe Drinking Water Act systems)
- Investigates public and private drinking water complaints
- Inspection of public swimming pools
- Inspection of mobile home parks, RV parks, and recreational camps
- Inspection and regulation of septic tank systems
- Inspection of group care facilities
- Regulation of tattoo, body piercing and tanning facilities
- Investigation of food and waterborne illnesses
- Regulation of biomedical waste/SHARPS Disposal Program

### Disease Prevention and Control

We protect the health of the community through 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.

Clay County:

- Disease Prevention and Control
- Ryan White Program
- AIDS Drug Assistance Program
- TB Nurse Case Management

### 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 our communities safe and to minimize loss.

Clay County:

- Staff Special Needs Shelter
- ESF-8 Coordination
- Emergency Management Policy Group

## Community Health Promotion

We plan and implement programs to promote healthy behaviors and reduce chronic disease through education, community outreach, and collaborative partnerships.

Clay County:

- Chronic Disease Prevention Education
- Stress Management Education
- Water and Sun Safety Education
- Healthy Eating
- Opioid Prevention

## Health Access

Achieving health requires valuing everyone equally with focused and ongoing societal efforts to address avoidable inequalities and the elimination of health and health care disparities.

Clay County:

- Community Services Referral Program

## Clinical Services

We have a variety of services for expecting mothers, newborn babies, infants and toddlers, school-aged children, adolescents, and adults. Our services are provided by highly qualified physicians, nurses, nutritionists, nutrition educators, and other health care providers.

Clay County:

- Florida Breast and Cervical Cancer Early Detection Program
- School and Sports Physicals
- Family Planning Program
- Sexually Transmitted Infection Services
- Insulin and Epilepsy Medication
- Immunizations
- Women, Infants, and Children Services
- School Health Services
- TB Services

## Vital Statistics

We maintain Florida's birth and death records locally and assist with birth, death, marriage, and divorce records for all fifty states. Using data collected by our office, we assist the state with tracking causes of morbidity and mortality— two main indicators of health status.

### III. Strategic Planning Process

The performance management system is designed to ensure continuous improvement and progress toward organizational 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-Clay for four and a half years. As part of the performance management (PM) system, the strategic plan identifies the priority focus areas for the department and aligns with state and national priorities. The strategic plan considers capacity for and enhancement of information management, workforce development, communication (such as branding) and financial sustainability.

#### **A three-to-five-year strategic plan is always in place.**

The performance management system is integrated into the operations and practices and 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-Clay 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.

To define the direction and course of DOH-Clay for consumers, employees, administrators, and legislators for the next four years, in February 2024, DOH-Clay initiated a new strategic planning process. This plan will position DOH-Clay to operate as a sustainable integrated public health system and provide DOH-Clay customers with quality public health services.

The plan is a living document that DOH-Clay will evaluate and update annually to address new challenges posed by the changing public health environment.

To develop the plan, senior leadership championed the six-month planning process during seven meetings. Numerous internal stakeholders including the senior leadership, program managers, and a dedicated performance management council attended these meetings. During the meetings, DOH-Clay 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.

Additionally, DOH-Clay approached the strategic planning process with the following guiding principles in mind:

- 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.
- Interventions to promote public health are evidence-based and supported by the community.

In preparation for the strengths, weaknesses, opportunities, and threats analysis, staff from DOH-Clay presented information summaries from the sources listed in Appendix C, page 34, to the Performance Management Council (PMC). The PMC then reviewed the findings and conducted a SWOT analysis based on their findings. The SWOT analysis discussion 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 in Appendix D, page 35.

Discussions also included the consideration of infrastructure and capacity required for efficiency and effectiveness including:

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

The Performance Management Council members used the SWOT analysis, the agency strategic plan and the agency mission, vision, and values to establish strategic priority areas and goals. Staff then worked with program managers and their staff to write and revise strategies and objectives for each goal area. The strategies and objectives were routed back to the Performance Management Council for comment and approval.

Shared elements such as the mission, vision, and values demonstrate the governing entity's contribution to the county's strategic plan. Additionally, alignment between the plan's priorities, goals, and objectives and the agency strategic plan's priorities, goals, and objectives show that the local and state priorities are complimentary and synergistic.

