OSCEOLA COUNTY

COMMUNITY HEALTH IMPROVEMENT PLAN

Florida HEALTH

JULY 1, 2025 - DECEMBER 31, 2028

CONTENT

INTRODUCTION

The Osceola County Community Health Improvement Plan (CHIP) is a collaborative initiative grounded in a shared vision: A healthy community is a thriving community when leaders across sectors unite to drive sustainable, data-driven solutions that expand access, improve care, and elevate the well-being of every resident.

This plan is the reflection of the work led by the Osceola Health Leadership Council (HLOC), a dynamic coalition convened by The Chamber Foundation—the 501(c)(3) arm of The Osceola Chamber, in partnership with the Florida Department of Health in Osceola County (DOH-Osceola). The Foundation was established to unite people and resources for the betterment of both business and community, with a deep commitment to honoring Osceola's heritage, fostering unity, and creating opportunities for all who live and work here. Included in the Foundation's scope of work is to convene a Health Leadership Council, comprised of leaders from both public and private health sectors, to assess needs, identify service gaps, and develop actionable solutions to improve health care access, delivery, and outcomes in our county.

In cooperation with DOH-Osceola and informed by the findings of the most recent Community Health Assessment (CHA), the Health Leadership Council identified priority objectives to guide our work. These objectives are supported by measurable outcomes aligned with local and state health goals that will serve as the foundation for future initiatives and programming.

This CHIP is more than a roadmap, it is a living framework that reflects our community's commitment to collective action, accountability, and continuous progress. Through this plan, we aim to create a healthier Osceola County for generations to come.

Sincerely,

Susan Ring
Vice President of Strategic Initiatives
The Osceola Chamber

Natalie Mullett
Chairperson
Health Leadership Council

CHIP LEADERSHIP ROLES

The Florida Department of Health in Osceola County (DOH-Osceola) facilitates the Community Health Improvement Plan (CHIP) process, guiding a collaborative effort among local partners to improve health outcomes. DOH-Osceola plays a central role in coordinating strategic planning and priority-focused workgroup meetings, engaging a varied network of stakeholders and providing leadership, expertise, and logistical support.

Through these efforts, DOH-Osceola ensures the CHIP addresses the community's most urgent health challenges while aligning with broader goals outlined in the Florida State Health Improvement Plan (SHIP).

Although the CHIP is a community-driven and collectively owned initiative, DOH-Osceola is responsible for administrative coordination, data collection and performance tracking, preparing the annual review report to assess progress and guide future actions.

Osceola Health Leadership Council (HLOC) members play a vital role in guiding the development and implementation of the CHIP. Drawing on their subject matter expertise, they provide strategic direction and help shape the plan's priorities to ensure alignment with community needs. These leaders actively identify and recommend partner organizations that can support CHIP goals and objectives, fostering a collaborative approach to public health improvement. Their commitment includes attending monthly HLOC meetings and reviewing the CHIP at least quarterly to monitor progress.

They also participate in a range of CHIP activities such as offering feedback, completing surveys, analyzing data, and supporting events and initiatives to strengthen community engagement and accountability.

Additionally, health leadership members are responsible for providing quarterly updates on objective status, activity progress, and key accomplishments, while continuously evaluating and proposing new objectives or strategies to address gaps and enhance the effectiveness of the CHIP.

COLLABORATING PARTNERS

We would like to extend our gratitude to the Health Leadership Council and the many dedicated community partners who contributed their time, expertise, and insights throughout the development of the Community Health Improvement Plan (CHIP).

This collaborative effort would not have been possible without the active engagement of key stakeholders across Osceola County, including representatives from hospital systems, health care and behavioral health organizations, social service agencies, housing and food insecurity partners, school district, transportation providers, government entities, the business community, and community education and public health advocates.

Their commitment to improving the health and well-being of our community played a vital role in shaping the priorities and strategies outlined in the CHIP. Together, we have laid the foundation for meaningful progress toward a healthier, more accessible future for all residents. We deeply appreciate the spirit of partnership and shared vision that guided this process.

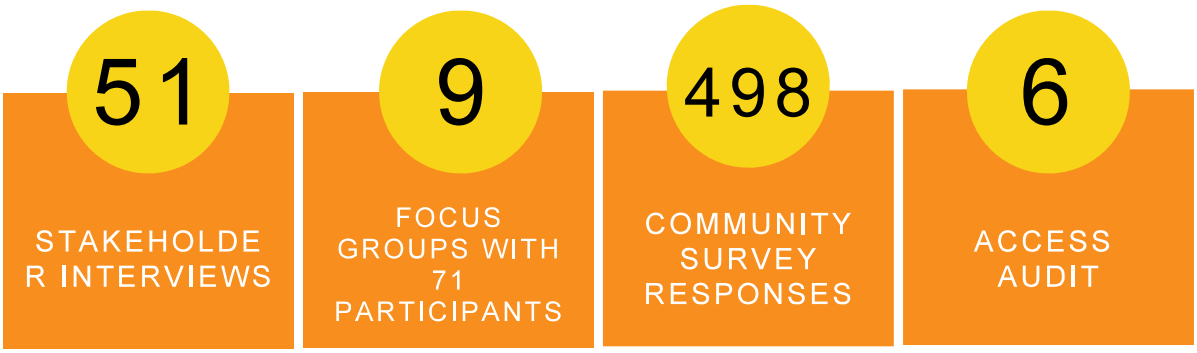
COMMUNITY HEALTH NEEDS ASSESSMENT (CHNA)

