

Department of Health FY2021

Agency Department of Health

Agency Code HCO

Fiscal Year 2021

Mission The District of Columbia Department of Health promotes health, wellness and equity, across the District, and protects the safety of residents, visitors and those doing business in our nation's Capital.

Strategic Objectives

| Objective Number | Strategic Objective |
|------------------|---|
| 1 | Health Regulation and Licensing Administration (HRLA). Protect the health of those who reside and do business in the District of Columbia by fostering excellence in health professional practice and building quality and safety in health systems and facilities through an effective regulatory framework. |
| 2 | Office of Health Equity (OHE). Promote Health Equity. Collaborate with other government agencies and community partners to identify and address the social determinants of health which are the key drivers of inequities in health outcomes. |
| 3 | Center for Policy Planning and Evaluation (CPPE). Develop an integrated public health information system to support health policy decision, state health planning activities, performance analysis and direction setting for department programs. |
| 4 | Community Health Administration (CHA). Provide programs and services that promote coordination among the health care systems in the city and enhance access to effective prevention, primary and specialty medical care through collaborations with public and private organizations. |
| 5 | HIV/AIDS, Hepatitis, STD and TB Administration (HAHSTA) Reduce HIV, STD, TB and hepatitis-related morbidity and mortality and ensure healthy outcomes for persons living with those diseases. Administer federal and local funding, provide grants to service providers, monitor and evaluate programs, ensure quality services, and track the cases and status of the epidemics in the District. |
| 6 | Health Emergency Preparedness and Response Administration (HEPRA) Provide regulatory oversight of emergency medical services (EMS) and seek to ensure that DOH, its partners and the community are prepared for, can respond to, and recover from public health and health care system events and emergencies. |
| 7 | Create and maintain a highly efficient, transparent, and responsive District government. |

Key Performance Indicators

| Measure | Directionality | FY 2018 Actual | FY 2019 Actual | FY 2020 Actual | FY 2021 Target |
|--|----------------|----------------|----------------|----------------|----------------|
| 1 - Health Regulation and Licensing Administration (HRLA). Protect the health of those who reside and do business in the District of Columbia by fostering excellence in health professional practice and building quality and safety in health systems and facilities through an effective regulatory framework. (10 Measures) | | | | | |
| Percent of follow-up inspections of health care facilities with harm level deficiencies completed within 30 days | Up is Better | 100% | 100% | 100% | 100% |
| Percent of samples taken from rabies suspect animals submitted for testing within 48 hours | Up is Better | 100% | 88.5% | 100% | 100% |
| Percent of food establishment complaint inspections initiated within five (5) business days of receipt | Up is Better | 97.3% | 98.3% | 97.9% | 95% |
| Percent of Registered Controlled Substance Facilities inspected annually | Up is Better | 100% | 98.8% | 74.8% | 100% |
| Percent of residential healthcare providers scoring at or above the national average of 72 percent on the customer satisfaction survey | Up is Better | New in 2019 | 97.7% | 100% | 100% |
| Percent of medical marijuana facilities (dispensaries and cultivation centers) receiving at least one quarterly inspection | Up is Better | New in 2019 | 100% | 30% | 95% |
| Percent of pharmaceutical facilities receiving at least one annual inspection | Up is Better | New in 2019 | 98.2% | 67.6% | 100% |

| Measure | Directionality | FY 2018 Actual | FY 2019 Actual | FY 2020 Actual | FY 2021 Target |
|--|----------------|----------------|----------------|----------------|----------------|
| Percent of rodent activity complaints inspected or baited, and closed in the 311 system within three (3) business days of receipt | Up is Better | New in 2019 | 97.9% | 98.8% | 100% |
| Percent of confirmed foodborne illness cases by DC Health epidemiologists investigated within three (3) business days of notification to HRLA | Up is Better | New in 2019 | 96.9% | 100% | 95% |
| Percent of investigations initiated within 24 hours of receipt for complaints of abuse, neglect and mistreatment | Up is Better | New in 2019 | 100% | 100% | 100% |
| 3 - Center for Policy Planning and Evaluation (CPPE). Develop an integrated public health information system to support health policy decision, state health planning activities, performance analysis and direction setting for department programs. (6 Measures) | | | | | |
| Percent of Certificates of Need (CONs) reviewed on time within 90 days | Up is Better | 100% | 100% | 100% | 100% |
| Number of CON Appeals | Down is Better | 0 | 0 | 0 | 0 |
| Percent of vital records walk-in requests processed within 30 minutes | Up is Better | 60.6% | 47.3% | 83.8% | 92% |
| Percentage of vaccine preventable disease cases with contact tracing initiated within 24 hours of receipt of line list of exposed contacts | Up is Better | New in 2021 | New in 2021 | New in 2021 | New in 2021 |
| Percentage of foodborne disease cases with first interview attempt within 72 hours of receipt of the case report | Up is Better | New in 2021 | New in 2021 | New in 2021 | New in 2021 |
| Average wait time for vital records walk-in issuance requests | Down is Better | New in 2021 | New in 2021 | New in 2021 | New in 2021 |
| 4 - Community Health Administration (CHA). Provide programs and services that promote coordination among the health care systems in the city and enhance access to effective prevention, primary and specialty medical care through collaborations with public and private organizations. (20 Measures) | | | | | |
| Percent of eligible children enrolled in the Maternal, Infant, and Early Childhood Home Visiting (MIECHV) programs who receive developmental and social-emotional screenings | Up is Better | 87.4% | 85.8% | 88.6% | 85% |
| Percent of women enrolled in the MIECHV programs that are screened for depression | Up is Better | 86.3% | 82.5% | 88.9% | 85% |
| Percent of eligible perinatal program participants with a documented reproductive health plan | Up is Better | 80.4% | 83.2% | 64.3% | 90% |
| Total breastfeeding initiation rates among WIC enrollees | Up is Better | 59.9% | 62.2% | 68.5% | 60% |
| Breastfeeding initiation rates among African-American WIC enrollees | Up is Better | 52.3% | 54.6% | 62.5% | 53% |
| Percent of Health Professional Loan Repayment Program (HPLRP) participants that are practicing in priority underserved areas | Up is Better | 91.7% | 92.2% | 91.5% | 90% |
| Percent of infants who receive an initial hearing screen at birth | Up is Better | New in 2019 | 97.3% | 97.5% | 85% |
| Percent of infants that receive a repeat screening after failing an initial hearing screening | Up is Better | New in 2019 | 61.4% | 35.1% | 75% |
| Percent of Farmer's Market incentive benefits redeemed | Up is Better | New in 2019 | 95.8% | Not Available | 93% |
| Proportion of adults with hypertension who have achieved blood pressure control (seen at Million-Hearts-participating facilities) | Up is Better | New in 2019 | 65.3% | 70% | 70% |