Throughout the life of the plan, DOH-Clay staff will monitor the strategic plan objectives through implementation plans. A designated performance management (PM) champion will continually collect these plans that include quarterly/annual data values on indicators and sub-indicators along with a status of completion (on track, not on track, complete, not complete or decision required). The PM Champion will also enter data into the department's online plan tracking system. This action will generate reports that DOH-Clay Health Performance Management Council participants will use as a reference when the strategic plan is discussed.

## IV.Strategic Priorities

### Strategy Map

1. **Population Health** - *How does DOH-Clay improve and maintain optimal health and health outcomes with the people in Clay County?*

**Goal** 1. Foster an environment where all individuals in Clay County work together to live long, healthy lives.

**Core Strategies** A. Improve health behaviors aligned with the Community Health Improvement Plan (CHIP).  
B. Improve health outcomes working with partners using a collaborative approach.

---

#### OBJECTIVES

1. By December 31, 2028, the number of DOH-Clay RNs and LPNs who complete QPR (Question, Persuade and Refer) Gatekeeper Training will increase from 0 to at least 10.
  2. By December 31, 2028, decrease the rate of adults who are overweight or obese (BRFSS) from 68.9% (2019) to 65.5%.
  3. By December 31, 2028, decrease the percentage of adults who are current smokers (BRFSS) from 22.2% to 21%.
  4. By December 31, 2028, decrease the age-adjusted death rate from hypertension (FL Health CHARTs) from 12.9 per 100,000 (2021) to 11.9 per 100,000.
  5. By December 31, 2028, decrease the rate of opioid overdose deaths (FL Dept. of Law Enforcement) from 28.4 per 100,000 (2022) to 26.
  6. By December 31, 2028, decrease the age-adjusted suicide death rate per 100,000 among white non-Hispanic males (FL Health CHARTs) from 21 (2021) to 16.
  7. By December 31, 2026, increase DOH-Clay staff's knowledge of Human Trafficking Prevention and Advocacy from 0% (Feb 2024) to 90%.
  8. By December 31, 2028, decrease the rate per 100,00 of infectious syphilis (FDOH, Bureau of Communicable Diseases) from 18.6 (2022) to 17.6.
-

2. **Customer Experience** - *In what ways can DOH-Clay create a positive experience through the local public health system to improve customer satisfaction?*

**Goal** 2. Consistently deliver exceptional customer experiences.

**Core Strategy** A. Develop and implement a more customer-focused process to assess and improve satisfaction.

---

**OBJECTIVES** 1. By December 31, 2028, increase the number of referrals that DOH-Clay sends out using the community services referral program from 0 (2024) to 75.

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2. By December 31, 2028, maintain our customer’s overall customer satisfaction at 95%.

---

3. **Community Awareness** - *How does DOH-Clay build community awareness, confidence, and trust with the local public health system?*

**Goal** 3. Empower our communities to make healthier life choices in all aspects of their life.

**Core Strategies** A. Develop and implement a comprehensive community engagement plan.  
B. Create and implement an ambassador strategy for staff.

---

**OBJECTIVES** 1. By December 31, 2028, increase the number of DOH and community partner articles focusing on CHIP initiatives (currently less than 2) in local media from 0 to 16.

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2. By December 31, 2028, increase the number of referrals that DOH-Clay sends out using the community services referral program from 0 (2024) to 75.

---

3. By December 31, 2028, plan and host or collaborate on coordinated care events (from 0 to a minimum of 2) aimed at bringing community partners together to provide and educate the community on available services and resources.

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4. By December 31, 2028, DOH Clay establishes and implements a comprehensive ambassador program with ongoing training for staff.

---

4. **Systems and Processes** - *How does DOH-Clay foster a culture of continuous improvement for systems and processes?*

**Goal** 4. Build and retain a more satisfied, competent, and productive workforce.

**Core Strategies** A. Develop and implement consistent desktop guidelines that are more purposeful, efficient, and effective.  
B. Develop ongoing process for accountability and review across the organization.  
C. Enhance the two-way internal communications processes to support all priority areas.  
D. Identify and develop a plan for embedding continuous improvement thinking and doing as part of our culture.

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**OBJECTIVES**

1. By December 31, 2028, desktop guidelines get reviewed on an annual basis for relevancy and use in all departments and work units.

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2. By December 31, 2028, ensure an annual communication survey is conducted to gather any staff concerns or gaps in communications in the department.

