

**Preventive Health and Health Services Block Grant FFY 2016 - Program Outcomes Report
Document #10**

Impact Objective	Detailed Objective Outcome 2-1-17	Objective Outcome 2-1-17	Objective Outcome 6-30-17	Preliminary Allocation	Spend Rate	# of PYs	# of FTEs	* Compliance
Accountable Communities for Health								
HP 2020 Objective: HO ECBP-10 Community - Based Primary Prevention Services								
Impact Objective 1: Select and implement pilot Accountable Communities for Health.								
Will review two resources generated by Fusion Center, Blue Sky Consulting, and UC Berkeley (e.g., toolkit of best practices, description of the public health role, performance measures, evaluation framework of the statewide effort with partners), to support establishment of ACHs in California to reduce cost, improve population health, and improve the quality of health care.				\$240,000		2.00	2.00	
Activity 1: Encourage prevention activities - will participate in at least two pilot partner convenings to ensure collective impact in prevention, and leverage partnerships, including in-person and virtual participation in the statewide chronic-disease-prevention Community of Practice, to enhance the efforts of the ACH pilots.								
Activity 2: Provide expertise in the selection of pilot sites - will provide subject-matter expertise in selection and oversight of the implementation of six ACH pilot sites statewide.								
Activity 3: Develop metrics and evaluation framework for pilot - will assist Blue Sky Consulting and the California Health and Human Services Agency in the development of one set of metrics in an evaluation framework, to ensure that the ACH pilot efforts effectively address community conditions and chronic diseases for target and high-risk populations.								

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Activity 4: Develop toolkit outlining data and information needs - will assist the Center for Health Organizational Innovation Research at UC Berkeley in the development of one report summarizing the findings of the program and intervention index and literature review and one toolkit that outlines the spectrum of data and information needs of an ACH to create a data- and information-sharing capacity where none exists, or improve upon and maximize an existing system to meet optimum standards.								
California Active Communities: Older-Adult Falls Prevention								
HP 2020 Objective: HO IVP-23 Deaths from Falls								
Impact Objective 1: Conduct fall-prevention classes for older adults.								
Will conduct 27 SO or TCMBB Program community-based classes throughout California to prevent falls by promoting strength and balance among older adults at risk for falls.				\$590,841.00		4.00	1.76	
Activity 1: Fund LHDs to provide fall-prevention classes for older adults -will provide funding to seven LHDs to implement and evaluate community-based SO and TCMBB Program classes for older adults within their jurisdictions to promote strength and balance among older adults at risk for falls.								
Impact Objective 2: Increase LHDs' ability to implement TCMBB Program.								
Will establish four LHD staff or their designees as new TCMBB instructors, to provide them with the ability to promote strength and balance among older adults at risk for falls.								

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Activity 1: Fund LHDs' to participate in TCMBB training - staff will provide funding for a minimum of four LHD staff or their designees to participate in TCMBB leader trainings, increasing the LHDs' ability to implement TCMBB in their counties.								
Activity 2: Conduct TCMBB training activities - will conduct at least one two-day training to certify LHD staff or their designees as TCMBB Instructors/ Master Trainers, and provide video-based fidelity checks, support webinars, and technical assistance consultations to newly trained Instructors/Master Trainers.								
Impact Objective 3: Increase LHDs' ability to implement the SO Program.								
Will establish ten LHD staff or their designees as new SO Leaders or Master Trainers, to provide them with the ability to promote strength and balance among older adults at risk for falls.								
Activity 1: Fund LHDs' to participate in SO Program training - will provide funding for a minimum of ten LHD staff or their designees to participate in SO Program leader trainings. This enables the goal of increasing the LHDs' ability to implement the SO Program.								
Activity 2: Conduct SO Program training activities - staff will conduct at least one three-day training to certify LHD staff or their designees as new SO Leaders/Master Trainers, and conduct follow-up video-based fidelity checks, support webinars, and technical-assistance consultations to newly trained Leaders/Master Trainers, to provide trainers with the ability to promote strength and balance among older adults at risk for falls.								
Impact Objective 4: Promote safer community mobility for older adults.								
Will develop one Safe Routes for Seniors toolkit, to promote strength and balance among older adults at risk for falls.								

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Activity 1: Develop a Safe Routes for Seniors toolkit - will conduct one background literature search, research three potential elements, perform two key informant interviews, and field test one draft Safe Routes for Seniors Toolkit, to promote strength and balance among older adults at risk for falls.								
Impact Objective 5: Promote universal design and older-adult mobility in community planning.								
Will increase the number of LHDs that incorporate universal-design and older-adult mobility programs, planning, and policies into their strategic plans, to promote strength and balance among older adults at risk for falls from zero to five.								
Activity 1: Fund LHDs' to participate in strategic planning - will fund five LHDs to conduct universal-design and older-adult mobility strategic planning with their local partners, to promote strength and balance among older adults at risk for falls.								
California Health Alert Network								
HP 2020 Objective: HO PREP-1 Public Health Emergency Alert								
Impact Objective1: Increase CAHAN competency and reduce alert distribution time.								
Will develop three outreach programs to increase awareness of, participation in, and competency with the CAHAN program among partners at CDPH, public health and medical designated-response programs at the state level, and local jurisdictions. Outreach program content will help HAN coordinators use the system to its fullest extent, including shortcuts and template tips to reduce alert distribution time.				\$375,000.00		3.00	2.15	

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<p>Activity 1: Reduce alert distribution time - will conduct five or more presentations and develop two or more guidance documents to increase awareness of, participation in, and competency with the CAHAN program's CDPH participants. The content included in these presentations and guidance documents will help HAN coordinators use the system to its fullest extent, including shortcuts and template tips to reduce alert distribution time.</p>								
<p>Activity 2: Develop relationships that advance capacity building - will conduct at least three outreach presentations to public health and medical response partners within California Health and Human Services Agency to increase partner awareness of, participation in, and competency with the CAHAN alerting and notifications. The content included in these presentations will help HAN coordinators use the system to its fullest extent, including shortcuts and template tips to reduce alert distribution time.</p>								
<p>Activity 3: Conduct region-specific CAHAN training - will conduct two or more advanced regional training sessions with CAHAN local partners to increase HAN coordinator competency in the CAHAN system. The content included in these presentations will help HAN coordinators use the system to its fullest extent, including shortcuts and template tips to reduce alert distribution time.</p>								
<p>Activity 4: Develop a training procedure for HAN coordinators - will develop a curriculum of requirements, including five basic training objectives, that HAN coordinators must meet to independently train their own HAN coordinators. Will also develop one comprehensive step-by-step training manual to assist HAN coordinators in frequently used aspects of the new alerting system. A required component for the training procedure will be to demonstrate quick, effective use of the system.</p>								

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California Wellness Plan Implementation, Program A								
HP 2020 Objective: HO PHI-15 Health Improvement Plans								
Impact Objective 1: Improve chronic-disease surveillance.								
Will conduct one conceptual framework for improved statewide chronic-disease surveillance beyond stroke and cancer registries, starting with a pilot on the burden of diabetes in California.				\$330,000.00		1.00	1.00	
Activity 1: Convene stakeholders to develop conceptual framework - will convene one statewide CWP Goal-3 Work Group of partners in at least four meetings to ensure “Accessible and Usable Health Information” by developing the strategic and conceptual framework for improved chronic-disease surveillance in California via electronic health-record data.								
Activity 2: Collaborate on pre-diabetes and diabetes pilot project - will collaborate with Quest Diagnostic Laboratories, Inc., to develop one pilot proof-of-concept proposal to assess the frequency, distribution, and quality of care of patients with diabetes and those at risk of diabetes (i.e., pre-diabetics) by evaluating Quest hemoglobin A1c laboratory results.								
Objective 2: Maintain Chronic-Disease Prevention Coalition.								
Will conduct four meetings and attend partner meetings to promote CWPI in collaboration with partners committed to utilizing evidence-based chronic-disease-prevention practices that have a measurable impact on population health, patient experience, and health care cost.								

