Preventive Health & Health Services Block Grant (PHHSBG) – Selection Criteria

DOCUMENT #4

California PHHS Block Grant Advisory Committee - 2014 AC Principles for Allocation:

- Emphasize primary and secondary prevention programs.
- Primary prevention includes prevention of future injury among the injured population.
- Fund each program for at least three years.
- Do not transfer monies out of the Preventive Health and Health Services Block Grant.
- Prioritize using these criteria:
- Condition severity
- Size of the problem/condition
- Equity in health status
- Community concern
- Programs engage communities at the local level
- Cost of the condition
- Cost-effectiveness of interventions
- Concordance with Healthy People Objectives
- Other resources available to address the conditions
- Performance on program metrics
- The needs of EMSA should be considered
- Innovation in areas for which there are few proven interventions
- Ability to cross sectors and disciplines (HIAP)
- Leverage of other funds
- Impact of terminating program
- Appropriate balance between infrastructure vs. program services
- History/longevity of program
- Reconfiguration/modification of program

Association of State and Territorial Health Officials (ASTHO) Recommended Criteria:

- Maintain flexibility for use of funds.
- Encourage funds to be used for evidence based programs.
- Ensure adequate reporting and accountability for use of funds.
- Link with strategic goals of the State and HP 2020.
- Support capacity such as the development of QI and performance management.
- Ensure that health equity cuts across funded programs.

California Department of Public Health (CDPH) Selection Criteria:

- Rank priority provided by Centers
- Public Health reinvestment perspective
- Previous Federal or GF cuts sustained
- Marginal utility ("bang for the buck")
- Availability of alternate funding sources
- Potential to fund internally
    a. Year-end GF savings for one-time costs
    b. Incorporate in distributed overhead
- Outcome of PHEP/HPP budget revision process
- Input from Advisory Committee and Public Meeting
- Ease of implementation (in required timeframe)
- Scalability