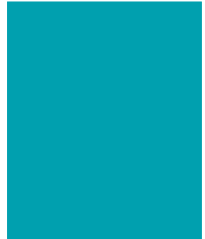


Florida Department of Health  
**Division of Medical Quality  
Assurance Strategic Plan  
2016-2018**



**Rick Scott**  
GOVERNOR



**Celeste Philip, MD, MPH**  
State Surgeon General  
and Secretary

**Version 1.3**  
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**Produced by:**  
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# Executive Summary

The Florida Department of Health conducted a strategic planning process during the summer of 2015 to define the direction and course of the agency for consumers, employees, administrators and legislators for the next three years. This strategic plan will position the Department to operate as a sustainable integrated public health system under the current economic environment and to provide our residents and visitors with high quality public health services. This is a living document that we will evaluate and update regularly to address new challenges posed by the changing environment of public health in Florida.

After executive leadership approved the Agency Strategic Plan strategic priorities, goals and objectives, each objective was assigned to a division to implement and monitor. In turn, each division created their own strategic plan that contains their objectives from the Agency Strategic Plan plus other goals, strategies and objectives that emerged as supporting the Department's strategic priorities from their environmental scan and SWOT analysis.

## **Mission – Why do we exist?**

To protect, promote and improve the health of all people in Florida through integrated state, county and community efforts.

## **Vision – What do we want to achieve?**

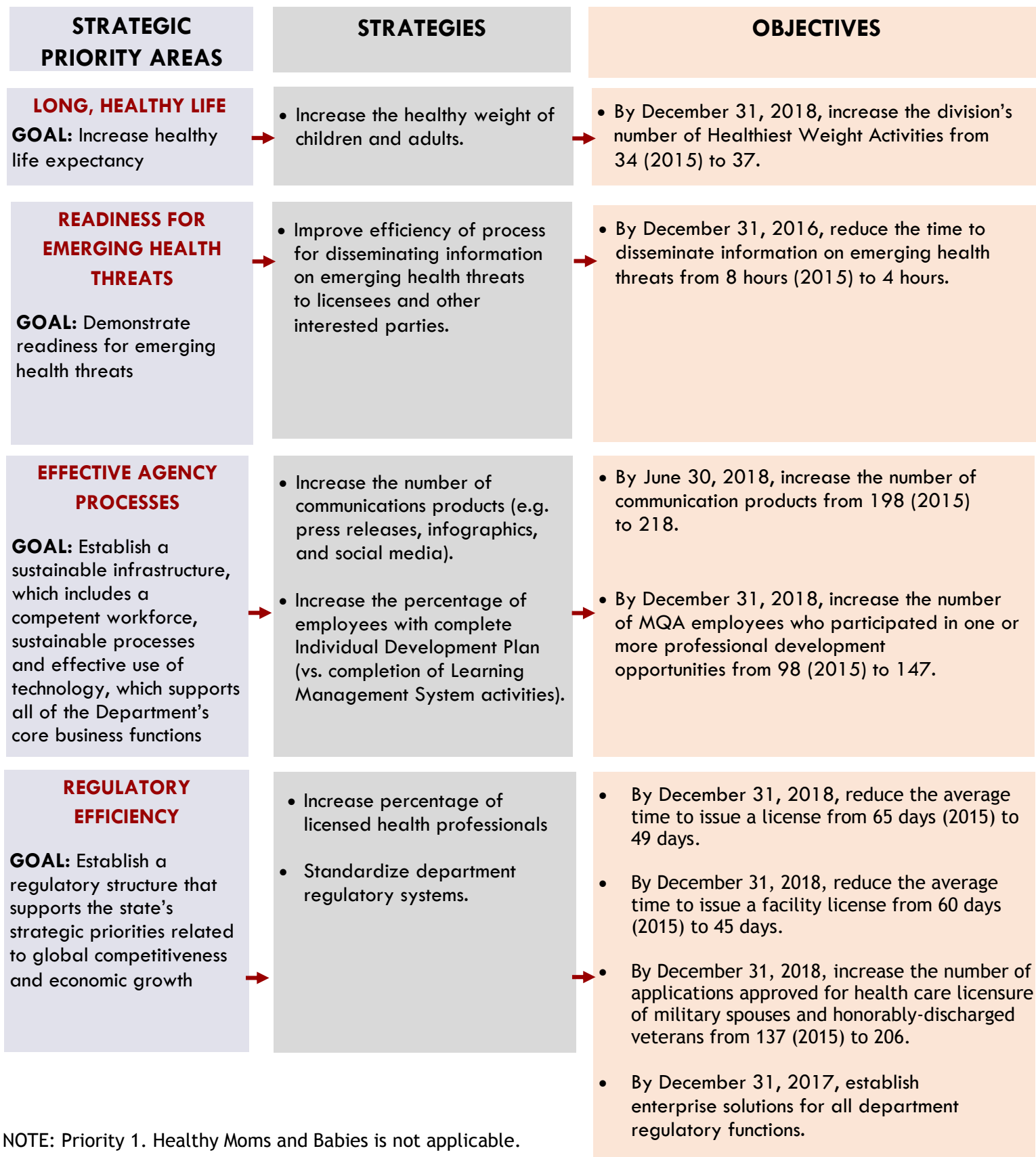
To be the Healthiest State in the Nation.

