December 30, 2019

Mark Ghaly, Secretary
California Health and Human Services Agency
1600 9th Street #460
Sacramento, CA 95814

Dear Dr. Mark Ghaly,

In accordance with the State Leadership Accountability Act (Leadership Accountability), the Department of Public Health submits this report on the review of our internal control and monitoring systems for the biennial period ending December 31, 2019.

Should you have any questions please contact Brandon Nunes, Chief Deputy Director of Operations, at (916) 558-1700, Brandon.Nunes@cdph.ca.gov.

GOVERNANCE

Mission and Strategic Plan

The California Department of Public Health (CDPH or the Department), a nationally accredited public health department, is a subdivision of the California Health and Human Services Agency (CHHS Agency or Agency). CDPH was established on July 1, 2007 through enactment of Senate Bill 162 (Ortiz, Chapter 241, Statues of 2006), which vested CDPH with responsibility of public health programs.

The 2019 – 2020 Budget Act includes $3.22 billion for the continued support of Public Health Programs and services and affirms the Department’s commitment to address the public health needs of Californian’s through population-based programs, strategies and initiatives.

The mission of CDPH is to advance the health and well-being of California’s diverse people and communities, which supports the Department’s vision of healthy communities with thriving families and individuals. CDPH promotes its mission by continuing efforts that focus on planning for the future. This is done by maximizing the efficiency and effectiveness of service delivery and operational functions that drive greater quality of life and better health outcomes across all communities in California. CDPH also serves as a leader in the implementation of California’s State Health Improvement Plan – Let’s Get Healthy California (LGHC) that promotes health equity, leveraging the use of data and emphasizes innovation. At the direction and in collaboration with the CHHS Agency and other departments under Agency, LGHC strives to establish California as the healthiest state through advancements to better health, better care, and lower costs.

The CDPH Strategic Map 2019-2022 outlines six overarching strategic goal areas with associated priority areas that the Department will focus on over the next three years. The following goals position CDPH to adapt and respond to the evolving Public Health landscape by creating innovative solutions, strengthening partnerships and collaborations and embracing technology:

1. **Protect the Public’s Health** – Strengthen foundational public health and health care infrastructure at the State and local level
2. **Promote Health and Wellness** – Prevent disease and injury by fostering vibrant, resilient and prosperous communities

3. **Increase Health Equity** – Create equitable opportunities to advance physical and mental health for all Californians by addressing social determinants of health

4. **Empower the Public Health Workforce** – Strategically invest resources to attract and retain a diverse, highly engaged and productive workforce

5. **Enhance Services Through Agile Operations** – Ensure that core business areas are efficient, innovative, transparent and customer-focused

6. **Optimize Data and Technology** – Leverage data and technology to advance goals and inform action and accountability

The Department is responsible for the administration of over 200 programs within six Public Health Centers and two Public Health Offices that provide program services. There are four independent entities that report directly to the director of the Department, which include the Office of Compliance, the Office of Health Equity, the Office of Legislative and Governmental Affairs and the California Conference of Local Health Officers. These are supported by operational and administrative support services within five Offices, the Administration Division (Admin), the Human Resources Division, the Information Technology Services Division (ITSD) and the Strategic Development and External Relations Fusion Center.

**Control Environment**

CDPH’s internal control system is overseen by the Director and State Public Health Officer, the Assistant Director and two Chief Deputy Directors, which combined represent CDPH’s Directorate team. Each area of the organization is overseen by a Deputy Director or Chief. The Directorate team and the leadership over the various areas of the organization make up CDPH’s Senior Leadership team.

The Public Health Administrative Manual (PHAM) is an integral part of CDPH’s directive and internal control system. It communicates official administrative policy and procedures, delegations of authority, and assignments of responsibility throughout the Department. The PHAM also outlines the organizations expectations of ethical responsibilities, standards of conduct and behavior that should be upheld by all employees, and outlines the reporting structure, protocol and responsibility to report ethical concerns.