| Measure | Directionality | FY 2018 Actual | FY 2019 Actual | FY 2020 Actual | FY 2021 Target |
|--|----------------|----------------|----------------|-------------------------|----------------|
| Percent of families with one or more completed referrals through Help Me Grow within three months of referral | Up is Better | New in 2019 | 40.7% | 59.8% | 70% |
| Percent of students in the School Health Services program with asthma with an asthma action plan on file | Up is Better | New in 2019 | 27.9% | 25.1% | 40% |
| Percent of kindergarten-enrolled children with up-to-date immunizations | Up is Better | New in 2020 | New in 2020 | 79.5% | 80% |
| Percentage increase in preventive care visits among health centers supported by Primary Care Office grants | Up is Better | New in 2020 | New in 2020 | 5.1% | 5% |
| Percent of Youth Advisory Council participants who report an increase in knowledge and skills gained from participation | Up is Better | New in 2020 | New in 2020 | 20% | 40% |
| Percent of providers reporting immunization data electronically into the immunization registry (DOCIS) | Up is Better | New in 2020 | New in 2020 | 45.3% | 40% |
| Percent of sampled elementary aged students participating in School-Based Markets reporting food security | Up is Better | New in 2019 | 68.8% | 45.4% | 70% |
| Percent of students referred by the SBOHP that completed at least one visit with a dental home provider | Up is Better | New in 2020 | New in 2020 | 7.1% | 50% |
| Percent of WIC FMNP Benefits Redeemed | Up is Better | New in 2020 | New in 2020 | Waiting on Data | 47% |
| Percent of Senior FMNP Benefits Redeemed | Up is Better | New in 2020 | New in 2020 | Waiting on Data | 47% |
| 5 - HIV/AIDS, Hepatitis, STD and TB Administration (HAHSTA) Reduce HIV, STD, TB and hepatitis-related morbidity and mortality and ensure healthy outcomes for persons living with those diseases. Administer federal and local funding, provide grants to service providers, monitor and evaluate programs, ensure quality services, and track the cases and status of the epidemics in the District. (16 Measures) | | | | | |
| For patients with newly diagnosed TB disease for whom 12 months or less of treatment is indicated, the proportion who complete treatment within 12 months | Up is Better | 100% | 100% | 96% | 90% |
| Number of individuals prescribed Pre-Exposure Prophylaxis (PrEP) | Up is Better | 3414 | 1690 | 341 | 3000 |
| Percent of Ryan White clients living in the District that are prescribed Anti-Retroviral Therapy | Up is Better | 86.6% | 93.1% | 94.1% | 90% |
| Percent of diagnosed HIV positive individuals retained in care that are virally suppressed | Up is Better | 79.7% | 87.5% | 88.7% | 85% |
| Percentage of individuals diagnosed with HIV confirmed to be out-of-care that are re-engaged within 90 days of successful case contact | Up is Better | 14.1% | 11.9% | 16.7% | 10% |
| Percent of DOH-supported HIV tests conducted with focus populations | Up is Better | 49.1% | 69.5% | 53.7% | 15% |
| Percent of clients with a positive Hepatitis C test enrolling in treatment | Up is Better | 30.4% | 31.2% | No Applicable Incidents | 40% |
| Percent of new HIV cases linked to care within 3 months of diagnosis | Up is Better | 85.6% | 88.1% | 95.6% | 90% |
| Number of Naloxone kits distributed | Up is Better | New in 2019 | 41,258 | 31,266 | 30,000 |
| Percent of people experiencing overdoses who were also linked to substance use treatment | Up is Better | New in 2019 | 27.6% | 4.5% | 45% |
| Proportion of gonorrhea cases with appropriate treatment confirmed among clients seen at the Health and Wellness Center | Up is Better | New in 2019 | 96.9% | 97.6% | 90% |

| Measure | Directionality | FY 2018 Actual | FY 2019 Actual | FY 2020 Actual | FY 2021 Target |
|---|----------------|----------------|----------------|-------------------------|----------------|
| Percentage of individuals prescribed PrEP at the DC Health & Wellness Center who are members of the demographic groups disproportionately impacted by HIV (e.g., Black Women, men who have sex with men, Transgender Women of Color) | Up is Better | New in 2019 | 96.3% | 97.1% | 65% |
| Percent of AIDS Drug Assistance Program (ADAP) beneficiaries who are currently virally suppressed | Up is Better | New in 2019 | 84.8% | 89.6% | 85% |
| Percent of successful opioid overdose reversals | Up is Better | New in 2021 | New in 2021 | New in 2021 | New in 2021 |
| Percentage of new HIV cases linked to care within 30 days of diagnosis | Up is Better | New in 2021 | New in 2021 | New in 2021 | New in 2021 |
| Percentage of new HIV cases achieving viral suppression within 90 days of diagnosis | Up is Better | New in 2021 | New in 2021 | New in 2021 | New in 2021 |
| 6 - Health Emergency Preparedness and Response Administration (HEPRA) Provide regulatory oversight of emergency medical services (EMS) and seek to ensure that DOH, its partners and the community are prepared for, can respond to, and recover from public health and health care system events and emergencies. (13 Measures) | | | | | |
| Percent of Management Supervisory Service (MSS), Excepted Service (ES), and Legal Services staff with the essential or emergency designation who complete the independent study portion of the Management ICS Training Series as outlined in DOH Standard Operating Procedure 1380 | Up is Better | 10.6% | 36.6% | 35% | 60% |
| Percent of HEPRA personnel completing the prescribed ICS Training Series, including POD training and participation in at least one exercise, special event or real incident | Up is Better | New in 2019 | 40.7% | 37.5% | 100% |
| Percent of Open PODs that can open for set up within 2 hours of notification to activate | Up is Better | New in 2019 | 100% | 100% | 100% |
| Percent of Closed PODs that can open for set up within two hours of notification to activate | Up is Better | New in 2019 | 75% | 27.2% | 100% |
| Percent of EMS agency inspections with passing determinations | Up is Better | New in 2019 | 95.2% | 93.3% | 75% |
| Percent of EMS Emergency Response vehicles with an initial passing inspection | Up is Better | New in 2019 | 92.3% | 92.5% | 85% |
| Percent of HECC IMT leadership staff (ie, the six ICS/IM lead roles) reporting for immediate duty within 60 minutes to an unannounced staff assembly for a real incident or drill | Up is Better | New in 2019 | 91.8% | No Applicable Incidents | 100% |
| Percent of District hospitals, skilled nursing facilities, and clinics that participate in at least two (2) HMC sponsored trainings and workshops annually | Up is Better | New in 2019 | 15.6% | 82.2% | 50% |
| Percent of District hospitals that reported requested Essential Elements of Information (EEI) to the HMC within the timeframe as stated in the HMC Response Plan | Up is Better | New in 2019 | 43.9% | 82.5% | 50% |
| Percent of closed POD partners meeting all program requirements | Up is Better | New in 2020 | New in 2020 | 36.6% | 100% |
| Percent of Medical Reserve Corps (MRC) volunteers that acknowledge a notification to activate/drill message within 2 hours | Up is Better | 100% | 100% | 39.8% | 75% |
| Percent of Health Alert Network (HAN) alert recipients who acknowledge receipt after the first alert attempt | Up is Better | New in 2020 | New in 2020 | 56.4% | 90% |
| Percent of District hospitals, skilled nursing facilities and clinics that complete the HMC Membership requirements as outlined in the HMC Preparedness Plan | Up is Better | New in 2021 | New in 2021 | New in 2021 | New in 2021 |