The Central Florida Collaborative is a regional partnership of health care organizations, public health departments, and community-based providers working together to improve health outcomes across Lake, Orange, Osceola, and Seminole counties. Members include major health systems, and several federally qualified health centers. This collaborative leads a unified approach to conducting the CHNA. The CHNA is a systematic process used to understand the health status, needs, and assets of a community.

The CHNA process serves as a critical phase in the overall effort to improve community health and ensure all residents have the opportunity to achieve optimal well-being. It is a process that provides a means of identifying and collecting community data while engaging community members in both the data collection and the implementation of prioritized efforts for improving the well-being of all Osceola County residents. The CHNA creates a frame of reference for community members to discuss the health status of the community. The process itself has been a collaborative effort to identify health issues, barriers, assets, and to prioritize the implementation activities needed to address identified issues. To improve community health and well-being, the CHNA process has included the following goals:

- Identify resources, strengths and barriers to improving health outcomes.
- Develop a deeper understanding of community access to care challenges, including those faced by medically underserved populations.
- Enable partners to collaborate around the opportunities for population health improvement.

METHODOLOGY



The CHNA had comprehensive methodology that included a mixed method approach consisting of the following:

Data Analysis: In-depth review of dozens of validated data sources. Information was tabulated and parsed to identify at risk and other insights whenever possible.

Primary Qualitative Research: This component included 9 focus group discussions with a total of 71 participants and 51 key stakeholder's interviews.

Survey Research: The community survey, taken by 498 respondents, provided insights on a breadth of key health issues.
Access Audit: Six mystery shopper calls revealed real-life customer service and access to care issues.

Prioritization Process: Stakeholders participated in a modified Hanlon Method, an evidence-based approach which objectively takes into consideration explicitly defined criteria and feasibility factors.

COMMUNITY NEEDS

Community needs across both regional and county levels were identified through a comprehensive analysis of primary and secondary data sources. In Osceola County, this process revealed 30 distinct areas of concern. To prioritize these needs effectively, a modified Hanlon Method, an evidence-based framework for public health decision-making was applied. This approach considered specific criteria such as the size and seriousness of each issue, the effectiveness of potential interventions, and overall feasibility. Based on this assessment, the top 15 prioritized needs for Osceola County are:

- Affordable Housing
- Affordable Prescription Medications
- Food Insecurity
- Jobs with livable wages
- Programs for Chronic Diseases and Prevention Education
- Affordable childcare services
- Transportation
- Better Communication between Health Care and Non-profit Organizations
- Social and Health Services for Special Populations
- Emergency Shelter for People Experiencing Homelessness
- Transitional Housing for People Experiencing Homelessness
- General Awareness of Resources
- Primary Care Provider Shortage
- Substance Abuse Treatment
- Access to Specialty Care

The following is an overview of priority areas identified in the CHNA that would be addressed in the Community Health Improvement Plan (CHIP).

AFFORDABLE HOUSING

FOOD INSECURITY

PROGRAMS FOR CHRONIC DISEASES PREVENTION AND EDUCATION

AFFORDABLE HOUSING

Housing and health are closely linked, with stable, affordable, and quality housing promoting better health outcomes and unstable or substandard housing leading to negative health consequences. Conversely, accessing safe housing can improve physical and mental well-being, reduce health care costs, and create healthier communities. Factors like environmental hazards, unaffordable costs, and lack of stability in housing can lead to increased rates of illness, chronic conditions, mental health issues, and even homelessness.

SECONDARY DATA ANALYSIS

Data from several national sources was reviewed to assess the affordability of safe housing in Osceola County. According to the US Census Bureau, Osceola County has experienced large population growth over the last 13 years, increasing the number of residents by an astonishing 51.5%, from 268,583 in 2010 to 406,043 in 2023. It is projected that Osceola County will have 24.6% more residents, a total of 507,034, by 2032.

