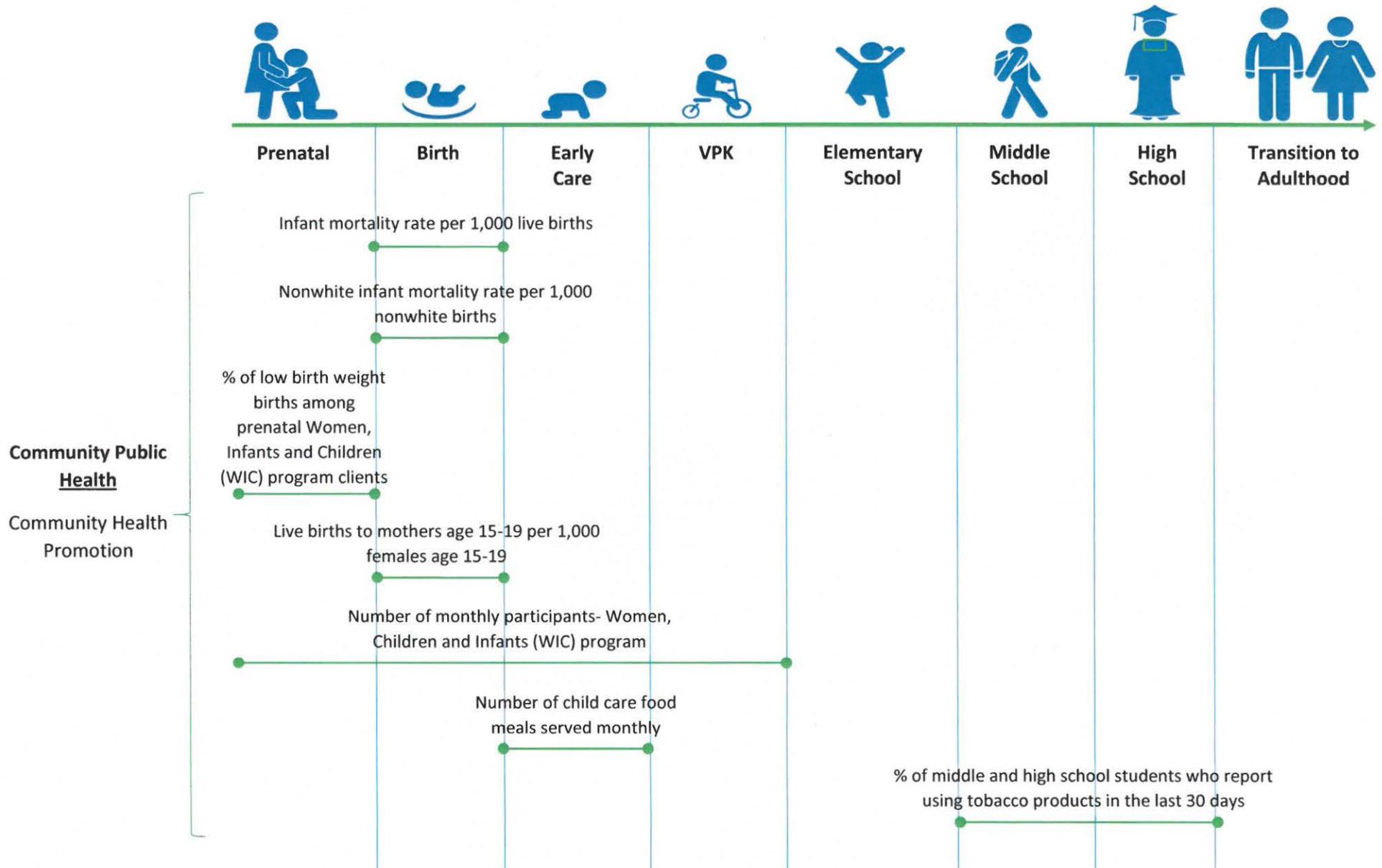


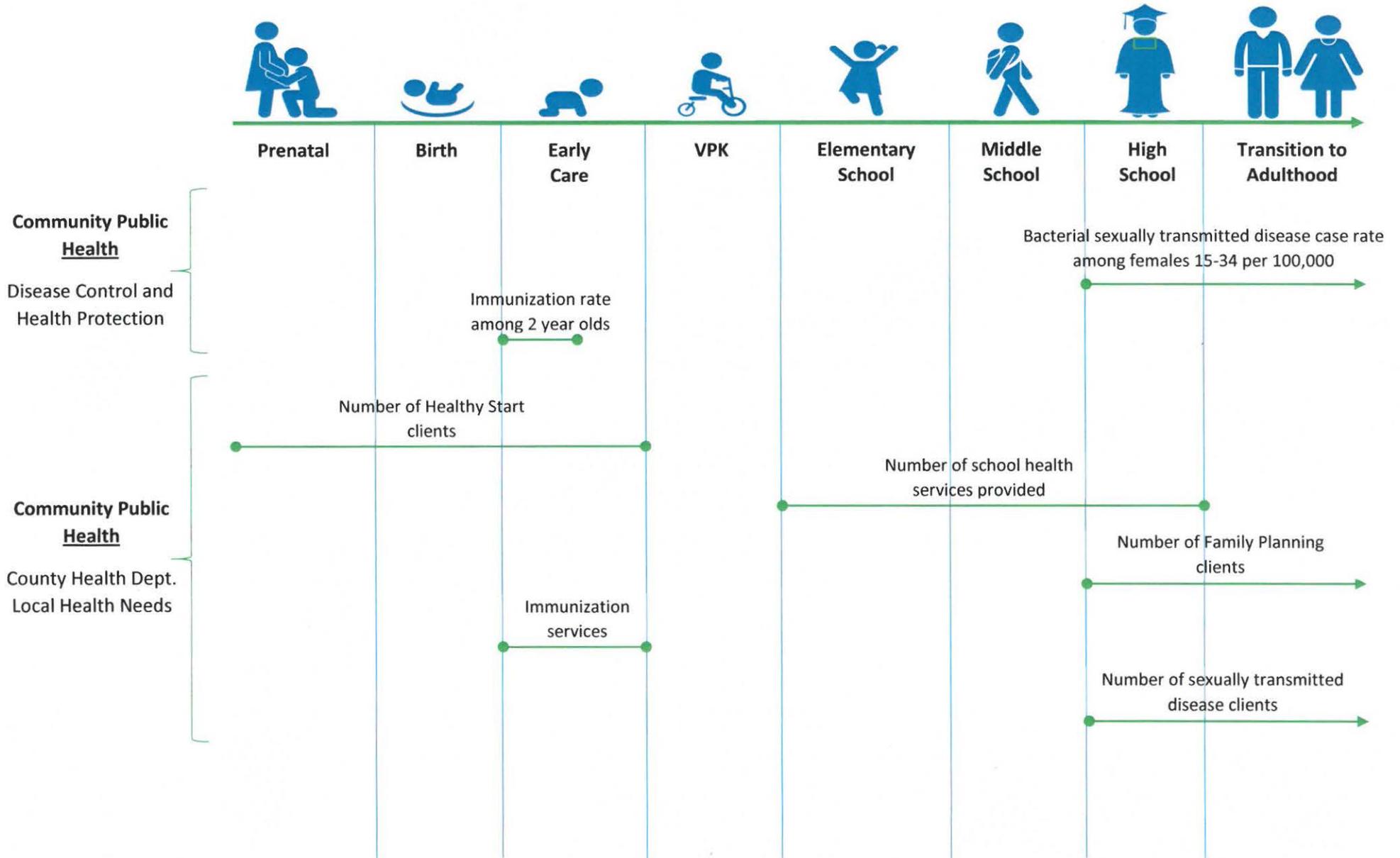
2017-22 Long Range Program Plan  
Alignment to the Cabinet's Scope

Department of  
Health



Community Public Health  
Community Health Promotion

2017-22 Long Range Program Plan  
Alignment to the Cabinet's Scope





LRPP Exhibit II - Performance Measures and Standards

Department: Department of Health Department No: 64

|   |          |
|---|----------|
| Program: EXECUTIVE DIRECTION AND SUPPORT      | 64100000 |
| Service/Budget Entity: ADMINISTRATIVE SUPPORT | 64100200 |

