

Preventive Health and Health Services Block Grant FFY 2015 – Final Program Outcomes Report

Impact Objective	Detailed Objective Outcome 2-1-16 / 6-30-16	Objective Outcome 2-1-16	Objective Outcome 6-30-16	Budget	Spend Rate %	# of PYs	# of FTEs
Accountable Communities for Health							
HP 2020 Objective: ECBP-10 Community-Based Primary Prevention Services							
Impact Objective 1: Pilot Communities for Health.							
Will develop at least 5 resources (e.g. toolkit of best practices, description of public health role, performance measures, evaluation framework of statewide effort w/partners), to support establishment of Accountable Communities for Health (ACHs) in California to reduce cost, improve population health, & improve the quality of health care.	<p>2-1-16: No resources were developed to support establishment of ACH, due to delays in hiring staff & executing contracts. However, an external environmental scan was conducted to identify an academic institution to develop a data & information sharing toolkit & report.</p> <p>6-30-16: Three resources were developed directly: A comparative analysis paper of the ACH Initiative, the federal Accountable Health Communities and the 3 Medi-Cal 1115 Waiver Projects: Whole Person Care, Dental Services and PRIME (community-based health systems transformation effort) as well as a crosswalk summarizing the comparative analysis paper and a PowerPoint that was shared with CCLHO. Other resources were developed indirectly through contract oversight and provision of technical assistance. An evaluation framework, a logic model, an outcome framework that included proposed performance measures was developed.</p>	Not Met	Met	\$320,000 (\$224,000) FFY 2015 allocation (\$96,000) FFY 2014 & FFY 2015 savings	69%	2	2.0
California Active Communities							
HP 2020 Objective: IVP-23 Deaths from Falls							
Impact Objective 1: Conduct fall-prevention classes for older adults.							
Will conduct a minimum of 20 community-based classes to prevent falls by promoting strength & balance among older adults at risk for falls.	<p>2-1-16: 17 community-based classes to prevent falls were conducted at 8 Local Health Departments & 24 instructors were trained by University of California, San Diego (UCSD). These included “Stepping On” (SO) & “Tai Chi: Moving for Better Balance” (TCMBB). Lack of staff impacted outcome.</p>	Partially Met	Partially Met	\$687,788 (\$590,841) FFY 2015 allocation (\$96,947) FFY 2014 & FFY 2015 savings)	100%	5	2.35

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Impact Objective 2: Disseminate fall-prevention information.							
Will distribute 1 “Return on Investment (ROI) Report for Older Adult Fall Prevention” to at least 100 policymakers & stakeholders.	2-1-16: No ROI Report for Older Adult Fall Prevention was developed or distributed to Policymakers or Stakeholders as other sources of funding for this project were eliminated.	Not Met	Not Met				
Impact Objective 3: Implementing the Stepping On Program.							
Will provide funding, training, & TA to 15 Local Health Department (LHD) staff or their designees as new SO Leaders/Master Trainers.	2-1-16: A 3-day training was provided to 14 LHD staff to conduct TCMBB & SO fall prevention programs. 1 County declined to participate in the SO training, affecting the outcome.	Partially Met	Partially Met				
Impact Objective 4: Increase ability to implement the Tai Chi: Moving for Better Balance Program.							
Will provide funding, training, & TA to 15 LHD staff or their designees as new TCMBB Program Instructors/Master Trainers.	2-1-16: A 2-day leader training was provided to 10 LHD staff on TCMBB. Only 5 counties elected to participate.	Partially Met	Partially Met				
Impact Objective 5: Promote Universal Design and older-adult mobility in community planning.							
Will provide funding, training, & TA to 8 LHDs, to increase their knowledge of universal-design elements & mobility issues, & increase their ability to work with community planners.	2-1-16: (1) No funding, training or TA was provided to LHDs due to inadequate staffing; (2) A universal-design curriculum was completed, & the LHDs will attend universal-design training in spring 2016 through a contract with UCSD. 6-30-16: LHDs attended the spring 2016 universal-design training. One LHD declined funding; thus, only 7 LHDs received training, which is why the objective is partially met.	Not Met	Partially Met				

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California Health Alert Network							
HP 2020 Objective: PREP-1 Public Health Emergency Alert							
Impact/Process Objective 1: Develop processes to provide consistent message and alerting platform.							
Will develop 4 resources; 1 local user guideline, 1 state-level user guideline, 1 training course for HAN administrators, & 1 training course for end users, to provide consistent message & alerting platforms for use by local jurisdictions, health care partners, & state emergency response partners.	2-1-16: (1) CAHAN developed 1 local user guideline, 1 state-level user guideline, 1 training course for HAN administrators, & 1 training course for end users; (2) Policies & procedures for the alerting & notification system were updated to reflect new system features, & 6 webinar training sessions were conducted. The list of CAHAN participants was updated.	Exceeded	Exceeded	\$500,000 (\$356,747) FFY 2015 allocation (\$143,253) FFY 2014 & FFY 2015 savings	100%	2	2.0
Impact Objective 2: Improve program alerting and notification capacity.							
Will establish a minimum of 24 program capabilities for targeted, actionable alerting & notification by identifying 1 individual for each required local & hospital notification position, & establishing a minimum of 4 scenario-specific alerting matrices.	2-1-16: Established 34 scenario-specific alerting matrices & 24 program capabilities for targeted, actionable alerting & notification.	Exceeded	Exceeded				