The Department’s control environment and infrastructure is set forth by CDPH leadership through: establishing clear organizational level strategies, goals and priorities; development, availability and maintenance of the Department’s organizational structure and operational processes; an Enterprise Risk Management and Compliance (ERMC) Framework; clearly defining policies, procedures and processes to govern the organization; communication of expectations of conduct to be upheld by all CDPH employees; workforce and succession planning activities to ensure continued ability to maintain a competent and skilled workforce; and ensuring oversight is properly conducted by all managers and supervisors to support overall efficiency and effectiveness throughout the Department and to enforce staff accountability enterprise-wide.

CDPH promotes a culture of internal control and risk management through its ERMC Framework, which provides a foundation for the Department’s control environment by outlining, documenting, maintaining and providing ongoing oversight of centralized and standardized processes for risk management and
compliance. The Enterprise Risk and Accountability (ERA) Unit within the Office of Compliance and an Enterprise Risk Management and Compliance Council (comprised of appointed department sponsors) were established as the risk and compliance function for the Department. The ERA Unit and ERMC Council support the ERMC Framework by facilitating activities including identifying, assessing, evaluating, elevating and continually monitoring risk and compliance issues reported by Department staff. Senior Leadership and the Directorate use information provided by this function to inform decision-making for internal controls or action plans needed to address and mitigate high-level risks that could impact the achievement of CDPH’s strategic goals and priorities, or that may impact the Department’s ability to fulfill mandates. The processes within the ERMC Framework are ongoing and continue to be updated and enhanced to increase efficiencies within the internal control system and will evolve with changes to the Department over time.

The Department also fosters a strong culture of quality improvement, which supports internal control and risk identification and mitigation. Through the Office of Quality Performance and Accreditation (OQPA), CDPH offers various activities that support quality improvement. CDPH requires all new hires to complete an introduction to quality improvement in public health training. The training outlines CDPH’s adopted process and model for quality improvement, which includes staff’s role to conduct regular reviews of their day-to-day workloads to identify inefficiencies that could benefit from process improvements. The Department also offers regular in-house Lean White Belt trainings (a customer focused process improvement methodology adopted and followed by the State of California). OQPA oversees activities and workgroups related to quality improvement projects, and supports the Department in strategic planning, reviewing and tracking performance measures and helps to ensure CDPH meets national standards of excellence for public health organizations established by the Public Health Accreditation Board.

With Directorate oversight, CDPH leadership and department managers and supervisors provide staff with a clear overview of duties and expectations of their position; information on where to obtain Department policies, procedures, and relevant onboarding resources; Department and (when relevant) job specific mandated trainings; job specific policies and procedures; and expectation memorandums, which further detail CDPH’s standards of conduct for all staff. Further, a new hire on-boarding program familiarizes all new employees with a Department overview, key concepts of public health, and more detail on the work conducted by the organization.

CDPH uses organizational charts to provide clear illustrations on the relationships and relative ranks of job positions within the Department. The Human Resources Division (HRD) provides expertise on the organizational reporting structures, as well as ensuring that classifications have the appropriate responsibility and authority for the reporting structures they fall under to comply with appropriate state laws, regulations and requirements.

The Department’s HRD Training and Recruitment Unit provides tools and resources for managers, supervisors, and current and future employees to recruit, develop and retain a qualified workforce. This includes participation and promotion of Job Fairs, use of social media recruitment platforms (LinkedIn), and the use of employee exit surveys for staff leaving the Department to gain valuable information on employee satisfaction, experience or retention issues. CDPH offers an in-house Leadership Development Program to develop future public health leaders through a rigorous course curriculum and a capstone project focused on a CDPH challenge or needed process improvement throughout the organization. The Department also has a student internship program that provides an opportunity for
students to learn about public health and state service, and that assists CDPH to develop and educate potential future public health employees.