| Measure | Directionality | FY 2018 Actual | FY 2019 Actual | FY 2020 Actual | FY 2021 Target |
|--|----------------|----------------|-------------------------|----------------|----------------|
| 7 - Create and maintain a highly efficient, transparent, and responsive District government. (8 Measures) | | | | | |
| Percent of MSS employees who complete the required MSS training curriculum | Up is Better | 36.3% | 80.3% | 91.1% | 80% |
| Percent of lapsed dollar amounts on federal awards | Down is Better | 19.1% | 9.2% | 11% | 3% |
| Percent of eligible employee reviews completed on time | Up is Better | 96.5% | 100% | 100% | 100% |
| Percent of required attendees completing trainings mandated by EOM, DCHR, or the DOH Director | Up is Better | New in 2019 | No Applicable Incidents | 100% | 70% |
| Percent of new subgrants with approved risk-based monitoring plans within 30 days of award | Up is Better | New in 2019 | 49.5% | 60.3% | 75% |
| Percent of completed interim subgrant budget periods with performance ratings completed and submitted within 45 days | Up is Better | New in 2019 | 71.5% | 62.1% | 60% |
| Average days to hire new employees | Down is Better | New in 2019 | 56 | 64 | 90 |
| Percent of targeted visits completed by monitors per the most recent version of the risk-based monitoring plan | Up is Better | New in 2019 | 72.2% | 11.2% | 60% |

Operations

| Operations Header | Operations Title | Operations Description | Type of Operations |
|--|---|---|--------------------|
| 1 - Health Regulation and Licensing Administration (HRLA). Protect the health of those who reside and do business in the District of Columbia by fostering excellence in health professional practice and building quality and safety in health systems and facilities through an effective regulatory framework. (11 Activities) | | | |
| FOOD, DRUG, RADIATION & COMMUNITY HYGIENE | Food Safety and Hygiene Inspection Services Division (FSHISD) | Food Safety and Hygiene Inspection Services Division inspects food establishments (e.g. restaurants, food trucks, etc.) to prevent the spread of food-borne illness. They also inspect public pools, barbershops and beauty salons for cleanliness. | Daily Service |
| HEALTH PROFESSIONAL LICENSE ADMIN | Criminal Background Check Program | The Division is responsible for processing criminal background checks for health care professionals and prospective applicants of long term care facilities. | Daily Service |
| FOOD, DRUG, RADIATION & COMMUNITY HYGIENE | Rodent and Vector Control Division | The Rodent and Vector Control Division conducts field inspections, rodent baiting and community education activities to reduce the rat population in the District of Columbia. | Daily Service |
| FOOD, DRUG, RADIATION & COMMUNITY HYGIENE | Radiation Protection Division (RPD) | The Radiation Protection seeks to reduce and/or eliminate radiation overexposure of naturally occurring or man-made radiation in the District of Columbia. | Daily Service |

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|---|---|---|--------------------|
| HEALTH CARE FACILITIES REGULATION | Health Care Facilities Division | The Health Care Facilities Division inspects, monitors, and investigates: Ambulatory Surgical Centers, Certified Home Health Agencies, End-Stage Renal Disease Facilities, Hospices, Hospitals, Laboratories (Clinical Laboratory Improvement Amendments of 1988[CLIA]), Certificate of Waiver Programs (COW), Communicable Disease Laboratories, Tissue Banks, and Hospital Laboratories, Maternity Centers, Nursing Homes, Outpatient Physical Therapy or Speech Pathology Services, and Portable X-Ray Suppliers in the District of Columbia. The Division inspects these sites to determine compliance with local licensure health and safety regulations and federal standards for participation in Medicare and Medicaid programs under Titles XVIII and XIX of the Social Security Act. The Division also conducts Architectural Plans Review of health care facilities in the District of Columbia and inspects renovated projects and new construction. In addition, the Division inspects the DC Detention Facility aka (DC Jail) and the DC Youth Services Administration Detention Center – at New Beginnings Youth Development Center (located in Laurel, Maryland) and Mt. Olivet Road, NE (Washington, DC) in accordance with court mandates. | Daily Service |
| HEALTH PROFESSIONAL LICENSE ADMIN | Health Professional Licensing | Receive, process, and review for compliance with District and Federal regulatory compliance license applications for over seventy different healthcare professions. | Daily Service |
| HEALTH PROFESSIONAL LICENSE ADMIN | Compliance, Quality Assurance and Investigation | The Office of Compliance, Quality Assurance and Investigation enforces the District and federal laws and regulations governing licensed health professionals (Health Professional Boards and Advisory Committees). In addition, to determine compliance with federal participation in Medicare and Medicaid programs regarding Nursing Homes and Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/ID), the Office also conducts investigations, as necessary. | Daily Service |
| FOOD, DRUG, RADIATION & COMMUNITY HYGIENE | Animal Services Program (ASP) | The Animal Services Program (ASP) is responsible for the prevention and spread of diseases transmitted by animals to people, follow-up on disease investigations, dog licensing, regulation and enforcement, field inspection and animal sheltering services in the District of Columbia. In addition, the ASP responds to any animal related complaint, and is responsible for zoonotic surveillance. | Daily Service |
| FOOD, DRUG, RADIATION & COMMUNITY HYGIENE | Pharmaceutical Control Division (PCD) | The Pharmaceutical Control Division (PCD) licenses, regulates and inspects community and hospital pharmacies and distributor manufacturers. The PCD also licenses pharmaceutical detailers (e.g., pharmaceutical representatives) as well as registers, regulates and inspects controlled substance facilities in the District of Columbia. | Daily Service |
| HEALTH CARE FACILITIES REGULATION | Intermediate Care Facilities Division (ICFD) | The Intermediate Care Facilities Division (ICFD) seeks to ensure applicable agencies substantially comply with District and/or Federal regulatory requirements for licensure and/or federal certification. ICFD has the regulatory oversight responsibility for the following seven (7) different programs: 1) Intermediate Care Facilities for Individuals with Intellectual Disabilities; 2) Group Homes for Individuals with Intellectual Disabilities; 3) Child Placing Agencies; 4) Home Care Agencies; 5) Assisted Living Residence; 6) Community Residence Facilities; and 7) Nurse Staffing Agencies. The oversight of these facilities is conducted at least annually and when necessary to ensure the health and safety of residents. | Daily Service |
| MEDICAL MARIJUANA | Medical Marijuana Program (MMP) | The Division of Medical Marijuana and Integrative Therapy (MMIT) licenses and regulates medical marijuana dispensaries and cultivation centers. The MMIT also approves patients and caregivers who apply to participate in the medical marijuana program. The Division also registers healthcare practitioners who elect to participate as recommenders for patients in need of medical marijuana as a treatment modality. | Daily Service |