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Impact Objective 3: Increase Participation of California Tribes.							
Will increase the percent of California tribal participation in the CAHAN program by increasing tribal participation beyond the singular tribal consortium from 6% to 15%.	<p>2-1-16: Tribal participation was not increased due to other program priorities.</p> <p>6-30-16: Based on CDPH executive management's direction, tribal enrollment on CAHAN rests on local jurisdiction. However, tribal CAHAN enrollment has increased by over 150 contacts.</p>	Not Met	Partially Met				
Impact Objective 4: Replace alerting and notification system.							
Will implement 1 new online alerting & notification system to replace the existing CAHAN system, which will be obsolete after December 2015.	2-1-16: New online alerting & notification system was implemented September 2015.	Met	Met				
Impact/Process Objective 5: Update online document library.							
Will implement 1 online collaborative workspace for public health response partners in 61 local health jurisdictions, to replace the document library found in the former CAHAN system.	<p>2-1-16: No online collaborative workspace for public health response partners was implemented, although the SharePoint site was developed. The new online alerting notification system has been built, however more collaboration needed before SharePoint site implemented.</p> <p>6-30-16: The project is on hold pending the department's SharePoint refresh.</p>	Not Met	Not Met				

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California Wellness Plan Implementation							
HP 2020 Objective: PHI-15 Health Improvement Plans							
Impact/Process Objective 1: Analyze the prevalence and impact of adverse childhood experiences.							
Will analyze 1 Adverse Childhood Experiences module of the upcoming 2015 California Behavioral Risk Factor Surveillance Survey to document the impact of ACE on population health outcomes.	<p>2-1-16: The 2015 Adverse Childhood Experiences module was not analyzed as the data will not be available until April 2016; the report will be prepared in June 2016.</p> <p>6-30-16: 2015 BRFSS data not yet available; However new fact sheet published: "ACEs California Update": http://www.cdph.ca.gov/programs/Pages/ChildMaltreatmentPrevention.aspx.</p>	Not Met	Partially Met	\$527,000 (\$379,200) FFY 2015 allocation (\$147,800) FFY 2014 & FFY 2015 savings	94%	2	2.0
Impact/Process Objective 2: Maintain Chronic Disease Prevention Coalition.							
Will conduct 4 meetings & attend 6 Partner meetings to promote CWP/P21 implementation in collaboration with Partners committed to utilizing evidence-based chronic disease prevention practices.	<p>2-1-16: Conducted 20 meetings & attended 6 Partner meetings. The CA Conference of Local Health Officers (CCLHO) & the County Health Executives Association of CA (CHEAC) Leadership Project conducted a survey & published an online report, "Health in Planning within California's Local Health Departments 2015."</p>	Met	Met				
Impact/Process Objective 3: Monitor California Wellness Plan implementation.							
Will develop 1 process for CWP reporting on priority objectives & P21 activities, including a strategy for implementation.	<p>2-1-16: Developed & implemented a process for reporting on CWP objectives, including developing a progress report template & overseeing a Cal-EIS Fellow who gathered & analyzed the data.</p>	Met	Met				

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Impact Objective 4: Report on the economic burden of chronic disease.				\$128,000	0%		
Will develop 1 needs assessment report to guide future analyses, & provide county-level cost estimates of chronic disease to 3 partners, since chronic disease treatment costs are different in every local jurisdiction, requiring targeted interventions to reduce cost, improve population health, & improve the quality of health care.	2-1-16: (1) No needs assessment report developed, as funding for this objective transferred to the Director’s Office. (2) 2 1-day trainings for senior management on economic evaluation & using economic decision-making tools & methods. (3) A health economics workshop was held in April 2016, in collaboration with health-jurisdiction partners.	Not Met	Not Met	(\$109,300) FFY 2015 allocation (\$18,700) FFY 2014 & FFY 2015 savings			
Cardiovascular Disease Prevention Program							
HP 2020 Objective: HDS-2 Coronary Heart Disease Deaths							
Impact Objective 1: Implement quality improvement through comprehensive medication management.				\$524,819	86%	3	3.0
Will develop 1 quality improvement process through utilization of pharmacists implanting Comprehensive Medication Management (CMM). This will result in increased implementation of best practices in health systems related to CVD.	2-1-16: A QI process engaged pharmacists to promote CMM. CDPH & USC School of Pharmacy hosted a conference to discuss the implementation of & payment for CMM.	Met	Met	(\$524,819) FFY 2015 allocation			

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Impact Objective 2: Maintain active partnerships to support CDPP activities.							
Will maintain 10 partnerships with key stakeholders to support CDPP CVD prevention activities	2-1-16: 20 partnerships with key stakeholders led to planning & implementation of the Sodium Reduction Conference in September 2015.	Exceeded	Exceeded				
Impact/Process Objective 3: Maintain the statewide Sodium Awareness Leadership Team (SALT) taskforce.							
Will maintain 1 SALT taskforce to provide guidance on state-level efforts to increase awareness about the health benefits of lowering sodium consumption.	2-1-16: The SALT taskforce held 16 meetings, participated in 7 national meetings, & distributed sodium-related information.	Met	Met				
Impact Objective 4: Perform cardiovascular disease surveillance activities.							
Will provide TA for data requests to 10 state & local agencies, public, partners; publish 1 comprehensive burden report to inform & control efforts; & monitor progress on 10 CVD indicators defined in HP 2020, California Wellness Plan, & CDC's Chronic Disease Surveillance indicators.	2-1-16: 2 data requests completed; 1 cardiovascular disease burden report developed & data on cardiovascular disease indicators analyzed.	Met	Met				