Further, CDPH is currently in the process of finalizing its Workforce Development Plan (WDP) and its Succession Plan. The WDP includes various processes that will be used to continuously improve the CDPH workforce by establishing professional development opportunities, provide competitive salary and benefits to new hires, and retain a strong and competent workforce by providing growth and advancement opportunities. The Department’s Succession Plan sets forth CDPH’s process to establish pipelines for key positions and provide development opportunities throughout the organization to ensure a skilled and knowledgeable workforce will be in place to support current and future organizational needs. It also establishes a systematic process to plan for an anticipated increase in key position retirements over the next five years.

Managers and supervisors are responsible for day-to-day activities to hold the staff they oversee accountable to their duties, policies, procedures and processes (State-level, department-level and job specific), as well as CDPH expectations of conduct. They are also responsible for ensuring and reviewing workloads, requirements, assignments for annual Department drills/assignments and the timelines outlined to ensure that staff are able to feasibly complete their work without creating conditions where staff may engage in behaviors that violate CDPH’s standards of conduct. Tools and resources to support this are yearly employee Performance Appraisals, issuance of probationary reports to new hires, and a Performance Management Unit within HRD that assists managers and supervisors in the appropriate and timely application of preventative and progressive discipline processes to proactively address concerns relating to job performance or conduct in the workplace. Best practices to support accountability are shared in venues available to managers and supervisors (meetings, trainings, memorandums) and include the availability of tools such as work plan templates, project management software’s, and quality improvement and Lean tools and principles.

Information and Communication

CDPH utilizes various channels, outlets and tools for tracking information and communicating both internally and externally to staff, as well as with stakeholders and the public.

The Department maintains the CDPH Intranet Site, which houses resources, the PHAM, other policies and procedures, and reporting and information systems. Through Department-wide collaboration, CDPH recently implemented a redesign of its Intranet to create a more centralized and interactive HUB for employee resources, training opportunities, policies, forms, templates, and important news and information about programmatic work department-wide. The redesign of the CDPH Intranet assists the Department to communicate more efficiently and to streamline the process for updates to operational and administrative information and resources that employees need to effectively do their jobs.

Employees are notified of department policies and standards of conduct through the PHAM. Twice a year, the Director’s Office provides an email summarizing any recent revisions made to policies in the PHAM to all employees. Additional updates and communication of policies and procedures, human resource information, action items and annual drills to be completed, and Information Technology (IT) system related updates are provided to staff through Administration memorandums, IT Service Desk notifications, Human Resources Quarterly Blasts, and other emails and newsletters sent through the Office of Public Affairs and/or the Director’s Office. Programs maintain internal policies and procedures specific to their workloads within their functional areas and are responsible to keep these current and
up to date. Information is also shared at operational and administrative workgroups, councils and committees.

To enhance effective communication across organizational lines, staff and supervisors and managers participate in various operational and policy workgroups or committees to gather and share information to support and advance the organization and its core work. These committees and workgroups include the Administration Users Group, Key Support Staff Meetings, Information Technology Governance Council, Ecosystem of Data Sharing (EODS) Subcommittee and Workgroups, and a Quality Improvement Council. Information and best practice sharing across the organization also occurs at CDPH Manager and Supervisor Summits, and through the Public Health Executive Management Team (PHEMT) meetings. Within the various areas of the organization, more informal meetings are also conducted by management with their staff to discuss workloads, as well as any issues and challenges that may arise.

External to the organization the Chief Deputy Director of Operations is the Executive Sponsor on a subcommittee through the CHHS Agency focused on Risk Management across Departments under the Agency. The Office of Compliance also attends the statewide Governance Risk Management and Compliance Council (GRCC) on behalf of CDPH to stay informed of and share back with the Department crucial governance and risk management guidance provided to all departments statewide.

CDPH utilizes various information systems and tools to collect and communicate pertinent information for operational, programmatic and financial decision-making processes. These include CDPH’s Administrative Network, which includes a personnel directory, hiring appointment and separations, Requests for Personnel Actions (RPAs), the Departments timekeeping system and the contract and purchasing system. This online web based administrative system provides a centralized tool for personnel actions, staff time and leave reporting, contracts, and purchasing requisitions throughout the Department. Administrative and operational areas, as well as leadership use this system to track and monitor key organizational information, and to make informed decisions and plan workloads or needed resources based on data stored in this system. The Public Health Employee Training Tracking System (PHETTS) provides a central, easily accessible location to track employee completion of all CDPH mandated trainings.

