

Escambia CHD 2008-11 Roadmap Detail

Information taken directly from divisional action plans on j-drive. Blank cells indicate information is missing on action plan.

Objective	DIV	Division Objective	Measure	Target	Target Date	Actual
1.1 Improve Customer Satisfaction	NUT	Reduce number of complaints related to voucher redemption.	Client rating of WIC training on how to use WIC checks improves	10%	Jun-11	
	HP	Initiate process to survey divisions quarterly, record and analyze results. Maintain mechanism for daily customer comment feedback and analyze results.	Functional quarterly survey system	quarterly survey all ECHD sites	Jun-11	
	EH	Re-establish the use of the ECHD EH Customer Comment Cards	Collect and track customer satisfaction results	15 cards per month	Oct-10	
	SS	Improve customer satisfaction for those programs & units serving the general public	Percent of increase in customer satisfaction on each survey	5%	Jun-10	
	SH	Improve satisfaction of students, staff, and parents	Percent of students, staff, and parents satisfied	90%	Spring 2010	
	CLN	Decrease wait time for initial, annual, problem, and supply/result visits	Results of study of wait times	Annual wait time = 75min. Initial wait time = 90 min. Problem wait time = 45 min. S/R wait time = 30 min	Feb-11	
	CN	Develop and implement HIV external customer survey. Reformat Epi report to publicize	Distribute survey via email. Increase # of infection control practitioners and private physicians satisfied with services provided by HIV/AIDS program	> 80% satisfied	Feb-10	

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1.2 Improve Employee Satisfaction	HP	Design and implement programs to improve employee satisfaction specifically in areas of professional development and rewards and recognition	Employee satisfaction results from 2010 survey will increase. Currently at 68.1%	75%	ESS to be administered in fall of 2010.	
	PHP	Improve the percentage of PHP employees that noted items 23 and 24 as dissatisfied or very dissatisfied on the 2008 DOH ESS	Employee satisfaction results from 2010 survey will increase.	>20%	ESS to be administered in fall of 2010.	
	EH	Improve the percentage of PHP employees that noted items 23 and 24 as dissatisfied or very dissatisfied on the 2008 DOH ESS	Employee satisfaction results from 2010 survey will increase.	>20%	ESS to be administered in fall of 2010.	
	SS	Establish and launch employee web site (Infonet) and evaluate ECHD satisfaction through survey after launch of Infonet	Infonet activated and available on all staff desktop computers	Infonet activated	Aug-09	
1.3 Improve Employee Wellness	HP	Assess, develop, and implement an employee wellness program.	Number of employees participating in employee wellness program.	>100	Jun-10	

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	NUT	Market healthier choices in Vending Machines at ECHD locations	Percent in sales of vending items promoted	25%	Jun-10	
1.4 Improve Leadership Workforce Developmen t	PHP	Improve training opportunities for each PHP staff member	Each employee will have an Individual Development Plan (IDP) for the 2009/2010 evaluation period	100%	Jun-11	
	EH	Improve training opportunities for each EH staff member	Each employee will have an Individual Development Plan (IDP) for the 2009/2010 evaluation period	100%	Jun-11	
	SS	Train to have a computer literate staff	Establish minimum acceptable skill levels. ID computer based training for staff. Test staff, set guidelines, and reassess to see if knowledge has been gained.	> 50% of staff pass test	Sep-10	
	PHN	Increase leadership development opportunities across all employment levels	Develop leadership development strategies by 30 June	4 strategies developed/implemented	Jun-11	

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1.5 Implement Training System	SS	Establish a comprehensive training committee that oversees and coordinates all staff training	Create training roster, determine training program based on required DOH training. Create Standard Operating Procedure for training program	100% complete	Nov-10	
2.1 Expand Use of Electronic PH Records	EH	Electronically file all OSTDS and Community EH records	All records on file in the EH file room will be scanned. All new records scanned on a weekly basis	>29,000 records	June 2010 for current files. Ongoing for new files	
	HP	Eliminate production on all non-electronic We Care patient records	All Carescope documentation needed for referral to providers is stored electronically	10% by March 2010, 25% by June 2010, 50% by October 2010.	Oct-10	
	SS	Expand use of electronic public health records	Train staff to facilitate electronic storage of Sacred Heart dental records	> 3 staff trained in < 6 months.	Feb-11	
	SH	Expand and standardize Elect Record choices	Number of drop down boxes removed to limit RN/HST Health Office choices. Choices presently 279.	<80 choices	2010 School Year	
	CN	Implement plan to expand use of electronic Healthy Start records	All Healthy Start client records stored electronically. Currently have 20% stored electronically	>95%	Dec-10	