---

3. By December 31, 2028, every Department should have one quality improvement project annually.

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4. By December 31, 2028, annually host a QI showcase where poster presentations and storyboards are illustrated and highlighted.

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5. By December 31, 2028, annually ensure all staff complete three QI trainings and supervisors complete a minimum of five.

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## V. Objectives

Measurable outcomes of objectives are obtained through the execution of data-driven initiatives. The table below lists objectives (with baseline values, target values, and objective status), data sources, alignment with other foundational plans, responsible entities and strategic initiatives/actions that will be implemented to achieve the objectives.

### Priority: Population Health

<b>Objective:</b> By December 31, 2028, the number of DOH-Clay RNs and LPNs who complete QPR (Question, Persuade and Refer) Gatekeeper Training will increase from 0 to at least 10.				
Data Source	Baseline Value	Target Value	Objective Status	Alignment
DOH-Clay; HR Liaison	0	10	On track	DOH-Clay CHIP- C.1 and C.2 Behavioral Health
<b>Strategies/Actions to Achieve Objective:</b>			<b>Entities Responsible:</b>	
<ul style="list-style-type: none"> <li>Obtain training and ensure at least 10 RNs/LPNs staff successfully complete.</li> </ul>			DOH-Clay nurses	

**ASP-** Agency Strategic Plan

**CHIP-** Community Health Improvement Plan

**PMQI-** County Health Department Performance Management and Quality Improvement Plan  
current PMQI plan ends December 2024

**WFD-** County Health Department Workforce Development Plan

**Florida SHIP-** State Health Improvement Plan

<b>Objective:</b> By December 31, 2028, decrease the rate of adults who are overweight or obese (BRFSS) from 68.9% (2019) to 65.5%.				
Data Source	Baseline Value	Target Value	Objective Status	Alignment
FL Health CHARTS, BRFSS	68.9%	65.5%	On track	DOH-Clay CHIP-A.1., 1.1 Lifestyle Behaviors  Florida SHIP-Priority 2 Chronic Diseases and Conditions  National Healthy People 2030 initiative
<b>Strategies/Actions to Achieve Objective:</b>			<b>Entities Responsible:</b>	
<ul style="list-style-type: none"> <li>Promote and increase nutrition education and physical activity using promotional campaign.</li> </ul>			DOH-Clay Community Health Program and community-based organizations	

<b>Objective:</b> By December 31, 2028, decrease the percentage of adults who are current smokers (BRFSS) from 22.2% to 21%.				
Data Source	Baseline Value	Target Value	Objective Status	Alignment
FL Health CHARTS, BRFSS	22.2%	21%	On track	DOH-Clay CHIP-B1. 1., 2.1 Lifestyle Behaviors  Florida SHIP-Priority 2 Chronic Diseases and Conditions  National Healthy People 2030 initiative

<p><b>Strategies/Actions to Achieve Objective:</b></p> <ul style="list-style-type: none"> <li>Assist Clay County employers and businesses with the best tools to become tobacco-free.</li> </ul>	<p><b>Entities Responsible:</b></p> <p>DOH-Clay Community Health and Community-based organizations</p>
--	--

**Objective:** By December 31, 2028, decrease the age-adjusted death rate from hypertension from 12.9 per 100,000 (2021) to 11.9 per 100,000.

Data Source	Baseline Value	Target Value	Objective Status	Alignment
FL Health CHARTS FDOH Bureau of Vital Statistics	12.9 per 1000,000 (2021)	11.9 per 100,000	On track	DOH-Clay CHIP-C. 1., 4.1 Lifestyle Behaviors  Florida SHIP-Priority 2 Chronic Diseases and Conditions  National Healthy People 2030 initiative

<p><b>Strategies/Actions to Achieve Objective:</b></p> <ul style="list-style-type: none"> <li>Promote healthy lifestyle practices to achieve and maintain good health.</li> </ul>	<p><b>Entities Responsible:</b></p> <p>DOH-Clay Community Health Program and community-based organizations</p>
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<b>Objective:</b> By December 31, 2028, decrease the rate of opioid overdose deaths (FL Dept. of Law Enforcement) from 28.4 per 100,000 (2022) to 26.				
Data Source	Baseline Value	Target Value	Objective Status	Alignment
FL Health CHARTS	28.4 per 100,000	26 per 100,000	On track	DOH-Clay CHIP-B2. 1., 2.2 Behavioral Health  Florida SHIP-Priority 5 Mental Well-being and Substance Abuse Prevention  National Healthy People 2030 initiative
<b>Strategies/Actions to Achieve Objective:</b>			<b>Entities Responsible:</b>	
<ul style="list-style-type: none"> <li>Establish and collaborate on a comprehensive adult substance use/abuse framework.</li> </ul>			DOH-Clay Community Health Program and community-based organizations	