Source: U.S. Census Bureau American Community Survey 2018-2022 Five-year Estimates

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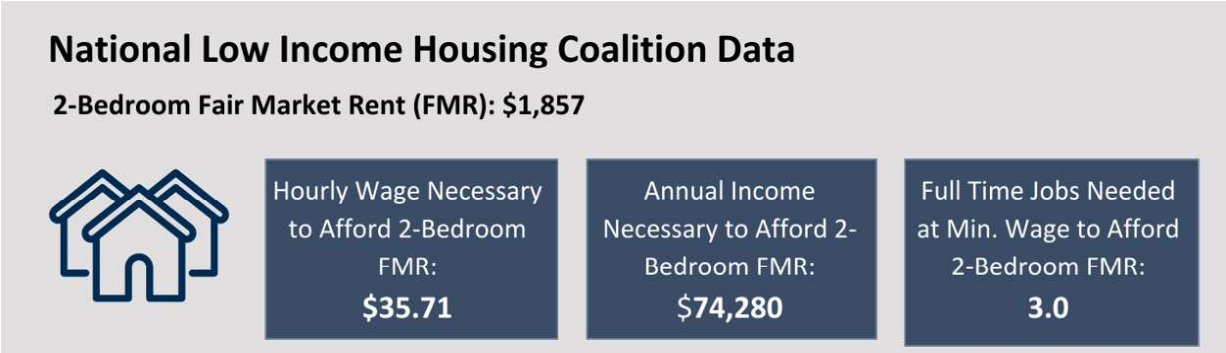
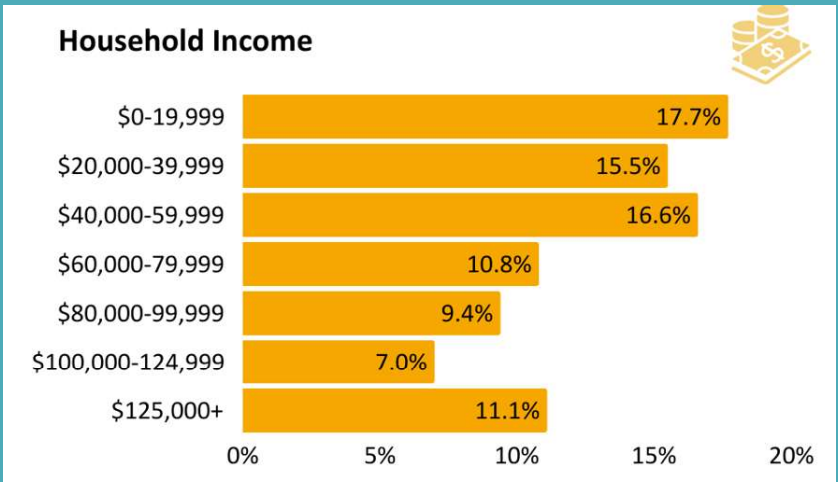
This substantial population growth has strained the housing stock and led to increasing housing costs. According to the United Way, 41.2% of households in Osceola County are spending more than 30% of their income on housing. The National Low Income Housing Coalition estimates that it takes an average of 3 full time jobs at minimum wage to afford 2-bedroom fair market rent in Osceola County. The annual point-in-time count, which aims to gather a fairly accurate number of people experiencing unsheltered homelessness at a given point in time in a region, shows that between 2020 and 2024, the number of people experiencing homelessness increased by approximately 50.0% in Osceola County.



Source: National Low Income Housing Coalition. Florida Out of Reach Report, 2024

SURVEY RESEARCH

The CHNA community survey found that only 48.4% of respondents were employed full-time and 49.8% of respondents had a household income below $60,000, making affording rent in Osceola County challenging.



PRIMARY QUALITATIVE RESEARCH

Housing is essential for a healthy community and concerns about its availability and affordability were consistently raised during stakeholder interviews and focus groups. Rent is rising quickly and while people are doing their best to keep up, many are struggling and experiencing significant hardship. A rising cost of living was noted, with individuals voicing concerns about food insecurity, low wages and the rising costs of basic needs. Low wages, especially in the tourism sector, contribute to housing instability, inadequate health care and food insecurity. Many individuals are unable to afford rent, which impacts their ability to afford other essential services like transportation and childcare. When residents face housing insecurity, it has a direct impact on their physical and mental health. There is a need for more affordable housing options to alleviate this issue, as well as interventions that can address the rising costs of rent.

FOOD INSECURITY

Food insecurity occurs when a household cannot access enough food due to a lack of money and other essential resources. It is often linked to one or multiple factors that lead to food insecurity, creating a cycle that can be hard to break. These factors can be related to household income, expenses, access to affordable health care, the surrounding social and physical environment, and barriers to opportunity which play a role in preventing some households and communities from being food secure.

SECONDARY DATA ANALYSIS

Data from several sources including Map the Meal Gap and the United States Department of Agriculture (USDA) were analyzed. According to Map the Meal Gap, in 2023, 58,710 residents of Osceola County (or 14.4%) were food insecure. The numbers were more alarming among children, with 15.7% of children in Osceola County experiencing food insecurity.

Source: Map the Meal Gap: https://map.feedingamerica.org/

USDA food desert data identifies 24.7% of Osceola County as a food desert. The USDA defines a food desert as a census tract that meets both of the following criteria:
Low-income: a poverty rate of 20.0% or greater, or a median family income at or below 80.0% of the statewide or metropolitan area median family income.
Low access: at least 500 people and/or at least 33.0% of the population lives more than 1 mile from a supermarket or large grocery store (10 miles, in the case of rural census tracts).

