Welcome and Open Meeting

Joseph A. Ladapo, MD, PhD
State Surgeon General
Florida Department of Health
State Health Improvement Plan
Overview and Updates

Emma C. Spencer, PhD, MPH
Director, Division of Public Health Statistics and Performance Management
Florida Department of Health
State Health Improvement Plan (SHIP) Resources

- State Health Improvement Plan Annual Review Presentation
- State Health Improvement Plan Proposed Goals and Objectives by Priority Area
- State Health Improvement Plan Steering Committee Charter
- SHIP Website: Florida SHIP – State Health Improvement Plan – Florida’s 2022-2026 State Health Improvement Plan
SHIP Development

1. Setting Health Priorities
2. Priority Area Workgroups (PAWs) finalize Goals
3. Present proposed Objectives to Steering Committee for approval
4. Implement 2022-2026 State Health Improvement Plan
SHIP Priority Areas

1. Alzheimer’s Disease and Related Dementias
2. Chronic Diseases and Conditions
3. Injury, Safety and Violence
4. Maternal and Child Health
5. Mental Well-being and Substance Abuse Prevention
7. Transmissible and Emerging Diseases
SHIP Implementation Process

- Develop strategies and identify key activities.
- Plan workgroup meeting(s) where strategies and key activities are formulated; discuss each strategic issue in-depth and identify the goals, strategies and barriers.
- Obtain agency and community input into feasible and effective strategies.
- Implement and report findings.
Overall SHIP Objective Performance

(n= 96 SHIP Objectives)
Opportunities for Improvement

- Increase State Health Improvement Plan awareness on the local level.
- Create alignment of efforts involving county health departments.
- Strengthen real-time reporting for health risks and outcomes.
- Build and maintain partner engagement.
Next Steps

- Strategically align state and local efforts to better address community needs.
- Coordinate efforts through the State Health Improvement Plan Data Subcommittee to promote data sharing among partner organizations.
- Foster an environment for innovative thought and engagement among partners.
SHIP Data Subcommittee Timeline

- **January 24, 2024**: 2022-2026 State Health Improvement Plan Year 1 Annual Review Meeting.
- **January 30, 2024**: Launch 2022-2026 State Health Improvement Plan Data Subcommittee Meetings.
- **July 30, 2024**: Launch 2022-2026 State Health Improvement Plan Membership Portal and Data Dashboard.
- **March 2025**: 2022-2026 State Health Improvement Plan Year 2 Annual Review Meeting.
SHIP Steering Committee Meeting Cycle Timeline

- **January 24, 2024**: 2022-2026 State Health Improvement Plan Year 1 Annual Review Meeting.
- **October 2024**: 2022-2026 State Health Improvement Plan Interim Progress Review Meeting.
- **March 2025**: 2022-2026 State Health Improvement Plan Year 2 Annual Review Meeting.
- **October 2025**: 2022-2026 State Health Improvement Plan Interim Progress Review Meeting.
Steering Committee Partners
2022-2026 State Health Improvement Plan
Priority Area Workgroup Progress
Alzheimer’s Disease and Related Dementias (ADRD) Priority Area Workgroup Chairs

Myasha Graham
SHIP & ADAC Coordinator
Florida Department of Elder Affairs

Jennifer Braisted
Director of Government Affairs
Alzheimer’s Association
Alzheimer’s Disease and Related Dementias

In 2022,

- The estimated Alzheimer’s cases were 537,478 or 11.4% of the population age 65+.\(^1\)
- The projected increase of Alzheimer’s cases of the population age 65+ is 24.1%, or 129,532 new cases, by 2025.\(^2\)
- Caregivers provided 1.3 billion hours of unpaid care valued at $23.4 billion dollars.\(^3\)

Sources:
1: Estimated proportions of persons 65-74, 75-84, and 85+ with Alzheimer's Disease are provided by the Department of Elder Affairs. The proportions are multiplied by population estimates for the same groups from FLHealthCHARTS.gov.
2: 2023 Alzheimer’s Disease Facts and Figures report at alz.org/facts
3: 2023 Alzheimer’s Disease Facts and Figures report at alz.org/facts
Alzheimer’s Disease and Related Dementias

Major Successes

• Created ADRD Resource Guide and the Caregiver Toolkit
• Updated AD2.1 Language
• Onboarded ADRD Training Specialist
• Developed surveys for all three Goals:
  • **Goal AD 1** - Outreach Survey
  • **Goal AD 2** - Training Survey
  • **Goal AD 3** - Caregiver Survey
Alzheimer’s Disease and Related Dementias
Alzheimer’s Disease and Related Dementias

Next Steps

- Increase Priority Area Workgroup (PAW) recruitment and participation from members.
- Ensure the guidelines of House Bill (HB) 299 are being met.
- Develop an online community resource library for assistance in communities.
Alzheimer’s Disease and Related Dementias

Changes to Objectives

• Update to Objective AD 2.1
  
  **Current Objective:** By June 30, 2026, increase the percentage of facilities, support agencies or partners that provide Alzheimer’s and related dementias training, in various formats, to all of its direct care employees or staff from 0% (2021) to 100%.

  *(Data Source: Florida Agency for Healthcare Administration and University of South Florida)*

  **New Objective:** By June 30, 2026, increase the percentage of long-term care providers and direct care staff who have taken the new 1-hour training requirement for Alzheimer’s and related dementias training, from 0% (2023) to 100%.