**NOTE: Approved primary service outcomes must be listed first.**

| Approved Performance Measures   | Approved Standard | Actual FY 2015-16 | Requested FY 2016-17 Standard | Requested FY 2017-18 Standard |
|---|-------------------|-------------------|-------------------------------|-------------------------------|
| Agency administrative costs/administrative positions as a percent of total agency costs/ agency positions | 0.80%             | 0.69%             | 0.69%                         | 0.69%                         |
| Technology costs as a percent of total agency costs   | 1.0%              | 0.96%             | 0.96%                         | 0.96%                         |

LRPP Exhibit II - Performance Measures and Standards

Department: Department of Health Department No: 64

| Program: COMMUNITY PUBLIC HEALTH  |                   | 64200000          |                               |                               |
|---|-------------------|-------------------|-------------------------------|-------------------------------|
| Service/Budget Entity: COMMUNITY HEALTH PROMOTION   |                   | 64200100          |                               |                               |
| Approved Performance Measures   | Approved Standard | Actual FY 2015-16 | Requested FY 2016-17 Standard | Requested FY 2017-18 Standard |
| Infant mortality rate per 1,000 live births   | 6.9               | 6.2               | 5.6                           | 5.4                           |
| Nonwhite infant mortality rate per 1,000 nonwhite births  | 10.7              | 11.0              | 9.4                           | 9.4                           |
| Percent of low birth weight births among prenatal Women, Infants and Children (WIC) program clients | 8.5%              | 7.79%             | 7.79%                         | 7.79%                         |
| Live births to mothers age 15 - 19 per 1,000 females 15 - 19  | 41.5              | 20.3              | 18.0                          | 16.0                          |
| Number of monthly participants-Women, Infants and Children (WIC) program                            | 500,000           | 483,885           | 500,000                       | 500,000                       |
| Number of child care food meals served monthly  | 9,030,000         | 12,603,671        | 12,263,917                    | 13,188,859                    |
| Age-adjusted death rate due to diabetes   | 20                | 19.8              | 18                            | 18                            |
| Prevalence of adults who report no leisure time physical activity                                   | 20.0%             | 23.7%             | 20.0%                         | 20.0%                         |
| Age-adjusted death rate due to coronary heart disease   | 104               | 99.3              | 98.5                          | 98.5                          |
| Percent of middle and high school students who report using tobacco products in the last 30 days    | 16.8%             | 9.4%              | 9.2%                          | 9.2%                          |

LRPP Exhibit II - Performance Measures and Standards

Department: Department of Health Department No: 64

| Program: COMMUNITY PUBLIC HEALTH  |                   | 64200000          |                               |                               |
|---|-------------------|-------------------|-------------------------------|-------------------------------|
| Service/Budget Entity: DISEASE CONTROL AND HEALTH PROTECTION  |                   | 64200200          |                               |                               |
| Approved Performance Measures   | Approved Standard | Actual FY 2015-16 | Requested FY 2016-17 Standard | Requested FY 2017-18 Standard |
| AIDS case rate per 100,000 population   | 28.0              | 11.2              | 11.5                          | 11.3                          |
| HIV/AIDS resident total deaths per 100,000 population   | 9.0               | 4.4               | 4.3                           | 4.2                           |
| Bacterial sexually transmitted disease case rate among females 15-34 per 100,000                        | 2,540             | 2,752             | 2,540                         | 2,540                         |
| Tuberculosis case rate per 100,000 population   | 6.0               | 3.0               | 2.8                           | 2.6                           |
| Immunization rate among 2 year olds   | 90.25%            | 85.5%             | 88.0%                         | 90.0%                         |
| <b>DELETE</b> - Number of patient days (A.G. Holley tuberculosis hospital)                              | 13,500            | N/A               | * N/A                         | N/A                           |
| <b>DELETE</b> - Enteric disease case rate per 100,000   | 47                | 54.77             | 40                            | 40                            |
| <b>DELETE</b> - Food and waterborne disease outbreaks per 10,000 facilities regulated by the Department | 3.55              | 1.38              | 3.35                          | 1.50                          |
| Septic tank failure rate per 1,000 within 2 years of system installation                                | 3.50              | 1.97              | 1.99                          | 1.98                          |
| Percent of required food service inspections completed  | 100.0%            | 92.08%            | 100.0%                        | 100.0%                        |
| Percent of laboratory test samples passing routine proficiency testing                                  | 100.0%            | 98.70%            | 100.0%                        | 100.0%                        |
| <b>NEW</b> - Number of confirmed foodborne disease outbreaks identified per million population          | 1.0               | 2.77              | 2.25                          | 2.25                          |