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Commodity-Specific Surveillance: Food & Drug Program							
HP 2020 Objective: FS-2 Outbreak-Associated Infections Associated with Food Commodity Groups							
Impact Objective 1: Increase analysis of food commodities for microbial contamination.							
Will collect 420 samples of high-risk food commodities that are known to be susceptible to contamination. Will investigate the distribution of adulterated foods & take steps to ensure they are removed from commerce, to decrease exposure to contaminated foods.	<p>2-1-16: Collected 350 samples of high-risk food commodities. Insufficient staff to reach desired outcome.</p> <p>6-30-16: By June 30, 2016, FDB collected over 600 samples of food products for microbiological testing.</p>	Partially Met	Exceeded	<p>\$200,000</p> <p>(\$150,000) FFY 2015 allocation (\$50,000) FFY 2014 & FFY 2015 savings</p>	58%	5	2.0
Community Water Fluoridation Implementation Project							
HP 2020 Objective: OH-13 Community Water Fluoridation							
Impact Objective 1: Provide leadership, technical assistance, and training.							
Will provide ongoing leadership & guidance to a minimum of 6 public, private, & voluntary organizations, & 4 local communities to maximize the percentage of the population receiving CWF.	<p>2-1-16: (1) Through Fluoridation Advisory Committee, provided guidance about fluoridation to 19 public, private, & voluntary organizations & 4 local communities; (2) inter-agency agreement drafted to allow exchange of data about non-compliant water systems & provide TA & education.</p>	Exceeded	Exceeded	<p>\$280,082</p> <p>(\$260,560) FFY 2015 allocation (\$19,523) FFY 2014 & FFY 2015 savings</p>	79%	1.5	1.5

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Impact/Process Objective 2: Provide technical assistance and training on community water fluoridation.							
Will provide consultation & TA to 4 local communities to increase or maintain the percent of the population receiving community water fluoridation.	2-1-16: (1) Provided consultation & TA to 8 local communities; (2) A webinar was prepared & 2 water engineers attended a basic water fluoridation course.	Exceeded	Exceeded				
Let's Get Healthy California Dashboard and Website							
HP 2020 Objective: PHI-14 Public Health System Assessment							
Impact Objective 1: Develop a communications plan.							
Will develop 1 marketing & communications plan to draw targeted audiences to the website.	2-1-16: (1) Did not develop a marketing & communications plan by September 2015, but website was launched in Jan. 2016; (2) 3 communication outlets announced the launch of the LGHC website. 6-30-16: Developed 2016 Communications Plan in collaboration with CDPH Office of Public Affairs and CHHSA Public Information Office. The Communication Plan outlines monthly communication activities, as well as several major campaigns and events to help build up public awareness of LGHC through website and social media.	Partially Met	Met	\$400,000 (\$280,000) FFY 2015 allocation(\$120,000) FFY 2014 & FFY 2015 savings	90%	3	2.0
Impact Objective 2: Develop a data collection process.							
Will develop at least 4 processes & procedures for collecting, updating, & analyzing indicator data that can be used for the LGHC website & dashboard.	2-1-16: (1) 4 processes & procedures were developed with input from Department data experts, & a vendor was hired to complete data visualization platforms; (2) 4 indicator data structures, including data elements & statistical methodologies, were defined for pilot indicators to use in development of website platform & visualization.	Met	Met				

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Impact Objective 3: Develop Content in preparation for website launch.							
Will identify at least 6 local innovations representing the 6 LGHC Goal Areas that will be featured at the LGHC Conference as part of development of website content.	2-1-16: 23 local innovations were featured at the LGHC Conference; 4 ideation sessions to develop content for the LGHC website were conducted.	Met	Met				
Impact Objective 4: Develop the website and dashboard.							
Will develop 1 website, which will include solicited user feedback & beta-testing results from at least 3 meetings with end users, to ensure that the website is being built “with” the user, not just “for” the user.	2-1-16: A website was launched in Jan. 2016 with the assistance of the State Oversight Team. The Coordination Team met 4 times with the State Oversight Team to identify end-users for beta testing during website development.	Met	Met				
Impact Objective 5: Identify Vendor.							
Will increase the number of websites, via selection of 1 vendor who will build the LGHC website, from 0 to 1.	2-1-16: Was launched in Jan. 2016.	Met	Met				

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Microbial Diseases Laboratory Branch/Select Agent and Biosafety							
HP 2020 Objective: PHI-11 Public Health Agencies Laboratory Services							
Impact Objective 1: Finalize biosafety and biosecurity policies.							
Will implement 1 select-agent tier-1 program. Policies will be finalized & streamlined for compliance with tier-1 requirements. Staff security clearances via DOJ, monitoring, intrusion prevention, inspections, & drills will ensure a secure, safe work environment.	2-1-16: (1) Implementation of the select-agent tier-1 program made possible through adoption & updating of policies for compliance, working closely with the FBI/DOJ & CDC; (2) This included a review of laboratory procedures & inventory to ensure adherence to compliance requirements.	Met	Met	\$200,000 (\$150,000) FFY 2015 allocation (\$50,000) FFY 2014 & FFY 2015 savings	100%	1	1.0
Impact Objective 2: Implement biosafety and biosecurity Outreach.							
Will conduct 8 outreach activities with internal & external partners to establish & refine emergency communication channels.	2-1-16: While only 1 outreach activity was conducted, planning continues for the development of an action plan & 2 statewide medical exercises through coordinated efforts with the Communicable Diseases Emergency Response Program & Emergency Preparedness Office. 6-30-16: Five outreach activities conducted between 9/2015 and 2/2016, including on- and off-site meet-&-greet with FBI specialists, and between 2/2016 and 6/2016, coordination with Communicable Diseases Emergency Response Program and Emergency Preparedness Office.	Not Met	Partially Met				