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<p>Activity 1: Plan and convene statewide conference - will, in partnership with internal and external stakeholders, host one statewide chronic-disease-prevention meeting to share successes and promote best practices for implementing chronic-disease prevention and health promotion in alignment with Let's Get Healthy California (LGHC) goals and California Wellness Plan (CWP) objectives to make California the healthiest state in the nation by 2022.</p>								
<p>Activity 2: Convene Work Group - will engage internal and external partners and stakeholders to prevent, diagnose, treat, and control chronic disease by promoting seven interventions: (1) Asthma In-Home Services for Children/ California Breathing; (2) Standard Tobacco Cessation Benefit/ California Tobacco Control; (3) National Diabetes Prevention Program Benefit/ Heart Disease and Diabetes Prevention; (4) Colorectal Cancer Screening using Fecal Immunochemical Test Preferred Policy/ California Colon Cancer Control Program; (5) Perinatal Home Visiting Benefit/ California Home Visiting; (6) Breastfeeding-Friendly Hospital Preferred Policy/ Maternal, Child and Adolescent Health; and (7) Comprehensive Medication Management/ California Wellness Plan Implementation and Prevention First.</p>								
<p>Activity 3: Promote best practices, training, and collaboration - will maintain two mechanisms for communication (e.g., listserv, website) of CWPI progress and opportunities for internal and external collaboration to promote and utilize best practices to prevent, treat, and control chronic disease, and promote use of measures such as return on investment and cost of prevention.</p>								
<p>Activity 4: Participate in partner conferences and meetings - will provide guidance in CWPI to partners attending six conferences/meetings, to ensure collective impact in prevention, diagnosis, treatment, and control of chronic disease.</p>								

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Objective 3: Monitor California Wellness Plan Implementation.								
Will maintain one process for providing progress on CWP Goals, including all 266 CWP Objectives, to inform partner chronic-disease-prevention priorities and planning efforts.								
Activity 1: Maintain online CWP Data Reference Guide - will maintain one CWP Data Reference Guide on the California Health and Human Services Open Data Portal by ensuring that data is accurate and current every year.								
Activity 2: Disseminate CWP progress report - will disseminate one CWP progress report to a statewide audience of partners and stakeholders, to provide state-level updates on CWP health objectives to inform partner chronic-disease-prevention priorities and planning efforts								
Activity 3: Track, monitor, and evaluate CMM update statewide - will collaborate with partners and stakeholders to develop one article of recommendations to track, monitor, and evaluate comprehensive medication management uptake statewide, to provide evidence of impact and effectiveness of team-based care approach for high-risk patients.								
California Wellness Plan Implementation, Program B								
HP 2020 Objective: HO PI-14 Health System Assessment								
Impact Objective 1: Increase capacity for economic analysis of public health interventions. □								
Will analyze three centers or programs within CDPH to develop a summary of staffing resources, including the level of readiness to utilize and incorporate economic analysis, and build capacity within the centers to support economic-analysis activities.				\$112,500.00		2.00	1.00	

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Activity 1: Evaluate or survey programs for economic-analysis capability - Will follow up with three centers or programs, after reviewing the results of an environmental scan, to conduct key information interviews, that will provide robust baseline data and information to develop a strategy for increasing economic-analysis capacity within the department.								
Activity 2: Research public health economic-analysis tools - will, in partnership with Lets' Get Heathy California Goal team members, conduct research on at least two public health economic-analysis tools developed by CDC, NACCHO, and ASTHO, to develop a strategy for increasing economic-analysis capacity within the department.								
Activity 3: Develop list of economic-analysis resources and tools - will, in partnership with Lets' Get Heathy California Goal team members, develop one list of recommended tools and instructions in how to use them to increase economic-analysis capacity within the department.								
Cardiovascular Disease Prevention Program								
HP 2020 Objective: HO HDS-2 Coronary Heart Disease Deaths.								
Impact Objective 1: Analyze CVD and economic data.								
Will conduct three data analyses to measure CVD burden, risk factors associated with CVD, and return on investment of public health interventions. These measures will determine the success of interventions and inform program and policy decisions of CDPP and the Chronic Disease Control Branch (CDCB).				\$524,819.00		4.00	2.60	

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<p>Activity 1: Train on economic and statistical techniques - will present at least two trainings to managers and staff on health economics (e.g., conducting cost studies, health impact assessments) to identify the cost and effect of public health programs aimed at reducing CVD.</p>								
<p>Activity 2: Collect and analyze data on sodium awareness - will: (1) analyze 2015 data from one California Behavioral Risk Factor Surveillance System (BRFSS) module question to measure awareness of reducing sodium intake, to help prevent and control hypertension; (2) produce one fact sheet on sodium awareness, highlighting the 2015 BRFSS data; (3) purchase the same question for the 2017 BRFSS survey, to track trends over time that may help inform goals and objectives regarding sodium reduction.</p>								
<p>Activity 3: Develop policy recommendation - will (1) lead at least two peer-reviewed health-economic studies to quantify the fiscal burden of CVD, (2) provide at least two estimates of county-level health care costs for treating the most common chronic conditions, including CVD, and (3) develop at least two policy recommendations for CDCB and the Health Economic Advisory Committee, to inform policy and/or program decisions that may impact staff efforts in CVD prevention.</p>								
<p>Impact Objective 2: Establish and support a statewide heart-disease alliance.</p>								
<p>Will conduct 12 Healthy Hearts California meetings and support Healthy Hearts California, a dynamic, diverse statewide alliance of individuals and organizations working to reduce the burden of heart disease and stroke in California by creating synergy between alliance members that will maximize the impact of each member's contribution to reducing coronary heart disease.</p>								

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<p>Activity 1: Implement statewide heart disease alliance - will (1) develop one steering committee composed of state and local heart disease leaders and experts; (2) in conjunction with American Heart Association partners, lead the steering committee in developing a framework—including a Vision, Mission, Goals, Guiding Principles, and Objectives—to be rolled out through a statewide alliance. Healthy Hearts California alliance members will share information and increase the ability to leverage resources and the visibility for heart disease prevention and control, to maximize public health impact.</p>								
<p>Activity 2: Organize statewide Conference - will plan, organize, facilitate, and host one statewide Healthy Hearts California Conference and invite heart disease and stroke prevention and control leaders to promote, discuss, and create synergy toward national, state, and local efforts relating to heart disease and stroke, bringing together Healthy Hearts stakeholders to set goals and objectives and monitor progress toward reducing heart disease and stroke.</p>								
<p>Activity 3: Implement heart-disease awareness campaign - will implement one heart-disease awareness campaign to be promoted by members of the Healthy Hearts California alliance. Heart-disease prevention and control concepts and materials will be developed and published online and in print and marketed to create awareness of heart disease risks and designed to shape behavior toward positive health outcomes.</p>								

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<p>Activity 4: Distribute provider toolkits - will develop and distribute 100 provider toolkits to targeted clinical providers throughout California. Toolkits will include quality-improvement tools and resources to improve health care delivery through health information technology, and tools to increase the engagement of non-physician team-members (e.g., nurses, pharmacists, and community health workers). Materials will include evidence-based protocols and algorithms from the Million Hearts Initiative, the American Heart Association, and the Right Care Initiative.</p>								
<p>Impact Objective 3: Maintain and expand partnerships to prevent CVD.</p>								
<p>Will maintain ten partnerships with key national, statewide, and local stakeholders that support cardiovascular risk reduction, with an emphasis on high blood pressure, leading to implementation of evidence-based guidelines and public health best practices.</p>								
<p>Activity 1: Participate in partner meetings and conferences - will maintain and expand at least ten partnerships by participating in meetings and conferences hosted by partner programs working to reduce CVD in California. Staff will provide requested presentations at conferences, webinars, and events hosted by partner programs, and sign letters of support.</p>								
<p>Impact Objective 4: Maintain the Sodium Awareness Leadership Team (SALT) taskforce.</p>								
<p>Will conduct 12 monthly SALT taskforce meetings to strategize on taskforce objectives and monitor and track progress toward SALT taskforce goals. Evaluation of this activity will be through taskforce agendas and meeting minutes.</p>								

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<p>Activity 1: Implement sodium-reduction awareness campaign - will implement one sodium-reduction awareness campaign that will: (1) distribute sodium-related information to parents at K–12 schools; (2) educate state employees on the risks of excess sodium consumption at the CDPH Public Health Showcase; (3) distribute nutrition and sodium-related materials to partners, including Healthy Hearts California, the Chronic Care Coalition, Lifetime of Wellness, Sodium Reduction in Communities grantees, and WISEWOMAN clinics; (4) add a sodium-awareness message to CDPH employee paystubs; (5) include sodium-awareness messages on social media sites. Measures will be taken to increase awareness of the dangers of consuming too much sodium and designed to shape behavior toward positive health outcomes.</p>								
<p>Activity 2: Implement policies on nutrition and sodium reduction - will apply policies related to one sodium-reduction campaign that will promote lower-sodium menu options at the CDPH office buildings in the East End Complex in Sacramento, which includes the Sports Grill, coffee bars, and snack shops. Campaign activities will also include surveying local area restaurants to collect and analyze data on the sodium content of menu items.</p>								
<p>Impact Objective 5: Participate in the CWP: CMM Implementation Work Group.</p>								
<p>Staff will provide information and resources to 20 individuals working on Comprehensive Medication Management (CMM), to engage pharmacists to provide services resulting in medication adherence and improved health outcomes.</p>								

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Activity 1: Support CWP: CMM Work Group - will (1) attend monthly meetings, conferences, and activities in support of the CWP: CMM Work Group. The CMM model engages pharmacists to provide services resulting in medication adherence and creating better health outcomes, and (2) share information and resources provided during CWP: CMM Work Group meetings with local health departments and Healthy Hearts California alliance members.								
Commodity-Specific Surveillance: Food & Drug Program								
HP 2020 Objective: HO FS-2 Outbreak-Associated Infections Associated with Food Commodity Groups								
Impact Objective 1: Increase analysis of food commodities for microbial contamination.								
Will collect 600 samples of high-risk food commodities that are known to be susceptible to microbial contamination. Staff will investigate the distribution of adulterated foods and take steps to ensure removal from commerce to decrease consumer exposure to contaminated foods and reduce the risk of contracting food-borne illness.				\$160,000.00		5.00	1.38	
Activity 1: Collect and evaluate high-risk food commodities for microbial contamination - will analyze approximately 600 samples of food commodities for microbial contamination. Microbial analysis will be conducted to isolate and serotype pathogens. Pulsed-field Gel Electrophoresis (PFGE) or Whole Genome Sequencing (WGS) may also be conducted on isolates to determine if they are linked to any reported illnesses.								