  *(Data Source: Florida Agency for Healthcare Administration and University of South Florida)*
Alzheimer’s Disease and Related Dementias

Changes to Objectives (continued)

• Update to Objective AD 2.2
  
  **Current Objective:** By December 31, 2026, increase the number of counties in Florida having at least one business that has achieved the Department of Elder Affairs Age and/or Dementia Friendly Business/Employer Designation from 1 (2022) to 67.  
  (Data Source: Florida Department of Elder Affairs and American Association of Retired Persons)

  **New Objective:** By December 31, 2026, increase the number of counties in Florida having at least 100 businesses per county that have received the Department of Elder Affairs Age and/or Dementia Friendly Business/Employer training from their local Dementia Care and Cure Initiative task force from 1 (2022) to 67.  
  (Data Source: Florida Department of Elder Affairs and American Association of Retired Persons)
Chronic Diseases and Conditions
Priority Area Workgroup Chairs

Christopher R. Cogle, MD
Chief Medical Officer
Agency for Health Care Administration

Tara Hylton, MPH
Chief, Bureau of Chronic Disease Prevention
Florida Department of Health
In 2022,

- There were 138.8 deaths per 100,000 population from cancer.\(^1\)
- There were 22.8 deaths per 100,000 population from diabetes.\(^2\)
- There were 146.9 deaths per 100,000 population from heart disease.\(^3\)

Sources:
\(^1,2,3:\) Florida Department of Health, Bureau of Vital Statistics
Chronic Diseases and Conditions

Major Successes

- The Florida Cancer Control & Research Advisory Council and the Florida Regional Cancer Collaboratives raised awareness and education, based on recent changes in eligibility criteria, to increase screenings.
- Tobacco Free Florida (TFF) launched a Community Engagement Initiative “Set a Quit Date”.
- The Heart Health Plus Program currently has a 79% completion rate among the fifteen CHDs that have implemented Heart Health Plus activities.
- Feeding Florida has increased food access and availability through legislative funding.
- School-based sealant programs received legislative funding which allowed for the opening, or expansion, of 25 programs and sites.
- The American Cancer Society’s Extension for Community Healthcare Outcomes (ECHO) Program disseminated evidence-based strategies to improve cancer outcomes, increase prevention, and early detection efforts in health systems. Including efforts focused on the military veteran population.
Chronic Diseases and Conditions

Next Steps

- Recruit advisory council chairs to form a Cardiovascular Advisory Council to address treatment and prevent gaps for cardiovascular disease.
- Promote TFF's Set a Quit Date and Suwanee River Area Health Education Center (SRAHEC) continuing medical education (CME) on pharmacologic options for tobacco cessation.
- Improve access to continuous glucose monitoring, affordable insulin, and diabetes self management education.
- Recruit groups of clinics within health systems to increase number of diabetes prevention programs.
- Increase research into choice treatment modalities for cancer, stroke, diabetes, and heart disease in diverse populations in Florida.
- Leverage local and state resources and funds to develop shared messaging on health promotion and disease prevention for those living with co-morbidities.
Changes to Objectives

• Update to Objective CD 2.2
  
  **Current Objective:** By December 31, 2026, increase the percentage of stroke centers providing thrombolytic treatment to a stroke patient within 45 minutes of arrival to a Florida stroke hospital from 75% (2020) to 85%.
  *(Data Source: Florida Stroke Registry)*

  **New Objective:** By December 31, 2026, increase the percentage of stroke patients receiving thrombolytic treatment within 45 minutes of arrival to a Florida stroke hospital from 75% (2020) to 85%.
  *(Data Source: Florida Stroke Registry)*
Injury, Safety and Violence
Priority Area Workgroup Chairs

Joseph D. Pepe, EdD, MSA
Health Officer
Florida Department of Health in Charlotte County

Robert D. Karch, MD, MPH, FAAP
Health Officer
Florida Department of Health in Orange County
In 2022,

- There were **2.1 deaths per 100,000 population** from unintentional drowning in children aged 17 years or younger.\(^1\)
- There were **19.6 deaths per 100,000 population** from motor vehicle crashes ages 19 years or older.\(^2\)
- There were **63.9 deaths per 100,000 population** from falls in adults aged 60 years or older.\(^3\)

Source:
1,2,3: Florida Department of Health, Bureau of Vital Statistics
Major Successes

- Developed a partnership between Area Agencies on Aging (AAA), the Florida Department of Health (FDOH) and the Department of Elder Affairs (DOEA) to create a statewide Falls Coalition and support older adult driving initiatives.
- Implemented and supported Keep Kids Safe From Drowning program (KKSFD), which is dedicated to water safety and preventing child drowning incidents in conjunction with local Child Abuse and Death Review Committee (CADR) regions.
- Implemented and expanded the Sleep Baby Safely initiative from 8 original counties in Fiscal Year (FY) 2022-23 to 16 counties in FY 2023-24.
- Connected Florida State University, local service providers and coalitions, and CHDs to strengthen capacity to support survivors of human trafficking.
Next Steps

• Recruit representatives of the Department of Transportation, Ounce of Prevention, and experts in the field of traumatic brain injuries (TBI).

• Integrate trauma informed education into crisis training for law enforcement.

• Exploring the intersection between domestic violence, sexual violence and human trafficking with state partners.

• Developing an infographic to accompany whiteboard and Adverse Childhood Experiences (ACEs) education and prevention strategy toolkit for professionals.