<b>Objective:</b> By December 31, 2028, decrease the age-adjusted suicide death rate per 100,000 among white non-Hispanic males (FL Health CHARTs) from 21 (2021) to 16.				
Data Source	Baseline Value	Target Value	Objective Status	Alignment
FL Health CHARTS FDOH Bureau of Vital Statistics	21 (2021)	16	On track	DOH-Clay CHIP-C.1, 3.1 & 3.2 Behavioral Health  Florida SHIP Priority 5 Mental Well-being and Substance Abuse Prevention

				National Healthy People 2030 initiative
<b>Strategies/Actions to Achieve Objective:</b> <ul style="list-style-type: none"> <li>Update and promote a brochure list of available mental health services in Clay County.</li> <li>Establish a unified suicide prevention campaign.</li> </ul>			<b>Entities Responsible:</b> DOH-Clay Community Health Program and community-based organizations	

<b>Objective:</b> By December 31, 2026, increase DOH-Clay staff’s knowledge of Human Trafficking Prevention and Advocacy from 0% (Feb 2024) to 90%.				
Data Source	Baseline Value	Target Value	Objective Status	Alignment
DOH-Clay; HR Liaison	0%	90%	On track	DOH-Clay CHIP-A.4., 1.1 & 1.2 Behavioral Health  Florida SHIP-Priority 6 Social and Economic Conditions Impacting Health
<b>Strategies/Actions to Achieve Objective:</b> <ul style="list-style-type: none"> <li>Educate and encourage safe and healthy relationship skills.</li> <li>Establish integrated behavioral health advocacy.</li> </ul>			<b>Entities Responsible:</b> DOH-Clay Community Health Program and community-based organizations	

**Objective:** By December 31, 2028, decrease the rate per 100,00 of infectious syphilis (FDOH, Bureau of Communicable Diseases) from 18.6 (2022) to 17.6.

Data Source	Baseline Value	Target Value	Objective Status	Alignment
FL Health CHARTS	18.6 (2022)	17.6	On track	DOH-Clay CHIP-D.1., 5.1 Lifestyle Behaviors  Florida SHIP-Priority 2 Chronic Diseases and Conditions  National Healthy People 2030 initiative
<b>Strategies/Actions to Achieve Objective:</b> <ul style="list-style-type: none"> <li>Increase sexually transmitted infection (STI) awareness in the community.</li> </ul>			<b>Entities Responsible:</b>  DOH-Clay Disease Prevention & Control Program	

**Priority: Customer Experience**

<b>Objective:</b> By December 31, 2028, increase the number of referrals that DOH-Clay sends out using the community services referral program from 0 (2024) to 75.				
Data Source	Baseline Value	Target Value	Objective Status	Alignment
DOH-Clay; Community Health Division Director	0	75	On track	DOH-Clay CHIP-B. 1., 2.1 Healthcare Access
<b>Strategies/Actions to Achieve Objective:</b>			<b>Entities Responsible:</b>	
<ul style="list-style-type: none"> <li>Increase knowledge of the impact of social and economic factors on health.</li> <li>Promote the use of the community services referral program.</li> </ul>			DOH-Clay	

<b>Objective:</b> By December 31, 2028, maintain the overall customer satisfaction rate in DOH-Clay at 95%.				
Data Source	Baseline Value	Target Value	Objective Status	Alignment
DOH-Clay; Health Educator & Health Data Analyst	92%	95%	On track	DOH-Clay WFD-1.e DOH-Clay PMQI Department-wide QI project
<b>Strategies/Actions to Achieve Objective:</b>			<b>Entities Responsible:</b>	
<ul style="list-style-type: none"> <li>Provide/conduct at least one customer service training for all staff.</li> </ul>			DOH-Clay	