Food insecurity experienced by residents	Often True	Sometimes True	Never True
Worried about food running out before more money in the past 12 months	22.4%	31%	46.6
Worried about food running out before more money in the past 12 months	18.1%	29.2%	52.7%

PRIMARY QUALITATIVE RESEARCH

Food insecurity is closely linked to housing instability, transportation challenges, mental health and the rising cost of food. Throughout focus groups and stakeholder interviews, participants emphasized these connections, noting that access to healthy food depends on factors such as availability, affordability, and broader social drivers of health like housing. Food access is also dependent on location, with rural areas often having more limited food sources and urban areas facing food quality concerns.

During focus group discussions, community members expressed concerns about food insecurity, access to adequate employment and the rising cost of basic necessities. These issues are deeply interconnected—low wages make it difficult for individuals to afford housing, food, transportation and childcare.

During stakeholder interviews, stakeholders raised concerns about the limited ability of food pantries to provide nutritious options. Seniors were identified as especially vulnerable to food insecurity due to fixed incomes, limited transportation and challenges with meal preparation.

CHRONIC DISEASE

Chronic disease is a leading cause of death, disability, and reduced quality of life worldwide, placing a huge strain on health care systems and economies through massive treatment costs and lost productivity. These long-lasting conditions, such as heart disease, cancer, and diabetes, are often treatable through behavioral changes and medication but also contribute to differences in health outcomes and require significant public health efforts to control and manage.

SECONDARY DATA ANALYSIS

During the CHNA process, data was analyzed from both state and national sources. According to Florida Department of Health data, chronic disease is a significant problem in Osceola County as shown in the table below:

Chronic Disease	Incidence in Osceola County
Obesity	31.30%
Arthritis	23.70%
Depression	19.30%
Diabetes	13.40%
Chronic Pulmonary Disease	6.60%
Coronary Heart Disease	6.60%
Cancer	6.20%

Overall, 13.6% of Osceola residents report that their physical health is not good and 13.2% report living with a disability. The types of disabilities are:

- Ambulatory (6.3%) - refers to a condition that significantly limits a person's ability to walk or move around without assistance.
- Cognitive (5.8%) - a condition that affects a person's ability to think, learn, remember, or make decisions.
- Independent Living (4.8%) - a condition that makes it difficult for a person to live on their own without assistance.
- Hearing and Vision (2.7%) - partial or total inability to hear and/or see.

The top three causes of death in Osceola County are heart disease (162.5 per 100,000), cancer (139.5 per 100,000) and stroke (58 per 100,000).

Many Osceola residents have risky health behaviors that can exacerbate chronic diseases such as 13.3% smoke and 16.7% binge drink, which means consuming large amounts of alcohol in a short period, often enough to become intoxicated. Additionally, many struggle to engage in healthy behavior, with 28.6% reporting they have no leisure time for physical activity, 24.9% saying they have not been seen by a doctor in the last year, and 10.9% of residents do not have medical insurance.