• Proposed Bills for 2024 Legislative Session:
  • HB 591/SB 554 Hot Car Death Prevention
  • HB 581/SB 544 Swimming Lesson Vouchers
Injury, Safety, and Violence

Changes to Objectives

• **Removal of Objective ISV 1.4**
  By December 31, 2026, reduce suicides in youth ages 10 to 17 years from 4.6 per 100,000 population (2020) to less than 3.7 per 100,000 population.  
  *(Data Source: Florida Department of Health, Bureau of Vital Statistics via FLHealthCHARTS.gov)*

• **Removal of Objective ISV 3.5**
  By December 31, 2026, reduce incidence rates of abuse and neglect associated hospitalizations for children ages 0-17 years from 13.5 per 100,000 to 12.2 per 100,000.  
  *(Data Source: Agency for Health Care Administration)*
Maternal and Child Health
Priority Area Workgroup Chair

Joni Hollis MSN, RN, CNL, CCM
Bureau Chief Specialty Programs
Office of Children’s Medical Services
In 2022,

- The Black infant mortality rate was **11.2 per 1,000 live births** compared to the overall infant mortality rate of **6.0 per 1,000 live births**. ¹

- The rate of congenital syphilis was **122.2 per 100,000 Resident Births (Live and Stillbirths)**. ²

Sources:
1: Florida Department of Health, Bureau of Vital Statistics
2: Florida Department of Health, Bureau of Communicable Diseases
Maternal and Child Health

Major Successes

• Recruited PAW leadership to champion Goal MCH 1.5
• Implemented Fetal and Infant Mortality Review (FIMR) Committees throughout the state per Section 383.21625, Florida Statutes.
• Piloting the Universal Prenatal Risk Screen in a fully electronic platform.
• Established a Maternal Morality Review Committee, Mental Health Subcommittee
• Completed Year 1 of Florida American College of Obstetrics and Gynecologists Levels of Maternal Care (LOMC) verification process.
• Documented improvement in hospital postpartum care through the Florida Perinatal Quality Collaborative, Postpartum Access & Continuity of Care Initiative.
Maternal and Child Health

Annual Legislative Report
October 1, 2023

Ron DeSantis
Governor
Joseph A. Ladapo, MD, PhD
State Surgeon General

FIMR Annual Legislative Report

Florida Levels of Maternal Care Playbook

FPQC Levels of Maternity Care Playbook
Maternal and Child Health

Next Steps

• Providing in-state training to dental providers on caring for patients with intellectual and developmental disabilities.

• Implementing the digital Universal Prenatal Risk Screen statewide by July 1, 2024.

• Developing a media campaign for hospitals to self-promote their LOMC verification status.

• Beginning informant interviews to develop better understanding of contributing factors to maternal mortality cases.

• Renewing and expanding the Maternal Mortality Physician Ambassador Outreach program.
Changes to Objectives

• **Removal of Objective MCH 2.1**
  By December 31, 2026, increase the percentage of very low birth-weight infants* born in a Level III or higher hospital from 78.1% (2020) to 86.3%.
  *Infants are aged 12 months or younger
  *(Data Source: Florida Department of Health Bureau of Vital Statistics via FLHealthCHARTS.gov)*

• **Removal of Objective MCH 2.5**
  By December 31, 2026, increase the percentage of maternity service hospitals with 100% of written breastfeeding policy elements identified on the Maternity Practices in Infant Nutrition and Care survey from 37% (2020) to 100%.
  *(Data Source: Centers for Disease Control and Prevention national survey of Maternity Practices in Infant Nutrition and Care)*
Maternal and Child Health

Changes to Objectives (continued)

- **Update to MCH 3.3**

  **Current Objective:** By December 31, 2026, increase the percentage of mothers with Medicaid who attend a postpartum care visit with a health care provider from 7 to 84 days after delivery from 72.4% (2020) to 80%.

  *(Data Source: Pregnancy Risk Assessment Monitoring System; Agency for Health Care Administration; Healthcare Effectiveness Data and Information Set measure)*

  **New Objective:** By December 31, 2026, increase the percentage of mothers with Medicaid who attend a postpartum care visit with a health care provider from 7 to 84 days after delivery from **70.4% (2021)** to 80%.

  *(Data Source: Pregnancy Risk Assessment Monitoring System; Agency for Health Care Administration; Healthcare Effectiveness Data and Information Set measure)*
Mental Well-being and Substance Abuse Prevention
Priority Area Workgroup Chairs

Jennifer Johnson, MPH
Senior Director, Public Policy
Florida Behavioral Health Association

Lisa Spector, MD, FAAP
Developmental Behavioral Pediatrician
Nemours Children’s Health
Mental Well-being and Substance Abuse Prevention

In 2022,

- There were 51,752 Naloxone administrations.¹
- There were 45.3 Veteran suicide deaths per 100,000 Veteran population.²
- There were 135,814 adult and 34,234 child Baker Act examinations.³

Sources:
1: Florida Department of Health, EMSTARS
2: The Florida Department of Health, Division of Public Health Statistics and Performance Management, Bureau of Public Health Research
3: The Florida Department of Children and Families, The Baker Act, Florida Mental Health Act, Fiscal Year 2021-2022 Report
Mental Well-being and Substance Abuse Prevention

Major Successes

• Initiated implementation of Certified Community Behavioral Health Clinic as a Medicaid service.

• Awarded funding to build out model of integrated collaborative care support in Behavioral Health Hubs

• Implemented Electronic Baker Act Data Collection System.

• Promoted Screening, Brief Intervention, and Referral to Treatment (SBIRT) and Medication Assisted Treatment (MAT) practices in obstetrical, family practice residency programs, and emergency departments.