| Operations Header | Operations Title | Operations Description | Type of Operations |
|--|--|---|--------------------|
| 2 - Office of Health Equity (OHE). Promote Health Equity. Collaborate with other government agencies and community partners to identify and address the social determinants of health which are the key drivers of inequities in health outcomes. (3 Activities) | | | |
| HEALTH EQUITY PRACTICE AND PROGRAM IMPLEMENTATION | Multi Sector Collaboration | The Office of Health Equity (OHE) provides informed, data driven and evidence based leadership in convening and sustaining effective multi-sector collaborative partnerships essential to promote and achieve health equity. OHE uses a "health in all policies" (HiAP) approach to improving community health. OHE serves as a liaison and technical advisor to all DOH Administrations regarding health equity, as well as external DC government agencies and private partners. | Daily Service |
| HEALTH EQUITY PRACTICE AND PROGRAM IMPLEMENTATION | Community Based Participatory Research & Policy Evaluation | OHE applies data driven and evidence based research methods, tools and practices, including Geographic Information Systems (GIS) and other innovative methodologies, to measure social determinant and population health outcomes. This includes current and projected opportunities for health, disparate outcomes and inequities by socio-economic and demographic subpopulation and geographic location. This core function includes support to design, development and implementation of Health Equity Programs and their evaluation, including community based participatory research, and publication of reports that inform the policy making process as well as building the evidence base. | Daily Service |
| HEALTH EQUITY PRACTICE AND PROGRAM IMPLEMENTATION | Health Equity Practice & Program Implementation | Development and delivery of selected programs and initiatives with demonstrable strategic health equity nexus and operational potential, so as to contribute to, and inform, the essential paradigm shift in policy and practice to improve population health and promote more equitable opportunities for health, especially amongst vulnerable populations. | Daily Service |
| 3 - Center for Policy Planning and Evaluation (CPPE). Develop an integrated public health information system to support health policy decision, state health planning activities, performance analysis and direction setting for department programs. (3 Activities) | | | |
| STATE HEALTH PLANNING AND DEVELOPMENT | Certificate of Need (CON) Program | CPPE works with healthcare providers to administer the Certificate of Need program to ensure that the healthcare services and facilities established in the District are of high quality and meet the needs of residents. | Daily Service |
| STATE CENTER HEALTH STATISTICS | Vital Records | Vital Records is responsible for collecting, preserving and administering the District's system of birth, death and domestic partnership records. | Daily Service |
| STATE CENTER HEALTH STATISTICS | Behavioral Risk Factor Surveillance System (BRFSS) | CPPE/BRFSS conducts an estimated 333 health surveys monthly to District residents aged 18 years of age and older in all eight wards of the city. | Daily Service |
| 4 - Community Health Administration (CHA). Provide programs and services that promote coordination among the health care systems in the city and enhance access to effective prevention, primary and specialty medical care through collaborations with public and private organizations. (28 Activities) | | | |
| HEALTH CARE ACCESS | Health Professional Loan Repayment Program (HPLRP) | This program aims to recruit and retain health professionals in the District have underserved areas. The HPLRP, funded with both local and Federal dollars, provides loan repayment awards to eligible primary medical, dental, and mental health, health professionals in exchange for two to four years of service at approved sites. | Daily Service |
| HEALTH CARE ACCESS | School-Based Oral Health Program | This program aids DC Public and Public Charter students in maintaining educational readiness by providing preventive oral health services in schools and linkage to dental homes. | Daily Service |
| HEALTH CARE ACCESS | Primary Care Office (PCO) Grant Programs | These programs provide funding to increase access to equitable, comprehensive, quality health care services provided through a medical or dental home. | Daily Service |

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|---------------------------------------|--|---|--------------------|
| HEALTH CARE ACCESS | Immunization Program | This program seeks to reduce the spread of vaccine preventable diseases among residents, visitors, and those working or doing business in the District. | Daily Service |
| FAMILY HEALTH BUREAU | Evidence-Based Home Visiting Program | This program is designed to promote maternal, infant and early childhood health as well as the development of strong parent-child relationships. The program's key outcomes include improved maternal and child health; prevention of child injuries, child abuse or maltreatment; improvement in school readiness and achievement; reduction in crime or domestic violence; and improvements in family economic self-sufficiency. | Daily Service |
| FAMILY HEALTH BUREAU | Help Me Grow (HMG) | HMG builds collaboration across sectors, including child health care, early care and education, and family support. Through comprehensive physician and community outreach and centralized information and referral centers, families are linked with needed programs and services. | Daily Service |
| FAMILY HEALTH BUREAU | Newborn Screening Program | This program provides a comprehensive, coordinated system for universal newborn hearing screening and intervention. The program works to ensure all newborns are screened for hearing loss prior to hospital discharge and infants needing additional evaluation are linked with specialized services and a medical home. | Daily Service |
| FAMILY HEALTH BUREAU | Sexual Violence Prevention Program | Implement and evaluate sexual violence prevention programs, practices, and policies within the District of Columbia. This includes increasing the use of partnerships to implement relationships/community-level strategies and improve coordination of sexual violence prevention efforts. | Daily Service |
| FAMILY HEALTH BUREAU | School Health Programs | These programs consist of both school health services and the School Based Health Centers (SBHC). The School Health Services Program provides comprehensive school health services in District of Columbia public and public charter schools. Located within the school building, SBHCs are designed to bring the medical provider's office to the school. Each SBHC is designed to complement and enhance the health care system in the District by collaborating with each student's medical home/primary care provider or serving as the student's medical home/primary care provider. | Daily Service |
| FAMILY HEALTH BUREAU | Perinatal Health Program | This program seeks to improve women's health, promote clinical quality and patient safety, and achieve collective impact. | Daily Service |
| FAMILY HEALTH BUREAU | Adolescent Health Education and Training Program | This program focuses on building the capacity of youth-serving organizations, District of Columbia Public Schools, and District of Columbia Public Charter Schools through training and technical assistance services on adolescent health topics. | Daily Service |
| FAMILY HEALTH BUREAU | Early Childhood Place-Based Initiative | This program partners with community organizations to implement place-based strategies to improve early childhood health and education outcomes. | Daily Service |
| FAMILY HEALTH BUREAU | Teen Pregnancy Prevention (TPP) | This program is designed to prevent teen pregnancy and improve adolescent health outcomes, as well as to achieve the purposes of the Temporary Assistance for Needy Families program. Grantees implement evidence-based or evidence-informed teen pregnancy prevention initiatives. | Daily Service |
| FAMILY HEALTH BUREAU | Youth Advisory Council | Program promotes positive youth development, working with young leaders to enhance critical thinking skills and apply skills to planning and implementing projects to improve their community. | Daily Service |
| CANCER AND CHRONIC DISEASE PREVENTION | Cancer Programs Division | The Cancer Programs Division encompasses three programs (Project WISH, Comprehensive Cancer Control, and Colorectal Screening) engaged in reducing the District's cancer burden. | Daily Service |

