

DEPARTMENT OF HEALTHFY 2026 PERFORMANCE PLAN

MAY 27, 2025



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1 INTRODUCTION

This document is the Fiscal Year 2026 Performance Plan for the Department of Health.

This Performance Plan is the first of two agency performance documents published each year. The Performance Plan is published twice annually – preliminarily when the Mayor's budget proposal is delivered, and again at the start of the fiscal year when budget decisions have been finalized. A companion document, the Performance Accountability Report (PAR), is published annually in January following the end of the fiscal year. Each PAR assesses agency performance relative to its annual Performance Plan.

Performance Plan Structure: Performance plans are comprised of agency Objectives, Administrative Structures (such as Divisions, Administrations, and Offices), Activities, Projects and related performance measures. The following describes these plan components, and the types of performance measures agencies use to assess their performance.

Objectives: Objectives are statements of the desired benefits that are expected from the performance of an agency's mission. They describe the goals of the agency.

Administrative Structures: Administrative Structures represent the organizational units of an agency, such as Departments, Divisions, or Offices.

Activities: Activities represent the programs and services an agency provides. They reflect what an agency does on a regular basis (e.g., processing permits).

Projects: Projects are planned efforts that end once a particular outcome or goal is achieved.

Measures: Performance Measures may be associated with any plan component, or with the agency overall. Performance Measures can answer broad questions about an agency's overall performance or the performance of an organizational unit, a program or service, or the implementation of a major project. Measures can answer questions like "How much did we do?", "How well did we do it?", "How quickly did we do it?", and "Is anyone better off?" as described in the table below.

Measures are printed in the Performance Plan along with the Objective, Administrative Structure, Activity, or Project that they measure.

Measure Type	Measure Description	Example
Quantity	Quantity measures assess the volume of work an agency performs. These measures can describe the inputs (e.g., requests or cases) that an agency receives or the work that an agency completes (e.g., licenses issued or cases closed). Quantity measures often start with the phrase "Number of".	"Number of public art projects completed"
Quality	Quality measures assess how well an agency's work meets standards, specifications, resident needs, or resident expectations. These measures can directly describe the quality of decisions or products or they can assess resident feelings, like satisfaction.	"Percent of citations issued that were appealed"
Efficiency	Efficiency measures assess the resources an agency used to perform its work and the speed with which that work was performed. Efficiency measures can assess the unit cost to deliver a product or service, but typically these measures assess describe completion rates, processing times, and backlog.	"Percent of claims processed within 10 business days"

Measure Type	Measure Description	Example
Outcome	Outcome measures assess the results or impact of an agency's work. These measures describe the intended ultimate benefits associated with a program or service.	"Percent of families returning to homelessness within 6- 12 months"
Context	Context measures describe the circumstances or environment that the agency operates in. These measures are typically outside of the agency's direct control.	"Recidivism rate for 18-24 year-olds"
District-wide Indicators	District-wide indicators describe demographic, economic, and environmental trends in the District of Columbia that are relevant to the agency's work, but are not in the control of a single agency.	"Area median income"

Targets: Agencies set targets for most performance measures before the start of the fiscal year. Targets may represent goals, requirements, or national standards for a performance measure. Agencies strive to achieve targets each year, and agencies provide explanations for targets that are not met at the end of the fiscal year in the subsequent Performance Accountability Report.

Not all measures are associated with a target. Newly added measures do not require targets for the first year, as agencies determine a data-informed benchmark. Changes in some measures may not indicate better or worse performance. They may be "neutral" measures of demand or input or outside of the agency's direct control. In some cases, the relative improvement of a measure over a prior period is a more meaningful indicator than meeting or exceeding a particular numerical goal, so a target is not set.

2 DEPARTMENT OF HEALTH OVERVIEW

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.