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Impact Objective 3: Improve biosafety and biosecurity practices.							
Will develop at least 2 procedures binders, to prescribe handling, processing, storage, & shipment of select agents.	2-1-16: 7 procedures binders were developed. The binders include material on biological safety, & incident response & were tested in a mock security-incident exercise including Tier-1staff, CDPH security, Richmond Police, Fire Department, & emergency services.	Exceeded	Exceeded				
Microbial Diseases Laboratory Branch/Valley Fever							
HP 2020 Objective: PHI-11 Public Health Agencies Laboratory Services							
Impact Objective 1: Establish Mycotic diagnostics.							
Will establish at least 1 reference service for isolation of pathogenic fungi from clinical specimens & ID of <i>Coccidioides</i> species isolates submitted to state & local public health laboratories. 500 clinical specimens will be tested through 2015.	2-1-16: Reference service not established; however, a real-time polymerase chain reaction assay for identification of <i>Coccidioides immitis</i> & <i>C. posadasii</i> validated & awaiting approval for laboratory-developed tests. Comprehensive diagnostic services available by June 2016. 6-30-16: MDL provided reference service for fungal identification to all CA local public health laboratories since May 2016. The diagnostic test is ITS-PCR sequencing for pan-fungal identification. The assay greatly enhances laboratory capacity for the identification of human fungal pathogens.	Not Met	Met	\$426,000 (\$319,500) FFY 2015 allocation (\$106,500) FFY 2014 & FFY 2015 savings	100%	3	3.0
Impact Objective 2: Increase fungal molecular testing.							
Will implement at least 2 validated real-time PCR assays for differentiation of <i>Coccidioides immitis</i> from <i>C. posadasii</i> . During 2014–2015, will test 100 isolates of <i>Coccidioides</i> species by rapid molecular test.	2-1-16: Although 2 assays not implemented, all requirements for validation of a real-time PCR assay completed & awaiting approval to begin diagnostic services. Validation of pan-fungal PCR-nucleotide ID nearing completion. 6-30-16: MDL provided real-time PCR assay service to all CA local public health labs since 5/2016. Assay is for ID and differentiation of <i>Coccidioides immitis</i> and <i>C. posadasii</i> , the two etiologic agents of valley fever. It replaced the GenProbe assay for routine testing for <i>Coccidioides</i> species ID.	Not Met	Met				

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Impact Objective 3: Increase genotyping services.							
Will develop at least 1 validated multi-locus sequence typing (MLST) & whole genome sequence (WGS) typing of <i>Coccidioides</i> species. A subset of isolates of <i>Coccidioides</i> species from suspected outbreaks will be genotyped through 2015. The genotyping results will enhance surveillance activities aimed at disease control & prevention.	<p>2-1-16: Since a Research Scientist (RS) II was not hired until October 2015, development & validation of MLST & WGS typing of <i>Coccidioides</i> species could not be initiated. However, a procedure is being developed to test soil samples collected from the Central Valley for presence of <i>Coccidioides</i>. Over 30 soil samples were tested, & 5 <i>C. immitis</i> strains were isolated.</p> <p>6-30-16: RS III hired in 10/2015 to validate sequence typing of <i>Coccidioides</i> species. WGS sequencing of 5 environmental isolates of <i>C. immitis</i> was completed, an important step for developing genotyping tools for valley fever outbreak investigations.</p>	Not Met	Partially Met				
Nutrition Education and Obesity Prevention Branch							
HP 2020 Objective: NWS-10 Obesity in Children and Adolescents							
Impact Objective 1: Advance education and prevention policy.							
Will provide educational opportunities, resources, & TA on evidence-based & evidence-informed strategies to at least 35 partners to support the advancement of nutrition-education & obesity-prevention policy.	<p>2-1-16: (1) Served as the lead convener for the 2015 State Implementing Agency Forum, providing educational opportunities, resources, & TA to 36 partners; (2) Evidence-based, evidence-informed resources & best practices that enhance capacity to advance PSE changes for childhood obesity prevention were shared.</p>	Exceeded	Exceeded	\$468,039 (\$468,039) FFY 2015 allocation	100%	7	2.63

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Impact/Process Objective 2: Coordinate obesity-prevention activities with partners.							
Will develop at least 25 partnerships to coordinate state- & local-level obesity-prevention efforts, to reduce the prevalence of obesity in California	2-1-16: 25 partnerships to coordinate state-& local-level obesity-prevention developed, using a strategic-planning process that engaged stakeholders. This approach required participation in workgroups, committees, & meetings & partnering with non-traditional organizations.	Met	Met				
Impact Objective 3: Support obesity-prevention interventions.							
Will provide 10-12 obesity-prevention trainings & ongoing TA to at least 20 local jurisdictions statewide, to support obesity-prevention interventions & promote changes that foster healthy & active communities.	2-1-16: With the assistance of the TDS Section, 59 local jurisdictions received trainings & ongoing TA. TDS leveraged funds & staff resources from SNAP-Ed & Prevention First to conduct 6 PSE change webinars.	Exceeded	Exceeded				
Office of AIDS							
HP 2020 Objective: HIV-1 HIV Diagnoses							
Impact Objective 1: Increase number of people in HIV care.				\$500,000	100%	0	0
Will decrease the percent of people classified as out-of-care for Alameda, Orange, & San Diego Counties to decrease HIV transmission in these counties from baseline to a 3% reduction.	2-1-16: While there is no decrease in HIV transmission, San Diego County is providing linkage to care & Partner Services to people newly diagnosed. Alameda is combining available databases to identify people who have not received an HIV viral-load test in the last 6-12 months. Database will be operational June 2016. 6-30-16: Data will not be available to measure this outcome until 2017. Field reports indicate that objective will be met.	Not Met	Partially Met	(\$375,000) FFY 2015 allocation (\$125,000) FFY 2014 & FFY 2015 savings			