## Priority: Community Awareness

<b>Objective:</b> By December 31, 2028, increase the number of DOH and community partner articles focusing on CHIP initiatives (currently less than 2) in local media from 0 to 16.				
Data Source	Baseline Value	Target Value	Objective Status	Alignment
DOH-Clay; Communications Director	Less than 2	16	On track	DOH-Clay CHIP – A.1. Lifestyle Behaviors
<b>Strategies/Actions to Achieve Objective:</b>			<b>Entities Responsible:</b>	
<ul style="list-style-type: none"> <li>With community partners, promote Healthy Tales and other programs that support the CHIP goal of decreasing the percentage of adults who are overweight or obese in Clay County.</li> </ul>			DOH-Clay	

<b>Objective:</b> By December 31, 2028, plan and host or collaborate on coordinated care events (from 0 to a minimum of 2) aimed at bringing community partners together to provide and educate the community on available services and resources.				
Data Source	Baseline Value	Target Value	Objective Status	Alignment
DOH-Clay; Chief Health Strategist	0	Minimum of 2/year	On track	DOH-Clay CHIP- A.1., 1.1 & 1.2 Healthcare Access
<b>Strategies/Actions to Achieve Objective:</b>			<b>Entities Responsible:</b>	
<ul style="list-style-type: none"> <li>Promote health literacy on healthcare access resources and health insurance navigation.</li> <li>Decrease transportation barriers to healthcare access.</li> </ul>			DOH-Clay and community-based organizations	

<b>Objective:</b> By December 31, 2028, DOH-Clay establishes and implements a comprehensive ambassador program with ongoing training for staff.				
<b>Data Source</b>	<b>Baseline Value</b>	<b>Target Value</b>	<b>Objective Status</b>	<b>Alignment</b>
DOH-Clay; Chief Health Strategist	No program as of July 2024	Program created and being implemented with ongoing training by December 2028	On track	DOH-Clay WFD-1.f
<b>Strategies/Actions to Achieve Objective:</b>			<b>Entities Responsible:</b>	
<ul style="list-style-type: none"> <li>• Develop a comprehensive document that clearly defines the purpose and objectives of the ambassador program, outlines its role within the organization, and specifies the desired outcomes.</li> <li>• Identify and select a minimum of five ambassadors who align with our ICARE values by the Sunshine Committee.</li> <li>• Each ambassador will complete a UDEMY training plan to include courses on effective communication, leadership, and employee engagement.</li> </ul>			DOH-Clay Communications Director	

**Priority: Systems and Processes**

<b>Objective:</b> By December 31, 2028, ensure desktop guidelines are reviewed annually for relevancy and use. (from 0 to 4)				
Data Source	Baseline Value	Target Value	Objective Status	Alignment
DOH-Clay; Communications Director	Desktop guidelines being developed	Desktop guidelines reviewed annually	On track	DOH-Clay WFD-2.i
<b>Strategies/Actions to Achieve Objective:</b>			<b>Entities Responsible:</b>	
<ul style="list-style-type: none"> <li>Develop a system to track yearly review of desktop guidelines.</li> <li>Email sent yearly to necessary party to review and update if needed.</li> </ul>			DOH-Clay Communications Director	

<b>Objective:</b> By December 31, 2028, ensure the communications director annually conducts a communications survey to gather any staff concerns or gaps in communications in the department. (from 0 to 4)				
Data Source	Baseline Value	Target Value	Objective Status	Alignment
DOH-Clay; Communications Director	Annual survey	Annual survey with new questions	On track	DOH-Clay WFD-2.g
<b>Strategies/Actions to Achieve Objective:</b>			<b>Entities Responsible:</b>	
<ul style="list-style-type: none"> <li>Send survey to all staff each April to assess the effectiveness of current communication channels.</li> <li>Share results with staff.</li> <li>Develop action plan based on needs.</li> </ul>			DOH-Clay Communications Director	

<b>Objective</b> By December 31, 2028, every program should have one quality improvement project annually.				
Data Source	Baseline Value	Target Value	Objective Status	Alignment
DOH-Clay; Chief Health Strategist	Some programs have one quality improvement project annually	All programs have one quality improvement project annually	On track	PMQI- Goal 2, 2.2B
<b>Strategies/Actions to Achieve Objective:</b>			<b>Entities Responsible:</b>	
<ul style="list-style-type: none"> <li>Acknowledge, incentivize, and/or celebrate all success around QI projects.</li> </ul>			DOH-Clay Chief Health Strategist	