Summary of Services: The Department of Health (DC Health) adheres to the ten essential public health services generally accepted by the United States public health community. The ten essential public health services are: 1. Monitor health status to identify and solve community health problems. 2. Diagnose and investigate health problems and health hazards in the community. 3. Inform, educate, and empower people about health issues. 4. Mobilize community partnerships and action to identify and solve health problems. 5. Develop policies and plans that support individual and community health efforts. 6. Enforce laws and regulations that protect health and ensure safety. 7. Link people to needed personal health services and assure the provision of health care when otherwise unavailable. 8. Assure competent public and personal health care workforce. 9. Evaluate effectiveness, accessibility, and quality of personal and population-based health services. 10. Research for new insights and innovative solutions to health problems.

Objectives:

- 1. Environmental Health
- 2. Health Equity
- 3. Policy Planning and Evaluation
- 4. Community Health
- 5. HIV/AIDS, Hepatitis, STD and TB
- 6. Health Systems and Preparedness
- 7. Efficient, Transparent, and Responsive Government

3 PROPOSED OBJECTIVES

3.1 ENVIRONMENTAL HEALTH

Environmental Health Administration (EHA). Protect the health of the residents of the District of Columbia, visitors and those that do business here, by targeting environmental factors through education, research and regulation.

Measure Type	Measure	Directionality	FY2023	FY2024	FY2025 Target	FY2026 Target
Outcome	Percent of confirmed foodborne illness cases by DC Health epidemiologists investigated within three (3) business days of notification to EHA	Up is Better	95%	94%	95%	95%
Outcome	Percent of food establishment complaint inspections initiated within five (5) business days of receipt	Up is Better	95.9%	94.35%	95%	95%
Outcome	Percent of foodborne disease cases with first interview attempt within 72 hours of receipt of the case report	Up is Better	100%	100%	99%	95%
Outcome	Percent of rodent activity complaints inspected or baited, and closed in the 311 system within three (3) business days of receipt	Up is Better	100%	100%	100%	95%
Outcome	Percent of samples taken from rabies suspect animals submitted for testing within 48 hours	Up is Better	97.5%	100%	100%	100%
Efficiency	Percent of Community Hygiene-related facility complaint inspections initiated within five (5) business days of receipt	Up is Better	New in 2025	New in 2025	New in 2025	95%
Efficiency	Percent of radiation complaints received initiated within (3) business days	Up is Better	New in 2025	New in 2025	New in 2025	95%
Efficiency	Percent of radiation complaints received investigated within (5) business days/summation submitted to AD within (3) business days	Up is Better	New in 2025	New in 2025	New in 2025	95%

3.2 HEALTH EQUITY

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.

No Related Measures

3.3 POLICY PLANNING AND EVALUATION

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.

Measure Type	Measure	Directionality	FY2023	FY2024	FY2025 Target	FY2026 Target
Outcome	Average wait time for vital records walk-in issuance requests (in minutes)	Down is Better	21.5 min	18.8 min	25 min	20 min
Outcome	Percent of vaccine preventable disease cases with contact tracing initiated within 24 hours of report	Up is Better	100%	100%	99%	99%
Efficiency	Percent of Certificates of Need (CONs) reviewed within the period required by District law	Up is Better	New in 2025	96.88%	New in 2025	99%

3.4 COMMUNITY HEALTH

Community Health Administration (CHA). The Community Health Administration promotes healthy behaviors, healthy environments, and access to quality health care services to improve health outcomes and reduce disparities in the leading causes of disease and death in the District.