• Increased the number of organizations distributing naloxone into communities across the state.

• Secured $26M in Opioid Settlement funds to add 17 counties to the Coordinated Opioid Recovery (CORE) Network, for a total of 29 counties.
Mental Well-being and Substance Abuse Prevention

Florida Governor’s Challenge

https://floridavets.org/governors-challenge/
Mental Well-being and Substance Abuse Prevention

Next Steps

• Conducting focus groups to identify gaps in access to pediatric Patient-Centered Medical Homes for parents of Black children with special health care needs.

• Incorporate recommendations from the Commission on Mental Health and Substance Use Disorders’ Interim Report.

• Develop awareness campaigns to increase mind-body connection, self-screening for mental health conditions, stigma reduction.

• Develop partnerships with post-secondary institutions to promote training to staff on identification and referral to services for mental health and substance use conditions.
Mental Well-being and Substance Abuse Prevention

Changes to Objectives

• Update to Objective MW 4.1

  **Current Objective:** By December 31, 2026, reduce the number of high-school students who indicate they have attempted suicide from 7.9% (2019) to 5.4%. *(Data Source: Youth Risk Behavioral Survey)*

  **New Objective:** By December 31, 2026, reduce the percentage of high-school students who indicate they have attempted suicide within the last 12 months from 9.1% (2022) to 6.6%. *(Data Source: Florida Youth Substance Abuse Survey)*
Social and Economic Factors Contributing to Health
Priority Area Workgroup Chairs

Justin Baldwin
North Florida Trail Planner
Office of Green Ways and Trails
Florida Department of Environmental Protection

Nicholas A. Alford, MPH
Section Administrator
Health Improvement Planning
Florida Department of Health
In 2022,

- The percentage of uninsured children in Florida was 7.4%.\(^1\)
- The graduation rate gap between students with physical and/or developmental disabilities and students without physical and/or developmental disabilities was 4.3%.\(^2\)
- The prevalence rate of food insecurity in Florida was 11.4%.\(^3\)

Sources:
1: US Census Bureau American Community Survey table HIC-5
2: Florida Department of Education
Social and Economic Factors Contributing to Health

Major Successes

• Restructured PAW leadership, membership, and objectives.

• Met Objective SEC1.2- By December 31, 2026, reduce the graduation rate gap between students with physical and/or developmental disabilities and students without physical and/or developmental disabilities from 8.9% (2021) to 6.8%.

• Met and increased Objective SEC3.2- By December 31, 2026, increase the number of trail towns* in the state from 11 (2021) to 20.
Next Steps

• Incorporate Minority Health Liaisons at CHDs to host outreach activities to promote resources and partnerships to increase health literacy, access to services, and preventive health care.

• Promote PACE-EH programs among our CHDs to assess community infrastructure to improve physical and mental health.

• Collaboration with Veteran’s Affairs and veteran-related services to focusing on unhoused individuals.
Social and Economic Factors Contributing to Health

Changes to Objectives

- **Replacement to Objective SEC 2.1**
  
  **Current Objective:** By December 31, 2026, increase the rate of licensed Florida physicians from 314.0 per 100,000 population (2021) to 376.8 per 100,000 population.
  
  *(Data Source: Florida Department of Health, Division of Medical Quality Assurance)*

  **New Objective:** By December 31, 2026, decrease the percentage of uninsured children in Florida from 7.3% (2021) to 5.0%.
  
  *(Data Source: US Census Bureau American Community Survey table HIC-5)*
Changes to Objectives (continued)

• Update to Objective SEC 3.2
  
  **Current Objective:** By December 31, 2026, increase the number of trail towns* in the state from 11 (2021) to 15.
  
  *(Data Source: Florida Department of Environmental Protection)*

  **New Objective:** By December 31, 2026, increase the number of trail towns* in the state from 11 (2021) to 20.
  
  *(Data Source: Florida Department of Environmental Protection)*

*Trail towns are vibrant, walkable communities that support healthy residents and economic vitality.*
Social and Economic Factors Contributing to Health

Changes to Objectives (continued)

- Update to Objective SEC 3.1
  
  **Current Objective:** By December 31, 2026, increase livable communities* in Florida from 44 (2021) to 100.
  
  *(Data Source: American Association of Retired Persons)*

  **New Objective:** By December 31, 2026, increase livable communities* in Florida from 44 (2021) to **75**.
  
  *(Data Source: AARP (Age-Friendly Communities, Challenge Grant Implementation), Florida Department of Transportation (Safe Mobility for Life Program, Vision Zero, Complete Streets))*

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*A livable community is one that is safe and secure. It offers choices in where to live and how to get around. And it equitably serves residents of all ages, ability levels, incomes, races, ethnicities, and other backgrounds.*
Social and Economic Factors Contributing to Health

Changes to Objectives (continued)

• Update to Objective SEC 3.4
  **Current Objective:** By December 31, 2026, increase the number of new data sources accessible to the public that address Florida environmental public health concerns from 0 (2021) to 4.
  *(Data Source: Florida Department of Health, Division of Disease Control and Health Protection)*

  **New Objective:** By December 31, 2026, increase the number of new data sources accessible to the public that address Florida environmental public health concerns from 0 (2021) to 20.
  *(Data Source: Florida Department of Health, Division of Disease Control and Health Protection)*
Social and Economic Factors Contributing to Health

Changes to Objectives (continued)

• Replacement to Objective SEC 4.2
  
  **Current Objective:** By December 31, 2026, decrease the percentage of renter-occupied housing units with gross rent costing 30% or more of household income from 56.3% (2019) to 53.5%.
  