## **Values – What do we use to achieve our mission and vision?**

- I**nnovation: We search for creative solutions and manage resources wisely.
- C**ollaboration: We use teamwork to achieve common goals & solve problems.
- A**ccountability: We perform with integrity & respect.
- R**esponsiveness: We achieve our mission by serving our customers & engaging our partners.
- E**xcellence: We promote quality outcomes through learning & continuous performance improvement.

The Division of Medical Quality Assurance (MQA) is dedicated to the mission, vision and values of the Department. Working in conjunction with 22 boards and six councils, MQA established the strategic priorities set forth in this plan. Over the next three years, MQA will work diligently to accomplish these goals and further contribute to the Department's vision to be the healthiest state in the nation.

# STRATEGY MAP



NOTE: Priority 1. Healthy Moms and Babies is not applicable.

# Strategic Priorities

## Priority 1: Healthy Moms and Babies: Not applicable

## Priority 2: Long, Healthy Life

Goal 2.1: Increase healthy life expectancy

Strategy	Objective
2.1.1 Increase the healthy weight of children and adults.	A By December 31, 2018, increase the division's number of Healthiest Weight Activities from 34 (2015) to 37.

## Priority 3: Readiness for Emerging Health Threats

Goal 3.1: Demonstrate readiness for emerging health threats

Strategy	Objective
3.1.1 Improve efficiency of process for disseminating information on emerging health threats to licensees and other interested parties.	A By December 31, 2016, reduce the time to disseminate information on emerging health threats from 8 hours (2015) to 4 hours.

## Priority 4: Effective Agency Processes

Goal 4.1: Establish a sustainable infrastructure, which includes a competent workforce, sustainable process and Effective use of technology, which supports all of the Department's core business functions

Strategy	Objective
4.1.1 Increase the number of communications products (e.g. press releases, infographics, and social media).	A By June 30, 2018, increase the number of communication products from 198 (2015) to 218.
4.1.2 Increase the percentage of employees with complete Individual Development Plan (vs. completion of Learning Management System activities)	A By December 31, 2018, increase the number of MQA employees who participated in one or more professional development opportunities from 98 (2015) to 147.

## Strategic Priority 5: Regulatory Efficiency

Goal 5.1: Establish a regulatory structure that supports the state's strategic priorities related to global competitiveness and economic growth

Strategy	Objective
5.1.2 Increase percentage of licensed health professionals	A By December 31, 2018, reduce the average time to issue a license from 65 days (2015) to 49 days.
	B By December 31, 2018, reduce the average time to issue a facility license from 60 days (2015) to 45 days.
	C By December 31, 2018, increase the number of applications approved for health care licensure of military spouses and honorably-discharged veterans from 137 (2015) to 206.
5.1.3 Standardize department regulatory systems.	A By December 31, 2017, establish enterprise solutions for all department regulatory functions.

# Appendix A

## Division of Medical Quality Assurance Strategic Planning Participants

The following list features all attendees of the division's strategic planning process meetings, including the MQA Strategic Planning Retreat held in July 2015 and the Healthiest Weight Liaisons and Board Chairs/Vice Chairs Annual Long-range Planning Meetings held in September 2015. Although not included individually in the list, all MQA employees, management and board/council members participated in a Strengths, Weaknesses, Opportunities and Threats (SWOT) survey in 2015.