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Activity 2: Investigate processors to determine source and distribution of contaminated foods - will investigate all firms involved in the manufacture and distribution of foods identified with bacterial contamination to determine the likely source of the contaminant and the distribution of the contaminated food(s) to ensure removal from commerce. Distribution and handling records will be evaluated to determine product distribution, and processing and growing practices will be evaluated to determine the source of the contaminant or the failure in the processing system that allowed the contaminant to proliferate.								
Community Water Fluoridation Implementation Project								
HP 2020 Objective: HO OH-13 Community Water Fluoridation								
Impact Objective 1: Provide leadership, technical assistance, and training.								
Will provide ongoing leadership and guidance to a minimum of two communities, local health departments, or water systems interested in fluoridating their water or maintaining their fluoridation efforts.								
Activity 1: Identify priorities, challenges, and opportunities - will meet quarterly with the Fluoridation Advisory Council to identify priorities, gaps, and progress of fluoridation efforts, as well as opportunities, challenges, and resources for fluoridation and to problem solve and determine where to provide technical assistance to implement or maintain water fluoridation in strategic areas.				\$263,813.00		1.00	1.00	

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<p>Activity 2: Track fluoridated water systems - will collaborate with DWP to identify at least 57 optimally fluoridated water systems that are fluoridating to provide information to health providers and the public. This information will inform providers regarding the efficacy of prescribing fluoride supplements.</p>								
<p>Activity 3: Provide technical assistance - will provide (1) technical assistance to at least three local health departments, water systems, or communities (e.g., to provide scientific expertise and testimony regarding the safety and efficacy of water fluoridation, interpret fluoridation studies and technical reports, identify educational materials, list of resources), and (2) information to rebut anti-fluoridation information to at least four local communities (such as San Jose, Sonoma County, Woodland, and Davis) interested in implementing or maintaining fluoridation, and to stop rollback efforts, and (3) information to DWP regarding the public health benefits, safety, cost effectiveness, and efficacy of community water fluoridation.</p>								
<p>Activity 4: Identify new fluoridation formula - will identify one new methodology to determine the fluoridation status of the population receiving fluoridated water from public water systems in California. An appropriate numerator and denominator will be identified to better reflect the number of people served by fluoridated water systems. This will help to align the methodology with other states and provide a more accurate fluoridation status.</p>								
<p>Activity 5: Promote CDC water-fluoridation course - will identify and recruit two to five water engineers and/or operators to attend one national water fluoridation training course.</p>								
<p>Let's Get Healthy California Dashboard and Website</p>								
<p>HP 2020 Objective: HO PHI-14 Public Health System Assessment</p>								

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Impact Objective 1: Implement a community engagement plan.								
Will implement one community engagement plan to (1) promote and track local- and state-level innovation and collective impact activities to reduce disparities and improve health outcomes; and (2) promote application of the LGHC framework through communications and outreach, data analytics, and fostering collaborative state and local innovation to improve health outcomes in targeted priority areas.				\$300,000.00		3.00	2.50	
Activity 1: Implement a communications and outreach plan - will implement one communications and outreach campaign to increase awareness and engagement of state and local audiences with the LGHC dashboard website. The communication plan will include at least four sub-campaigns: (1) building awareness of the recently launched website and soliciting user feedback; (2) building active participation and encouraging users to submit stories of activities “moving the dial” on indicator outcomes; (3–4) promoting each of the two major content releases on the website (see Objective #1), highlighting priority focus areas that represent key opportunities for collective action and disparities reduction.								
Activity 2: Facilitate Innovation Challenge 2.0 - will coordinate the next iteration of this open innovation activity, Innovation 2.0. This targeted challenge will focus on specific LGHC priorities. Challenge and selection criteria will be framed and promoted to target audiences. Two facilitated workshops will expose state and local audiences to user-centered design. Submissions will be evaluated, and selected innovations will be showcased on the LGHC website as well as at a Statewide Innovation Conference in January 2017.								

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<p>Activity 3: Collaborate around indicator priorities - will implement at least one collaborative project to effectively link programs within CDPH. This cross-cutting collaboration will be supported by “goal teams” of staff from programs organized around common objectives, and will be implemented by aligning efforts between CDPH and a local health department partner.</p>								
<p>Impact Objective 2: Maintain, update, and enhance the newly launched website.</p>								
<p>Will maintain one statewide LGHC dashboard and website; manage technical maintenance, facilitate regular content and data updates, and implement design and feature enhancements to improve the functionality and utility of the LGHC website and dashboard.</p>								
<p>Activity 1: Conduct ongoing maintenance and updates - will support the ongoing technical maintenance for one LGHC website and dashboard. This includes responding to user feedback, conducting regular performance testing and content review, and facilitating the review and inclusion of user-generated content to maintain the dynamic and participatory aspects of the website (such as submissions to the site inbox, additions to the listserv, and “share your story” features).</p>								
<p>Activity 2: Conduct data indicator updates - will collaborate with the LGHC Data Analytics Workgroup to post updated indicator data for 2016 for 39 selected indicators. Indicator data pages, visualizations, and dashboard progress will be updated on a rolling basis as the updated results from each data source are made available.</p>								

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<p>Activity 3: Release content - will, in addition to regular content updates, plan, organize, collect, and publish two major content releases on highlighted focus areas (sub-themes that represent opportunities for collective action and disparities reduction) to include enhanced data presentation, stories of local- and state-level activities, and opportunities for community engagement.</p> <p>These major releases will be coordinated with communications campaigns and community engagement activities (see Objective #2), to bring users to the site to connect with, learn from, and participate in collective impact opportunities around the highlighted focus areas.</p>								
<p>Activity 4: Enhance website - will assess feedback from user surveys and partner feedback and identify two opportunities to improve the user experience and functionality of the website. The team will test options to enhance the staging environment. When new features are rolled out to the production site, additional user feedback will be solicited to evaluate their effectiveness.</p>								
Microbial Diseases Laboratory Branch/Select Agent and Biosafety								
HP 2020 Objective: HO PHI-11 Public Health Agencies Laboratory Services								
Impact Objective 1: Finalize biosafety and biosecurity policies.								
<p>Will implement one Tier-1 select agents and toxins program to maintain the ability to perform critical activities in detecting and preventing the spread of bio-threat agents in California.</p>				\$150,000.00		1.00	1.00	
<p>Activity 1: Conduct compliance review - will complete one review of laboratory procedures and inventory, to ensure adherence to compliance requirements.</p>								

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Activity 2: . Complete facility review - will inspect one High-Risk Pathogens Section laboratory and its equipment, to ensure adherence to compliance standards.								
Impact Objective 2: Implement biosafety and biosecurity outreach.								
Will conduct eight outreach activities with internal and external partners, to establish and refine emergency communication channels.								
Activity 1: Increase coordination between EPO and CDER - will establish close contacts with at least two parties in the EPO and CDER offices, to ensure coordination in response to a bio-threat event.								
Activity 2: Increase external coordination - will reach out to 14 California Laboratory Response Network (LRN)-B laboratories. Two webinars and two mailings will be undertaken, to engage laboratories in: (1) performance of MDL Tier-1 duties in reference testing of <i>Bacillus anthracis</i> , <i>Burkholderia mallei</i> , <i>Burkholderia pseudomallei</i> , <i>botulinum neurotoxins</i> , botulinum neurotoxin-producing species of <i>Clostridium</i> , and <i>Francisella tularensis</i> , and (2) sharing of resources to increase capacity for such testing in the LRN-B laboratories.								
Activity 3: Increase preparedness - will send one state-of-preparedness document to at least 35 contacts in local and state police, FBI, local and state fire departments, and the U.S. Postal Service, to serve as a ready reference. Will follow up with an annual on-site meet-and-greet event, to familiarize principals likely to be involved in responding to an actual bio-threat event.								
Impact Objective 3: Improve biosafety and biosecurity practices.								
Specialist will develop at least two detailed procedures binders, to prescribe handling, processing, storage, and shipment of select agents.								

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Activity 1: Provide annual biosafety training - will provide annual training in biosafety, security, and incident response to approximately 12 MDL staff members. This training is mandated by federal select-agent regulations.								
Activity 2: Respond to mock and real security incidents - will perform one mock security incident exercise, to test the level of preparedness of staff and obtain hands-on experience for actual breach events.								
Microbial Diseases Laboratory Branch/Valley Fever								
HP 2020 Objective: HO PHI-11 Public Health Agencies Laboratory Services								
Impact Objective 1: Conduct diagnostic reference services for <i>Coccidioides</i> species.								
Will analyze 400 clinical specimens for diagnostic reference services for the isolation of pathogenic fungi from clinical specimens and identification of <i>Coccidioides</i> species isolates submitted to state and local public health laboratories.				\$340,800.00		3.00	3.00	
Activity 1: Provide fungal laboratory reference services - will (1) complete mycology laboratory proficiency testing from the College of American Pathologists and meet the licensing requirements for a comprehensive mycology laboratory; (2) process 400 specimens and isolates for reference testing. This activity will ensure that California patients receive reference services for fungal infections, including <i>coccidioidomycosis</i> .								