  *(Data Source: United States Bureau of the Census, American Community Survey)*

  **New Objective:** By December 31, 2026, decrease the number of individuals who experience sheltered and unsheltered homelessness from 30,809 (2023) to 27,728.
  
  *(Data Source: Florida Council on Homelessness)*
Social and Economic Factors Contributing to Health

Changes to Objectives (continued)

• **Removal of Objective SEC 4.3**
  By June 30, 2026, increase the percentage of qualified dwelling needs met for weatherization assistance from 11% (2021) to 30%.
  *(Data Source: United States Bureau of the Census, American Community Survey)*

• **Removal of Objective SEC 4.4**
  By June 30, 2026, increase the percentage of government loan funds obligated compared to total funds available at the beginning of the reporting period for small business and targeted industries from 19% (2021) to 75%.
  *(Data Source: Florida Department of Economic Opportunity)*
Transmissible and Emerging Diseases
Priority Area Workgroup Chair

Craig Wilson
Chief, Bureau of Communicable Diseases
Florida Department of Health
Transmissible and Emerging Diseases

In 2022,

- The proportion of all Floridians with newly diagnosed HIV linked to HIV medical care within one month was 82%.\(^1\)
- The rate of early syphilis was 47.7 per 100,000 population.\(^2\)
- The incidence rate of clinical cases of Candida auris in reporting health care facilities was 2.06 per 100,000 population\(^3\)

Sources:
1: Florida HIV Surveillance System
2: Florida Department of Health, Bureau of Communicable Diseases
3: United States Census
Major Successes

- FOCUS Program now has 28 healthcare institution partners across the state.
- Ryan White Part B and six Ryan Part A jurisdictions aligned policies for reciprocal eligibility.
- Urgent care facilities submitting data to ESSENCE increased from 91 to 122.
- Statewide C. auris Workgroup Stakeholders were engaged to develop a statewide action plan.
- Developed a Ventilator Associated Events (VAE) prevention and education toolkit to promote the use of bundles and increase access to prevention resources for health care facilities.
Transmissible and Emerging Diseases

Next Steps

• Building and maintaining Transmissible and Emerging Diseases (TED) PAW partner engagement
• Increase the number of non-traditional sites screening for communicable infections (jails, treatment centers, emergency departments).
• Continue data system automation, including exploration of artificial intelligence.
• Implement syndemic approach to screening, treatment and risk reduction.
• Revise Florida Administrative Code to include C. auris as a reportable condition.
Transmissible and Emerging Diseases

Changes to Objectives

- Update to Objective TED 1.1
  
  **Current Objective:** By December 31, 2026, increase the proportion of adolescents and adults aged 13 years and older living with diagnosed HIV infection who are virally suppressed from 68% (2019) to 75%.
  
  *(Data Source: HIV Surveillance System; FOCUS; Quest/Labcorp)*

  **New Objective:** By December 31, 2026, increase the proportion of all Floridians living with diagnosed HIV infection who are virally suppressed from 68% (2019) to 78%.
  
  *(Data Source: HIV Surveillance System; FOCUS; Quest/Labcorp)*
Transmissible and Emerging Diseases

Changes to Objectives (continued)

• Update to Objective TED 1.2
  
  **Current Objective:** By December 31, 2026, reduce the rate of new HIV diagnoses among adolescents and adults aged 13 years and older from 21.4 per 100,000 population (2019) to 18.7 per 100,000 population.
  
  *(Data Source: HIV Surveillance System; Ryan White Program; FOCUS)*

  **New Objective:** By December 31, 2026, reduce the rate of new HIV diagnoses among all Floridians from 21.4 per 100,000 population (2019) to 18.6 per 100,000 population.

  *(Data Source: HIV Surveillance System; Ryan White Program; FOCUS)*
Changes to Objectives (continued)

- Update to Objective TED 1.3
  
  **Current Objective:** By December 31, 2026, increase the proportion of adolescents and adults aged 13 years and older with newly diagnosed HIV linked to HIV medical care within one month from 82% (2019) to 95%.
  
  *(Data Source: HIV Surveillance System; Ryan White Program)*

  **New Objective:** By December 31, 2026, increase the proportion of all Floridians with newly diagnosed HIV linked to HIV medical care within one month from 82% (2019) to 95%.
  
  *(Data Source: HIV Surveillance System; Ryan White Program)*
Transmissible and Emerging Diseases

Changes to Objectives (continued)

- **Update to Objective TED 4.3**
  
  **Current Objective:** By December 31, 2026, reduce the incidence rate of clinical cases of Candida auris in reporting health care facilities from 1.00 per 100,000 population (2021) to 0.06 per 100,000 population (2026).  
  *Data Source: United States Census*

  **New Objective:** By December 31, 2026, reduce the incidence rate of clinical cases of Candida auris in reporting health care facilities from **1.12** per 100,000 population (2021) to **1.01** per 100,000 population (2026).  
  *Data Source: United States Census*
Break
Introduction of Lieutenant Governor

Joseph A. Ladapo, MD, PhD
State Surgeon General
Florida Department of Health
Remarks

Jeanette M. Nuñez
Lieutenant Governor
Panel Discussion:
High Impact Strategies to Improve Health Outcomes.
Spotlight on FOCUS, Delivery Outcomes Improvements, and Maternal Telemedicine Program
Spotlight: FOCUS Program

Kenneth A. Scheppke, MD, FAEMS
Deputy Secretary for Health
Florida Department of Health
Routine HIV, HCV, and Syphilis Testing in Health Care Settings

- 2015 FDOH began a collaboration with Gilead Sciences’ Frontlines of Communities in The United States (FOCUS) initiative.