### **MQA Executive Leadership**

Lucy C. Gee, MS  
Director, Division of Medical  
Quality Assurance

Lola Pouncey  
Chief, Bureau of Operations

Adrienne Rodgers, JD, BSN  
Chief, Bureau of Health Care  
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### **DOH Executive Leadership**

Celeste Philip, MD, MPH  
Deputy Secretary for Health  
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Aid Specialists, Clinical Social  
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Audiology, Massage Therapy,  
Acupuncture and the Council of  
Licensed Midwifery

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Executive Director, Boards of  
Occupational Therapy, Physical  
Therapy, Psychology, Respiratory  
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Nutrition and Electrolysis

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Laboratory Personnel, Nursing  
Home Administrators, Optometry,  
Orthotists and Prosthetists,  
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Aid Specialists, Clinical Social  
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# Appendix B

## Planning Summary

The Division of Medical Quality Assurance (MQA) management team, made up of the division director, bureau chiefs and other key staff, oversaw the development of this strategic plan. Prior to its first strategic planning meeting, a SWOT analysis (Appendix C) was sent out to MQA executive management and employees. The results were analyzed to determine the similarities and differences. Gaps were identified and addressed during a strategic planning retreat in which MQA management met with the division's Strategic Planning Unit to discuss best practices and solutions. The meeting was the first of many in-depth discussions to develop a strategic plan that promoted MQA's dedication to making Florida the healthiest state to live, work, practice and retire.

Another SWOT was developed and designed for MQA's executive management and board members to determine if the division's strategies and mission aligned with those of its health care boards. The division director presented the results of the survey at the Annual Board Chairs/Vice Chairs Long-range Planning meeting to executive management and board members. Meeting attendees took part in a facilitated discussion that included information management, communications, programs and services, budget (financial sustainability), and workforce development. Leadership staff conducted an environmental scan of the agency (sources listed in Appendix E). Results were reviewed and the progress of the current *Department of Health Strategic Plan* was analyzed to formulate additional strategies and objectives for each priority area. The revised proposal was then routed back to executive leadership for comment and approval.

The following is the strategic plan schedule of meetings:

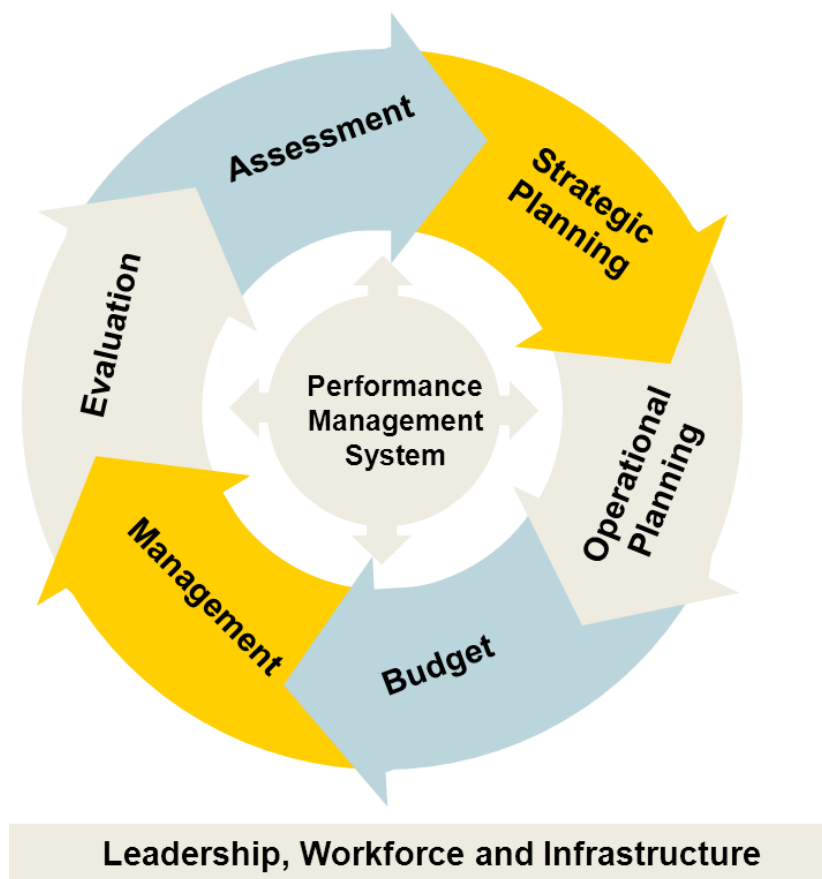
DATE	MEETING TOPIC	ATTENDEES
06/30/15	SWOT sent out to MQA management and employees	MQA management and employees
07/15/15	MQA Employee and management SWOT result analysis	Strategic Planning Services Team
07/23/15	Strategic Planning Retreat: discussed MQA's strategic focus aligned with DOH's strategic plan	Executive Management Team
07/24/15	Strategic plan draft development for five years	Executive Management Team, Strategic Planning Services Team
07/24/15	Strength, weaknesses, opportunities and threats (SWOT) analysis. Developed SWOT surveys	Executive Management Team Strategic Planning Services Team
08/12/15	SWOT survey sent out to MQA management and board members	Executive Management Team, MQA Management, Strategic Planning Services Team, External Partners
09/02/15	External SWOT survey results analysis.	Strategic Planning Services Team
09/23/15	2 <sup>nd</sup> Annual Healthiest Weight Liaison meeting	Executive Management Team, MQA Management, Strategic Planning Services Team, External Partners
09/24/15	Annual Board Chairs/ Vice Chairs Long-range Planning Meeting	See Appendix A
09/30/15	EMT Strategic Plan Development	Executive Management Team, MQA Management, Strategic Planning Services Team
11/12/15	Discussed new strategic plan format and assigned strategy managers	Executive Management Team, MQA Management, Strategic Planning Services Team