CDPH utilizes the Financial Information System for California (FI$Cal) as the accounting, budget, cash management and procurement system for the Department. Through the FI$Cal Online Reporting Environment (FORE), a web-based application, employees can access financial information and reports via the CDPH Intranet to fulfill requirements to submit financial statements to the State Controller’s Office and the Department of Finance as required by law. CDPH’s Budget and Accounting sections also use FI$Cal and FORE to review Department expenditures and reconcile the Department’s yearly budget to provide management up to date fiscal information to inform decision-making on prioritizing the distribution of resources department-wide.

Document control protocols, standard forms, and guidelines are in place for documents that require Directorate, Agency or Governor’s Office review and approval. These are established and maintained through the Correspondence and Procedures Manual, and through a standard form library available on the CDPH Intranet. Further, CDPH is working towards the automation of some of its document and form review processes and has implemented an Electronic Document Management System (EDMS) to further improve information and communication processes related to document reviews.
CDPH uses various methods to communicate externally to stakeholders and the public. CDPH utilizes the CDPH Internet, an external public facing website, to provide an avenue for CDPH to release public health media, newsletters on upcoming events, advances in public health, and an avenue for the public to apply for public health services that are provided by CDPH. All external communication follows web content and document review and approval guidelines outlined by the Department. CDPH also provides communication through email by issuing Media Advisories on public health matters and through quarterly Stakeholder Briefing summaries. Further, CDPH provides Legislative briefings and subject matter expertise on statewide public health considerations; engages with workgroups, committees, and councils with representatives from industries CDPH regulates through meetings or regular conference calls; and partners with local health jurisdictions (LHJs), community based organizations and other relevant partners to deliver key public health services statewide.

CDPH also has critical and invaluable working partnerships with the LHJs statewide through the California Conference of Local Health Officers (CCLHO), comprised of 61 legally appointed physician Health Officers in California from 58 counties and three (3) cities, and through the County Health Executives Association of California (CHEAC), comprised of county and city Health Department and Agency Directors statewide. The Department holds regular forums with both CCLHO and CHEAC through in-person conferences, meetings and conference calls to discuss, consult and partner on significant public health issues facing California.

CDPH recognizes the importance for staff to have the knowledge and skills to identify and report inefficiencies throughout the Department. All CDPH staff are trained in basic quality improvement techniques and the Department encourages staff to report inefficiencies through their internal chain of command if they discover an issue or an opportunity to improve the efficiency and effectiveness of processes.

Through onboarding and notifications, all employees are also provided information on their responsibility to report improper activities including fraud, waste, or abuse that may arise in the Department. Staff are encouraged to go through their internal reporting chain of command first; however, employees are also provided annually with information about the Whistleblower process (both internal and the State-wide process through the California State Auditor Whistleblower Hotline), which encourages employees and others who have serious concerns about improper activities to come forward and report those concerns. The ERMC Framework and its associated processes also provide a process for staff to consider and review potential risk areas across the Department that may fall under, or could eventually lead to, improper activities or fraud and that may require further review.

**MONITORING**

The information included here discusses the entity-wide, continuous process to ensure internal control systems are working as intended. The role of the executive monitoring sponsor includes facilitating and verifying that the Department of Public Health monitoring practices are implemented and functioning. The responsibilities as the executive monitoring sponsor(s) have been given to: Brandon Nunes, Chief Deputy Director of Operations.