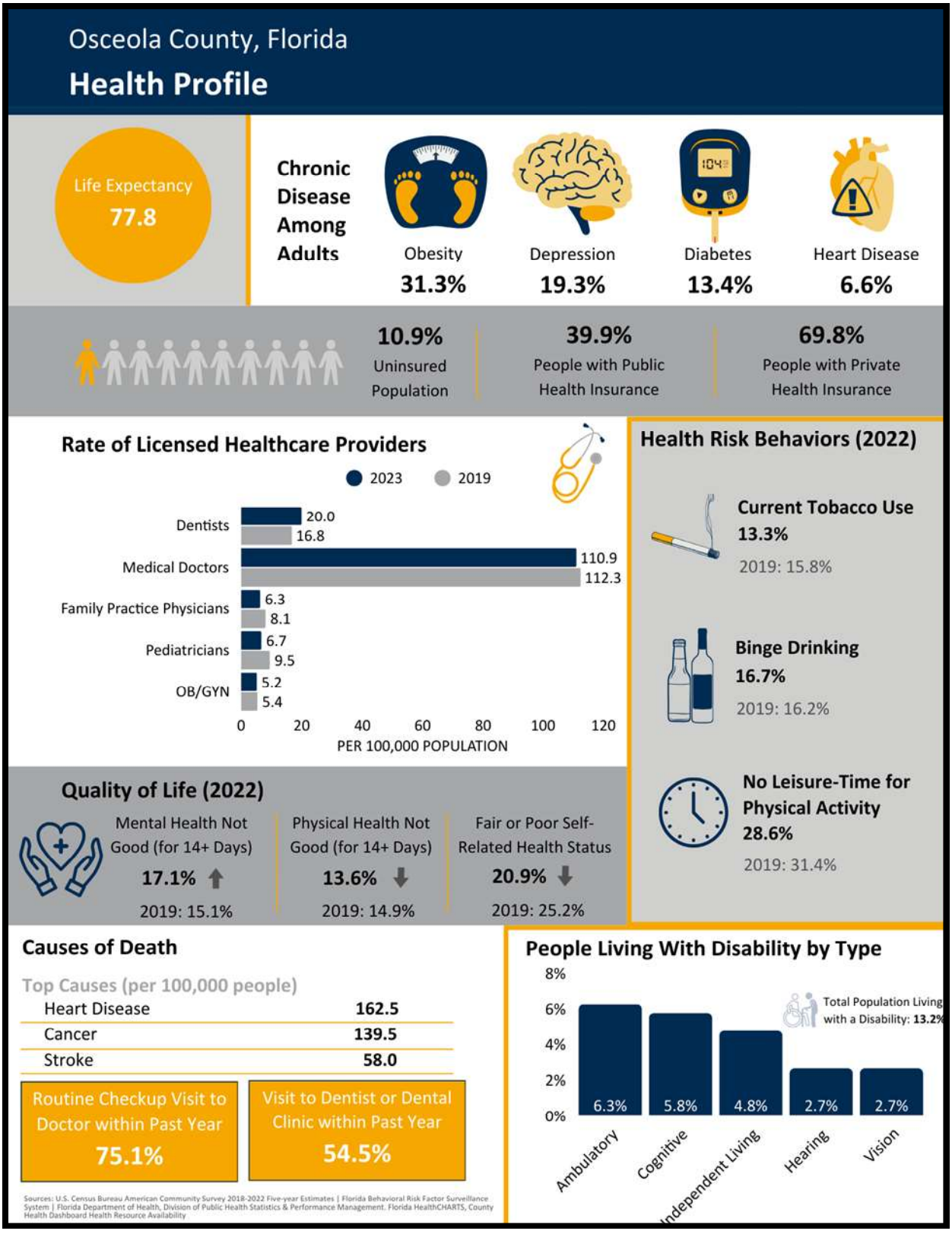
SURVEY RESEARCH

In the CHNA community survey, all respondents were asked a series of questions about their health status and their experience accessing medical, mental health and dental care within their community. Respondents' experiences varied widely with 15.9% reporting being very unhealthy to unhealthy, 46.4% somewhat healthy, 36.7% healthy to very healthy and 1% were unsure. A surprising 77.2% of respondents self-reported having at least one of the following chronic diseases: cancer, heart disease, depression/anxiety, high blood pressure, diabetes, obesity, HIV/AIDS, stroke or COPD.

Respondents also identified which risky health behaviors they engage in. Relevant to chronic disease incidence and management, 15.7% smoke, 5.5% have poor eating habits, 2% do not exercise, 1.3% use illegal drugs, and 0.2% abuse alcohol.

Consistent with the secondary data analysis, 1 in 4 respondents reported needing medical care in the past 12 months and not receiving it. The top reasons listed were:

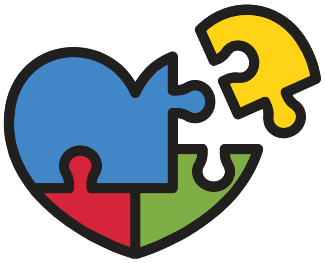
- Cannot take time off work
- Do not have insurance to cover medical care



Sources: U.S. Census Bureau American Community Survey 2018-2022 Five-year Estimates | Florida Behavioral Risk Factor SurveillanceSystem | Florida Department of Health, Division of Public Health Statistics & Performance Management. Florida HealthCHARTS, CountyHealth Dashboard Health Resource Availability

ASSETS AND RESOURCES

Osceola County stakeholders and focus group participants identified a range of community strengths that serve as vital assets in advancing health and well-being. Foremost among these is the presence of committed organizations that demonstrate a strong capacity for collaboration. These agencies, spanning health care, education, social services, and grassroots initiatives, work in concert to address resident needs, creating a resilient support network that enhances access to essential resources and services



This spirit of partnership has been especially valuable in responding to the county's evolving demographics. As the population reflects a broader range of backgrounds, community organizations have shown adaptability by expanding culturally appropriate services and outreach efforts. These include multilingual programming, culturally sensitive health education, and broad-based participation strategies that reflect the lived experiences of Osceola's residents.

While notable progress has been made in fostering cultural responsiveness, stakeholders emphasized that continued investment is needed to strengthen culturally competent care across all sectors. This includes training for service providers, improved representation in leadership, and deeper community involvement in program design. By building on existing assets and addressing remaining gaps, Osceola County is well-positioned to create a system of care to support all residents.

COMMUNITY HEALTH IMPROVEMENT PLAN (CHIP)

The CHIP is a three-year, collaborative effort to address the public health issues in Osceola County that were identified in the CHNA. The CHIP outlines priorities, goals, objectives, and Action Plans created by community members and organizations to improve health outcomes. The development of this plan is facilitated by DOH-Osceola in partnership with HLOC and other community partners from a wide variety of sectors.