\* A.G. Holley hospital closed 2012/ measure no longer relevant

LRPP Exhibit II - Performance Measures and Standards

Department: Department of Health Department No: 64

| Program: COMMUNITY PUBLIC HEALTH  |                   | 64200000          |                               |                               |
|---|-------------------|-------------------|-------------------------------|-------------------------------|
| Service/Budget Entity: COUNTY HEALTH DEPT. LOCAL HEALTH NEEDS   |                   | 64200700          |                               |                               |
| Approved Performance Measures   | Approved Standard | Actual FY 2015-16 | Requested FY 2016-17 Standard | Requested FY 2017-18 Standard |
| Number of Healthy Start clients   | 236,765           | 351,669           | 351,700                       | 352,000                       |
| Number of school health services provided   | 18,816,788        | 24,395,411        | 28,055,216                    | 28,055,216                    |
| Number of Family Planning clients   | 219,410           | 129,363           | 146,200                       | 146,200                       |
| Immunization services   | 1,457,967         | 740,253           | 763,050                       | 696,477                       |
| Number of sexually transmitted disease clients  | 99,743            | 89,348            | 100,646                       | 100,646                       |
| Persons receiving HIV patient care from county health departments (excludes ADAP, Insurance, Housing HIV clients) | 12,821            | 31,475            | 32,000                        | 33,049                        |
| <b>REVISE</b> - Number of tuberculosis medical, screening, tests, test read services                              | 289,052           | 157,233           | 150,000                       | 150,000                       |
| Number of onsite sewage disposal systems inspected  | 407,668           | 166,944           | 164,500                       | 164,500                       |
| Number of community hygiene services  | 126,026           | 65,199            | 57,800                        | 57,800                        |
| <b>REVISE</b> - Water system/storage tank inspections/plans reviewed.   | 258,974           | 125,607           | 130,000                       | 130,000                       |
| Number of vital events recorded.  | 406,083           | 418,842           | 418,900                       | 419,000                       |

LRPP Exhibit II - Performance Measures and Standards

Department: Department of Health Department No: 64

| Program: COMMUNITY PUBLIC HEALTH   |                   | 64200000          |                               |                               |
|--|-------------------|-------------------|-------------------------------|-------------------------------|
| Service/Budget Entity: STATEWIDE HEALTH SUPPORT SERVICES   |                   | 64200800          |                               |                               |
| Approved Performance Measures  | Approved Standard | Actual FY 2015-16 | Requested FY 2016-17 Standard | Requested FY 2017-18 Standard |
| DELETE - Number of radiation facilities, devices and users regulated                                 | 75,148            | 74,962            | 103,127                       | 103,127                       |
| DELETE - Percent saved on prescription drugs compared to market price                                | 40.0%             | 67.0%             | 69.0%                         | 69.0%                         |
| Number of birth, death, fetal death, marriage and divorce records processed                          | 653,447           | 668,393           | 651,211                       | 669,111                       |
| DELETE - Percent of health and medical target capabilities met                                       | 75.0%             | *                 | *                             | *                             |
| Percent of emergency medical service providers found to be in compliance during licensure inspection | 92.0%             | 95%               | 95%                           | 96%                           |
| Number of emergency medical technicians and paramedics certified                                     | 50,000            | 67,700            | 71,000                        | 71,000                        |
| Number of emergency medical services providers licensed  | 262               | 274               | 280                           | 280                           |
| DELETE - Number of students in health professions who do a rotation in a medically underserved area  | 5,598             | **                | **                            | **                            |
| REVISE - Percent of individuals with brain and spinal cord injuries reintegrated to the community    | 91.7%             | 95.8%             | 95.8%                         | 95.8%                         |
| DELETE - Number of providers who receive continuing education  | 16,750            | **                | **                            | **                            |
| REVISE - Number of brain and spinal cord injured individuals served                                  | 2,985             | 2,141             | 2,203                         | 2,203                         |
| NEW - Level of preparedness against national standards   | N/A               | 5.3               | 7.0                           | 9.0                           |
| NEW - Number of errors per million per yearly number of repacks/prepacks to pharmacy customer        | N/A               | .03%              | 1.06%                         | .03%                          |
| NEW - Number of errors per million per yearly number of Pharmacy dispenses to the pharmacy customer  | N/A               | .03%              | 0.08%                         | .03%                          |
| NEW - Percent radioactive material inspection violations corrected in 120 days                       | N/A               | 100%              | 98%                           | 100%                          |
| NEW - Percent of x-ray machine inspection violations corrected within 120 days.                      | N/A               | 69%               | 95%                           | 95%                           |