The Department conducts and uses various activities and processes to ensure its internal control system remains aligned with CDPH’s strategic goals, priorities and mandates, and to monitor overall quality of the performance of the organization. CDPH’s Senior Leadership team and Directorate oversee, deliberate and monitor organizational performance and the internal control system through
executive level committees. These executive committees include the Senior Leadership Team, the Department Operations Improvement Team and the Policy Committee. Regular meetings are held to provide a venue for CDPH leadership to discuss and resolve operational or policy issues that span across the Department, and assist in making determinations on the resources necessary to address or mitigate vulnerabilities appropriately.

In 2019, CDPH adopted and began to implement Results-Based Accountability (RBA) as a performance measurement process to track and monitor progress towards the achievement of the Department’s vision, mission, and strategic goals and priorities. RBA measures and tracks progress for population accountability for the services the Department delivers externally, as well as program performance improvement and organizational operations measures within the Department. Each area of the organization develops performance measures specific to their workloads in pursuit of CDPH’s vision, mission, and strategic goals and priorities that are tracked and monitored by the Office of Quality Performance and Accreditation within the Department.

The Department’s ERMC Framework facilitates tracking and monitoring activities regarding the status of identified risk areas, compliance issues and vulnerabilities that the Department faces. The ERMC Framework also outlines processes for continued review of enterprise risk management and compliance functions, activities and processes for the organization. This system allows CDPH to continue to make updates and improvements to its risk management and compliance processes as appropriate to ensure an effective and efficient internal control system is in place for the organization. In 2019, the first department-wide enterprise risk assessment was conducted for CDPH to develop a risk and compliance issues baseline for the organization. To support ongoing performance improvements to this baseline, a CDPH Enterprise Risk Register is used to document, track and more proactively monitor risk and compliance issues reported through the Department-level enterprise risk assessment.

As the risk and compliance function for the Department, and per the ERMC Framework, the ERA Unit within the Office of Compliance and the ERMC Council continue to review reported risks and compliance issues. The ERMC Council is a forum for ongoing risk reporting to occur, and provides review and oversight for compliance based projects the Department is conducting. It also facilitates regular check-ins with programmatic areas to gather status updates to determine if the implementation of internal controls are reducing the organizational risks as anticipated. If not, further discussions and additional control proposals are discussed, reviewed and considered. Updates on the status of risks are documented and maintained in the CDPH Enterprise Risk Register. If escalation on any risks, compliance issues or other vulnerabilities to Senior Leadership is needed, the ERMC Council and the ERA Unit facilitate this escalation to ensure the information provided to decision-makers properly addresses and assigns responsibility to risks or compliance issues that address issues or vulnerabilities that are newly identified.

The ERA Unit also provides risk information to CDPH’s Internal Audits Unit to enhance the development of CDPH’s yearly internal audit plan. CDPH’s Internal Audit Unit serves as more of an independent assurance function for the Department and further identifies vulnerabilities through various risk assessments, internal and external reviews and audits, and through regular meetings with staff. To complete its annual audit plan, Internal Audits regularly monitors and reports to the Directorate deficiencies identified through internal and external audits. Internal Audits also tracks and monitors open audit recommendations from external auditing agencies until they are resolved.
RISK ASSESSMENT PROCESS

The following personnel were involved in the Department of Public Health risk assessment process: executive management, middle management, front line management, and staff.

The following methods were used to identify risks: brainstorming meetings, employee engagement surveys, ongoing monitoring activities, audit/review results, other/prior risk assessments, questionnaires, and consideration of potential fraud.

The following criteria were used to rank risks: likelihood of occurrence, potential impact to mission/goals/objectives, and timing of potential event.

RISKS AND CONTROLS

Risk: Workforce Planning

The CDPH employs a diverse, complex, multi-skilled workforce of more than 4,000 employees in over 300 civil service classifications, which provide public health services statewide. This workforce includes many highly skilled professionals, including physicians, nurses, scientists, laboratorians, researchers, programmers, and technical and professional staff working on complex workloads. Many of these civil service classifications are unique and can create challenges with knowledge transfer, succession planning, and workforce planning efforts. Further, recruiting for these highly skilled and technical classifications can be challenging as individuals with these skillsets can often garner higher pay and benefits in private industry or with local governments.