<b>Objective:</b> By December 31, 2028, annually host a QI showcase where poster presentations and storyboards are illustrated and highlighted.				
Data Source	Baseline Value	Target Value	Objective Status	Alignment
DOH-Clay; Chief Health Strategist	Annual QI showcase	Annual QI showcase – enhanced each year	On track	PMQI - Goal 2, 3.1 DOH-Clay WFD - 2.e
<b>Strategies/Actions to Achieve Objective:</b>			<b>Entities Responsible:</b>	
<ul style="list-style-type: none"> <li>Continuously communicate updates on QI progress and future by leadership.</li> <li>Maintain an inclusive and transparent process.</li> </ul>			DOH-Clay Chief Health Strategist	

**Objective:** By December 31, 2028, annually ensure all staff complete three QI trainings and supervisors complete a minimum of five.

Data Source	Baseline Value	Target Value	Objective Status	Alignment
DOH-Clay; HR Liaison	67.5% staff complete QI trainings 100% supervisors complete a minimum of five	All staff complete QI trainings All supervisors complete a minimum of five	On track	PMQI - Goal 1, 2.3 DOH-Clay WFD - 2.d
<p><b>Strategies/Actions to Achieve Objective:</b></p> <ul style="list-style-type: none"> <li>• Develop and implement a WFD plan to address gaps in competencies around job-related work and QI.</li> <li>• Continue to implement QI training plan, focusing on QI leaders, and spreading to additional staff.</li> </ul>			<p><b>Entities Responsible:</b></p> <p>DOH-Clay Chief Health Strategist</p>	

## VI. Monitoring Progress and Reviews

Reviews of the strategic plan take place during the DOH-Clay Performance Management Council meetings. The Chief Health Strategist will monitor progress using a Gantt Chart.

The lead entity for each objective will provide quarterly updates on objectives that are not on track, not completed, or require a decision. Annually, the leads will report the progress and status for all objectives. Additionally, operational policies and procedures, including human resource policies and procedures, will be reviewed and revised on a routine basis.

Progress reports including the status of all objectives, the progress of all objectives and a description of how targets were monitored will be developed and are due each year.

## VII. Appendices

### Appendix A: Schedule of Meetings

The following is the strategic planning schedule of meetings:

Meeting Date	Topic
January 2024	<ul style="list-style-type: none"> <li>• Pre-planning with the Planning Team Tri-Chairs</li> <li>• Finalize the process for planning</li> <li>• Determine Planning Team members</li> </ul>
2/6/2024 – Kick-off meeting with the Planning Team	<ul style="list-style-type: none"> <li>• Set the stage for a successful planning process.</li> <li>• Build a shared understanding of the organization’s current situation.</li> <li>• Continue to build relationships with each other.</li> </ul>
3/5/2024 – Planning Team Meeting #2	<ul style="list-style-type: none"> <li>• Continue to build relationships with each other</li> <li>• Continue to build a shared understanding of the organization’s current situation</li> <li>• Begin to identify the key strategic issues</li> <li>• Review and revise the information gathering plan- identify what we know and what we need to know</li> </ul>
3/6/24 – All Staff Meeting #1	<ul style="list-style-type: none"> <li>• Share strategic planning process</li> <li>• Connecting your work to the strategic plan</li> <li>• Share key highlights from staff survey results and get feedback</li> </ul>
4/2/2024 – Planning Team Meeting #3	<ul style="list-style-type: none"> <li>• Prioritize the priority areas.</li> <li>• Identify the priority area questions.</li> <li>• Check alignment of mission and vision statements</li> <li>• Discuss operationalizing the values</li> <li>• Begin to develop goals</li> </ul>
4/24/2024 – Strategic Priorities Subcommittee	<ul style="list-style-type: none"> <li>• Take feedback from the Planning Team and fine-tune the wording of the Priority questions</li> </ul>
5/4/2024 – Goals Subcommittee	<ul style="list-style-type: none"> <li>• Take feedback from the Planning Team and fine-tune the wording of the Goals statements</li> </ul>
5/7/2024 – Planning Team Meeting #4	<ul style="list-style-type: none"> <li>• Finalize the priority areas questions</li> <li>• Develop goals</li> <li>• Begin to identify indicators and metrics</li> <li>• Begin to identify and prioritize core strategies</li> </ul>