Measure Type	Measure	Directionality	FY2023	FY2024	FY2025 Target	FY2026 Target
Outcome	Percent of Black/African American WIC enrollees breastfeeding at six months	Up is Better	16.63%	24.65%	25%	25%
Outcome	Percent of Health Professional Loan Repayment Program (HPLRP) participants contracted that meet the most recent version of priority workforce needs	Up is Better	New in 2024	80.85%	80%	85%
Outcome	Percent of Oral Health Program participants referred to a dental home	Up is Better	93.2%	97.87%	95%	98%
Outcome	Percent of WIC enrollees breastfeeding at six months	Up is Better	37.95%	46.37%	40%	45%
Outcome	Percent of WIC households that redeem their benefits	Up is Better	84.25%	87.29%	90%	90%

Measure Type	Measure	Directionality	FY2023	FY2024	FY2025 Target	FY2026 Target
Outcome	Percent of adults with diabetes with poor HbA1c control (A1C > 9%) at Million-Hearts participating facilities	Down is Better	39.7%	33.52%	32.2%	32%
Outcome	Percent of adults with high blood cholesterol in Million-Hearts participating facilities who are on statin therapy	Up is Better	83%	82.92%	82.3%	85%
Outcome	Percent of eligible children enrolled in DC Health funded evidence-based home visiting programs who receive developmental and social-emotional screenings	Up is Better	83.33%	88.61%	85%	83%
Outcome	Percent of families with one or more completed referrals through Help-Me-Grow within three months of referral	Up is Better	88.46%	90.87%	91%	91%
Outcome	Percent of infants that receive a repeat screening after failing an initial hearing screening	Up is Better	76.5%	74.89%	75%	75%
Outcome	Percent of infants who receive an initial hearing screen at birth	Up is Better	Data is pending	97.3%	95%	95%
Outcome	Percent of students in the School Health Services program with an L2/L3 asthma designation with an asthma action plan on file	Up is Better	New in 2025	New in 2025	New in 2025	50%
Outcome	Percent of women enrolled in DC Health funded evidence-based home visiting programs that are screened for depression	Up is Better	83.33%	80.43%	86%	86%
Outcome	Proportion of adults with hypertension who have achieved blood pressure control (seen at Million-Hearts-participating facilities)	Up is Better	63.4%	65.4%	70%	69.8%
Efficiency	Percent of Kindergarten-enrolled children with 2 doses of MMR vaccine	Up is Better	New in 2025	New in 2025	New in 2025	95%

Measure Type	Measure	Directionality	FY2023	FY2024	FY2025 Target	FY2026 Target
Efficiency	Percent of immunization providers reporting data electronically to the immunization registry (DOCIIS) that have query by parameter (QBP) functionality	Up is Better	New in 2025	New in 2025	New in 2025	17%

3.5 HIV/AIDS, HEPATITIS, STD AND TB

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.

Measure Type	Measure	Directionality	FY2023	FY2024	FY2025 Target	FY2026 Target
Outcome	For patients with newly diagnosed TB disease for whom 12 months or less of treatment is indicated, the Percent who complete treatment within 12 months	Up is Better	New in 2024	94.44%	90%	90%
Outcome	Percent of AIDS Drug Assistance Program (ADAP) beneficiaries who are currently virally suppressed	Up is Better	90.42%	90.58%	85%	95%
Outcome	Percent of DC Health-supported HIV tests conducted with focus populations (Black Heterosexual Women, Black Heterosexual Men, Black Men Who Have Sex with Men, Transgender Women, Intravenous Drug Users, Residents 55 years of age or older, and Youth 13-24 years old)	Up is Better	55.9%	62.72%	50%	50%
Outcome	Percent of Ryan White clients living in the District that are prescribed Anti-Retroviral Therapy	Up is Better	95.62%	97.32%	98%	98%
Outcome	Percent of confirmed new HIV cases achieving viral suppression within 90 days of diagnosis	Up is Better	New in 2024	52.43%	60%	60%

Measure Type	Measure	Directionality	FY2023	FY2024	FY2025 Target	FY2026 Target
Outcome	Percent of confirmed new HIV cases linked to care within 30 days of diagnosis	Up is Better	New in 2024	82.7%	80%	80%
Outcome	Percent of diagnosed HIV positive individuals retained in care that are virally suppressed	Up is Better	84.29%	78.67%	90%	90%
Outcome	Percent 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	20%	26.67%	15%	18%
Outcome	Percent 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	90.1%	90.38%	85%	85%
Outcome	Percent of of gonorrhea cases with appropriate treatment confirmed among clients seen at the Health and Wellness Center within 15 days of diagnosis date	Up is Better	96%	98.68%	92%	92%