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<p>Activity 2: Foster internal and external partnerships - will (1) reach out to 34 local public health laboratories and academic centers involved with Valley Fever; (2) collaborate with epidemiologists at CDPH to have six conference calls, two webinars, and three mailings. These activities will introduce specialized <i>Coccidioides</i> tests in the regular work flow of local public health laboratories.</p>								
<p>Impact Objective 2: Develop fungal genotyping by whole-genome sequencing.</p>								
<p>Will analyze 25 isolates of <i>Coccidioides</i> species from clinical specimens and environmental samples from suspected Valley Fever outbreaks. These will be genotyped by multi-locus sequencing typing and whole-genome sequence typing. The results will improve surveillance of <i>Coccidioides</i> in California, eventually helping to remediate the "hotspots" of <i>Coccidioidomycosis</i> in the Central Valley.</p>								
<p>Activity 1: Support prevention, control, and surveillance of coccidioidomycosis - will validate multi-locus sequence typing and whole-genome sequence typing of <i>Coccidioides</i> species. Two next-generation sequencing platforms will be employed to seek the optimal sequencing solution, leading to standardized genotyping methods and real-time genomic data for up to 25 <i>Coccidioides</i> isolates obtained from outbreak investigations in California.</p>								
<p>Activity 2: Support public health policy development - will collaborate with CDPH and 34 local public health laboratories to establish guidelines for utilization of <i>Coccidioides</i> species genotyping data during an outbreak investigation, to standardize the application of whole-genome sequencing platforms in public health laboratories, such that uniform results are obtained for outbreak investigations.</p>								

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<p>Activity 3: Support public health related investigations - use 25 <i>Coccidioides</i> species outbreak isolates to compare multi-locus sequence typing and whole-genome sequence typing from various outbreaks to find the best laboratory method for the outbreak investigation. The genotyping results will enhance surveillance activities aimed at disease control and prevention.</p>								
<p>Impact Objective 3: Identify <i>Coccidioides</i> species by rapid real-time PCR.</p>								
<p>Will identify 100 clinical isolates of <i>Coccidioides</i> species by two rapid DNA tests. The first test uses DNA sequencing to identify fungal species. The second test employs more-sensitive DNA probes to identify two pathogens of Valley Fever, <i>Coccidioides immitis</i> and <i>C. posadasii</i>.</p>								
<p>Annual Activities 1: Provide specialized and reference fungal tests - will introduce the two validated rapid molecular tests, the real-time PCR assays for the differentiation of <i>Coccidioides immitis</i> and <i>C. posadasii</i>, and internal transcribed spacer sequencing for fungal identification, to partner public health laboratories, to promote rapid and accurate diagnosis of pathogenic fungi, especially <i>Coccidioides</i> species, in clinical specimens and ensure better clinical management of <i>coccidioidomycosis</i> patients.</p>								
<p>Annual Activities 2: Support validation of new assays - will identify and diagnose <i>Coccidioides</i> in 100 clinical specimens from California public health laboratories and publish the validation and improvement of the testing methods. This activity will contribute to the knowledge of <i>Coccidioides</i> in the public health and academic communities.</p>								

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Nutrition Education and Obesity Prevention Branch								
HP 2020 Objective: HO NWS-10 Obesity in Children and Adolescents								
Impact Objective 1: Advance education and prevention policy.								
Will maintain 35 educational opportunities, resources, and technical assistance on evidence-based and evidenced-informed strategies to partners statewide to support the advancement of nutrition education and obesity prevention on policy, systems, and environmental (PSE) changes to reduce the incidence of obesity and chronic disease in California.				\$468,039.00		5.00	2.50	
Activity 1: Implement Childhood Obesity Conference - will (1) collaborate with four partners: The California Endowment, Kaiser Permanente, University of California Nutrition Policy Institute, and the California Department of Education, to implement this nationally recognized conference; (2) convene the conference Executive Committee, responsible for implementing the conference and providing subject-matter expertise and content development; (3) through the Executive Committee, the agenda and associated content, prioritize evidence-based and evidence-informed resources and best practices to advance PSE changes for childhood obesity prevention.								
Activity 2: Promote physical activity in early childhood and school settings - will (1) provide policy-related and programmatic technical assistance on physical-activity promotion efforts to five to ten early childhood, school, and after-school settings; (2) provide technical assistance, best practices, and guidance in the area of safe and active transportation through education and PSE change strategies.								

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Impact Objective 2: Coordinate healthy eating, physical activity, and food security activities.								
Will maintain 25 partnerships with internal and external partners to coordinate state and local efforts in the priority focus areas of food and beverage, physical activity, and food security to reduce the prevalence of obesity in California.								
Activity 1: Implement NEOPB's three-year Strategic Framework - will distribute and implement one completed NEOPB three-year Strategic Framework that will include strategies and strategic directions in the priority focus areas of food and beverage, food security, and physical activity. It will also include recommendations, including barriers and challenges. The Strategic Framework will be shared with more than 100 internal and external partners, including LHDs, that will use the Framework as a tool for their three-year work plans.								
Activity 2: Advance education and prevention policy - will (1) actively initiate, foster, pursue, and engage in 10–15 strategic partnerships across multiple sectors, especially among low-income populations and ethnic communities; (2) continue to develop and maintain partnerships with agencies and programs regarding food and beverage, physical activity, and food security. These partnerships include statewide public and private organizations in areas of retail, health care, faith-based organizations, government, education, and agriculture; and (3) cultivate and maintain relationships with traditional and nontraditional partners.								
Impact Objective 3: Support obesity-prevention interventions.								
Will conduct ten obesity-prevention trainings and ongoing technical assistance to at least 20 local jurisdictions statewide to support obesity-prevention interventions and promote healthy community changes that foster healthy and active California communities.								

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Activity 1: Provide training, technical assistance, and resources to LHDs - Will help 10–15 LHDs achieve sustainable, healthy community change that supports obesity prevention, targeting youth and adults. PHHSBG funds will leverage SNAP-Ed promotion funding with technical assistance on policy-driven change with PSE consultation and multiple trainings.								
Office of AIDS: Re-engagement in HIV Care and Partner Services Using HIV Surveillance Data								
HP 2020 Objective: HO HIV-1 HIV Diagnoses								
Impact Objective 1: Analyze Orange County Linkage to HIV Care and Partner Services Activities.								
Will analyze two linkages to HIV care (LTC) and/or partner services policies, protocols, or work flows, and suggest improvements to the division Manager of Disease Control and Epidemiology in Orange County.				\$375,000.00		0.00	0.00	
Activity 1: Investigate LTC and partner-services processes - will develop two improvements to LTC and/or partner-services policies, protocols, or work flows and present them to the Division Manager of Disease Control and Epidemiology in Orange County.								
Activity 2: Improve LTC/partner-services activities - will interview 75% of Orange County staff currently providing LTC and partner services to determine processes, protocols, or work flows to improve.								
Impact Objective 2: Develop Alameda County-specific database of people with HIV.								
Will develop one database to assist in determining people with HIV who are not in HIV care or not virally suppressed, and/or have become co-infected with syphilis or gonorrhea (GC).								

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Activity 1: Evaluate available data sources - will assess 100% of available sources and, if appropriate, include them in the database.								
Activity 2: Develop protocol for usage of database information - will develop one protocol for HIV LTC and partner services staff to use information from the database to provide services to people who need them.								
Impact Objective 3: Link HIV care and partner services in San Diego.								
<p>Will conduct 250 interviews with people co-infected with non-virally suppressed HIV and GC to provide linkage to HIV care, ascertain appropriate GC treatment, and elicit information about sex or needle sharing partners.</p> <p>People with HIV and GC co-infection must receive appropriate GC treatment to decrease the possibility of developing drug-resistant GC. It is also important to find the partners of people with HIV and GC co-infection because if the partner has GC it may make them more likely to have become infected with HIV. Finding and testing partners is critical to decreasing HIV transmission.</p>								
Activity 1: Identify those co-infected with HIV and GC - will use laboratory and Enhanced HIV/AIDS Reporting System (eHARS) data to identify 325 people recently diagnosed with GC who are also HIV positive.								
Activity 2: Interview identified patients - will (1) contact all identified patients and determine if they are currently in HIV care and have received appropriate GC treatment and (2) elicit identifying information about their sex and/or needle-sharing partners that can allow for anonymous third-party notification.								

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Office of Health Equity								
HP 2020 Objective: HO PA-15 Built Environment Policies								
Impact Objective 1: Coordinate stakeholder engagement initiatives focused on improving health equity.								
Will develop at least three opportunities to embed physical-activity—promoting health and equity components into state-issued land-use and transportation grants, guidelines, programs, data collection, or processes to support efforts to build healthy and equitable communities.				\$491,689.00		4.00	4.00	
Activity 1: Expand relationships with state non-health departments - will, in response to input from agency partners, facilitate four multi-agency forums with at least 15 state departments, agencies, and offices through the Health in All Policies (HiAP) Task Force to assess capacity for non-health departments to consider physical-activity-related health and health-equity components; identify and lift up successes, creating a venue for sharing and troubleshooting; and identify gaps where further training and tools are needed when developing grant applications and guidance documents.								
Activity 2: Increase collaboration and coordination with local health departments - will gather input from at least two local health department leaders through the California Conference of Local Health Officers to ensure that their needs are incorporated in policies of the California Departments of Education and Transportation to promote physical-activity—related health and equity components in state policies, programs, and processes related to active transportation and school facilities siting.								