The Osceola CHIP:

- Improves organizational and community coordination and collaboration
- Increases knowledge about public health and the interconnectedness of activities
- Strengthens partnerships within state and local systems
- Identifies benchmarks for public health practice improvements
- Prioritizes resources to address critical public health issues
- Tracks key metrics to regularly assess the health of the county

ASSETS AND RESOURCES

To prepare for the development of the CHIP, DOH-Osceola staff hosted three virtual training sessions for the HLOC members. These sessions were well attended and covered the following topics:

March 13, 2025
CHNA Findings

March 19, 2025
Thinking Strategically and Changing Systems

March 25, 2025
Writing SMART Objectives, Trend Analysis, and Setting Statistically Significant Targets

OSCEOLA CHIP RETREAT

From April 8–10, 2025, DOH-Osceola hosted a three-day, in-person retreat bringing together members of the HLOC and key community partners. The retreat served as a pivotal planning session to develop the new CHIP. Participants engaged in discussions to identify priority public health issues and then worked in focused groups to design corresponding goals, objectives, and detailed action plans for each selected area. To ensure accountability and momentum, project managers were appointed to lead the implementation of each objective and oversee progress throughout the CHIP cycle.

First row from left to right: Tashanda Dennison, Natalie Mullett, Esther Rodríguez, Ana McDougall, Aurelia Annunziata, Kelly Bender. Second row from left to right: Traci Blue, Rebecca Desir, Jialexy Robinson, Vianca McCluskey, Harmony Latino, Mari Torres Luengas, Kelly Grove, and Mary Catherine Jones. Last row from left to right: Slade Downs, Gabriel Berrio, Samantha Giel, Sue Ring, Alyson Olinzock, Jeanne Britton, and Ian Henning.

SELECTING PRIORITIES AND PUBLIC HEALTH ISSUES

To develop the CHIP, participants of the retreat reviewed the top 15 CHNA priority areas. Given the large number of issues identified, participants engaged in a prioritization process to focus efforts and resources effectively. Through collaborative review and organizational input, issues were assessed for relevance and leadership capacity.

From these 15 identified priority areas, three were carefully selected to serve as the cornerstone of the CHIP. These top priorities were chosen through a collaborative decision-making process that considered factors such as community impact, feasibility of intervention, alignment with existing resources, and potential for measurable outcomes.

By narrowing the focus to these three areas, the HLOC aims to concentrate efforts where they can make the greatest impact, fostering targeted strategies and partnerships that address the most pressing health challenges facing Osceola County residents.

These priorities will guide the county's health initiatives over the coming years, shaping programs, policies, and resource allocation to improve overall well-being of the community.

The final prioritized areas selected for inclusion in the CHIP are:

CHRONIC DISEASES AND CONDITIONS

INJURY, SAFETY, AND VIOLENCE PREVENTION

SOCIAL AND ECONOMIC FACTORS CONTRIBUTING TO HEALTH

TRACKING PROGRESS

The implementation of the CHIP is supported by a structured and ongoing tracking process designed to promote transparency, coordination, and measurable progress. Each CHIP objective is overseen by a project manager responsible for monitoring the advancement of action steps, identifying challenges, and ensuring alignment with established goals.

Progress is reviewed and documented on a quarterly basis, with project managers providing formal updates during HLOC meetings. These updates include milestones achieved, barriers encountered, adjustments made to strategies, and any support needed to maintain momentum. This quarterly reporting cycle allows stakeholders to evaluate progress in real time, make data-informed decisions, and reallocate resources as needed.

In addition to quarterly reporting, monthly meetings are held to maintain consistent communication among project managers, and HLOC members. These meetings serve as a platform for collaboration, troubleshooting, and sharing best practices. They also help ensure that all participants remain engaged and that implementation efforts stay on track.

This structured approach to tracking and evaluation reinforces accountability, fosters cross-sector collaboration, and supports the long-term success of the CHIP in improving health outcomes across Osceola County.

ACTION PLANS

Developing effective action plans with clearly defined goals and objectives is essential for advancing public health outcomes. By aligning these plans with both the State Health Improvement Plan (SHIP) and the national framework of Healthy People 2030, we ensure that efforts are evidence-based, strategically focused, and responsive to the most pressing health needs of the community.

This alignment strengthens the impact of local initiatives by:
Promoting consistency with statewide and national health priorities
Leveraging data-driven benchmarks to measure progress
Fostering collaboration across sectors and agencies

Healthy People 2030 provide a comprehensive set of objectives aimed at improving health and well-being over the next decade, while SHIP tailors those priorities to the unique needs of Florida's population. Together, they serve as a roadmap for designing interventions that are not only locally relevant but also nationally significant.

By grounding our action plans in these frameworks, we commit to advancing accessible care, enhancing accountability, and driving measurable change that benefits all residents.