3.6 HEALTH SYSTEMS AND PREPAREDNESS

The mission of the Health Systems and Preparedness Administration (HSPA) is to safeguard and enhance the health and well-being of residents, visitors, and businesses in the District of Columbia by fostering excellence in health professional practice, regulating health systems and facilities, and coordinating robust emergency preparedness, response, resiliency, and recovery efforts. Through partnerships and an effective regulatory framework, we ensure the quality, safety, and readiness of our health systems to meet both everyday healthcare needs and public health emergencies.

Measure Type	Measure	Directionality	FY2023	FY2024	FY2025 Target	FY2026 Target
Outcome	Percent of Registered Controlled Substance Facilities inspected annually	Up is Better	96.6%	96.55%	95%	95%

Measure Type	Measure	Directionality	FY2023	FY2024	FY2025 Target	FY2026 Target
Outcome	Percent of District hospitals that reported requested Essential Elements of Information (EEI) to the HMC within the timeframe requested by the DC HMC Branch or DCHA for either planned or unplanned events	Up is Better	82%	97.78%	100%	100%
Outcome	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	55.32%	43.59%	50%	50%
Outcome	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	100%	100%	100%	100%
Outcome	Percent of Management Supervisory Service (MSS), Excepted Service (ES), and Legal Services staff with the essential or emergency designation who complete ICS-100, ICS-200, ICS-700, ICS-800, and any other HSPA prescribed training, as outlined in DOH Standard Operating Procedure 1380	Up is Better	45.2%	42.5%	60%	60%
Outcome	Percent of Medical Reserve Corps (MRC) volunteers that acknowledge the alert notification drill message within 4 hours	Up is Better	New in 2024	15.5%	45%	50%
Outcome	Percent of Open Points of Distribution (PODs) that can open to public within 6 hours of notification to activate	Up is Better	New in 2024	12.5%	100%	50%
Outcome	Percent of closed points of distribution (CPOD) partners meeting all program requirements	Up is Better	63.64%	72.41%	100%	80%

Measure Type	Measure	Directionality	FY2023	FY2024	FY2025 Target	FY2026 Target
Outcome	Percent of employee and partner alert recipients who acknowledge receipt after the first alert attempt	Up is Better	No incidents	34.92%	90%	90%
Outcome	Percent of follow-up inspections of health care facilities with harm level deficiencies completed within 30 days	Up is Better	100%	100%	100%	95%
Outcome	Percent of onsite investigations initiated within 72 hours of receipt for complaints alleging actual harm, as required by federal guidelines	Up is Better	New in 2024	100%	95%	95%
Outcome	Percent of pharmaceutical facilities receiving at least one annual inspection	Up is Better	96.6%	98.3%	95%	95%
Efficiency	Average number of days to respond to EMS patient care complaints	Down is Better	New in 2024	6	14	14
Efficiency	Percent of radiation applications approve within (3) business days	Up is Better	New in 2025	New in 2025	New in 2025	90%

3.7 EFFICIENT, TRANSPARENT, AND RESPONSIVE GOVERNMENT

Create and maintain a highly efficient, transparent, and responsive District government.