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|---------------------------------------|--|---|--------------------|
| CANCER AND CHRONIC DISEASE PREVENTION | DC Cancer Registry (DCCR) | DCCR is a population-based registry that maintains data on all cancer patients diagnosed and/or treated within the District. All cancer cases are required by DC Law to be reported to DCCR within six months of first contact with a cancer patient. | Daily Service |
| NUTRITION AND PHYSICAL FITNESS | Home Delivered Meals | This program involves the administration of a home delivered meals program to homebound residents of all ages living with a chronic disease. Services include: meals tailored to meet dietary and cultural needs and medical nutrition therapy and referrals. | Daily Service |
| NUTRITION AND PHYSICAL FITNESS | Pop-Up Markets in Elementary Schools | Program administers pop-up food markets in all elementary schools in Wards 7 and 8. Families participate in choice pantry style market, food demonstrations and nutrition education and are eligible for 23 pounds of food per student enrolled in the participating school. Program addresses food access, food literacy and community engagement. | Daily Service |
| NUTRITION AND PHYSICAL FITNESS | Supplemental Nutrition Assistance Program, Education and Obesity Grant (SNAP-Ed) | Program provides health and wellness education; policy, systems, and environmental change strategies; and SNAP referrals to eligible District residents. Eligibility for program services includes SNAP certification and participating in activities where at least 50 percent of the audience is SNAP eligible. | Daily Service |
| PERINATAL & INFANT HEALTH | The Safe Sleep Program | This program provides safe sleep education for parents/caregivers, child serving community partners, and health providers. The program distributes portable cribs to families in need of a safe sleep environment for their newborn infant. | Daily Service |
| NUTRITION AND PHYSICAL FITNESS | Produce Plus Program | Program increases resident access to affordable, nutritious, locally sourced produce. The program offers vouchers to eligible low-income residents. Vouchers can be used to purchase fresh produce at any of the authorized farmers' markets between June and October. | Daily Service |
| CANCER AND CHRONIC DISEASE PREVENTION | Chronic Disease Division | The Chronic Disease Division addresses population level chronic disease prevention and management through evidence-based behavioral, clinical, policy and environmental interventions, as well as through multi-sector collaboration. | Daily Service |
| CANCER AND CHRONIC DISEASE PREVENTION | Tobacco Control Program | This program aims to reduce disease, disability and death due to tobacco use by: educating and informing stakeholders and decision-makers about evidence-based policies and programs to prevent initiation of tobacco use; working with health systems to implement evidence-based practices to support tobacco cessation in the District of Columbia; implementing evidence-based, mass-reach health communication interventions to increase cessation and/or promote the Quitline; reducing exposure to secondhand smoke; and identifying and eliminating tobacco-related disparities among specific populations. | Daily Service |
| NUTRITION AND PHYSICAL FITNESS | Special Supplemental Nutrition Program for Women, Infants and Children (WIC) | Program provides no-cost nutrition assessments, breastfeeding support and healthful foods to promote healthy pregnancies and growth in children during the first five years of life. | Daily Service |
| NUTRITION AND PHYSICAL FITNESS | Farmers' Market Nutrition Program (FMNP) | This program provides oversight for farmers who participate in healthful food access programs that assist income stressed District residents purchase locally sourced fruits and vegetables. Residents receive health and wellness education along with the food benefit. | Daily Service |
| CANCER AND CHRONIC DISEASE PREVENTION | Preventive Health and Health Services Block Grant (PHHSBG) | The PHHSBG aligns with DC Healthy People 2020 to identify current and emerging public health needs and to support innovative programs and policies within the local context. | Daily Service |