- The FOCUS program is a public health initiative that enables partners to develop and share best practices in routine opt-out blood-borne virus (HIV, HCV) and Syphilis screening, diagnosis, and linkage to care.

Source: State of Florida, Integrated HIV Prevention and Care Plan, pg. 70
The Importance of Routine, opt-out Screening

1 in 2 people with HIV have the virus at least 3 years before diagnosis

1 in 4 people with HIV have the virus at least 7 years before diagnosis

1 in 5 people with HIV are diagnosed with advanced disease (AIDS)

87% of new HIV infections are transmitted from people who don’t know they have HIV or are not in care.

7 in 10 people with HIV saw a healthcare provider in the 12 months prior to diagnosis and failed to be diagnosed

Source: Daily et al., MMWR Weekly Report, 2017; Skarbinski et al., JAMA, 2015; Gopalappa et al., Med Decision Making, 2017
Focus Model Helps Address Multiple Health Epidemics

- HIV
  - New
  - Acute
  - Previously Diagnosed, Out-of-Care

- HCV + Opioid Epidemic
  - MAT Pathway
  - Referral for Substance Use

- Syphilis & STIs
  - Linkage to HIV Comprehensive Prevention Services
The Focus Model: Efficiently Addressing Three Public Health Epidemics
Identifying HIV, HCV, and Syphilis* With One Blood Draw

1. Electronic Medical Record Triggers Blood Draw
2. With One Blood Draw, Individual Is Screened for HIV, HCV, and Syphilis
3. Results Provided to Staff, Linkage to Care Initiated

- **HIV**: Diagnosing new and identifying previously diagnosed, out-of-care HIV positives
- **Hepatitis C**: Diagnosing HCV among those most at risk
- **Syphilis***: Diagnosing syphilis and initiating linkage to HIV comprehensive prevention services
Does the Program Work?

Miami. U Health Tower Emergency Department:

“Eighty-six-fold increase in human immunodeficiency virus (HIV) diagnosis with Opt-out Screening: Frontlines of Communities in the U.S. (FOCUS) Program in the UHealth Tower (UHT) Emergency Department (ED)—a path to eliminate HIV transmission in the U.S.”

Source: Yaa F. Abu, Ph.D.1*, Barbara Huang, PharmD.1*; Emmanuel Thomas MD, Ph.D 1*, et al. Pending Publication
Case Study: Getting Results and Becoming the Solution

Homestead Hospital
Homestead, FL

Jackson Memorial Hospital
Miami, FL

Florida Partners’ Routine Screening Helps Improve Quality of Life for All

Homestead Hospital: Black Females 16% of the total tested yet 40% of total HIV positives (11% were pregnant and linked to care)

Jackson HIV seropositivity was eight times national average—with 38 acute HIV cases between June 2017 and January 2020.

Source: Jackson Memorial Hospital, March 2022
How Many Tests in 2023?

- HIV
  - Tests: 225,017
  - Positive Results: 2222
  - Linked to Care: 87%

- HCV
  - Tests: 96,971
  - Positive results: 3652
  - Linked to Care: 77%
Current efforts to support expansion include the inclusion of this initiative as an objective in the State Health Improvement Plan (Objective TED 4.7) where, by December 1, 2026, the Department and external partners aim to increase the number of emergency room or acute care hospitals that are conducting opt-out HIV screening, routine HCV screening, and syphilis testing with a smart screen algorithm from 1 (2021) to 15.

Source: State of Florida Integrated HIV Prevention and Care Plan, 2022-2026
Florida Partner Reach in 2023
SHIP Goal Exceeded

Current Hospital FOCUS Partners: 22

- **Baptist Health South Florida**
  - Homestead Hospital
  - West Kendall Baptist Hospital
  - Freestanding ED at Country Walk
  - Baptist Hospital of Miami
  - South Miami Hospital

- **Univ. of Florida Health ED Jacksonville**
- **Holy Cross Hospital**
- **Broward Health**
- **Orlando Health**
- **Advent Health Orlando**
- **Univ. of Miami Health ED**

- **Jackson Health System**
  - Jackson Memorial Hospital
  - Jackson South
  - Jackson North
  - Jackson West

- **Memorial Health System**
  - Memorial Regional
  - Memorial West
  - Memorial Pembroke
  - Memorial Miramar
  - Memorial South

Hospital Testing Status:
- HIV, HCV & Syphilis: 17
- HIV & HCV: 3
- HIV: 2

Rates of Persons Living with HIV, Florida, 2021
Questions?
Spotlight: Improvements in Cesarean Section Rates in Florida

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Division Director
Community Health Promotion
SHIP Maternal and Child Health Priority Area

• Goal MCH 1: Increase access to quality primary, preventative and sub-specialty care for infants, children and adolescents.

• Goal MCH 2: Reduce infant morbidity and mortality.

• Goal MCH 3: Reduce maternal morbidity and mortality.

• Goal MCH 4: Improve preconception and interconception health.
Vaginal Birth

- **Benefits for Mom:**
  - Shorter recovery time
  - Lactation begins sooner
  - Lower Chance of future pregnancy complications

- **Benefits for Baby:**
  - Lower chance of respiratory conditions
  - Improved immune system function
  - More likely to breastfeed
When is a Cesarean Section (C-Section) necessary?