Measure Type	Measure	Directionality	FY2023	FY2024	FY2025 Target	FY2026 Target
Outcome	Average days to hire new employees	Down is Better	62	72	90	90
Outcome	Percent of MSS employees who complete the required MSS training curriculum	Up is Better	88.89%	62.2%	80%	80%
Outcome	Percent of agency staff who were employed as Management Supervisory Service (MSS) employees prior to 4/1 of the fiscal year that had completed an Advancing Racial Equity (AE204) training facilitated by ORE within the past two years	Up is Better	No data available	69.64%	*	•

Measure Type	Measure	Directionality	FY2023	FY2024	FY2025 Target	FY2026 Target
Outcome	Percent of completed interim subgrant budget periods with performance ratings completed and submitted within 45 days	Up is Better	73%	96.32%	75%	85%
Outcome	Percent of eligible employee reviews completed on time	Up is Better	91.16%	89.06%	100%	90%
Outcome	Percent of employees that are District residents	Up is Better	43.13%	43.79%	*	*
Outcome	Percent of lapsed dollar amounts on federal awards	Down is Better	Data is pending	10.49%	3%	3%
Outcome	Percent of new hires that are District residents	Up is Better	41.56%	51.14%	*	*
Outcome	Percent of new hires that are current District residents and received a high school diploma from a DCPS or a District Public Charter School, or received an equivalent credential from the District of Columbia	Up is Better	19.3%	19.35%	*	•
Outcome	Percent of new subgrants with approved risk-based monitoring plans within 30 days of award	Up is Better	57.5%	86.09%	75%	75%
Outcome	Percent of required attendees completing trainings mandated by EOM, DCHR, or the DOH Director	Up is Better	96.02%	75.41%	70%	75%
Outcome	Percent of required contractor evaluations submitted to the Office of Contracting and Procurement on time	Up is Better	55.56%	54.55%	*	*
Outcome	Percent of targeted visits completed by monitors per the most recent version of the risk-based monitoring plan	Up is Better	69.2%	92.21%	70%	85%

^{*} Specific targets are not set for this measure

4 PROPOSED ACTIVITIES

4.1 HEALTH CARE FACILITIES DIVISION

: HSPA Office of Healthcare Facilities' 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), 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. Oversight of these facilities is conducted as per the program requirements and as necessary to ensure the health and safety of residents. 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.

Measure Type	Measure	Directionality	FY2023	FY2024	FY2025 Target	FY2026 Target
Quantity	Number of inspections completed by the Health Care Facilities Division	Neutral	117	143	*	*

^{*} Specific targets are not set for this measure

4.2 SURVEILLANCE AND INVESTIGATION DIVISION

The Surveillance and Investigation Division collects, analyzes, and disseminates information about new and existing reportable conditions and other infections impacting the residents of the District for the purposes of guiding prevention planning and disease mitigation strategies. It collaborates with healthcare providers, laboratories, schools, long-term care facilities, other non-clinical organizations, and individuals to collect and maintain comprehensive epidemiologic data in a confidential and secure manner; analyzes, interprets, and distributes epidemiologic information for use in developing public policy, planning, and evaluating prevention intervention and health care services.

No Related Measures

4.3 GRANTS MANAGEMENT

Provides fiscal and administrative monitoring of District and federally appropriated funds. The Grants Management team provides fiscal monitoring of over 75 sub-grants to more than 40 providers, ensuring that grant funds are expended in accordance with federal and local grant regulations, conducting site visits, providing technical assistance to sub-grantees, and providing continued analysis of grant spending to program counterparts.

Measure Type	Measure	Directionality	FY2023	FY2024	FY2025 Target	FY2026 Target
Quantity	Number of site visits conducted annually within Care and Treatment	Neutral	New in 2024	29	*	*

^{*} Specific targets are not set for this measure

4.4 CANCER PROGRAMS DIVISION

The Cancer Programs Division encompasses three programs (Project WISH, Comprehensive Cancer Control, and Colorectal Cancer Control Program) engaged in reducing the District's cancer burden using data-informed strategies to promote community-clinical linkages, health systems, change activities and program monitoring & evaluation.

Measure Type	Measure	Directionality	FY2023	FY2024	FY2025 Target	FY2026 Target
Quantity	Number of people provided with navigation services for colorectal cancer screening, diagnosis and treatment through DC3C	Up is Better	996	3,935	*	*
Quantity	Number of visits to DCQuitNow website (dcquitnow.org)	Neutral	New in 2025	New in 2025	New in 2025	*
Quantity	Number of women provided with navigation services for breast cancer screening, diagnosis and treatment through Project WISH	Up is Better	678	1,058	*	*

^{*} Specific targets are not set for this measure

4.5 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.