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|--|---|--|--------------------|
| NUTRITION AND PHYSICAL FITNESS | Senior Farmers' Market Nutrition Program (SFMNP) | Healthful food access programs that assists income stressed seniors in purchasing locally sourced fruits and vegetables. Seniors aged 60 years and older receive health and wellness education along with the food benefit, June through October. | Daily Service |
| NUTRITION AND PHYSICAL FITNESS | Commodity Supplemental Food Program | This program provides a monthly food package, nutrition and wellness education, and opportunities for social engagement to seniors 60 years and older living in the District. | Daily Service |
| <p>5 - HIV/AIDS, Hepatitis, STD and TB Administration (HAHSTA) Reduce HIV, STD, TB and hepatitis-related morbidity and mortality and ensure healthy outcomes for persons living with those diseases. Administer federal and local funding, provide grants to service providers, monitor and evaluate programs, ensure quality services, and track the cases and status of the epidemics in the District. (5 Activities)</p> | | | |
| DRUG ASSISTANCE PROGRAM (ADAP) | AIDS Drug Assistance | The AIDS Drug Assistance Program (ADAP) provides medication for the treatment of HIV disease. Through screening of clients to determine eligibility, enrollment and medication management the District of Columbia will continue providing this critical service. | Daily Service |
| PREVENTION AND INTERVENTION SERVICES | Condom Distribution | The District of Columbia Condom Program distributes both male and female condoms to District residents. The program utilizes an online platform to distribute condoms to individuals and District providers of health and support services. | Daily Service |
| PREVENTION AND INTERVENTION SERVICES | DC Needle Exchange Program (DC NEX) | The District of Columbia Needle Exchange Program (DC NEX) supports harm reduction through the distribution of clean needles in exchange for used ones. The program partners with 3 District community based providers to implement these interventions and link clients to primary medical services. | Daily Service |
| PREVENTION AND INTERVENTION SERVICES | Pre-Exposure Prophylaxis (PrEP) | HAHSTA makes PrEP widely available in the District, and does targeted outreach to target populations to receive screening, education, and referral to PrEP enrollment. | Daily Service |
| PREVENTION AND INTERVENTION SERVICES | Narcan Distribution | Naloxone is an opioid antagonist that was developed in the 1960s. It bonds to the opioid receptors in the brain without activating them, cutting off the effects of opiate drugs. Commonly known by the trade name Narcan, naloxone is carried by first responders, EMTs, and paramedics. It can be administered, in different formulations, intramuscularly, intravenously, or subcutaneously with a syringe or via an intranasal atomizer. DOH provides funding to community partners to provide stipends to peers for outreach, education and the distribution of kits. | Daily Service |
| <p>6 - Health Emergency Preparedness and Response Administration (HEPRA) Provide regulatory oversight of emergency medical services (EMS) and seek to ensure that DOH, its partners and the community are prepared for, can respond to, and recover from public health and health care system events and emergencies. (7 Activities)</p> | | | |
| PUBLIC HEALTH EMERGENCY PREPAREDNESS | Medical Materiel Management and Distribution | HEPRA ensures the secure distribution and integrity of the stockpile from receipt to recovery of the materiel through planning, real time inventory tracking, and partner collaboration. | Daily Service |
| PUBLIC HEALTH EMERGENCY PREPAREDNESS | Incident Command System (ICS) and National Incident Management System (NIMS) Training | HEPRA ensures that all DOH staff with a designated role within the Health Emergency Coordination Center (HECC) and/or the Emergency Support Function (ESF) #8 response are prepared for and can respond to events and emergencies utilizing the concepts of the NIMS of FEMA Incident Command System (ICS) trainings and participation in planned exercises, as directed by Homeland Security Presidential Directive #5. | Daily Service |
| PUBLIC HEALTH EMERGENCY PREPAREDNESS | Special Events Permitting | As a member of the Mayor's Special Event Task Group, HEPRA provides customer assistance to Event Organizers by reviewing/approving the Health, Medical and Safety Plan component of their DCRA Special Event Permit Application. Through this coordination, HEPRA ensures each Event Organizer has obtained the required health and medical support required for their size and type of event, in accordance with the District EMS Act of 2008; DCMR, Title 29, Chapter 5 (Emergency Medical Services) and DOH policies. | Daily Service |

| Operations Header | Operations Title | Operations Description | Type of Operations |
|--------------------------------------|---|---|--------------------|
| PUBLIC HEALTH EMERGENCY PREPAREDNESS | Healthcare Coalition Development | HEPRA co-leads the DC Health and Medical Coalition (HMC) by providing coordination, oversight, policy guidance and leadership through meeting participation, planning support and communications to promote, attain and sustain Health and medical emergency preparedness services during routine and emergency operations. HEPRA conducts exercises, training and drills, to test and improve the healthcare system's resiliency. HEPRA also compiles and distributes situation reports (SITREPs), and radio drills to ensure timely and adequate communication and response, and monitors healthcare facility status. | Daily Service |
| EMERG. MED. SVS. REGULATION | Training and Certification of EMS Providers and EMS Emergency Response Vehicles | HEPRA regulates training and certification for EMS Providers (paramedics and EMTs) emergency medical service (EMS) and certifies/inspects EMS and emergency response vehicles (including ambulances, medical equipment aboard air ambulances and FEMS' rescue boats) operating in the District to ensure optimal healthcare response in accordance with the District EMS Act of 2008 and DCMR, Title 29, Chapter 5 (Emergency Medical Services). | Daily Service |
| PUBLIC HEALTH EMERGENCY PREPAREDNESS | Medical Reserve Corps (MRC) | The DC Medical Reserve Corps (MRC) is a team of medical and non-medical volunteers who are called upon to assist the Department of Health, Health Emergency Preparedness and Response Administration (HEPRA) in preparing for and responding to special events and public health and all-hazard emergencies. | Daily Service |
| PUBLIC HEALTH EMERGENCY PREPAREDNESS | Emergency Operations Coordination | HEPRA directs and coordinates the implementation of other public health preparedness capabilities critical to public health emergency preparedness and response; and make informed, timely and effective decisions that direct resources and personnel to address ongoing and evolving health needs arising from emergencies. | Daily Service |

Workload Measures

| Measure | FY 2018 Actual | FY 2019 Actual | FY 2020 Actual |
|--|----------------|----------------|----------------|
| 1 - Animal Services Program (ASP) (2 Measures) | | | |
| Number of calls responded to by Animal Control Officers | 15,511 | 17,725 | 18,145 |
| Number of dog licenses processed | 3824 | 3948 | 1026 |
| 1 - Compliance, Quality Assurance and Investigation (2 Measures) | | | |
| Number of Intermediate Care and Nursing Home-related incidents received | 11,798 | 12,758 | 273 |
| Number of investigations performed | 1621 | 1725 | 1310 |
| 1 - Criminal Background Check Program (2 Measures) | | | |
| Number of Criminal Background Checks processed for health professionals | 9299 | 11,019 | 13,240 |
| Number of Criminal Background Checks processed for non-health professionals | 8010 | 7659 | 4956 |
| 1 - Food Safety and Hygiene Inspection Services Division (FSHISD) (1 Measure) | | | |
| Number of new and routine food establishments inspected | 4839 | 3076 | 5016 |
| 1 - Health Care Facilities Division (1 Measure) | | | |
| Number of inspections completed by the Health Care Facilities Division | 159 | 145 | 203 |
| 1 - Health Professional Licensing (2 Measures) | | | |