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Impact Objective 2: Increase number of people identified as HIV positive by partner services.							
Will increase the number of people in Alameda, Orange, & San Diego Counties newly identified with HIV through partner services from 7 to 14 (100%).	<p>2-1-16: Unable to increase the number of people identified as HIV positive, since the data was not available in 2015. Fortunately, access to Partner Services Data will become available in 2016; this will allow for the identification of out-of-care individuals.</p> <p>6-30-16: Data will not be available to measure this outcome until 2017. Field reports indicate that objective will be met.</p>	Not Met	Partially Met				
Office of Health Equity							
HP 2020 Objective: ECBP-11 Culturally Appropriate Community Health Programs							
Impact Objective 1: Create healthy, safe built environments.							
Will develop at least 3 opportunities to promote safe, accessible active transportation & healthy, sustainable, equitable land-use planning & development.	2-1-16: 5 opportunities with 15 State departments occurred through the Active Transportation Action Plan activities.	Exceeded	Exceeded	\$592,748	100%	2	2.0
				(\$491,688) FFY 2015 allocation (\$101,050) FFY 2014 & FFY 2015 savings			
Impact Objective 2: Foster relationships with stakeholders focused on improving health status.							
Will maintain at least 15 relationships with key HiAP Task Force stakeholders through activities that improve the health status of Californians (e.g., distribution of Active Transportation Program grant funds).	2-1-16: 2 formal meetings & one-on-one meeting with stakeholders occurred. Collaboration with CCLHO, CHEAC, BARHII, & the Public Health Alliance of Southern California ensures that the needs of individual members are taken into account in the planning process.	Met	Met				
Impact Objective 3: Strengthen connections between public health and mental health fields.							
Will identify 3 opportunities to	2-1-16: Participation in the National Health Impact Assessment (HIA)	Met	Met				

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advance social determinants of public & mental health through staff meetings & strategic communications, to strengthen understanding of connections between the fields of public & mental health.	conference provided an opportunity to solicit input in integrating public health, mental health, & health equity into the public debate.						
Office of Quality Performance and Accreditation							
HP 2020 Objective: PHI-17 Accredited Public Health Agencies							
Impact Objective 1: Assess needs.				\$250,000	100%	2	2.0
Will develop 2 local & tribal public health agency assessments of accreditation & QI activities readiness to determine available and needed resources.	2-1-16: (1) Data from 2015 CHEAC & CRIHB surveys clarified local & tribal PH accreditation needs & will be used to provide TA in the accreditation process; (2) 2 needs assessments evaluated & 18 assessment questions updated, information to be used for training & TA.	Exceeded	Exceeded	(\$187,500) FFY 2015 allocation (\$62,500) FFY 2014 & FFY 2015 savings			
Impact Objective 2: Increase tribal public health agency capacity.							
Will develop training tailored to local & tribal public health agency accreditation & QI readiness, as identified by survey of LHDs & tribal health partners.	2-1-16: 2 trainings tailored to tribal public health accreditation were conducted, & community health improvement training was provided. A subsequent training identified community priorities. Training material was developed.	Exceeded	Exceeded				
Impact Objective 3: Maintain local resource capacity.							
Will maintain 2 state personnel positions, to provide accreditation-	2-1-16: TA provided; local resource capacity maintained by analyzing statewide accreditation readiness needs, using findings from the 2015 Public Health Accreditation Readiness Conference, distributing PHAB accreditation	Met	Met				

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readiness TA activities to local & tribal public health agencies.	manuals, providing monthly consultations, developing a strategic action plan. TA was provided to 55 local & tribal public health agencies.						
Impact Objective 4: Provide financial assistance.							
Will provide financial assistance to increase accreditation readiness to at least 1 local &/or tribal public health agency, to improve the capacity to apply for national public health accreditation.	2-1-16: Did not provide financial assistance to increase accreditation readiness, as there was no funding available for mini-grants.	Not Met	Not Met				
Impact Objective 5: Support Interventions.							
Will provide accreditation readiness TA to at least 3 local & tribal public health agencies, to address identified accreditation needs & increase agency capacity to apply for & achieve national public health accreditation.	2-1-16: (1) TA was provided to 55 local & public health agencies through the development & implementation of support interventions, including trainings, webinars, consultations, & conferences; (2) the 2015 Public Health Accreditation Readiness Conference served as a forum for collaboration & exchange of ideas; (3) Tools that support accreditation-readiness activities were identified.	Exceeded	Exceeded				
Prescription Drug Overdose Surveillance Project							
HP 2020 Objective: IVP-9 Poisoning Deaths							
Impact Objective 1: Increase capacity for using surveillance data.							
Will provide (1) data on prescription drug misuse, abuse, & overdose on	2-1-16: (1) Data & TA provided to 169 state or local stakeholders; (2) Successfully uploaded data in EpiCenter, by creating an “All Opioid Pharmaceutical” category.	Exceeded	Exceeded	\$200,000 (\$140,000) FFY 2015 allocation	42%	2	1.15

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Impact Objective	Detailed Objective Outcome 2-1-16 / 6-30-16	Objective Outcome 2-1-16	Objective Outcome 6-30-16	Budget	Spend Rate %	# of PYs	# of FTEs
EpiCenter: California Injury Data Online query system & (2) TA to at least 10 state or local stakeholders to increase their ability to use data from the EpiCenter website for surveillance activities.				(\$60,000) FFY 2014 & FFY 2015 savings			
Impact Objective 2: Support Statewide Work Group.							
Will provide surveillance & programmatic TA on prescription drug misuse, abuse, & overdose to 10 state agency Workgroup members, to promote state & local policy & program planning, implementation, & evaluation reducing opiate-related morbidity & mortality.	2-1-16: Collaboration w/Workgroup & local Prescription Drug Overdose Prevention Coalition identified data needs & produced prescription drug data. By providing data & programmatic TA, opiate-related morbidity & mortality reduction advanced.	Exceeded	Exceeded				