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<p>Activity 3: Increase collaboration and coordination with CDPH - will provide technical assistance and partnership to at least two branches within CDPH to support coordination of healthy-community and health-equity initiatives such as Let's Get Healthy California through activities that convene staff and align physical-activity-related program planning and implementation, and communications efforts to create organizational efficiency and increase CDPH's collective impact toward improving the health of Californians.</p>								
<p>Impact Objective 2: Develop healthy public policy.</p>								
<p>will develop at least three opportunities to embed physical-activity-related health and equity components into state-issued land-use and transportation grants, guidelines, programs, data collection, or processes to support efforts to build healthy and equitable communities.</p>								
<p>Activity 1: Promote sustainable, equitable land-use planning and development - will partner with one HiAP Task Force by providing guidance and technical input to the Departments of Education and Transportation on including equity and health promotion considerations in school facilities siting guidelines and practices and active-transportation projects. These policy areas promote sustainable, equitable land-use planning and development supportive of regular daily physical activity and other behaviors that will lead to improved health outcomes.</p>								

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<p>Activity 2: Promote greater equity in CDPH policies, programs, and processes - will build on at least two existing organizational relationships by partnering with the Government Alliance on Race and Equity to assess CDPH policies, programs, and processes that present barriers to racial equity and develop a plan for CDPH to address institutional racism. Reasons OHE is focusing on racism include that government institutions and employees must be aware of their role in promoting proportionate health and well-being outcomes across populations, and prioritizing efforts targeted to populations with the greatest need, particularly those historically and currently disadvantaged, including in built-environment policies that affect access to physical-activity opportunities.</p>								
Office of Quality Performance and Accreditation								
HP 2020 Objective: HO PHI-17 Accredited Public Health Agencies								
Impact Objective 1: Assess needs.								
Will develop two assessments of accreditation readiness, for one local and one tribal public health agency, to determine which resources are available and which are lacking.				\$193,483.00		3.00	1.00	
Activity 1: Evaluate needs assessment data - will evaluate the information gathered to determine the TA areas to address with at least two local and/or tribal public health agencies.								
Impact Objective 2: Maintain internal personnel capacity.								

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Activity 1: Provide infrastructure and personnel support - will provide TA services, including documentation selection and submission, site-visit preparation, strategic planning, QI, and performance management to at least two local and/or tribal public health agencies, to augment and facilitate their accreditation planning activities.								
Impact Objective 3: Provide Financial Assistance.								
Will provide financial assistance to increase accreditation readiness to at least one local and/or tribal public health agency to improve the capacity to apply for national public health accreditation.								
Activity 1: Establish mini-grant program - will establish an accreditation readiness mini-grant program for at least two local and/or tribal public health agencies to apply for financial assistance. Mini-grants may be used to fund the PHAB application fee when applying for accreditation or support the development of accreditation-related activities such as workforce development, QI, and performance management. The allocation of financial assistance will increase the capacity of at least one local and/or tribal public health agency that has demonstrated limited economic resources to pursue and apply for public health accreditation.								
Impact Objective 4: Support interventions.								
will provide accreditation-readiness TA to at least three local and/or tribal public health agencies, to address identified accreditation needs and increase agency capacity to apply for and achieve national public health accreditation.								
Activity 1: Provide TA - will provide at least two webinars, educational seminars, and conference calls that provide guidance on the national public health–accreditation process to local and/or tribal public health agencies.								

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Activity 2: Provide accessible accreditation resources - will utilize the information provided by at least two needs assessments to identify materials and tools to support local and/or tribal public health agency accreditation-related activities. These resources will be posted on the California Performance Improvement Management Network's website.								
Prescription Drug Overdose Surveillance Project								
HP 2020 Objective: HO IVP-11 Unintentional Injury Deaths								
Impact Objective 1: Increase capacity for using surveillance data.								
Will analyze quarterly data reports to 25 state and local stakeholders to inform policy and program implementation.				\$150,000.00		2.00	1.05	
Activity 1: Prepare and upload data on EpiCenter website - will design and/or update at least three functionalities for EpiCenter, to capture data sources using International Classification of Diseases (ICD) coding and upload the most current data to increase availability for surveillance activities.								
Activity 2: Provide TA to EpiCenter users - will provide TA to at least ten state or local partners on how to use data from the EpiCenter, to conduct surveillance activities to enhance planning and implementation of policies and programs.								
Impact Objective 2: Support statewide workgroup.								
Will provide surveillance and programmatic technical assistance to ten state agency members of the Director's Prescription Opioid Drug Overdose Prevention Workgroup to promote policy and program planning, implementation, and evaluation at state and local levels.								

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Activity 1: Provide data support - will provide four regular reports on data sources and data-sharing activities to Workgroup members to support policy and program planning and implementation.								
Activity 2: Provide TA - will provide data and programmatic TA to the Workgroup and its partners (e.g., Department of Health Care Services) to assist with program planning, implementation, and evaluation at least 10 times annually.								
Impact Objective 3: Translate data into useful information.								
Will distribute quarterly data reports to 25 state and local stakeholders, to inform policy and program implementation.								
Activity 1: Prepare and analyze available data - will, using three data sources, annually prepare and analyze data on prescription-drug–related deaths, hospitalizations, and emergency department visits to be included in multiple dissemination platforms (e.g., websites, webinars, conferences, TA).								
Activity 2: Disseminate reports to stakeholders - will produce and disseminate ten data reports to at least 100 state and local prevention/public health stakeholders to inform program planning and implementation.								
Preventive Medicine Residency Program								
HP 2020 Objective: HO PHI-1 Competencies for Public Health Professionals								
Impact Objective 1: Increase the number of trainees who gain Preventive Medicine and Applied Epidemiology competencies.								

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Will increase the number of trainees who, over the course of their training period, have satisfactorily achieved moderate or high competency in American College of Preventive Medicine (ACPM)/ACGME or CSTE competencies, by working in local or state public health agency programs or community-based settings and/or completing academic coursework, from 111 Residents and 145 Fellows to 113 Residents and 155 Fellows.				\$534,600.00		3.00	2.25	
Activity 1: Recruit and interview applicants for PMRP and Cal EIS Fellowships - Will recruit and interview at least seven PMRP applicants and 26 Cal-EIS applicants. The competitive recruitment and selection process includes distributing PMRP and Cal-EIS information to schools of public health, residency programs, and local health departments, and posting on various websites, such as FREIDA Online, Electronic Residency Application Service (ERAS), and Public Health Connection. Applications from this pool will be reviewed by the PMRP and Cal-EIS Advisory Committees, and top candidates will be selected for interview.								
Activity 2: Place trainees for a public health training experience - will train at least 12 individuals (at least ten Cal-EIS trainees to achieve CSTE competencies and at least two Residents to meet ACPM/ACGME competencies). Experienced preceptors mentor and guide trainees to meet competencies through applied state and local public health experiences, training required for the State's public health workforce.								

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Activity 3: Develop and implement public health practice curriculum - will conduct at least 14 public health/preventive medicine (PM) seminars for PMRP and Cal-EIS trainees. These bimonthly PM seminars address ACPM/ACGME or CSTE competencies and provide trainees with insights and resources on public health practice, epidemiologic investigation procedures, and other processes that prepare trainees to enter the public health workforce.								
Rape Prevention Program								
HP 2020 Objective: IVP-40 Sexual Violence (Rape Prevention)								
Impact Objective 1: Increase delivery of evidence-informed rape-prevention programs.								
Will increase the number of evidence-informed sexual-offense-prevention programs provided to victims, potential victims, and potential perpetrators, by promoting the use of the Nine Principles of Effective Prevention (Principles), from 10 to 20.				\$832,969.00		2.00	0.50	
Activity 1: Assess knowledge and application of Principles among RCCs - will conduct organizational assessments with 34 RCCs to determine to what extent they are implementing sexual-offense-prevention programs using <i>Principles</i> .								
Activity 2: Increase knowledge and skills of RCCs to use "Principles." - Will conduct a minimum of four <i>Principles</i> -based educational activities to contracted RCCs so they may conduct evidence-informed sexual-offense (rape)-prevention programs for potential victims and perpetrators, to change behaviors that lead to sexual offenses.								

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Activity 3: Fund MyStrength Clubs - Will fund eight local RCCs to conduct MyStrength Clubs with young men to change behaviors that have been shown to contribute to the perpetration of sexual offenses.								
Receptor Binding Assay for Paralytic Shellfish Poisoning Control								
HP 2020 Objective: HO EH-22 Monitoring Diseases Caused by Exposure to Environmental Hazards								
Impact Objective 1: Conduct a feasibility study of regulatory testing in California.								
Will conduct one feasibility study of the RBA for routine regulatory testing in California. This study will compare performance of the RBA and the currently used testing method (MBA). The greater sensitivity and higher throughput of the RBA compared to the MBA has the potential to reduce risk of illness due to food-borne intoxication.								
Activity 1: Test all shellfish samples submitted to CDPH using the RBA - Will analyze every shellfish sample received by CDPH for PSP toxin testing by the RBA and the MBA for one calendar year. It is necessary to test samples with both methods to (1) establish that the results generated from the two tests are similar; and (2) demonstrate that the RBA is as protective to public health as the MBA before considering changing methods.								