| Measure | FY 2018 Actual | FY 2019 Actual | FY 2020 Actual |
|--|----------------------|----------------------|----------------------|
| Number of new health professional licenses issued | 11,590 | 10,579 | 10,762 |
| Number of walk-in customers to Processing Center | 38,924 | 33,514 | 10,898 |
| 1 - Intermediate Care Facilities Division (ICFD) (1 Measure) | | | |
| Number of inspections completed by the Intermediate Care Facilities Division | 268 | 345 | 244 |
| 1 - Pharmaceutical Control Division (PCD) (2 Measures) | | | |
| Number of pharmacies inspected | 166 | 171 | 163 |
| Number of Registered Controlled Substance Facilities inspected | 234 | 248 | 187 |
| 3 - Behavioral Risk Factor Surveillance System (BRFSS) (1 Measure) | | | |
| Number of BRFSS surveys administered | 123 | 600 | 1436 |
| 3 - Certificate of Need (CON) Program (1 Measure) | | | |
| Number of Certificate of Need application decisions | 27 | 33 | 18 |
| 3 - Vital Records (1 Measure) | | | |
| Number of walk-in customers to the Vital Records Office | 38,193 | 41,016 | 20,608 |
| 4 - Adolescent Health Education and Training Program (1 Measure) | | | |
| Number of reproductive health plans developed | New in 2019 | 1298 | 46 |
| 4 - Cancer Programs Division (5 Measures) | | | |
| Number of breast screening and diagnostic procedures performed | 900 | 940 | 963 |
| Number of cervical screening and diagnostic procedures performed | 35 | 8 | 1 |
| Number of women provided with navigation services for breast cancer screening, diagnosis and treatment | New in 2020 | New in 2020 | 61 |
| Number of people provided with navigation services for colorectal cancer screening, diagnosis and treatment | New in 2020 | New in 2020 | Waiting on Data |
| Number of persons identified as cancer survivors and care givers who have attended a disease management course | New in 2020 | New in 2020 | 28 |
| 4 - Chronic Disease Division (3 Measures) | | | |
| Number of healthcare systems reporting clinical quality measures related to high blood pressure and diabetes | 10 | 9 | Waiting on Data |
| Number of residents enrolled in chronic disease self-management trainings | 5500 | 5665 | Waiting on Data |
| Number of residents at risk for diabetes participating in the Diabetes Prevention Program | New in 2019 | 295 | Waiting on Data |
| 4 - Evidence-Based Home Visiting Program (2 Measures) | | | |
| Number of families participating in evidence-based home visiting programs | 259 | 259 | 309 |
| Number of resource referrals made through the evidence-based Home Visiting Program | 466 | 491 | 539 |
| 4 - Farmers' Market Nutrition Program (FMNP) (3 Measures) | | | |
| Number of District residents receiving meals from the Home Delivered Meals program | New in 2019 | 350 | 407 |

| Measure | FY 2018 Actual | FY 2019 Actual | FY 2020 Actual |
|---|----------------|----------------|-----------------|
| Number of District seniors receiving supplemental groceries from and Commodities and Supplemental Food Program (CSFP) | New in 2020 | New in 2020 | 5407 |
| Number of District residents receiving supplemental groceries from School-Based Food Markets | New in 2020 | New in 2020 | 7566 |
| 4 - Health Professional Loan Repayment Program (HPLRP) (1 Measure) | | | |
| Number of certified HPLRP sites | 33 | 30 | Waiting on Data |
| 4 - Help Me Grow (HMG) (2 Measures) | | | |
| Number of completed resource referrals provided through the Help Me Grow Program | 246 | 156 | 183 |
| Number of families/providers calls/referrals to Help Me Grow | New in 2020 | New in 2020 | 192 |
| 4 - Home Delivered Meals (1 Measure) | | | |
| Number of District residents receiving farmer's market incentive benefits from DC Health-administered programs | 21,188 | 21,533 | 22,796 |
| 4 - Immunization Program (1 Measure) | | | |
| Number of site visits to provide technical assistance to Vaccines for Children (VFC) providers | New in 2020 | New in 2020 | 46 |
| 4 - Newborn Screening Program (1 Measure) | | | |
| Number of infants receiving a hearing screening in their first month of life | 13,061 | 13,042 | 12,510 |
| 4 - Perinatal Health Program (1 Measure) | | | |
| Number of participants receiving services though DC Healthy Start | 1851 | 1561 | 107 |
| 4 - Primary Care Office (PCO) Grant Programs (1 Measure) | | | |
| Number of primary care providers participating in workforce development activities | New in 2020 | New in 2020 | Waiting on Data |
| 4 - Produce Plus Program (2 Measures) | | | |
| Number of Farmers Markets vendors accepting Produce Plus benefits | 69 | 54 | 53 |
| Number of residents redeeming Produce Plus and Produce Prescription at Farmers' Market checks | 9109 | 8028 | 4000 |
| 4 - School Health Programs (2 Measures) | | | |
| Number of students enrolled in a school based health center | 2742 | 2128 | 2095 |
| Number of students served by the School Health Services Program | New in 2019 | 79,709 | 81,422 |
| 4 - School-Based Oral Health Program (1 Measure) | | | |
| Number of children <18 years of age who receive a dental examination screening through the School-Based Preventative Oral Health Program (SBPOHP) | 3392 | 2515 | Waiting on Data |
| 4 - Special Supplemental Nutrition Program for Women, Infants and Children (WIC) (1 Measure) | | | |
| Number of Supplemental Nutrition Program for Women, Infants, Children (WIC) participants | 20,542 | 11,802 | 21,764 |
| 4 - Supplemental Nutrition Assistance Program, Education and Obesity Grant (SNAP-Ed) (1 Measure) | | | |

| Measure | FY 2018 Actual | FY 2019 Actual | FY 2020 Actual |
|---|----------------|----------------|----------------|
| Total number of nutrition education and wellness contacts made to low income District residents participating in DC Health Healthful Food Access programs | 32,861 | 35,485 | 16,500 |
| 4 - The Safe Sleep Program (2 Measures) | | | |
| Number of parents/caregivers educated on infant safe sleep practices | 528 | 1560 | 1039 |
| Number of portable cribs distributed | 508 | 900 | 947 |
| 4 - Tobacco Control Program (1 Measure) | | | |
| Number of calls to the DC Tobacco Quitline | 3197 | 3181 | 3121 |
| 5 - AIDS Drug Assistance (3 Measures) | | | |
| Number of DC ADAP clients served | 797 | 827 | 362 |
| Number of clients with DC ADAP and Alliance receiving pharmaceutical services through the pharmaceutical procurement and distribution program | 567 | 517 | 413 |
| Number of publicly-supported HIV medication prescriptions refilled | 9177 | 9060 | 2024 |
| 5 - Condom Distribution (3 Measures) | | | |
| Number of clients with viral load served through treatment adherence activities | 1895 | 762 | 581 |
| Number of condoms (female and male) distributed by DC Health Condom Program | 4,115,000 | 4,551,300 | 4,043,000 |
| Number of youth (15-19 years) screened for CT and GC through HAHSTA-supported programs | 2288 | 1840 | 1038 |
| 5 - DC Needle Exchange Program (DC NEX) (1 Measure) | | | |
| Number of needles off the streets through DC NEX Program | 410,212 | 470,040 | 522,653 |
| 6 - Healthcare Coalition Development (5 Measures) | | | |
| Number of Health Action Network (HAN) Alerts generated | 36 | 18 | 723 |
| Number of Radio Drills conducted | 49 | 15 | 8 |
| Number of Health and Medical Coalition (HMC) Meetings held | 14 | 35 | 33 |
| Number of HMC facilities participating in exercises and special events involving HMC Coordination | New in 2020 | New in 2020 | 115 |
| Number of HMC-sponsored trainings and workshops | New in 2020 | New in 2020 | 10 |
| 6 - Medical Materiel Management and Distribution (2 Measures) | | | |
| Number of emergency preparedness-related trainings and exercises coordinated by HEPRA | New in 2020 | New in 2020 | 13 |
| Number of DC Health personnel trained for POD operations | New in 2020 | New in 2020 | 264 |
| 6 - Special Events Permitting (5 Measures) | | | |
| Number of special event health, medical and safety plans for DCRA permit applications requiring DC Health review | 213 | 159 | 40 |
| Number of HECC Activations | 6 | 3 | 2 |
| Number of MRC activations | New in 2020 | New in 2020 | 3 |