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Impact Objective	Detailed Objective Outcome 2-1-16 / 6-30-16	Objective Outcome 2-1-16	Objective Outcome 6-30-16	Budget	Spend Rate %	# of PYs	# of FTEs
Impact Objective 3: Translate data into useful information.							
Will distribute quarterly data reports to at least 25 state & local stakeholders, to inform planning & implementation of programs that address consequences of prescription drug misuse, abuse, & overdose.	2-1-16: (1) Quarterly data reports distributed to 75 state & local stakeholders. Data used in LiveStories website & included in CHCF RFA; (2) data report produced/distributed to 25 state & local prevention/public-health stakeholders.	Met	Met				
Preventive Medicine Residency Program							
HP 2020 Objective: PHI-1 Competencies for Public Health Professionals							
Impact Objective 1: Increase number of trainees who gain Preventive Medicine and Applied Epidemiology competencies.							
Will increase by 12 trainees/Fellows who achieve moderate or high CPM/ACGME or CSTE competencies, by working in HD programs or community-based settings and completing academic coursework, from 109 Residents/132 Fellows to 111 Residents/42 Fellows.	2-1-16: (1) 2 PMRP Residents enrolled in Post-Graduate Year (PGY2) & met ACPM/ACGME competencies; 13 Fellows achieved CSTE competencies; (2) 7 PMRP & 26 Cal-EIS applicants interviewed; 62 applications reviewed by Advisory Committees & 33 candidates interviewed.	Exceeded	Exceeded	\$565,278 (\$524,464) FFY 2015 allocation (\$36,814) FFY 2014 & FFY 2015 savings	83%	3	2.4

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Impact Objective	Detailed Objective Outcome 2-1-16 / 6-30-16	Objective Outcome 2-1-16	Objective Outcome 6-30-16	Budget	Spend Rate %	# of PYs	# of FTEs
Rape Prevention and Education 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, & potential perpetrators, by promoting the use of the 9 <i>Principles of Effective Prevention (Principles)</i> , from 10 to 20.	2-1-16: Evidence-informed sexual offense-prevention programs increased from 10 to 21, an increase related to organizational assessments of 34 RCCs to determine if they implemented programs based on the <i>Principles</i> as well as core components of the programmatic guidelines.	Exceeded	Exceeded	\$832,969 Set-Aside from FFY 2015 Allocation	65%	2	0.5
Receptor Binding Assay for Paralytic Shellfish							
HP 2020 Objective: EH-22 Monitoring Diseases Caused by Exposure to Environmental Hazards							
Impact Objective 1: Improve the PSP surveillance program.							
Will develop 1 RBA to monitor PSP toxins in from CA growing areas & coastal waters. Staff will seek regulatory approval for RBA in PSP toxin surveillance & establish effectiveness of RBA for public health protection in shellfish collected from CA growing areas & marine waters.	2-1-16: (1) A single laboratory validation of the RBA completed, but did not improve PSP surveillance to monitor PSP toxins in shellfish in CA coastal waters since regulatory approval not secured. Scientist not hired in a timely manner; (2) Performance of RBA in shellfish species established, & 1 application package submitted to Interstate Shellfish Sanitation Conference. 6-30-16: A matrix extension application seeking regulatory approval for oyster testing with the RBA submitted to Interstate Shellfish Sanitation Conference (ISSC) in March 2016; awaiting ISSC review of application. A validation study of use of commercial membrane for the RBA is underway; results of this study will be submitted to ISSC for regulatory approval.	Not Met	Partially Met	\$275,000 (\$206,250) FFY 2015 allocation (\$68,750) FFY 2014 & FFY 2015 savings	54%	2	1.25

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Impact Objective	Detailed Objective Outcome 2-1-16 / 6-30-16	Objective Outcome 2-1-16	Objective Outcome 6-30-16	Budget	Spend Rate %	# of PYs	# of FTEs
Safe and Active Communities Branch							
HP 2020 Objective: IVP-11 Unintentional Injury Deaths							
Impact Objective 1: Increase capacity for conducting injury surveillance.							
Will (1) publish 3 sets of annual data on the EpiCenter web-based query system, including CA injury deaths (~16,200), non-fatal hospitalizations (~256,000), & nonfatal emergency department treatments/transfers (~2,220,000), & (2) provide TA to at least 25 individuals, to increase ability to use data from EpiCenter website to identify changes in numbers or rates of injuries, trends, or emerging issues.	2-1-16: (1) 4 sets of annual data were published on the EpiCenter web-based query system, & (2) TA was provided to 30 individuals.	Exceeded	Exceeded	\$244,919 (\$244,919) FFY 2015 allocation	100%	6	1.27
Impact Objective 2: Increase the capacity to use EpiCenter data for planning and evaluation.							
Will provide at least 2 web-based trainings & TA to at least 25 LHDs or selected partners (e.g., state & local policy makers, academicians, program advocates) on using injury-surveillance data from EpiCenter, for policy planning & evaluation.	2-1-16: (1) 2 web-based trainings & TA provided to 25 LHDs or selected partners. This was made possible through outreach & prompt responses to requests for data & to face-to face presentations & training; (2) LHD needs assessed to identify 3 injury topics for web-based trainings.	Met	Met				