The risks or result of not investing in succession planning, workforce development, recruitment and retention are loss of key knowledge, extended vacancies in key positions, reduced ability to perform core department responsibilities, inability to meet strategic goals and priorities efficiently and effectively, and potential failure to meet mandates and provide key public health services.

Control: A. Workforce Development and Succession Planning

CDPH established a designated coordinator for workforce and succession planning for the organization. This function exists within the Department’s Human Resources Division (HRD) and oversees and collaborates with all areas of the Department to develop and implement workforce and succession plan activities to support CDPH’s highly technical and skilled workforce needs. The coordination of these activities helps CDPH to reduce this risk by proactively and consistently reviewing its workforce needs and taking necessary actions as appropriate to make adjustments and ensure ongoing pipelines for specified key leadership positions, as well as all positions throughout the organization.

Control: B. Human Resources Division Workforce Planning

The CDPH HRD continues to manage and support key workforce planning, recruitment and retention activities for the organization. These include participation at Job Fairs throughout the state, as well as facilitation of CDPH facilitated Job Fairs; expanding and enhancing staff development trainings offered; and continued use of social media platforms such as LinkedIn and other communication tools to recruit strong candidates for jobs the organization is hiring for. This
helps CDPH to reduce this risk by improving and fostering new and innovative solutions and processes to ensure CDPH continues to have a strong and skilled workforce in place, and helps to provide new opportunities and outlets to recruit for technical or key positions throughout the organization.

**Risk: FI$Cal Implementation**

The CDPH continues to experience challenges that impact business functionality and processes related to financial management, financial reporting and procurement/contracts throughout the organization resulting from the Department’s implementation of FI$Cal in July 2018.

Business challenges with FI$Cal could lead to continued delays in financial and procurement processes that are crucial for overall operational functionality of the organization. This also impacts CDPH staff availability to work on critical high priority assignments due to increased time required to access critical financial information, and/or the re-direction of staff to support functions under the FI$Cal system to ensure basic functionality of financial management business processes are maintained.

**Control: A. Special Projects Unit**

CDPH has created a Special Projects Unit within its Financial Management Branch that provides support, coordination, project management and oversight of FI$Cal processes for CDPH. This includes a help desk to resolve ongoing issues with FI$Cal. The Special Projects Unit also serves as the primary contact with the State Department of FI$Cal. This communication is critical for CDPH to reduce and manage this risk. CDPH’s Special Project Unit provides support and expertise on issues and challenges that arise through the FI$Cal system, and through the navigation of the first few years of CDPH operating in the FI$Cal system.

**Control: B. FI$Cal Workgroups**

The Director’s Office for the Department continues to work closely and participate in workgroups with the Financial Management Branch related to FI$Cal implementation and challenges that may arise as the Department continues to transition into this new operating system. This includes identifying resources in-house to support and address challenges. This type of executive support and oversight of the ongoing implementation and transition into FI$Cal assists to mitigate this risk.

**Risk: Information and Data Security/Privacy (Internal)**

The CDPH continues to face challenges to address information technology internal security and privacy issues in a timely manner. This stems from resource limitations to help further develop and expand the organization’s information security and privacy infrastructure capacity and capabilities, as well as challenges due to the complexity and variety of public health activities the Department administers.

Limitations with current information security and privacy infrastructure could lead to CDPH facing challenges with providing services to clients through critical systems the Department maintains, reduced ability to effectively and efficiently meet its mission and strategic goals and priorities, loss of data, non-compliance with laws, regulations or other requirements, which may lead to potential loss of funding or penalties.
Control: A. CDPH Security Operations Center

The Department’s Security Operations Center (SOC), under the Information Technology Services Division, oversees and manages security threat analytics, cloud security, network and host-based intrusion detection, security information and event management monitoring, and vulnerability scanning and remediation. This central and specialized operational security function serves as a primary contact with the State Security Operations Center for bi-directional identification and mitigation of technical threats to CDPH computing environments to reduce security vulnerabilities. The SOC team is responsible for monitoring and analyzing CDPH’s security posture on an ongoing basis with the goal to detect, analyze and respond to cybersecurity incidents using technology solutions and strong processes. The work performed by SOC team helps CDPH to mitigate the risk by ensuring that potential security incidents are correctly identified, analyzed, defended, investigated and reported for improved incident detection and timely response.