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2.2 Implement QI Agency Wide	HP	Implement QI agency-wide	Establishment of QI team and charter. Begin monitoring two global ECHD processes	EARS and Customer Satisfaction	Oct-10	
	EH	Improve GPS/GIS Display of Community EH and OSTDS Records	Production of a GIS map for each EH community EH program, OSTDS facility permit and private lift station	100%	June 2011 for all current files and ongoing for new files	
	CLN	Implement QI agency-wide - Cost of Services	Create matrix that identifies all services and associated client charges	Matrix 100% completed	Jun-11	
	WIC	Standardize Quality Nutrition Education Sessions	Counseling notes with client centered goals on all charts	>95% of charts	Oct-10	
2.3 Be More "Green"	EH	Implement three new "Green" initiatives	Implementation of >3 new green initiatives, Determine energy/carbon foot print calculation on current and new initiatives	>3 green initiatives/carbon footprints	Implement initiatives = March 2011. Calculate foot print = December 2011	
2.4 Prepare for Accreditation	DR. T	Improve deficiencies on Op Def Self Assessment	Improvement in scores	>50% of low scores	Jan-11	
	DR. T	Continued development of community health improvement plan/MAPP	No CHIP present. Create descriptive CHIP	CHIP complete	Feb-11	
2.5 Optimize Regional	PHP	Optimize Regional CHD Partners	Hold quarterly meetings to increase number of partners	>20% new partners	Sep-10	

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CHD Partnerships	DR. T	Assure ECHD participates fully in ECCHO consortium activities	Subcommittee rosters; STD & HIV MOA	Participation in all Comm; 2 MOA	May-11	
	HP	Provide support to community efforts to reduce obesity by 10% in Escambia County by the year 2020	1. Behavioral change targeted as measured by a pre and post survey. 2. Impact of social marketing campaign based upon focus groups pre and post survey. 3. Current obesity rate 28.7%	<18.7%	This action plan = June 2010. Overall = October 2020	
3.1 Reduce Childhood Obesity	NUT	Reduce obesity risk in Preschool children	Survey of Preschool Parents. Positive change in post survey response reflecting healthier food choices	>40% increase	Jun-11	
	SH	Reduce childhood obesity	Success to be measured by 1st, 3rd, 6th, and 9th grade BMI results. Baseline is 62%	64%	Jun-10	
	CLN	Provide support to community effort to reduce obesity for clinical nursing	Calculate BMI on each initial/annual Family Planning client and establish a clinic baseline. Counsel on healthy lifestyle. Reduce BMI rate of clients.	>5% reduction	Oct-10	
	CN	Support efforts of a community to reduce obesity among Healthy Start clients	The number of referrals to WIC for nutrition counseling and weight management	25	Nov-10	
	CN	Decrease infant mortality rate in Escambia County	The number of high risk infant clients and services provided to those families. Current rate is 8.5%	11%	Jul-11	

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3.2 Decrease Minority Infant Mortality	SH	Decrease infant mortality rate in Escambia County	Pre/Post test results shows increase in percentage of students who have knowledge of how to reduce rate	90%	Jun-10	
	NUT	Increase Breastfeeding initiation rates among minority participants	Show increase in State WIC Breastfeeding report	3%	Jun-11	
3.3 Improve Immunization Rates	SH	Improve Immunization compliance in public schools	Percent in compliance. Baseline is 95% (K) and 97.4% (7).	95% (set by state immunization office)	October 2009 and annually	
	CLN	Increase immunization rate in 2 year old population by private providers in Escambia County	Percent of 2 y/o that have received 4:3:1:3:3:1 (BOI 2 y/o survey. Baseline is 84.9%.	90%	Jun-11	
	HP	Increase number of flu, pneumonia, and varicella vaccinations in adults and children within Escambia County	Increase vaccination rates via ECHD HMS system data following social marketing campaigns	10%	Jun-11	
3.4 Reduce STD Rates	CLN	Reduce CT rates among 15-24 year olds in Escambia County	Identify/implement strategies to reduce CT rates.	3 strategies	Jun-10	
	CN	Reduce CT rates among 15-24 year olds in Escambia County	Use testing sites as place for target group to find information by placing educational brochures there	all sites	Oct-09	

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3.5 Expand Dental Care to the Lowest Income	DENTAL	Fluoride varnish treatments in FHC	Number ECHD clients 6 months to 4 years old who are getting treatments	120 per month	Mar-11	
3.6 Promote KidCare Agency Wide	CN	Promote KidCare to all clients we have the means to reach within the community	Increase distribution of KidCare information to more families	25%	July 2009 and ongoing	
	SH	Promote Kidcare agency wide	Increase number of children enrolled in KidCare. Presently 2,709 enrolled as of August 2009.	5%	May 2010 then annually	
	NUT	Increase distribution of Kidcare information & enrollment forms	Increase number of non-MC WIC clients who receive Kidcare fact sheet at certification	90%	Jun-11	