\* no longer measureable

\*\* unfunded 2011-12-not measurable

LRPP Exhibit II - Performance Measures and Standards

Department: Department of Health Department No: 64

| Program: CHILDRENS MEDICAL SERVICES  |                   | 64300000          |                               |                               |
|--|-------------------|-------------------|-------------------------------|-------------------------------|
| Service/Budget Entity: CHILDRENS MEDICAL SERVICES  |                   | 64300100          |                               |                               |
| Approved Performance Measures  | Approved Standard | Actual FY 2015-16 | Requested FY 2016-17 Standard | Requested FY 2017-18 Standard |
| Percent of families served with a positive evaluation of care  | 96.6%             | *N/A              | 84.0%                         | 84.5%                         |
| <b>REVISE</b> - Percent of CMS Network enrollees in compliance with periodicity schedule for well child care             | 91.0%             | 71.4%             | 75.0%                         | 80.4%                         |
| <b>DELETE</b> - Percent of eligible infants/toddlers provided CMS early intervention services                            | 100.0%            | **                | **                            | **                            |
| <b>REVISE</b> -Percent Child Protection Team assessments to Family Safety and Preservation within established            | 92.0%             | 96.0%             | 96.0%                         | 96.0%                         |
| Percent CMS Network enrollees in compliance with appropriate use of asthma medications (national measure)                | 94.0%             | 90.6%             | **93%                         | **93%                         |
| Number of children enrolled in CMS Program Network (Medicaid and Non-Medicaid)   | 64,740            | 72,351            | 74,521                        | 76,757                        |
| <b>DELETE</b> - Number of children provided early intervention services  | 47,502            | **                | **                            | **                            |
| <b>DELETE</b> -Number of children receiving Child Protection Team (CPT) assessments                                      | 25,123            | 26,050            | 32,881                        | 32,881                        |
| <b>NEW</b> - Percentage of children with mandatory allegations of abuse and neglect that receive CPT assessments within  | N/A               | 56%               | 56%                           | 60%                           |
| <b>NEW</b> - Percentage of children whose individualized family support plan session was held within 45 days of referral | N/A               | TBD               | 94%                           | 94%                           |
| <b>NEW</b> - Percentage of cases that received multidisciplinary staffing  | N/A               | 2.0%              | 5.0%                          | 10.0%                         |

\*stwd satisfaction survey not avail until -01-2017.  
 \*\*No longer measureable- propose new measures

# Florida Department of Health Goals, Objectives, Service Outcomes and Performance Projections Tables

## GOAL #1 Healthy Moms and Babies

**OBJECTIVE 1A:** Improve maternal and infant health  
**OUTCOME:** Infant mortality rate per 1,000 live births

| Baseline/ Year | FY 2017-18 | FY 2018-19 | FY 2019-20 | FY 2020-21 | FY 2021-22 |
|----------------|------------|------------|------------|------------|------------|
| 7.1 / 1997     | 5.4        | 5.3        | 5.1        | 5.0        | 4.9        |

**OBJECTIVE 1B :** Improve health care disparities in maternal and infant health  
**OUTCOME:** Black infant mortality rate per 1,000 nonwhite births

| Baseline/ Year | FY 2017-18 | FY 2018-19 | FY 2019-20 | FY 2020-21 | FY 2021-22 |
|----------------|------------|------------|------------|------------|------------|
| 12.4 / 1999    | 9.8        | 9.6        | 9.3        | 9.1        | 8.9        |