## Monitoring Summary

As depicted in the image below, strategic planning is a key component of the larger performance management system. This statewide performance management system is the cornerstone of the Department's organizational culture of accountability and performance excellence.

The Division of Medical Quality Assurance (MQA) leadership team will be responsible for monitoring and reporting progress on the goals and objectives of this strategic plan. The team meets quarterly to discuss recommendations about tools and methods that integrate performance management into sustainable business practices. Annually, MQA's strategic plan progress report will be developed and presented to executive leadership, assessing progress toward reaching goals and objectives, and achievements for the year. The plan will be reviewed and revised by January each year, based on an assessment of availability of resources, data and progress.

In turn, the objectives that come from the Agency Strategic Plan that have been assigned to this division for implementation and quarterly reporting to *Florida Health Performs* will be reviewed by the Agency's SPIL Team on a quarterly basis for progress toward goals, and an annual progress report will also be developed. The SPIL Team will revise the *Agency Strategic Plan* annually, based on their assessment of resources, data and progress.



# Appendix C

## Strengths, Weaknesses, Opportunities and Threats

### Strengths

Customer service
Enforcement/public protection
Communication
Teamwork
Leadership
Commitment of board members to the protection of the public
Expertise of board/council members
Attendance at board/council meetings
Consumer member participation in board/council meetings
Licensure requirements for health care practitioners
Standards of practice in statute
Rule-making authority of boards/councils
Board staff
Board legal counsel
Health care practitioner licensure process
Department of Health leadership
Board/council meetings
Impaired practitioner programs: Professionals Recovery Network (PRN) and Intervention Project for Nurses (IPN)
Expertise of prosecutors
Quality of settlement agreements
Prosecuting attorney staffing
Costs to prosecute

### Weaknesses

Technology
Workforce recruitment/retention
Communication/transparency with employees
Non-competitive salaries
Managers who do not know the processes they manage
Public participation in board/council meetings
Cross-disciplinary collaboration
Consumer member participation in board/council meetings
Timely appointments to boards/councils
Legislative change process
Rule-making authority of boards/councils
North Carolina State Board of Dental Examiners v. Federal Trade Commission (Supreme Court Ruling-Antitrust Laws)
External communications
Administrative allocation of trust fund

Board/council meetings
Internal communications
Timely prosecution
Quality of settlement agreements
Costs to prosecute
Prosecuting attorney staffing
Expertise of prosecutors
<b>Opportunities</b>
Process improvement
Hiring process
Inter-agency information sharing
Involving front-line employees in process improvements
Cross-disciplinary collaboration
Consumer member participation in board/council meetings
Public participation in board/council meetings
Rule-making authority of boards/councils
Legislative change process
Standards of practice in statute
External communications
Board/council meetings
Internal communications
Health care practitioner licensure process
Timely prosecution
Quality of settlement agreements
Impaired practitioner programs: Professionals Recovery Network (PRN) and Intervention Project for Nurses (IPN)
Expertise of prosecutors
<b>Threats</b>
Workforce turnover/employees recruited by other agencies
Legislature/legislative mandates
Non-competitive salaries
Constant reorganization
Timely appointments to boards/councils
Cross-disciplinary collaboration
Attendance at board/council meetings
Expertise of board/council members
Commitment of board/council members to the protection of the public
Legislative change process
Rule-making authority of boards/councils
Standards of practice in statute
North Carolina State Board of Dental Examiners v. Federal Trade Commission (Supreme Court Ruling-Antitrust Laws)
External communications
Administrative allocation of trust fund