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Impact Objective	Detailed Objective Outcome 2-1-16 / 6-30-16	Objective Outcome 2-1-16	Objective Outcome 6-30-16	Budget	Spend Rate %	# of PYs	# of FTEs
Impact Objective 3: Translate data into useful policy information and disseminate findings.							
Will distribute at least 2 injury data/program briefs to at least 100 state & national injury prevention/public health community members, to inform them about key findings on critical or emerging injury issues.	2-1-16: Distributed 2 data/program briefs to 150 state & national injury prevention/public health members in several formats, such as presentation slide deck & data briefs. Data analyzed to determine 3 critical or emerging injury issues for inclusion in briefs.	Exceeded	Exceeded				
Emergency Medical Dispatch Program/EMS Communications							
HP 2020 Objective: AHS-8 Rapid Prehospital Emergency Care (EMS)							
Impact Objective 1: Improve statewide training standards.							
Will increase the percent of participation in key EMS communications stakeholder association groups from 10 to 50%.	2-1-16: The percent of participation in key EMS communications stakeholder association groups increased from 10 to 58%, in part by participating in 4 NAPCO meetings & dedicating an EMS Communications Program designated employee to those efforts.	Exceeded	Exceeded	\$90,711 (\$90,711) FFY 2015 allocation	100%	5	0.62
Impact Objective 2: Maintain up-to-date EMSA-published communications resources.							
Will review 3 EMSA-published communications resources to assess content for accuracy, to ensure that up-to-date statewide EMS-related standards & guidelines are provided to LEMSAs & other EMS stakeholders.	2-1-16: 3 EMSA-published communications resources reviewed: Operations & Communications Resource Manual, Emergency Medical Services Dispatch Program Guidelines, & the EMS Communications Plan.	Met	Met				

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Impact Objective	Detailed Objective Outcome 2-1-16 / 6-30-16	Objective Outcome 2-1-16	Objective Outcome 6-30-16	Budget	Spend Rate %	# of PYs	# of FTEs
Impact Objective 3: Provide leadership and coordination to LEMSAs.							
Will provide TA to 100% of LEMSAs that submit their EMS plans, to ensure that they meet the compliance requirements of California EMS regulations, standards, & guidelines.	2-1-16: TA was provided to 100% of LEMSAs that submitted their EMS plans for review. The success of the review process was made possible by dedicating a Communications Coordinator who used a systematic review process.	Met	Met				
EMS for Children							
HP 2020 Objective: AHS-8 Rapid Prehospital Emergency Care (EMS)							
Impact Objective 1: Provide leadership and coordination.				\$123,800	100%	6	0.83
Will provide TA & support to 100% of LEMSAs requesting assistance in program development/enhancements, to support acute, specialized prehospital child patient care.	2-1-16: TA & support was provided to 100% of LEMSAs that requested assistance, & this approach allowed for review of the annual plans & the development of regulations for those plans & for modifications to the Core Measure related to Q1 efforts.	Met	Met	(\$123,800) FFY 2015 allocation			
EMS Health Information Exchange							
HP 2020 Objective: AHS-8 Rapid Prehospital Emergency Care (EMS)							
Impact Objective 1: Provide funding to LEMSAs for HIE programs.				\$389,580	100%	7	1.54
Will implement at least 1 EMSA-approved, LEMSAs-proposed HIE project, to enhance patient medical information-exchange.	2-1-16: 1 EMSA-approved, LEMSAs-proposed HIE project was implemented, due to adequate funding & an appropriate allocation process in place to award the local assistance project.	Met	Met	(\$389,580) FFY 2015 allocation			

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Impact Objective	Detailed Objective Outcome 2-1-16 / 6-30-16	Objective Outcome 2-1-16	Objective Outcome 6-30-16	Budget	Spend Rate %	# of PYs	# of FTEs
Impact Objective 2: Provide leadership and coordination of Health Information Exchange.							
Will provide TA & support to 100% of the LEMSAs that request assistance in areas associated with HIE system developments & operations to improve statewide EMS patient care.	2-1-16: TA & support was provided to 100% of the LEMSAs through 6 teleconferences & a collaborative approach.	Met	Met				
EMS Partnership for Injury Prevention and Public Education							
HP 2020 Objective: AHS-8 Rapid Prehospital Emergency Care (EMS)							
Impact Objective 1: Facilitate injury-prevention strategies.				\$78,515	100%	5	0.52
Will present 2 EMS-related injury-prevention talks at EMSC annual Education Forum & State Trauma Educational Forum, to ensure EMS providers & stakeholder interests represented.	2-1-16: The EMS for Children Education Forum & the State Trauma Summit were conducted. Success was made possible by the coordination of efforts between EMSC & Trauma Coordinators working closely with State Coordinators.	Met	Met	(\$78,515) FFY 2015 allocation			
Impact Objective 2: Maintain resources on website.							
Will maintain at least 1 up-to-date injury- & illness-related resource document on EMSA website to promote effective injury-prevention strategies, ensure public trust, & provide high-quality patient care.	2-1-16: 1 injury- & illness-related resource document was maintained on the EMSA website. The website content is discussed at state & regional meetings, & monthly website updates are made in response to input received.	Met	Met				

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Impact Objective	Detailed Objective Outcome 2-1-16 / 6-30-16	Objective Outcome 2-1-16	Objective Outcome 6-30-16	Budget	Spend Rate %	# of PYs	# of FTEs
EMS Poison Control System							
HP 2020 Objective: IVP-9 Poisoning Deaths							
Impact Objective 1: Provide oversight and technical assistance.							
Will provide oversight & TA to the CPCS service provider, to ensure rapid & effective telephone advice emergency services to ~300,000 Californians experiencing exposure to poisons.	2-1-16: Partnership with CPCS facilitates oversight while TA is provided through a contract with UCSF. Arrangement allows for review of quarterly reports to ensure compliance in providing telephone emergency services.	Met	Met	\$108,691 (\$108,691) FFY 2015 allocation	100%	6	0.72
EMS Prehospital Data and Information Services and Quality Improvement Program							
HP 2020 Objective: AHS-8 Rapid Prehospital Emergency Care (EMS)							
Impact Objective 1: Increase the quality and availability of EMS data.							
Will develop 5 EMS data reports to publish on EMSA website, to make data available for promoting public trust & quality patient care.	2-1-16: 7 reports were published on the EMSA website after thoroughly analyzing California EMS Information System (CEMSIS) data & providing revised reports.	Exceeded	Exceeded	\$595,573 (\$595,573) FFY 2015 allocation	100%	8	2.52
Impact Objective 2: Provide funding to LEMSAs for local QI or data-related programs.							
Will provide PHHSBG funds to at least 1 LEMSA, to support the implementation of their local QI or data-related pilot.	2-1-16: Funding was provided to 4 LEMSAs as a result of the existence of an allocation process & the capability to execute 4 contracts in a timely manner.	Exceeded	Exceeded				