- Baby is in a breech or transverse position
- Umbilical cord compression or prolapse
- Placental Conditions (i.e., abruption, accreta, previa)
- Fetal Distress
- Expecting multiples
- Previous C-Section
Cesarean Rates 2016-2022

Data Summary:

- From 2016–2022, Florida’s total Cesarean rate decreased from 37.4 percent in 2016 to 35.9 percent in 2022.

- In comparison, the Cesarean rates for the U.S. slightly increased, ranging from 31.9 percent in 2016 to 32.1 percent in 2022.

- The Florida total Cesarean rate is higher than the U.S. rate for all years between 2016-2022.

Data Sources: Centers for Disease Control and Prevention (CDC), Natality on CDC WONDER Online Database. Data are from the Natality Records 2016-2022, National Center for Health Statistics; Florida Department of Health, FLHealthCharts.
Nulliparous, Term, Singleton, Vertex (NTSV) Cesarean Rates 2016-2022

Data Summary:

- From 2016–2022, Florida’s total NTSV Cesarean rate decreased from 32.2 percent in 2016 to 29.7 in 2022.

- In comparison, the NTSV rates for the U.S. increased, ranging from 25.7 to 26.3 percent during the same period.

- The Healthy People 2030 target is 23.6 percent.

Data Sources: Centers for Disease Control and Prevention (CDC) National Center for Health Statistics; Florida Department of Health, Office of Vital Statistics.
The Florida Maternal Mortality Review Committee reviews pregnancy related deaths to determine preventability. Data is reviewed to evaluate for trends. The Department and its stakeholders identify initiatives that can be implemented at the hospital level to improve maternal mortality. The Department of Health contracts with the FPQC to implement quality improvement initiatives and monitor outcomes.
Promoting Primary Vaginal Deliveries (PROVIDE)

- PROVIDE 1.0 continued October 2017 through June 2019.
- PROVIDE 2.0 continued October 2019 through June 2022.
- The 76 hospitals that participated in PROVIDE 2.0 deliver 79% of the births in Florida.
- Hospitals participating in this initiative had an average of 6.35% decrease in NTSV C-section rates.
- The PROVIDE Initiative has moved into sustainability.
The Florida Perinatal Quality Collaborative (FPQC) is located in the Chiles Center at the University of South Florida College of Public Health.

Mission: Provide the best evidence-based perinatal care possible and to further that care through data driven education and training.

Legislation passed in 2022 that requires participation by maternity care hospitals in at least two FPQC initiatives.
Recognition

- Beginning in 2019, the C-Section awards were initiated.
- Awards are given to hospitals that meet the Healthy People 2030 goal.
- Awards have been given at Florida Hospital Association statewide meetings and hospital tours.

<table>
<thead>
<tr>
<th>Year</th>
<th>Number of Hospitals</th>
</tr>
</thead>
<tbody>
<tr>
<td>2018</td>
<td>19</td>
</tr>
<tr>
<td>2019</td>
<td>15</td>
</tr>
<tr>
<td>2020</td>
<td>26</td>
</tr>
<tr>
<td>2021</td>
<td>28</td>
</tr>
<tr>
<td>2022</td>
<td>31</td>
</tr>
</tbody>
</table>
Discussion

- Publication of provider or facility NTSV C-Section rates online
- Reimbursement Rates
- Create NTSV Coordinator positions in hospitals
- Patient Education
- Team Based Care Model
Questions?
Spotlight: Maternal Telemedicine Program

Melissa Jordan, MS, MPH
Assistant Deputy Secretary for Health
Florida Department of Health
Maternal and Child Health SHIP Objectives

• Current efforts to increase the well-being of women, infants, children and families include the inclusion of Maternal and Child Health as a priority area in the State Health Improvement Plan.
  • Objectives MCH1.1-5, MCH2.1-5, and MCH3.1-3

• By December 1, 2026, the Department and external partners aim to:
  • Increase access to quality primary, preventative, and sub-specialty care for infants, children, and adolescents, and
  • Reduce infant and maternal morbidity and mortality.
Severe Maternal Morbidity Data

Severe Maternal Morbidity

The presence of a complication during a delivery hospitalization that results in short- or long-term affects to a woman’s health.

The Severe Maternal Morbidity (SMM) rate is the number of delivery hospitalizations with at least one of the 21 defined SMM indicators per 1,000 delivery hospitalizations.

Source: FLHealthCHARTS, Florida Department of Health; 2022 Hospital Discharge Data, Florida Agency for Health Care Administration
Severe Maternal Morbidity Data

From 2013 to 2022, there were 51,454 cases of SMM among delivery hospitalizations in Florida.

Leading Indicators of SMM, 2013-2022

<table>
<thead>
<tr>
<th>Rank</th>
<th>Indicator</th>
<th>Number of Cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Blood products transfusion</td>
<td>27,403</td>
</tr>
<tr>
<td>2</td>
<td>Disseminated intravascular coagulation</td>
<td>4,317</td>
</tr>
<tr>
<td>3</td>
<td>Adult respiratory distress syndrome</td>
<td>2,824</td>
</tr>
<tr>
<td>4</td>
<td>Other</td>
<td>16,910</td>
</tr>
</tbody>
</table>

Source: Hospital Discharge Data, Florida Agency for Health Care Administration
Pregnancy-related Death Data

Pregnancy-related Death

Pregnancy-related death, is the death of a woman during pregnancy, or within one year of the end of pregnancy, from a pregnancy complication, a chain of events initiated by pregnancy, or the aggravation of an unrelated condition by the effects of pregnancy.¹

The Pregnancy-Related Mortality Ratio is the number of pregnancy-related deaths per 100,000 live births.