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<p>Activity 2: Validate commercial porcine membrane for use in the RBA - will validate use of one type of commercial porcine membrane for use in the RBA. Previous validation work for the RBA used a rat-brain homogenate as the source of PSP toxin binding sites. The rat homogenate is not commercially available and must be prepared in batches by the laboratory. Homogenate preparation is complex and labor intensive. A recently available commercially made porcine brain homogenate (1) uses tissue from animals slaughtered for other products, removing the need to slaughter animals solely for RBA-reagent preparation; and (2) is made in larger lots, reducing variability that can result from in-house homogenate preparation.</p> <p>Staff will test the performance of the commercial porcine membrane through side-by-side comparison to sample testing with the in-house prepared homogenate. Validation of the porcine reagent's performance has the potential to streamline the RBA workflow and yield a more uniform assay reagent.</p>								
<p>Activity 3: Evaluate rapid toxin extraction method - will evaluate performance of one rapid toxin-extraction method. When the International Shellfish Sanitation Conference approved the RBA for testing mussels for PSP toxin, they approved it for use with a rapid small-scale toxin-extraction method.</p>								

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<p>Activity 4: Develop a laboratory information management system for use with the RBA - will develop one laboratory information management system (LIMS) for use by the Preharvest Shellfish Program and the DWRL.</p> <p>The current LIMS used for shellfish samples is a commercial product; the portion of the LIMS for shellfish data entry will be discontinued due to system upgrades. A DWRL staff member will build a LIMS using Microsoft Access. The system will have fields for entering sample collection information, including environmental conditions at the time of sample collection, laboratory testing method, and laboratory results.</p> <p>The LIMS will be searchable and have the ability to export data into Excel and Adobe Acrobat. By building a LIMS specific to RBA, staff will not be constrained by commercial product limitations and will be able to generate a system tailored to DWRL needs.</p>								
Safe and Active Communities Branch								
HP 2020 Objective: HO IVP-11 Unintentional Injury Deaths								
Impact Objective 1: Analyze the prevalence and impact of Adverse Childhood Experiences (ACEs).								
Staff will analyze one ACEs module of questions to assess the prevalence and impact of ACEs on population health.				\$309,919.00		9.00	0.29	
Activity 1: Fund the ACEs module of questions - staff will fund one ACEs module of questions in the Behavioral Risk Factor Surveillance System (BRFSS) to document the impact of ACEs on population health.								

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Activity 2: Analyze and report on ACEs data from BRFSS. will analyze and prepare one report on ACEs from BRFSS data to document the impact of ACEs on population health.								
Impact Objective 2: Improve access to data on traffic-related injuries.								
Will conduct two web-based trainings to at least 20 local health department (LHD) staff and stakeholders on locally identified data from the Crash Medical Outcomes Data Project.								
Activity 1: Assess training needs - will assess the needs of California's LHD staff and other partners to identify at least two data issues for web-based trainings.								
Activity 2: Conduct training webinars and provide technical assistance - will conduct at least two webinars and provide follow-up technical assistance consultations to participants to increase their ability to use traffic-injury surveillance data from the Crash Medical Outcomes Data Project.								
Impact Objective 3: Increase access to occupant-protection data.								
Staff will develop one uniform process to collect standardized child passenger safety-seat misuse data to inform program, policy, and evaluation.								
Activity 1: Develop data collection system - will develop one data-collection instrument and system to obtain local child passenger safety-seat misuse data from local stakeholder organizations to increase access to occupant-protection data.								
Activity 2: Conduct pilot test of data-collection system - will conduct one pilot test of the data-collection instrument and system with at least three local stakeholder organizations to increase access to occupant-protection data.								

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<p>Activity 3: Disseminate findings at additional venues - will identify and utilize at least two additional venues to disseminate findings to state and national injury-prevention/public health community stakeholders to inform them about key findings on critical or emerging injury issues, such as participation on national expert panels, preparation of comprehensive reports and manuscripts for peer-reviewed journals, and presentations at state and national public health conferences</p>								
<p>Impact Objective 4: increase capacity for conducting injury surveillance.</p>								
<p>will publish three sets of data on the EpiCenter web-based query system, to provide information on California injury deaths (approx. 16,200 annually); non-fatal hospitalizations (approx. 256,000 annually); and, nonfatal emergency departments treatments/transfers (approx. 2,220,000 annually).</p>								
<p>Activity 1: Develop data for the EpiCenter website - staff will develop at least two data elements on injury deaths, non-fatal hospitalizations, and non-fatal emergency department treatments/transfers to post on the EpiCenter website to increase the availability of data for injury surveillance.</p>								
<p>Activity 2: Publish data on the EpiCenter website - will provide at least two of the most current fatal, emergency department, and nonfatal hospitalized injury-data elements on the EpiCenter's predefined and custom query systems to increase the availability of data for injury surveillance.</p>								
<p>Activity 3: Provide technical assistance to EpiCenter website users - will provide technical assistance to at least 25 state and local policy makers, academicians, program advocates, health departments, and others to increase their ability to use data from the EpiCenter website for injury surveillance.</p>								

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Emergency Medical Dispatch Program/EMS Communications								
HP 2020 Objective: HO AHS-8 Rapid Prehospital Emergency Care (EMS)								
Impact Objective 1: Maintain active partnerships with key EMS communication stakeholder groups.								
Will increase the percent of participation in key EMS communications stakeholder association groups that represent EMSA in California EMS communications operations from 30% to 50%.								
Activity 1: Attend 9-1-1 Advisory Board meetings - will participate in at least four 9-1-1 Advisory Board meetings to (1) develop relationships with key EMS communication stakeholders, (2) receive up-to-date 9-1-1 service information, and (3) to ensure statewide coordination of efficient pre-hospital medical responses.				\$90,711.00		6.00	1.46	
Activity 2: Attend NAPCO meetings - will attend at least three NAPCO meetings to develop relations with key communication stakeholders and provide EMS related information in NAPCO activities.								
Impact Objective 2: Review EMS manual.								
Will review one "Statewide EMS Operations and Communications Resource Manual" to determine the need for addition/deletion of information. Revisions will improve interoperability communications among EMS agencies and public-safety responders.								

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Activity 1: Update manual - will revise one "Statewide EMS Operations and Communications Resource Manual" by implementing suggested addition/deletion of content, to improve access to information that enables interoperability of communications systems among responders to crash sites.								
Activity 2: Establish Communication Technical Advisory Committee - will identify six to ten stakeholders and communicate with all appropriate agencies to get current information for revision of the resource manual.								
EMS For Children								
HP 2020 Objective: HO AHS-8 Rapid Prehospital Emergency Care (EMS)								
Impact Objective 1: Develop EMSC regulations.								
Will develop one set of draft regulations for the EMSC program. EMSC regulations are being drafted to provide the LEMSAs and other local facilities with minimum requirements to establish and maintain EMSC program(s).				\$123,800.00		5.00	0.66	
Activity 1: Coordinate Work Group meetings - will schedule at least two meetings and two conference calls with the EMSC Regulations Work Group to discuss draft regulations and come to an agreement on regulatory language.								
Activity 2: Draft EMSC regulations - will (1) provide one final draft of regulations for EMSC Work Group review and feedback, (2) revise the draft regulations based on Work Group comments, and (3) circulate draft regulations to internal EMSA management for approval.								

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Activity 3: Obtain approval of the draft EMSC regulations - will present for approval one set of final draft regulations to (1) the EMSC Regulation Work Group, (2) the Emergency Medical Services Administrators' Association of California (EMSAAC); and (3) the Commission on EMS, to satisfy required regulation standards.								
Activity 4: Develop one Rulemaking File for EMSC regulations - will (1) complete one Notice of Publication form (Std 400) to begin the review process with the California Office of Administrative Law (OAL); (2) develop one Notice of Proposed Rulemaking, announcing the proposed rulemaking to the regulated public (required by California law); (3) submit one Std 400, Notice of Proposed Rulemaking, the Initial Statement of Reason Statement (ISORS), and one draft regulations to OAL. The ISOR is the primary rulemaking document that satisfies the necessity standard in the rulemaking process.								
EMS Health Information Exchange								
HP 2020 Objective: HO AHS-8 Rapid Prehospital Emergency Care (EMS)								
Impact Objective1: Provide funding to LEMSAs for HIE programs.								
Will implement at least one EMSA-approved, LEMSAs-proposed HIE project, to enhance patient medical information exchange services.				\$389,580.00		5.00	0.91	
Activity 1: Develop contracts - will develop at least one contractual agreement with a LEMSA to receive PHHSBG funds, to ensure that their HIE-related pilot projects adhere to the approved proposal scope of work.								

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Activity 2: Coordinate quarterly project reports - will coordinate quarterly project reports from the LEMSAs, to ensure that scope-of-work and project objectives are being met.								
Activity 3: Coordinate final project report - will coordinate the receipt of one final project report from the LEMSA, to ensure completion of the HIE project as described in the contract.								
Impact Objective 2: Provide leadership and coordination of HIE.								
Will provide technical assistance and support to 100% of LEMSAs that request assistance in areas associated with health information exchange system developments and operations to improve statewide EMS patient care.								
Activity 1: Participate in teleconferences - will attend at least six teleconference calls with the Office of the National Coordinator for Health IT (ONC), the California Association of Health Information Exchanges, the California Office of Health Information Integrity, and/or other participating EMS entities. These teleconferences provide a forum for discussion of HIE designs and sharing of successes and program implementation issues for states that are operating HIE programs under an ONC grant.								
Activity 2: Participate in HIE workshop - will organize and host at least one event to share LEMSA HIE successes to (1) inform EMS partners how best to use HIE to improve patient care, and (2) measure that improved care.								