| Measure | FY 2018 Actual | FY 2019 Actual | FY 2020 Actual |
|---|----------------|----------------|----------------|
| Total number of MRC volunteer hours | New in 2020 | New in 2020 | 35,344 |
| Number of MRC personnel activated in response to an incident or planned event | New in 2020 | New in 2020 | 723 |
| 6 - Training and Certification of EMS Providers and EMS Emergency Response Vehicles (2 Measures) | | | |
| Number of new EMT certifications by DC Health | 502 | 559 | 220 |
| Number of emergency vehicle inspections conducted | 511 | 586 | 214 |

Strategic Initiatives

| Strategic Initiative Title | Strategic Initiative Description | Proposed Completion Date |
|---|--|--------------------------|
| Chronic Disease Division (1 Strategic Initiative) | | |
| Howard Centers of Excellence | DC Health will support the establishment or expansion of five DC Health-approved centers of excellence (COEs): sickle cell disease, women's health, substance use and co-occurring disorders, trauma care and violence prevention, and oral health. The funding will be used to support both operations and infrastructure investments necessary to support and launch the COEs through FY25. Overall, this funding creates a sustainable, nationally recognized Centers for Excellence (COE) within the District of Columbia's sole HBCU – Howard University. In FY 21, DC Health will work with stakeholders to create an administrative leadership structure and strategic plan for the COEs. | 09-30-2025 |
| Food Safety and Hygiene Inspection Services Division (FSHISD) (1 Strategic Initiative) | | |
| Framework of a customer friendly application and licensing system to support the Food and Hygiene Divisions | The Health Regulation and Licensing Administration (HRLA) will develop the framework for a new IT system that will allow customers to submit and pay for applications online. Additionally the customer will receive electronic approval and/or license/certification. This will allow the Division of Food and Hygiene to quickly and efficiently communicate with customers. It will also be more convenient for customers, as they will no longer be required to submit in person or by mail. | 09-30-2021 |
| Health Equity Practice & Program Implementation (2 Strategic initiatives) | | |
| Launch Internal DC Health Dialogue on Anti-Racism | The Office of Health Equity will convene internal sessions to explore racism as a public health issue. The objective of these sessions is to align culture and practice around addressing racism to improve public health outcomes in the District. | 09-30-2021 |
| Host DC Health Equity Summit 2021 | Convene the Health Equity Summit initially planned for FY 20 and postponed due to COVID-19. The summit is tentatively titled "Equity & COVID-19: Impacts, Insights & Solutions." | 09-30-2021 |
| Health Professional Loan Repayment Program (HPLRP) (1 Strategic Initiative) | | |
| Primary Care Retention and Specialty Care Incentive | Based on the recommendations from the Mayor's Commission on Healthcare Systems and Transformation, there is a need to retain primary care and specialty workforce in Health Professional Shortage Areas (HPSA) utilizing mechanisms to enhance the current HPLRP program. This initiative will pilot methods to incentivize recruitment of specialty care physicians and retention of primary care providers. | 09-30-2021 |
| Immunization Program (1 Strategic Initiative) | | |
| New Immunization Information System | DC Health aims to launch a new District of Columbia Immunization Information System (DOCIIS). DOCIIS 2.0 will continue to be the system of record for vaccinations for anyone immunized in DC, including a potential future COVID-19 vaccine. This system should be bidirectional and allow for improved vaccine management, data quality, and disease surveillance. | 09-30-2021 |

| Strategic Initiative Title | Strategic Initiative Description | Proposed Completion Date |
|---|---|--------------------------|
| Multi Sector Collaboration (1 Strategic Initiative) | | |
| Implement Health in All Policies (HiAP) Projects and Initiatives | The Office of Health Equity will expand HiAP practice in FY 21 through three projects: (1) PEW Charitable Trust "DC Calling All Sectors Initiative (CASI)" year two activities; (2) Complete a Health Impact Assessment pilot in collaboration with the Office of Planning; (3) Expand Applied Health Equity Practice Change Collaborations . | 09-30-2021 |
| Narcan Distribution (1 Strategic Initiative) | | |
| Integrated services: polysubstance use and primary care | DC Health – HAHSTA is expanding drug user health activities through a new program to respond to concurrent polysubstance use. Funds will be distributed to select federally qualified health centers (FQHCs) to support implementation of evidence-based/informed interventions into primary care. HAHSTA will provide technical assistance and capacity building to the centers, as well as create a forum for organizations to share best practices and lessons learned. | 09-30-2021 |
| Perinatal Health Program (1 Strategic Initiative) | | |
| Perinatal Care Integration/Coordination | This project seeks to pilot mechanisms to share social determinants of health information at healthcare visits and better connect prenatal care to labor and birthing options, with a specific emphasis on Wards 7 and 8. | 09-30-2021 |
| Pre-Exposure Prophylaxis (PrEP) (1 Strategic Initiative) | | |
| Bridging access: Post-Exposure Prophylaxis (PEP) for HIV | DC Health – HAHSTA is implementing a citywide non-occupational HIV post-exposure prophylaxis program. This program will link persons with possible HIV exposure to medication in order to prevent HIV infection. The program will also serve to link individuals with continued risk to pre-exposure prophylaxis, where appropriate. Prescription and weekend/evening coverage will be coordinated through DC Health’s Health and Wellness Center. | 09-30-2021 |
| Vital Records (1 Strategic Initiative) | | |
| Public Health Accreditation Board (PHAB) - Vital Records Office Accreditation | For the past few years, PHAB has been working to develop accreditation standards and measures for Vital Records/Health Statistics (VRHS) Units in the 57 jurisdictional areas identified by the National Center for Health Statistics (NCHS) within the National Vital Statistics Collaborative Program (VSCP). This includes the 50 states, the District of Columbia, New York City, American Samoa, Guam, Northern Mariana Islands, Puerto Rico, and Virgin Islands. PHAB has partnered with the National Association for Public Health Statistics and Information Systems (NAPHSIS), CDC’s Center for State, Tribal, Local, and Territorial Support (CSTLTS), NCHS, and several states to develop the standards and measures and complete both an alpha and a beta test to ascertain their applicability in the field. On November 28, 2018, the PHAB Board of Directors approved the final standards and measures and process guide for this new accreditation program. | 09-30-2021 |