Control: B. Enhance and Expand Security and Privacy Functionality

CDPH regularly explores opportunities to enhance and/or expand security and privacy functionality and capacity within the organization through ongoing discussions with leadership and workgroups with the various programmatic areas. This type of communication helps CDPH to identify resource needs to manage security and privacy threats it faces in support of reducing and managing this information technology security risk more effectively.

Control: C. Centralized Security and Privacy Policies and Procedures

CDPH is implementing a more comprehensive and centralized repository for security and privacy policies and procedures for the organization. A centralized repository helps CDPH to communicate and train staff more effectively on the policies and procedures to be followed to help address and prevent security and privacy vulnerabilities.

Risk: Information and Data Security/Privacy (External)

As the scope of technology and development of internet based solutions continues to increase, so do security and privacy threats by external cybercriminals to CDPH. Among international cybercriminals, healthcare and government data are two of the most highly valued targets for cyberattacks. As CDPH maintains millions of records containing personal health information, it has experienced a significant increase in the sophistication and volume of cybersecurity attacks against its security infrastructure. On average, CDPH fields one to four million attempted attacks each month.

These continued cybersecurity attacks increase the organization’s susceptibility to potential unauthorized access to key computing system infrastructure or data manipulation that could result in potential breaches, ransom demands, compliance violations and other negative outcomes.

Control: A. CDPH Security Operations Center

The Department’s Security Operations Center under the Information Technology Services Division oversees and manages security threat analytics, cloud security, network and host-based intrusion detection, security information and event management monitoring, and vulnerability scanning and remediation. The Security Operations Center assists CDPH in managing and reducing this risk
through additional support and oversight of external cybersecurity threats attempted on CDPH’s computing systems more efficiently and effectively.

**Control: B. Enhance and Expand Security and Privacy Functionality**

CDPH continues to explore opportunities to enhance and/or expand security and privacy functionality and capacity within the organization through ongoing discussions with leadership and workgroups with the various programmatic areas on a regular basis. This helps CDPH to reduce this risk by allowing CDPH to engage in discussions and identify areas that require additional support to prevent ongoing and increasing cybersecurity threats the organization faces.

**Control: C. Increased Cybersecurity Training**

CDPH continues to roll out additional training modules and informational notifications specifically focused towards increasing awareness on common ways cybercriminals target CDPH. These trainings include best practices to prevent the organization from being exposed to a cybersecurity threat. This helps CDPH to reduce this risk by educating staff and working to prevent exposures to cyberattacks more proactively.

**Risk: Technology Compatibility and Infrastructure**

The CDPH has many workloads that require and rely on the use of technology systems and applications to administer. The Department continues to face challenges due to reliance on outdated or incompatible technology systems or applications (legacy systems) and limitations in resource availability or data compatibility to effectively migrate to newer systems or applications. While the main information technology infrastructure has been updated, there are several legacy systems still in use throughout CDPH.

Outdated or incompatible technology systems or applications may lead to continued costly maintenance, incompatibility of data housed in old systems when new systems are implemented, workarounds, reliance on consultants to support outdated systems, and potential external business disruptions.

**Control: A. Information Technology Strategic Business Roadmap Model**

The Information Technology Services Division (ITSD) for CDPH works with areas throughout the Department to apply the IT Strategic Business Roadmap model that was developed for CDPH by Gartner Consulting Group in 2018. The standardized model allows ITSD to work with each area in the organization to create a plan for mapping future enterprise IT needs and identify cost-effective and functional IT solutions based on each area and the organization’s program goals, mandated requirements, workforce needs and budget. These efforts help CDPH to reduce this risk as it allows for long-term planning of technology-based business needs from the business area and organizational perspective, but also allows for discussions to determine key short-term needs as well.