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EMS Partnership for Injury Prevention and Public Education								
HP 2020 Objective: HO AHS-8 Rapid Prehospital Emergency Care (EMS)								
Impact Objective 1: Create trauma system public-information web page.								
Will develop one public-information page on the EMSA website for the trauma system to make injury-prevention information available.				\$78,515.00		5.00	0.71	
Activity 1: Review public information pages from other states - will review at least five trauma-related websites that provide public information that may be used for California.								
Activity 2: Draft public-information web page - will develop one draft web page providing public information on state and local trauma programs to provide injury-prevention information.								
Activity 3: Distribute draft public-information web page - will review the draft web page with at least four LEMSAs and four trauma centers through regional meetings or e-mail. Review of draft public information by essential stakeholders is essential for statewide uniformity and transparency.								
Activity 4: Obtain approval of trauma public-information web page - will review and make necessary revisions to one web page based on administrative comments, to maximize accuracy and usability of web-page content.								
Activity 5: Go live with trauma public-information web page - will activate one public-information web page and inform all trauma partners that it is live, to disseminate injury-prevention information.								
Impact Objective 2: Develop an injury-report template.								

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Will develop one template for reporting injury data to requesting entities. A standardized reporting process will assist the State of California in completing a state report on injuries seen at trauma centers.								
Activity 1: Collaborate on injury-report template development - will meet at least three times with CDPH staff to draft one injury-report template, taking into consideration available data in EpiCenter and CEMISIS.								
Activity 2: Generate data reports for each selected population - will generate at least two EpiCenter and CEMISIS data reports on select demographics, location, age, and gender (at a minimum) to determine the best categories for the template.								
Activity 3: Draft injury-report template - will review one draft injury-report template with trauma regions and Trauma Managers Association of California for suggested revisions.								
Activity 4: Complete injury-report template - will provide electronic access to one injury-report template on the EMSA website that has the ability to electronically complete a local report.								
Impact Objective 3: Update the EMSA injury- and illness-prevention website.								
Will update four EMSA injury- and illness-prevention website links, at least quarterly. Updating the website links provides education for EMS partners and promotes injury prevention in the EMS community.								
Activity 1: Verify functionality of website links - will check 63 links for connectivity and correct links as needed to ensure access to and accuracy of injury- and illness-prevention data.								
Activity 2: Inquire with trauma partner organizations - will collaborate with one Trauma Managers Association, five California Trauma Regions, and the 27 LEMSAs that have trauma centers, to add any new programs to the website as information becomes available.								

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EMS Poison Control System								
HP 2020 Objective: HO IVP-9 Poisoning Deaths								
Impact Objective 1: Provide program oversight.								
Will provide oversight to CPCS to promote rapid and effective telephone emergency advise service to 398,000 Californians exposed to poisons.				\$108,691.00		5.00	0.61	
Activity 1: Submit reports - will coordinate with the CPCS Business Operations Director to ensure timely report submissions following each reporting quarter.								
Activity 2: Review quarterly activity reports - review the quarterly reports submitted by CPCS to verify that the work performed is consistent with the contractual scope of work.								

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EMS Prehospital Data and Information Services and Quality Improvement Program								
HP 2020 Objective: HO AHS-8 Rapid Prehospital Emergency Care (EMS)								
Impact Objective 1: Fund LEMSA local QI or data-related programs.								
Will provide PHHS funds to at least one LEMSA, to support the implementation of their local QI or data-related pilot. Pilot projects will include efforts to more clearly define clinical performance measure data in the EMSA Core Measures Report and conduct periodic testing to ensure the data collected in NEMSIS 3.4 provide the information needed for the future Core Measures performance data.				\$651,256.00		7.00	2.41	
Activity 1: Develop contracts - will develop at least one contractual agreement with a LEMSA receiving PHHSBG funds, to ensure that their QI or data-related pilot project adheres to the approved proposal scope of work during this federal fiscal year.								
Activity 2: Coordinate reports - will coordinate quarterly and final LEMSA project reports, to ensure that scope-of-work and project objectives are met. Providing contract oversight presents a mechanism for EMSA to ensure that local areas are improving data quality and program operations that emanate from those data. It is important that the EMSA staff stay informed and aware of the scope and progress of the contracts by reviewing the data quarterly.								
Activity 3: Coordinate final project reports - will coordinate the receipt of at least two final project reports from the LEMSAs, to ensure completion of the project as described in the contract.								

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Impact Objective 2: Increase the quality and availability of EMS data.								
Will develop at least three EMS annual and Trauma data reports that show frequencies for specific data elements (e.g., cause of injury, type of service) specific to a particular area or county, (e.g., number of calls and proportion that are 9-1-1 calls). Data, to be published on the EMSA website, will help develop a state baseline and track what data are successfully moving from the LEMSAs to CEMSIS.								
Activity 1: Analyze CEMSIS database data - will analyze 100% of a selected data set submitted by LEMSAs to the CEMSIS database, to ensure accurate and efficient evaluation of critical data submitted for successful QI and QA data reporting.								
Activity 2: Publish EMS data reports - will publish at least three EMS data reports for distribution via the EMSA website, to make the data available to promote public trust and quality patient care.								
Activity 3: Select and develop a minimum data set - will, with appointed Executive Data Advisory Group members, develop one Minimum Data Set (MDS) for use with pre-hospital reports. The use of an MDS is intended to (1) streamline the data-collection process and lead to higher-quality data submissions to CEMSIS (an MDS is usually smaller than the initial data set, which reduces the time users must devote to becoming familiar with the data); and (2) reduce the data selections, which reduces EMS staff time devoted to data entry and is expected to reduce data-quality issues.								
Impact Objective 3: Lead and Coordinate Core Measure reporting.								

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Will provide TA to 100% of the LEMSAs that request assistance with Core Measure reporting, to ensure that data used to prepare Core Measure reports regarding selected clinical measures is used effectively.								
Activity 1: Facilitate Core Measure Taskforce - will facilitate at least two Core Measure Taskforce meetings to prepare the Core Measures book and review Core Measure reports, to ensure that measures are written accurately and appropriately by inclusion of EMS stakeholders and experts.								
Activity 2: Develop annual summary report - will develop one summary report of all LEMSA Core Measure data submitted and a map of one Core Measure of reported values, to provide data to the public and EMS stakeholders.								
<p>Activity 3: Develop a multi-year Summary Report - will develop one summary report of all LEMSA Core Measure data submitted over a multi-year period. This report is the only available mechanism by which to obtain statewide data on 17 clinical measures because the CEMSIS data system is limited by a wide variety of data systems, ranging from differing electronic systems to pen-and-paper systems.</p> <p>The Core Measures report allows the LEMSAs to focus on meaningful clinical measures that they can measure in whatever way their system supports, then provides the resulting data along with the specifics of how the data were run to provide a useful statewide data profile for the specific measures.</p>								
Impact Object 4: Lead and coordinate EMS plans.								
Will provide TA to 100% of LEMSAs that submit their EMS plans, to ensure that compliance requirements are met.								

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Activity 1: Coordinate QI Plan submissions - will contact each of the 33 LEMSA administrators, either by electronic or telephone communication, to request their QI plan submittal at least three months prior to their Plan due date, to support timely Plan submission and evaluation.								
Activity 2: Review LEMSA QI Plans - will review at least five submitted QI Plans from the LEMSAs, to assist them in meeting the compliance requirements of California EMS regulations, standards, and guidelines.								
Activity 3: Develop an activity log - will maintain and continue to develop one administrative QI Plan activity log, to standardize and streamline the administrative review processes within EMSA.								
EMS STEMI and Stroke Systems								
HP 2020 Objective: HO AHS-8 Rapid Prehospital Emergency Care (EMS)								
Impact Objective 1: Develop stroke and STEMI program regulations.								
Will develop two sets of draft regulations for the Stroke and STEMI Programs to provide the LEMSAs and other local facilities with minimum requirements to establish and maintain STEMI and Stroke Programs throughout California.				\$269,178.00		5.00	1.17	
Activity 1: Coordinate STEMI/Stroke Programs Regulations Work Group Meetings - will (1) schedule at least two meetings and two conference calls with the Stroke and STEMI Work Group, and (2) discuss one set of draft regulations with the Work Group, and come to an agreement on the regulatory language.								

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Activity 2: Draft STEMI/Stroke Regulations - will (1) provide one final draft of the STEMI/Stroke Regulations to the Stroke and STEMI Work Group for their review and feedback, and (2) make the necessary revisions to the draft regulations based on Work Group comments.								
Activity 3: Approve STEMI/Stroke Regulations - staff will present one final draft regulations for review and feedback from three recipients: (1) the Stroke and STEMI Regulations Work Group, (2) EMSAAC, and (3) the Commission on EMS for approval.								
Activity 4: Develop Rulemaking File for the Stroke and STEMI Programs - will: (1) Complete one Notice of Publication form (Std 400) to OAL; (2) Develop one Notice of Proposed Rulemaking; and (3) Submit one Std 400, one Notice of Proposed Rulemaking, ISORS, and one draft regulations to OAL to complete the rulemaking process.								
Impact Objective 2: Develop Stroke Program TAC.								
Will establish one TAC to serve as subject-matter experts to advise EMSA on identifying and meeting the program goal of supporting optimum patient outcomes during medical emergencies.								
Activity 1: Develop a Stroke Program TAC - will: (1) develop one list of Stroke Program constituents; (2) develop one letter requesting volunteers to serve on the Stroke TAC; (3) mail the letter to all Stroke Program constituents, and request one letter of interest and CV if they would like to serve on the TAC; (4) review letters of interest and CVs; and (5) choose Stroke TAC members based on subject-matter knowledge and experience.								