Health care practitioner licensure process
Timely prosecution
Costs to prosecute
Expertise of prosecutors
Prosecuting attorney staffing

# Appendix D

## Work Plan and Alignment

Objective	LRPP	SHIP	QI Plan	Agency Strategic Plan Alignment	Bureau Assigned To
By June 30, 2018, increase the division's number of Healthiest Weight Activities by 10% from 13 (2015) to 14.	2A	CD1.2.1	NA	2.1.1	Operations
By 2016, reduce the time to disseminate information on emerging health threats by 50% from 24 hours (2015) to 12 hours.	NA	NA	NA	NA	Operations
By 2016, increase the number of communication products by 10% from 198 (2015) to 218.	NA	NA	NA	4.1.1	Operations
By 2018, increase the number of MQA employees who participated in one or more professional development opportunities by 50% from 98 (2015) to 147.	NA	HI3.1.0	NA	4.1.2	Operations
By 2018, reduce the average time to issue a license by 25% from 65 days (2015) to 49 days.	MQA Measure #1	AC2.1.3	NA	5.1.2	Health Care Practitioner Regulation
By 2018, reduce the average time to issue a facility license by 25% from 60 days (2015) to 45 days.	MQA Measure #1	AC2.1.3	NA	5.1.2	Health Care Practitioner Regulation
By 2016, increase the number of applications approved for health care licensure of military spouses and honorably discharged veterans by 50% from 137 (2015) to 206.	NA	AC2.1.0	NA	5.1.2	Health Care Practitioner Regulation
By December 31, 2017, establish enterprise solutions for all department regulatory functions.	NA	5D	NA	5.1.3	Operations

**LRPP:** Long Range Program Plan

**SHIP:** State Health Improvement Plan

**QI:** Quality Improvement



# Appendix E

## Environmental Scan Resources

1. 2015 State Themes and Strengths Assessment
2. [Agency Strategic Plan Status Report](#)
3. [Division of Medical Quality Assurance Annual Report and Long-range Plan FY 2014-2015](#)
4. Division of Medical Quality Assurance Employee Training Log
5. Employee Satisfaction Survey 2015 Results
6. [Florida Board of Acupuncture Twitter](#)
7. [Florida Board of Athletic Training Twitter](#)
8. [Florida Board of Chiropractic Medicine Twitter](#)
9. [Florida Board of Clinical Laboratory Personnel Twitter](#)
10. [Florida Board of Dentistry Twitter](#)
11. [Florida Board of Hearing Aid Specialists Twitter](#)
12. [Florida Board of Massage Therapy Twitter](#)
13. [Florida Board of Medicine Twitter](#)
14. [Florida Board of Clinical Social Work, Marriage & Family Therapy, and Mental Health Counseling Twitter](#)
15. [Florida Board of Nursing Twitter](#)
16. [Florida Board of Nursing Home Administrators Twitter](#)
17. [Florida Board of Occupational Therapy Twitter](#)
18. [Florida Board of Optometry Twitter](#)
19. [Florida Board of Opticianry Twitter](#)
20. [Florida Board of Orthotists and Prosthetists Twitter](#)
21. [Florida Board of Osteopathic Medicine Twitter](#)
22. [Florida Board of Pharmacy Twitter](#)
23. [Florida Board of Physical Therapy Twitter](#)
24. [Florida Board of Podiatric Medicine Twitter](#)
25. [Florida Board of Psychology Twitter](#)
26. [Florida Board of Respiratory Care Twitter](#)
27. [Florida Board of Speech-Language Pathology and Audiology Twitter](#)
28. [Florida Department of Health Facebook](#)
29. [Florida Department of Health, Long Range Program Plan 2015-16 through 2019-20](#)
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32. [Florida Department of Health Twitter](#)
33. [Florida Department of Health, Year in Review 2013-2014](#)
34. [Florida Department of Health, Florida Health Impact Report 2014-15 by the Numbers](#)
35. [Florida Strategic Plan for Economic Development](#)
36. [Healthiest Weight State Profile](#)
37. [Physician Workforce Annual Report 2014](#)
38. [State Monthly Economic Updates](#)