PRIORITY 1: CHRONIC DISEASES AND CONDITIONS

Goal CD 1	Reduce hospitalizations due to chronic diseases		
Objective CD 1.1	By December 31, 2028, decrease the hypertension rate per 100,000 of hospitalizations from 444.7 (2023) to 380.1.		
Strategy	Partner with local organizations to deliver targeted prevention education to community members	Policy Change	No
Data Source	FLCharts		
Alignment	SHIP Goal CD 2	HP2030 HDS-04	

Activities	Responsible Organization	Current Performance Level	Units of Measurement	Target	Data Source	Resources Needed
Promote the Healthy Osceola website	Chamber Foundation	0	# of visits	100 annually	Website Tracking	Website Ownership
Increase the number of "know your numbers" surveys completed	HLOC	0	# of surveys	150 surveys	Survey Monkey	Marketing Campaign
Offer Prevention and Management Programs	DOH-Osceola	0	# of classes	4 programs annually	Participant Logs	Marketing
Conduct regular blood pressure screening events	DOH-Osceola	0	# of events	4 events annually	Staff Activity Logs	Screening Partners Scheduled Events

Objective CD 1.2	By December 31, 2028, decrease the age-adjusted rate per 100,000 of hospitalizations from diabetes from 291.3 (2023) to 271.5.		
Strategy	Partner with local organizations to deliver targeted prevention education to community members	Policy Change	No
Data Source	FLCharts		
Alignment	SHIP Goal CD 4	HP2030 HD-01	

Activities	Responsible Organization	Current Performance Level	Units of Measurement	Target	Data Source	Resources Needed
Promote the Healthy Osceola website	Chamber Foundation	0	# of visits	100 annually	Website Tracking	Website Ownership
Increase the "know your numbers" surveys completed	HLOC	0	# of surveys	150 surveys	Survey Monkey	Marketing Campaign
Offer Prevention and Management Programs	DOH-Osceola	0	# of classes	4 classes annually	Participant Logs	Marketing
Conduct regular A1C screening events	DOH-Osceola	0	# of events	4 events annually	Staff Activity Logs	Screening Partners Scheduled Events

PRIORITY 2: INJURY, SAFETY, AND VIOLENCE

Goal ISV 1	Increase public awareness and understanding of human trafficking indicators and reporting mechanisms.					
Objective ISV 1.1	By December 31, 2028, increase the number of calls to the Florida Human Trafficking Hotline for Osceola County from 1 (2024) to 3.					
Strategy	Collaborate with community partners, county, and city government to promote the Florida Human Trafficking Hotline.			Policy Change	No	
Data Source	Department of Law Enforcement					
Alignment	SHIP Goal ISV 3			HP 2030 AH-R11		
Activities	Responsible Organization	Current Performance Level	Units of Measurement	Target	Data Source	Resources Needed
Launch a comprehensive public awareness campaign focused on recognizing and preventing human trafficking.	FDOH-Osceola	Not started yet	# of campaigns	1 campaign	Internal Spreadsheet	Campaign Materials
Promote the Florida Human Trafficking Hotline as a resource for reporting and assistance	FDOH-Osceola	Not started yet	# of posters	50	Internal Spreadsheet	Toolkit

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Activities	Responsible Organization	Current Performance Level	Units of Measurement	Target	Data Source	Resources Needed
Osceola County participation in the Central Florida Human Trafficking Task Force	FDOH-Osceola	Not started yet	Meeting Invitation	1	Microsoft Outlook	Task Force contact information
Recruit more collaborating organizations	FDOH-Osceola	3	# of organizations	10	Internal Spreadsheet	Partners Messaging

Goal ISV 2	Reduce drowning-related deaths		
Objective ISV 1.2	By December 31, 2028, decrease drowning-related deaths in children 0-17 from 10 (2024) to 7.		
Strategy	Collaborate with community partners to provide drowning prevention education.	Policy Change	Yes
Data Source	Department of Children and Families Dashboard		
Alignment	SHIP Goal ISV 1	HP2030 MICH-03	

Activities	Responsible Organization	Current Performance Level	Units of Measurement	Target	Data Source	Resources Needed
Increase the number of redeemed Swimming Lesson Vouchers	FDOH-Osceola	25	Vendor Invoices	190	Tracking Log	Swimming Instructors
Increase the number of Swimming Lesson Voucher Program (SLVP) vendors/instructors in Osceola County	FDOH-Osceola	1	# of vendors /instructors	3	SLVP Portal	Participating Organizations
Facilitate children reading sessions focus on drowning prevention	FDOH-Osceola	Not started yet	# of reading sessions	20	Internal Spreadsheet	Hosting Partners Educational Books

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Activities	Responsible Organization	Current Performance Level	Units of Measurement	Target	Data Source	Resources Needed
Facilitate Children Safety Classes	FDOH-Osceola	Not started yet	# of classes	12	Activities Request Form	Hosting Partners Incentives
Expand distribution of Water Smart Florida Layers of Protection posters.	FDOH-Osceola	5	# of venues where posters are displayed	25	Internal Spreadsheet	Posters
Develop standardized practices at vacation rentals to educate on water safety	Experience Kissimmee (EK)	0	# of tool kit	1	EK website	Water Safety Taskforce Mobilization