Meeting Date	Topic
5/8/24 – All Staff Meeting #1	<ul style="list-style-type: none"> <li>• Share strategic planning process progress</li> <li>• Finding meaning and relevancy in the DOH-Clay motto</li> <li>• Living into our organizational values</li> </ul>
5/21/2024 – Objectives Subcommittee	<ul style="list-style-type: none"> <li>• Organize the creation of the Objectives with a cross-department group of staff</li> </ul>
6/4/2024 – Planning Team Meeting #5	<ul style="list-style-type: none"> <li>• Finalize goals</li> <li>• Share objectives progress</li> <li>• Review and revise core strategies</li> </ul>
Monthly call with Director of Community Health Services and/or other two Planning Team Chairs	<ul style="list-style-type: none"> <li>• Give and get feedback</li> <li>• Ensure alignment of what we’re doing and learning</li> <li>• Ask for any additional support needed to move the process forward</li> </ul>



## Appendix B: Strategic Planning Participants

### DOH-Clay

### Strategic Planning Participants

### 2024

Amy Alvarado,  
Assistant Administrative/Budget Manager

Edgar Martinez,  
Facilities Manager

Phyllis Barnett,  
Environmental Health Manager

Eric Mays,  
System Administrator

Chelsie Braswell,  
Clinic Manager

Sonny Rodgers,  
Emergency Preparedness Coordinator

Jacqueline Copeland,  
Senior Community School Health Nurse  
Supervisor

Gina Roundtree,  
Communications Director

Andrea Crowder,  
Partner – Associate Executive Director, The Way  
Free Medical Clinic

Jennifer Smidt,  
Partner – Wellness Programs Manager,  
Northeast Florida AHEC

Nimisha Dabhi-Armas,  
Administrative Assistant/HR Liaison

Amanda Snyder,  
Administrative Assistant

Ekiuwa Daniels,  
Community Health Division Director

Natalie Steingruber,  
WIC Program Supervisor

Courtney Ellis,  
Senior Community Health Nursing Director

Kenya Thomas,  
Fiscal Manager

Heather Huffman,  
Health Officer & Administrator

Robbin Thomas,  
Senior Community Nurse Supervisor

Rosalinda Joassaint,  
Chief Health Strategist

Amanda Toivola,  
WIC Program Director

Elda Killo,  
Community Health Services Supervisor

Annie Wallau,  
Partner – County Extension Director UF/IFAS

Morgan Klinzing,  
Disease Prevention & Control Program Manager

## Appendix C: Environmental Scan Resources

1. [Agency Strategic Plan, 2016-2020](#)
2. [Agency Quality Improvement Plan, 2018-2020](#)
3. [Behavioral Risk Factor Surveillance System \(BRFSS\), 2019](#)
4. [Biomedical Research Advisory Council Annual Report, 2020-2021](#)
5. CHD Performance Metrics – Customer Focus – County Health Systems
6. Clay County Community Health Assessment, 2023
7. Clay County Community Health Improvement Plan, March 2024-December 2028
8. Clay County Quality Improvement Plan, September 2021 through September 2024
9. Clay County Workforce Development Plan, February 2024-December 2028
10. Employee Communications Survey, January 2024
11. [Florida Community Health Assessment Resource Tool Set \(CHARTS\)](#)
12. [Florida Department of Health Long Range Program Plan, Fiscal Years 2019-2023](#)
13. [Florida Department of Health, Office of Inspector General Annual Report FY 2022-23](#)
14. [Florida Department of Health Workforce Development Plan](#)
15. [Florida State Health Improvement Plan, 2017-2021](#)
16. [Florida Middle School Health Behavior Survey Results, 2021](#)
17. [Florida Morbidity Statistics Report, 2019/2020](#)
18. [Florida Pregnancy Risk Assessment Monitoring System Trend Report, 2020](#)
19. [Florida Strategic Plan for Economic Development, 2018-2023](#)
20. Florida Vital Statistics Annual Report, 2021; data now available on [FLHealthCharts.gov](https://www.flhealthcharts.gov)
21. [Florida Youth Substance Abuse Survey Results, 2022](#)
22. [Florida Youth Tobacco Survey Results, 2022](#)
23. [Physician Workforce Annual Report, 2022](#)
24. [Tuberculosis Control Section Report, 2021](#)
25. [Volunteer Health Services Annual Report, 2022-23](#)