**Control: B. Information Technology Business Services**

The Department’s ITSD holds regular meetings with each area in the organization to discuss
current business needs and to determine if there are available enterprise-level platforms already available in the organization that could benefit the business needs in other parts of the organization quickly and effectively. This type of communication helps CDPH to manage and reduce this risk, as it allows for integration across multiple enterprise-wide information technology solutions across the Department.

**Control: C. Ecosystem of Data Sharing**

CDPH continues to implement and pilot its strategy to enhance the organization's interoperability through data management under the Ecosystem of Data Sharing (EODS) plan. Committees comprised of representatives from across the organization engage in planning and discussions focused on EODS and how to improve data interoperability among and across CDPH programs through the systems and applications they use. Continued implementation of EODS helps CDPH to reduce this risk by improving IT capabilities throughout the organization to build functionality to securely share data internally and externally more effectively.

**Risk: Complexity/Dynamic Nature of Laws or Regulations**

The CDPH is a moderately large organization that has staff located in offices statewide and as such could face ongoing challenges and potential inefficiencies to consistently track, interpret and comply with the numerous and evolving State and federal laws, regulations, and grant requirements that govern over 200 programs the Department is responsible for administering.

The overall complexity, as well as challenges with being based statewide, could hinder CDPH's ability to fulfill its mission and strategic goals and priorities; could lead to challenges with managing centralized communication infrastructures and business processes; and may lead to non-compliance with existing laws, regulations and/or grant requirements that could result in audit findings for the organization.

**Control: A. Enterprise Risk Management and Compliance Framework**

The CDPH Enterprise Risk Management and Compliance (ERMC) Framework was adopted in early 2019. It outlines governance structure and processes for the organization's internal control environment, risk management processes, and compliance activities. There are designated functions including supporting staff and a Council comprised of representatives from across the organization that provide coordination, support and facilitation of the enterprise risk assessment process and compliance efforts. The ERMC Framework helps CDPH to manage and reduce this risk by providing a standard and centralized infrastructure for risk management, compliance and internal controls to help inform decision-making and to help the organization better manage its complexities due to the varying State and federal laws, regulations, and grant requirements it is governed by.

**Control: B. Improved Communication and Information Sharing Practices**

CDPH continues to expand and develop communication and information sharing tools available to all staff. These include an update to the internal employee focused Intranet site; continued use and development of SharePoint platforms for internal information and document sharing, and automation of certain document reviews and approvals; and increased notification emails and
newsletters to inform staff of key updates to information, policies or procedures. This assists CDPH to reduce this risk by making use of communication tools and processes that are in the cloud and centralized, making them more easily accessible to staff located throughout the state.

**Control: C. Establishment of a Policy and Planning Office**

CDPH will establish a Policy and Planning Office that is responsible for public health policy analysis, as well as monitoring and evaluating policy impacts, and defining policy best practices for the Department. This Office coordinates between the legislative and government affairs, quality improvement and accreditation, and health equity functions, as well as with other areas throughout the organization to establish improved alignment towards a single set of priorities to improve the health of Californians. This helps CDPH to reduce this risk by providing a key oversight and a consistent function that is responsible for managing activities related to policy planning and decisions, improves collaboration, and supports the various areas throughout the organization with program evaluation tools and by providing technical assistance.

**CONCLUSION**

The Department of Public Health strives to reduce the risks inherent in our work and accepts the responsibility to continuously improve by addressing newly recognized risks and revising risk mitigation strategies as appropriate. I certify our internal control and monitoring systems are adequate to identify and address current and potential risks facing the organization.

**Sonia Angell, MD, MPH, Director and State Public Health Officer**

CC: California Legislature [Senate (2), Assembly (1)]
   California State Auditor
   California State Library
   California State Controller
   Director of California Department of Finance
   Secretary of California Government Operations Agency