**OBJECTIVE 1C:** Reduce births to teenagers  
**OUTCOME:** Live births to mothers age 15-19 per 1,000 females age 15-19

| Baseline/ Year | FY 2017-18 | FY 2018-19 | FY 2019-20 | FY 2020-21 | FY 2021-22 |
|----------------|------------|------------|------------|------------|------------|
| 58.2 / 1997    | 16.0       | 15.6       | 15.2       | 14.8       | 14.5       |

**OBJECTIVE 1D:** Identify and reduce the incidence of bacterial STDs among females aged 15 - 34  
**OUTCOME:** Bacterial STD case rate among females 15 - 34 per 100,000

| Baseline/ Year | FY 2017-18 | FY 2018-19 | FY 2019-20 | FY 2020-21 | FY 2021-22 |
|----------------|------------|------------|------------|------------|------------|
| 2377.7 / 2007* | 2,540      | 2,490      | 2,465      | 2,440      | 2,415      |

## GOAL #2: Long Healthy Life

**OBJECTIVE 2A:** Increase the percentage of adults who are at a healthy weight  
**OUTCOME:** Percent of adults who are at a healthy weight

| Baseline/ Year | FY 2017-18 | FY 2018-19 | FY 2019-20 | FY 2020-21 | FY 2021-22 |
|----------------|------------|------------|------------|------------|------------|
| 34.9% / 2011   | 38.2       | 39.0       | 39.8       | 40.6       | 41.4       |

**OBJECTIVE 2B:** Reduce the AIDS case rate  
**OUTCOME:** AIDS case rate per 100,000 population

| Baseline/ Year | FY 2017-18 | FY 2018-19 | FY 2019-20 | FY 2020-21 | FY 2021-22 |
|----------------|------------|------------|------------|------------|------------|
| 40.7 / 1997    | 11.3       | 11.1       | 10.8       | 10.6       | 10.4       |

**OBJECTIVE 2C :** Provide a family-centered, coordinated managed care system for children with special health care needs.

**OUTCOME:** Percent of families served reporting a positive evaluation of care provided.

| Baseline/ Year  | FY 2017-18 | FY 2018-19 | FY 2019-20 | FY 2020-21 | FY 2021-22 |
|-----------------|------------|------------|------------|------------|------------|
| 84.0% / 2014-15 | 84.5       | 85         | 85.5       | 86         | 86.5       |

# Florida Department of Health Goals, Objectives, Service Outcomes and Performance Projections Tables

## GOAL #2: Long, Healthy Life (continued)

**OBJECTIVE 2D :** Ensure that CMS clients receive appropriate and high quality care  
**OUTCOME:** Percent of CMS enrollees in compliance with periodicity schedule for well child care.

| Baseline/ Year  | FY 2017-18 | FY 2018-19 | FY 2019-20 | FY 2020-21 | FY 2021-22 |
|-----------------|------------|------------|------------|------------|------------|
| 65.2% / 2005-06 | 76.5       | 78.0       | 79.6       | 81.0       | 82.0       |

**OBJECTIVE 2E:** Compliance with appropriate use of asthma medications (national measure)  
**OUTCOME:** Percent of CMS Plan enrollees in compliance with appropriate use of asthma medications

| Baseline/ Year  | FY 2017-18 | FY 2018-19 | FY 2019-20 | FY 2020-21 | FY 2021-22 |
|-----------------|------------|------------|------------|------------|------------|
| 92.5% / 2014-15 | 93.0       | 93.5       | 94.0       | 94.5       | 95.0       |

**OBJECTIVE 2F :** Provide early intervention services for eligible children with special health care needs  
**OUTCOME:** Percent of children whose individual Family Support Plan session was held within 45 days of referral

| Baseline/ Year  | FY 2017-18 | FY 2018-19 | FY 2019-20 | FY 2020-21 | FY 2021-22 |
|-----------------|------------|------------|------------|------------|------------|
| 69.0% / 2004-05 | 94.0       | 94.5       | 95.0       | 97         | 98         |