## Appendix D: Strengths, Weaknesses, Opportunities and Threats (SWOT)

### Strengths (Internal)

*We want to maintain and leverage strengths.*

#### Agency Infrastructure:

- Plenty of data to help inform decision making
- Resources and best practices are shared with the public, colleagues, and partners

#### Capacity:

- Workforce is passionate, knowledgeable, hardworking, and practice teamwork
- Strong partnerships among community organizations

#### Emerging Trends:

- Focus on quality improvement opportunities

#### Other:

- Strong belief about the department's service and commitment to the community
- High engagement with multiple organizations in the process of setting priorities, developing plans, and implementing

### Opportunities (External)

*We want to invest in opportunities.*

#### Agency Infrastructure:

- Increase in technology creates more capability
- Schools cannot provide education about unhealthy behaviors

#### Capacity:

- Increasing education about communicable diseases
- Having sufficient resources and services for increased population

#### Emerging Trends:

- Increased population growth
- Advocating for mental health and behavioral health

#### Other:

- Focus on building up collaboration efforts to reach more community members
- Stronger engagement from county government – increasing their awareness of priorities

### Weaknesses (Internal)

*We want to minimize weaknesses.*

#### Agency Infrastructure:

- Systems and processes: process efficiency and effectiveness; continuous improvement
- Internal communications between areas within the department

#### Capacity:

- Community awareness: awareness about what the department does and the benefits and building trust in the community
- Customer experience: create a positive experience throughout the local public health system

#### Emerging Trends:

- Community does not know the resources available to them and how to access them

#### Other:

- Recruiting and retaining a qualified public health workforce
- Collective approach to the work

### Threats or Challenges (External)

*We want to identify threats or challenges that need to be addressed and understand their potential impact.*

#### Agency Infrastructure:

- Public policies were set back due to COVID-19
- Health professional shortage

#### Capacity:

- Transportation system is not optimal
- Less public health resources and credibility

#### Emerging Trends:

- Increase in homelessness
- Cultural norms are changing because the population is becoming more diverse

#### Other:

- Political challenges from state government
- Community distrust in public health system
- Rules and regulations change on a daily basis

## Appendix E: Summary of Reviews

This Strategic Plan is newly refreshed, and no review has been conducted yet. Reviews will be done on a regular basis and this format will be used.

On Date of Review, the Clay County Performance Management Council conducted an annual review of the strategic plan. The council discussed progress achieved and obstacles encountered for each objective.

The table below depicts revisions to objectives from the Date of Review review. Strikethroughs indicate deleted text and underlines indicate added text.

Date of Review Reviews		
Objective	Revisions to Objective	Rationale for Revision(s)
Objective	Revision to objective	Rationale for revision
Objective	Revision to objective	Rationale for revision
Objective	Revision to objective	Rationale for revision

## Appendix F: Glossary of Planning Terms

**Strategic planning**– a systematic process to produce fundamental decisions and actions that shape and guide what an organization is, what it does, and why it does it.

**Mission statement** – a statement that defines the core purpose of the organization-why it exists.

**Vision statement** – a picture of the future the organization seeks to create, described in the present tense, as if it were happening now. A statement that shows where we want to go, and what it will look like when we get there.

**Motto** – A shared understanding of what the vision will look like for Clay County.

**Values statement** – the principles or beliefs that guide an organization’s members as they pursue the organization’s purpose.

**Environmental scanning** – gathering up-to-date information about the organization’s strengths and areas for improvement, and its external opportunities and threats. The assessment helps to refine and reshape the list of critical issues the organization is facing.

**Strategic Priority** – after assessing the environment, identify primary concerns facing the organization.

**Strategy** – The means by which an organization intends to accomplish an objective or goals.

**Core strategies** – broad, overall priorities or direction adopted by an organization.

**Goals** – broad, expected outcome statements that define what an organization is trying to accomplish both programmatically and organizationally.

**Objectives** – precise, measurable, time-specific results that support the achievement of a goal.

**Work plan** – a plan for the day-to-day operation of a business over the next one to twelve months. It includes what activities need to happen, who is responsible for making sure they happen, by when, what additional resources are needed, and the expected outcomes.

Work plans translate the grand strategic objectives into a series of specific, bite-sized, doable actions with human and financial resources allocated to ensure success.