* Comprehensive assessment based on submission of: (1) Annual Reports; (2) Semi-Annual Reports; (3) Monthly Expenditure Reports; (4) Preliminary SFY 15/16 budgets
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**Preventive Health and Health Services Block Grant FFY 2016 - Program Outcomes Report
Document #10**

Impact Objective	Detailed Objective Outcome 2-1-17	Objective Outcome 2-1-17	Objective Outcome 6-30-17	Preliminary Allocation	Spend Rate	# of PYs	# of FTEs	* Compliance
Activity 2: Plan and facilitate Stroke TAC meetings - will: (1) develop a schedule of at least two meetings at the EMSA HQ; (2) facilitate discussions of the TACs mission, purpose, parameters, and meeting rules; and (3) facilitate vision and work plan/issues for the TAC to focus on.								
Impact Objective 3: Develop TAC for the STEMI Program.								
Will establish one TAC to serve as advisory subject-matter experts to EMSA to help identify and meet program goals of supporting optimum patient outcomes during medical emergencies.								
Activity 1: Develop a STEMI TAC - will: (1) develop one list of STEMI program constituents; (2) develop one letter requesting volunteers to serve on the STEMI TAC; (3) mail the letter to all STEMI constituents, and request one letter of interest and CV if they would like to serve on the TAC; (4) review letters of interest and CVs; (5) choose STEMI TAC members based on subject-matter knowledge and experience.								
Activity 2: Plan and facilitate STEMI TAC meetings - will: (1) schedule at least two meetings at the EMSA HQ; (2) facilitate discussions of the TACs mission, purpose, parameters, and meeting rules; (3) facilitate vision and work plan/issues for TAC to focus on.								

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EMS Systems Planning and Development								
HP 2020 Objective: HO AHS-8 Rapid Prehospital Emergency Care (EMS)								
Impact Objective 1: Provide oversight and assistance to LEMSAs with transportation plans.								
Will provide oversight and technical assistance to 100% of EMS providers regarding transportation services assistance associated with the LEMSA's EMS Plan.								
Activity 1: Review LEMSA transportation service request for proposal - will review and develop at least one LEMSA request for proposal for emergency ambulance services regarding prospective exclusive operating areas. Collaboration promotes successful, competitive bidding for local emergency ambulance services that ensure ideal patient care during an emergency.				\$651,198.00		10.00	4.91	
Activity 2: Inspect California Highway Patrol rescue helicopters - will coordinate the inspection of 11 advanced life support auxiliary rescue helicopters to ensure compliance with state and local standards. California Highway Patrol helicopters are maintained and located within seven California locations. Aircraft inspections support successful EMS transportation services within California.								
Impact Objective 2: Provide oversight and technical assistance to LEMSAs.								
Will provide oversight and technical assistance to 100% of the LEMSAs required to submit EMS Plans or Annual Plan updates, assisting with adherence to California EMS statutes and EMSA guidelines for optimum EMS patient care.								

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Activity 1: Coordinate EMS Plan submissions - will coordinate submission of EMS Plans for a minimum of six LEMSAs. Coordination will be directed to LEMSA administrators, supporting timely plan submissions.								
Activity 2: Record EMS Plan submissions and collaborate with EMSA staff - will update one internal tracking log to show receipt of EMS Plans or Updates and all collaboration with other EMSA staff, to ensure effective oversight of the Plan-review process for timely, comprehensive Plan development and plan approvals.								
Activity 3: Update EMSA website - will post fully reviewed EMS Plans and Plan Updates to one EMSA EMS Systems Planning website. Posting promotes effective injury-prevention EMS strategies, ensures public trust, and provides high-quality patient care across California.								
Activity 4: Review quarterly activity reports - will contact the six contracted LEMSAs one month prior to each quarterly report due date to promote comprehensive and timely reporting. Activity reports are reviewed to verify that the work performed is consistent with the contractual scope of work.								

EMS Trauma Care Systems

HP 2020 Objective: HO AHS-8 Rapid Prehospital Emergency Care (EMS)

Impact Objective 1: Draft final State Performance Improvement and Patient Safety Plan.

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Will develop one final version of the State Performance Improvement and Patient Safety (PIPS) Plan, with revisions based on comments from the Executive Division of EMSA and the public. The PIPS Plan will be used by EMSA and the PIPS Subgroup to ensure the delivery of quality trauma care to Californians.				\$258,536.00		5.00	1.21	
Activity 1: Review EMSA comments - will review 100% of comments received from the EMSA Executive Division on the draft PIPS Plan and revise.								
Activity 2: Release draft PIPS Plan for public comment - will provide an electronic copy of the draft PIPS Plan to 33 LEMSAs for review, and post updates on the EMSA website.								
Activity 3: Review public comments, and revise PIPS Plan - will review 100% of comments received on one draft PIPS Plan and revise based on comments received.								
Activity 4: Submit PIPS Plan for approval - will send one electronic version of the final draft of the PIPS Plan to the Commission on EMS and one issue memo requesting approval, and attend one Commission on EMS meeting to address any questions and obtain final approval.								
Impact Objective 2: Draft revised trauma regulations.								
Will develop one draft revision of the trauma regulations that incorporate suggestions for trauma system requirements in California.								
Activity 1: Establish committee to revise trauma regulations - will contact at least 33 LEMSAs and 78 trauma centers to select Trauma Regulations Revision Committee members to draft trauma system requirements.								
Activity 2: Schedule meetings and conference calls - will (1) determine availability of Trauma Regulations Revision Committee members to attend at least two meetings and two conference calls, and (2) create a one-year calendar.								

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Activity 3: Draft revised trauma regulations - will review each suggested revision from the Trauma Regulations Revision Committee and will provide at least two revised drafts to committee members.								
Activity 4: Review trauma regulation drafts - will review at least two revised trauma regulations with EMS Systems Division administration and Executive Division and will make recommended revisions.								
Impact Objective 3: Host annual State Trauma Summit.								
Will conduct one State Trauma Summit to educate on clinical and system aspects of trauma care, to improve trauma care in California.								
Activity 1: Develop pre-Trauma Summit documents - will create one "save the date" postcard for the State Trauma System Summit, including agenda for 9 hours of sessions; will distribute to 33 LEMSAs; and will post on EMSA website.								
Activity 2: Create an online portal for State Trauma Summit registration - will create one Eventbrite registration portal, to include ability to register and pay for sponsorship online.								
Activity 3: Organize Trauma Summit - will contact at least four sponsors/vendors for the summit, and complete a minimum of 150 information packets for registrants, to include an agenda, list of speakers with bios, objectives, evaluation forms, and post-test.								
Activity 4: Host annual Trauma Summit - will host one State Trauma Summit in May or June 2017, to provide education covering clinical and system aspects of trauma care, to improve trauma care in California.								
Activity 5: Provide continuing education credits - will distribute a minimum of 50 continuing education certificates to eligible State Trauma Summit participants.								

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Impact Objective 4: Implement the State Trauma Plan.								
Will develop one timeline for short-term goals and objectives for improving trauma care in California (to be completed in one year) listed under the responsibility of the EMS Authority.								
Activity 1: Determine short-term trauma system objectives - will determine a minimum of ten short-term objectives for improving trauma care in California by utilizing the eight Health Resources and Services Administration benchmarks and the State Trauma Plan.								
Activity 2: Review selection of trauma care goals and objectives - will host one meeting with the State Trauma Advisory Committee to review short-term objectives for improving trauma care in California.								
Activity 3: Revise short-term trauma care objectives - will revise the ten short-term objectives for improving trauma care in California, based on discussion with State Trauma Advisory Committee members.								
Activity 4: Create timeline for short-term trauma care objectives - will create one electronic timeline designed to allow for updating activities for improving trauma care in California and that can be shared with trauma-system partners.								
Impact Objective 5: Prepare Regional Network/Re-Triage Guidance document.								
Will develop one final draft of the Regional Network/Re-Triage Guidance document, including revisions, from public comment period(s). The document will assist LEMSAs, trauma centers, and non-trauma facilities in improving time to definitive care for critically injured patients.								

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Activity 1: Review EMS System Division administration comments - will review all Division comments received, and revise for review by the PIPS Subgroup, incorporating language for statewide QI activities in support of improving the care of critically injured patients.								
Activity 2: Host a conference call to review comments - will review all comments from EMS System Division administration with the PIPS Subgroup and will revise the guidance document to incorporate suggestions to measure improvement in the care of critically injured trauma patients.								
Activity 3: Schedule comment period(s) - will schedule at least one comment period, and will provide access to the electronic version of the Regional Network/Re-Triage Guidance through the EMSA website, to disseminate recommendations to LEMSAs, trauma centers, and other facilities that care for injured patients, to improve the timeliness of trauma care.								
Activity 4: Review comments - will review all comments received, and revise one Regional Network/Re-Triage Guidance document to incorporate recommendations for improved state trauma.								
Activity 5: Review final draft of the guidance document - will review one final version of the Regional Network/Re-Triage Guidance document in preparation for submission to the Commission on EMS for final approval of recommendations, to improve timeliness of trauma care in California.								

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