**OBJECTIVE 2G:** Prevent deaths from all causes of unintentional injury among Florida resident children ages 0-19  
**OUTCOME:** By 2021-22, reduce the baseline of 10.4 (2013) per 100,000 children ages 0-19 to 6.5.

| Baseline/ Year | FY 2017-18 | FY 2018-19 | FY 2019-20 | FY 2020-21 | FY 2021-22 |
|----------------|------------|------------|------------|------------|------------|
| 10.4 / 2013    | 7.8        | 7.3        | 6.9        | 6.7        | 6.5        |

**OBJECTIVE 2H:** Develop and maintain a continuous, statewide system of care for all injured patients, increase system preparedness, and decrease morbidity and mortality due to traumatic injury.  
**OUTCOME:** By 2021-22 reduce the statewide trauma mortality rate to meet the average U.S. trauma mortality rate of 3.0% or less. (2012 US Trauma mortality rate = 3.8%)

| Baseline/ Year | FY 2017-18 | FY 2018-19 | FY 2019-20 | FY 2020-21 | FY 2021-22 |
|----------------|------------|------------|------------|------------|------------|
| 6.5% / 2002    | 3.6        | 3.4        | 3.2        | 3.1        | 3.0        |

**OBJECTIVE 2I:** Increase the number of children receiving a preventive dental service.  
**OUTCOME:** Percent of Medicaid enrolled children receiving a preventive dental service statewide by any dental provider.

| Baseline/ Year | FY 2017-18 | FY 2018-19 | FY 2019-20 | FY 2020-21 | FY 2021-22 |
|----------------|------------|------------|------------|------------|------------|
| 13.0% / 2011   | 33.02      | 35.02      | 37.02      | 39.0       | 41.0       |

**OBJECTIVE 2J:** Assist persons suffering brain and spinal cord injuries to rejoin their communities  
**OUTCOME:** Percent of Brain & Spinal Cord Injury clients reintegrated to their communities at an appropriate level of functioning

| Baseline/ Year  | FY 2017-18 | FY 2018-19 | FY 2019-20 | FY 2020-21 | FY 2021-22 |
|-----------------|------------|------------|------------|------------|------------|
| 79.2% / 1995-96 | 95.8       | 95.8       | 95.8       | 95.8       | 95.8       |

# Florida Department of Health Goals, Objectives, Service Outcomes and Performance Projections Tables

## GOAL #2: Long, Healthy Life (continued)

**OBJECTIVE 2K:** Reduce the tuberculosis rate  
**OUTCOME:** Tuberculosis case rate per 100,000

| Baseline/ Year | FY 2017-18 | FY 2018-19 | FY 2019-20 | FY 2020-21 | FY 2021-22 |
|----------------|------------|------------|------------|------------|------------|
| 9.5 / 1997     | 2.6        | 2.4        | 2.2        | 2.1        | 2.0        |

## GOAL #3: Readiness for Emerging Health Threats

**OBJECTIVE 3A:** By June 30, 2016, achieve and maintain national Public Health Preparedness Capabilities and Standards  
**OUTCOME:** Level of preparedness against national standards (on a scale of 1 to 10)

| Baseline/ Year | FY 2017-18 | FY 2018-19 | FY 2019-20 | FY 2020-21 | FY 2021-22 |
|----------------|------------|------------|------------|------------|------------|
| 5.6 / 2009     | 9          | 9          | 10         | 10         | 10         |

**OBJECTIVE 3B:** Reduce the proportion of Floridians, particularly young Floridians, who use tobacco  
**OUTCOME:** Percent of middle and high school students who report using tobacco in the last 30 days

| Baseline/ Year  | FY 2017-18 | FY 2018-19 | FY 2019-20 | FY 2020-21 | FY 2021-22 |
|-----------------|------------|------------|------------|------------|------------|
| 30.4% / 1997-98 | 9.2        | 9.0        | 8.8        | 8.7        | 8.6        |

**OBJECTIVE 3C:** Increase the immunization rate among young children  
**OUTCOME:** Percent of two year olds fully immunized

| Baseline/ Year | FY 2017-18 | FY 2018-19 | FY 2019-20 | FY 2020-21 | FY 2021-22 |
|----------------|------------|------------|------------|------------|------------|
| 82.6% / 1997   | 90.0       | 90.5       | 91.0       | 91.5       | 92.0       |