PRIORITY 3: SOCIAL AND ECONOMIC FACTORS CONTRIBUTING TO HEALTH

Goal SEC 1	Increase and preserve affordable housing in Osceola County for households earning 80% or less of Area Median Income (AMI).		
Objective SEC 1.1	By December 31, 2028, increase the number of affordable housing units for households earning less than 80% AMI from 388 (2023) to 1101.		
Strategy	Partner with local governments and nonprofit developers to expand funding for low-cost housing initiatives.	Policy Change	Yes
Data Source	FLCharts		
Alignment	SHIP Goal CD 2	HP2030 HDS-04	

Activities	Responsible Organization	Current Performance Level	Units of Measurement	Target	Data Source	Resources Needed
Complete additional affordable housing units for seniors	Osceola Council on Aging	151 units	# of units	72 units	Completed units/ vacancy reports	None
Implement a long-term affordable housing preservation strategy	Osceola County Affordable Housing Advisory Committee (AHAC)	0	Completed Plan	1	Strategic Plan	AHAC members

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Activities	Responsible Organization	Current Performance Level	Units of Measurement	Target	Data Source	Resources Needed
Secure publicly owned parcels for affordable housing	Bright Community Trust	Not started yet	# parcels of land	10 parcels	Property appraiser	Land Money
Engage Bright Community Trust's land trust model for long-term affordability	Bright Community Trust	Not started yet	# parcels of land	10 parcels	CLT Database	Land Income Qualified Buyers
Maintain SHIP, CDBG, and HOME-funded programs to provide rental assistance and rehabilitation	Osceola County Housing and Community Services	386 units	# of units	386 units	SHIP annual report, HUD IDIS	Dedicated program staff, landlord, contractor & service provider partnerships, SHIP, CDBG & HOME funds
Coordinate with emergency management to plan for the impact of potential natural disasters	Osceola County Emergency Management Office	Ongoing	# of meetings/ trainings	9 meetings/ trainings annually	Meeting agendas and training attendance logs	Collaboration with ESF partners

CONTINUED

Activities	Responsible Organization	Current Performance Level	Units of Measurement	Target	Data Source	Resources Needed
Regularly assess housing needs through updated data and adjust strategies accordingly	Hope Partnership Osceola County Housing & Community Services	Ongoing	# of meetings	12 meetings annually	Homeless Management Information System Coordinated Entry	Community partners, collaboration Homeless Services Network staff expertise
Conduct proactive community education and outreach	Hope Partnership	Ongoing	# of outreach events	48 events annually	Homeless Management Information System	Community partners and Partner agency reports

CHIP Priority Area: Social and Economic Factors Contributing to Health			
Goal SEC 2	Reduce Food Insecurity		
Objective SEC 2.1	By December 31, 2028, reduce food insecurity rates within Osceola County from 14.4% (2024) to 13.3%		
Strategy	Collaboration with feeding partners to increase food access and nutrition education.	Policy Change	Yes
Data Source	FLCharts		
Alignment	SHIP Goal SEF 3.3	HP 2030 NWS-01	

Activities	Responsible Organization	Current Performance Level	Units of Measurement	Target	Data Source	Resources Needed
Increase access to food by increasing the number of partnerships in Osceola County.	Second Harvest Food Bank of Central Florida	24	# of partners	27	Internal report	Qualified Feeding Partners
Increase access to food by measuring pounds of food being distributed in Osceola County.	Second Harvest Food Bank of Central Florida	8.55 million lbs.	Pounds of food	3% increase (256,500lbs.)	Map the Meal Gap	Qualified Feeding Partners
To increase access to more nutritious foods, by measuring the pounds of produce distributed in Osceola County.	Second Harvest Food Bank of Central Florida	2.60 million lbs.	Pounds of produce	4% increase (104,000lbs.)	Map the Meal Gap	Qualified Feeding Partners

ANNUAL REVIEW

The CHIP undergoes an annual review to evaluate progress toward its goals and objectives, identify opportunities for improvement, and update the plan to reflect the community's evolving needs. This review is part of a continuous cycle of data collection, analysis, evaluation, and refinement, ensuring that the CHIP remains both dynamic and responsive.

HLOC and DOH-Osceola lead this process by analyzing performance data to assess the effectiveness of current interventions. They identify areas where progress is lagging, recognize successful initiatives, and address any barriers encountered during implementation. The review also includes an assessment of external influences, such as policy changes, economic conditions, and environmental factors, that may affect the CHIP's impact.

Based on these insights, objectives, strategies, and interventions are revised to maintain alignment with community health priorities. Adjustments to resource allocation are made as needed to support these updates. When new or unmet health challenges emerge, additional initiatives may be developed to ensure the CHIP continues to address the most pressing issues.

Findings from the annual review are shared with community partners and the public through the HLOC website, promoting transparency and reinforcing collective accountability for improving health outcomes in Osceola County.

REVISIONS

Date	Priority, goal or objective number	Original language	Revised language	Justification for the change

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