Source: Florida Maternal Mortality Committee Data
Pregnancy-related Death Data

Between 2012-2021, there were **416 pregnancy-related deaths** in Florida.

**Note:** The Florida Maternal Mortality Review Committee is a one-year retrospective review of confidential, de-identified cases of maternal deaths. Therefore, 2022 data are not yet available.

<table>
<thead>
<tr>
<th>Rank</th>
<th>Underlying Cause of Death</th>
<th>Number of Deaths</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Infection</td>
<td>78</td>
</tr>
<tr>
<td>2</td>
<td>Hemorrhage</td>
<td>72</td>
</tr>
<tr>
<td>3</td>
<td>Hypertensive Disorder</td>
<td>51</td>
</tr>
<tr>
<td>4</td>
<td>Other</td>
<td>215</td>
</tr>
</tbody>
</table>

Source: Florida Maternal Mortality Committee Data
Program Overview

• Established pilot programs in Duval and Orange counties to improve maternal health outcomes in priority populations.

• Provides services to pregnant and postpartum women using telehealth.

• Requires the Florida Department of Health’s Division of Community Health Promotion and Office of Minority Health to work in partnership.

Services include:

• Screening and treatment
• Referrals to meet individualized needs
• Education on pregnancy, childbirth, and parenting
• Connection to perinatal health workers
• Devices to conduct wellness checks (i.e., scales, blood pressure cuffs, glucose monitors)
• Training to participating health care practitioners
Pilot Year Activities Fiscal Year 2022-2023

- Provided 2,533 patients access to maternal health care, who might not have access to it otherwise.
- Connected patients with social service organizations to address additional needs.
- Identified patients with chronic health conditions and enrolled them in health management programs.
- Provided blood pressure cuffs, scales, and glucose monitors to patients as needed for remote monitoring and management of health conditions.
- Provided timely health care interventions to reduce instances of emergency room visits.

Source: Florida State University and KNOWLI Data Science Pilot programs to reduce Racial and Ethnic Disparities in Severe Maternal Morbidity through Telehealth, Page 2
## Pilot Year Measures

<table>
<thead>
<tr>
<th>Measure</th>
<th>Orlando Health</th>
<th>Agape</th>
</tr>
</thead>
<tbody>
<tr>
<td>Enrollment</td>
<td>1,327</td>
<td>1,206</td>
</tr>
<tr>
<td>Average Number of Consultations Per Patient</td>
<td>3.00</td>
<td>4.07</td>
</tr>
<tr>
<td>% Patients Enrolled in Hypertension Management Plan</td>
<td>100%</td>
<td>79%</td>
</tr>
<tr>
<td>% Patients Enrolled in Diabetes Management Plan</td>
<td>100%</td>
<td>66%</td>
</tr>
<tr>
<td>Total Number of Community Partners</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>% Patients with at least One Referral</td>
<td>80%</td>
<td>59%</td>
</tr>
<tr>
<td>% Referrals Made from Identified Social Needs</td>
<td>100%</td>
<td>90%</td>
</tr>
<tr>
<td>% High Satisfaction with the Program</td>
<td>87%</td>
<td>70%</td>
</tr>
</tbody>
</table>

Source: Florida State University and KNOWLI Data Science Pilot programs to reduce Racial and Ethnic Disparities in Severe Maternal Morbidity through Telehealth, Page 5
Patients with Chronic Health Conditions

![Bar chart showing the percentage of patients with chronic hypertension and diabetes at Agape and Orlando Health.]

Source: Florida State University and KNOWLI Data Science Pilot programs to reduce Racial and Ethnic Disparities in Severe Maternal Morbidity through Telehealth, Page 10
Resources Provided

Source: Florida State University and KNOWLI Data Science Pilot programs to reduce Racial and Ethnic Disparities in Severe Maternal Morbidity through Telehealth, Page 8
Evaluation

Maternal health outcomes:

• The program identified cases of hypertension through use of remote medical devices, resulting in prompt treatment.

• Participants maintained optimal blood sugar levels, effectively managed gestational diabetes, and improved overall maternal health.

• Continued support through the post-partum period ensured that the mental health needs of the mothers were met.

• Positive pilot program experiences resulted in greater trust with the medical system.
• Received $12,663,856 in funding for program expansion during fiscal year 2023-2024.

• Currently expanding the program to 18 additional counties with the highest number of women experiencing severe maternal morbidity.

• Received proposals from hospitals and community organizations.
Next Steps

- Expand data system to capture additional outcome measures.
- Promote consistent implementation while supporting the needs of each community.
- Continued evaluation of program clinical outcomes.
Discussion Question

Are there other examples or models like those discussed that can be expanded upon or used to further other objectives in the State Health Improvement Plan?
What strategies can be implemented to enhance collaboration and communication among different sectors, in achieving the goals of the plan?
2022-2026 State Health Improvement Plan
Steering Committee Highlights and Discussion
Discussion Question

How can the State Health Improvement Plan adapt to changing public health priorities and emerging health challenges over time?
Discussion Question

In what ways can the steering committee and PAWs leverage technology and data to inform and evaluate the progress of the State Health Improvement Plan?
Public Comment
Closing Remarks

Joseph A. Ladapo, MD, PhD
State Surgeon General
Florida Department of Health
Thank you!