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Impact Objective	Detailed Objective Outcome 2-1-16 / 6-30-16	Objective Outcome 2-1-16	Objective Outcome 6-30-16	Budget	Spend Rate %	# of PYs	# of FTEs
Impact Objective 3: Provide leadership and coordination of Core Measure Reporting.							
Will provide TA to 100% of the LEMSAs that request assistance with Core Measure Reporting.	2-1-16: By facilitating 3 Core Measure Taskforce meetings, TA was provided to 100% of the LEMSAs, & 1 summary report of all LEMSA Core Measure data was produced.	Met	Met				
Impact Objective 4: Provide leadership and coordination of EMS plans.							
Will provide TA to 100% of the LEMSAs that submit their EMS plans, to ensure that they meet the compliance requirements.	2-1-16: 13 LEMSA administrators were contacted to submit their QI plan, & this promoted the delivery of TA & support to 100% of LEMSAs that requested assistance. This approach allows for review of plans for compliance with regulations, standards, & guidelines.	Met	Met				
EMS STEMI and Stroke System							
HP 2020 Objective: AHS-8 Rapid Prehospital Emergency Care (EMS)							
Impact Objective 1: Develop STEMI and Stroke regulations and services.				\$269,178	100%	6	1.53
Will provide leadership & TA to 100% of STEMI & Stroke Workgroup members & LEMSAs, to promote timely & effective STEMI & Stroke regulation developments, & services for improved statewide STEMI & Stroke care.	2-1-16: STEMI & Stroke regulations were developed with the assistance of Workgroup member input.	Met	Met	(\$269,178) FFY 2015 allocation			

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Impact Objective	Detailed Objective Outcome 2-1-16 / 6-30-16	Objective Outcome 2-1-16	Objective Outcome 6-30-16	Budget	Spend Rate %	# of PYs	# of FTEs
Impact Objective 2: Update STEMI and Stroke information.							
Will provide at least 4 updates regarding STEMI & Stroke system trends to 100% of LEMSAs & public via EMSA website.	2-1-16: 4 updates were provided.	Met	Met				
EMS Systems Planning and Development							
HP 2020 Objective: AHS-8 Rapid Prehospital Emergency Care (EMS)							
Impact Objective 1: Provide oversight and leadership to LEMSAs.							
Will provide oversight & TA to 100% of LEMSAs that submit EMS Plans/updates, to assist in adhering to California EMS Statutes & department guidelines.	2-1-16: 33 LEMSAs were contacted to submit their plans. This proactive approach allowed for a timely evaluation of 18 plans that were posted on the EMSA website.	Met	Met	\$651,198 (\$651,198) FFY 2015 allocation	100%	10	4.82
Impact Objective 2: Provide Transportation Plan technical support.							
Will provide assistance to 100% of CAL FIRE staff who request assistance in basic life support (BLS) rescue air operations/communications & coordination of EMSA inspections of BLS rescue helicopters, to support successful EMS transportation operations.	2-1-16: (1) Assistance provided to 10% of the CAL FIRE staff because a severe fire season prevented helicopter inspection; (2) 4 LEMSAs received TA on RFPs for ambulance service. (3) Neither Table 8 Transportation Plan forms, nor instructions were updated, as this was contingent on adoption of the EMS Systems regulations. 6/30/16: (1) EMSA offered technical support to CAL FIRE more than 3 times and scheduled inspections; (2) 4 LEMSAs received TA with RFPs for emergency ambulance service in exclusive operating areas; (3) Forms update and instructions being developed and are reliant on successful regulation adoption. Regulations are being developed.	Not Met	Partially Met				

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Impact Objective	Detailed Objective Outcome 2-1-16 / 6-30-16	Objective Outcome 2-1-16	Objective Outcome 6-30-16	Budget	Spend Rate %	# of PYs	# of FTEs
EMS Trauma Care Systems							
HP 2020 Objective: AHS-8 Rapid Prehospital Emergency Care (EMS)							
Impact/Process Objective 1: Execute a State Trauma Plan.							
Will establish 1 approved State Trauma Plan for execution by LEMSAs & other EMS providers, to promote optimum, standardized trauma-care services.	2-1-16: 1 approved State Trauma Plan was approved, despite opposition by LEMSAs over the issue of local control. The Plan was vetted through the CHHS Secretary & the Department of Finance.	Met	Met	\$258,537 (\$258,537) FFY 2015 allocation	100%	7	2.02
Impact/Process Objective 2: Lead and coordinate the Performance Improvement & Patient Safety Plan Subcommittee.							
Will provide TA to 100% of Performance Improvement & Patient Safety Plan (PIPS) Subcommittee members.	2-1-16: TA was provided to 100% of Performance Improvement & Patient Safety Plan (PIPS) Subcommittee members.	Met	Met				
Impact Objective 3: Lead and coordinate the Regional Network/Re-Triage Subcommittee.							
Will provide TA to 100% of the Regional Network/Re-Triage (RNRT) Subcommittee members, to develop a draft RNRT guideline resource for use by all EMS & trauma medical providers.	2-1-16: TA was provided to 100% of the Regional Network/Re-Triage (RNRT) Subcommittee members.	Met	Met				