## GOAL #4: Effective Agency Processes

**OBJECTIVE 4A:** Complete medical disability determinations in an accurate manner  
**OUTCOME:** Percent of disability determinations completed accurately as determined by the Social Security Administration

| Baseline/ Year  | FY 2017-18 | FY 2018-19 | FY 2019-20 | FY 2020-21 | FY 2021-22 |
|-----------------|------------|------------|------------|------------|------------|
| 90.6% / 1996-97 | >97%       | >97%       | >97%       | >97%       | >97%       |

**OBJECTIVE 4B:** Provide specialized team assessments for children suspected of suffering abuse or neglect  
**OUTCOME:** Percent of Child Protection Team assessments provided to Family Safety within established timeframes.

| Baseline/ Year  | FY 2017-18 | FY 2018-19 | FY 2019-20 | FY 2020-21 | FY 2021-22 |
|-----------------|------------|------------|------------|------------|------------|
| 92.0% / 2014-15 | 96%        | 96.5%      | 97%        | 97%        | 97%        |

**OBJECTIVE 4C:** Assist in the placement of volunteer health care providers in underserved areas  
**OUTCOME:** Increase the number of contracted health care practitioners in the Volunteer Health Care Provider Program

| Baseline/ Year   | FY 2017-18 | FY 2018-19 | FY 2019-20 | FY 2020-21 | FY 2021-22 |
|------------------|------------|------------|------------|------------|------------|
| 12,867 / 2011-12 | 13,253     | 13,651     | 14,060     | 14,482     | 14,916     |

# Florida Department of Health Goals, Objectives, Service Outcomes and Performance Projections Tables

## GOAL #5: Regulatory Efficiency

**OBJECTIVE 5A:** Effectively address threats to public health from specific practitioners.  
**OUTCOME:** Percent of emergency actions taken within 30 days of receipt of a priority complaint

| Baseline/ Year  | FY 2017-18 | FY 2018-19 | FY 2019-20 | FY 2020-21 | FY 2021-22 |
|-----------------|------------|------------|------------|------------|------------|
| 8.99% / 2009-10 | 60         | 60         | 60         | 60         | 60         |

**OBJECTIVE 5B:** Ensure Emergency Medical Service (EMS) providers and personnel meet standards of care  
**OUTCOME:** Percent of EMS providers found to be in compliance during licensure inspection

| Baseline/ Year  | FY 2017-18 | FY 2018-19 | FY 2019-20 | FY 2020-21 | FY 2021-22 |
|-----------------|------------|------------|------------|------------|------------|
| 91.0% / 1997-98 | 96         | 97         | 98         | 99         | 99         |

**OBJECTIVE 5C:** Monitor individual sewage systems to ensure adequate design and proper function  
**OUTCOME:** Septic tank failure rate per 1,000 within two years of system installation

| Baseline/ Year | FY 2017-18 | FY 2018-19 | FY 2019-20 | FY 2020-21 | FY 2021-22 |
|----------------|------------|------------|------------|------------|------------|
| 3.0 / 1997     | 1.98       | 1.97       | 1.96       | 1.95       | 1.9        |

**OBJECTIVE 5D:** Ensure regulated facilities are operated in a safe and sanitary manner  
**OUTCOME:** Percent of required food service inspections completed

| Baseline/ Year | FY 2017-18 | FY 2018-19 | FY 2019-20 | FY 2020-21 | FY 2021-22 |
|----------------|------------|------------|------------|------------|------------|
| 80.15% / 2009  | 96         | 97         | 98         | 98.50      | 99.0       |

**OBJECTIVE 5E:** Protect the public from food and waterborne diseases  
**OUTCOME:** Confirmed foodborne disease outbreaks identified per million population\*

| Baseline/ Year | FY 2017-18 | FY 2018-19 | FY 2019-20 | FY 2020-21 | FY 2021-22 |
|----------------|------------|------------|------------|------------|------------|
| 2.69 / 2011    | 3.98       | 4.03       | 4.08       | 4.13       | 4.2        |

\*Indication more disease being identified by improved surveillance/implementation of more rigorous inspection process since baseline