Measure Type	Measure	Directionality	FY2023	FY2024	FY2025 Target	FY2026 Target
Outcome	Number of DC ADAP prescriptions	Neutral	8,221	8,808	*	*
Outcome	Number of reported HIV cases investigated	Neutral	596	803	*	*
Quantity	Number of DC ADAP clients served	Neutral	959	Data is pending	*	*
Quantity	Number of HIV, STD, and hepatitis laboratory reports processed	Neutral	175,006	116,085	*	*

^{*} Specific targets are not set for this measure

4.6 BEHAVIORAL RISK FACTOR SURVEILLANCE SYSTEM (BRFSS)

CPPE/BRFSS conducts an estimated 250 health surveys monthly to District residents aged 18 years of age and older in all eight wards of the city.

Measure Type	Measure	Directionality	FY2023	FY2024	FY2025 Target	FY2026 Target
Quantity	Number of Behavioral Risk Factor Surveillance System (BRFSS) surveys administered	Neutral	2,668	3,000	*	*

^{*} Specific targets are not set for this measure

4.7 CAPACITY BUILDING

Ensure that the community and our partnering organizations have access to relevant trainings and technical assistance through the Effi Barry Training Institute and other community initiatives.

No Related Measures

4.8 CASE INVESTIGATION

The Strategic Information Division investigates newly reported HIV and STD cases through contact with diagnosing providers and facilities; abstraction of physical and electronic medical records; and routine interstate case review processes. Information ascertained through case investigations facilitates the initiation of services provided by Disease Intervention Specialist (DIS) and provides the foundation for analytic activities.

No Related Measures

4.9 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.

Measure Type	Measure	Directionality	FY2023	FY2024	FY2025 Target	FY2026 Target
Quantity	Number of Certificate of Need application decisions	Neutral	38	22	*	*

^{*} Specific targets are not set for this measure

4.10 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.

Measure Type	Measure	Directionality	FY2023	FY2024	FY2025 Target	FY2026 Target
Quantity	Number of residents enrolled in evidence based chronic disease self-management or lifestyle change programs	Neutral	124	7,052	*	*

^{*} Specific targets are not set for this measure

4.11 COLLABORATIVE PRACTICE & POLICY CHANGE

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 promoting and achieving health equity. OHE uses a "health in all policies" (HiAP) approach, providing technical assistance on health equity internally and to a range of public, private, and non-profit partners. These partnerships serve to change the conversation and center the health impact of policy and infrastructure outside the traditional public health discourse such as housing, education, and transportation. OHE aims to convene partnerships whose breadth of authority and resources can realize population health improvements, that the healthcare sector and public health could never achieve alone.

No Related Measures

4.12 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.

No Related Measures

4.13 COMMUNITY PARTNERSHIPS

Ensure that all voices of the community are heard in the development of programs and initiatives. We convene several community advisory boards such as the Washington DC Regional Planning Commission on Health and HIV, the Places of Worship Advisory Board, and the IMPACT DMV Regional Coalition, these are important mechanisms to ensure community input. Additionally, CBHCP is committed to building stronger relationships and partnerships that foster innovative programming that supports creative and innovative approaches to public health.

No Related Measures

4.14 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.

Measure Type	Measure	Directionality	FY2023	FY2024	FY2025 Target	FY2026 Target
Quantity	Number of condoms (female and male) distributed by DC Health Condom Program	Neutral	3,029,000	2,017,000	*	*
Quantity	Number of youth (15-19 years) screened for chlamydia and gonorrhea (CT and GC) through HAHSTA-supported programs	Neutral	No data available	487	*	*

^{*} Specific targets are not set for this measure

4.15 DATA ANALYSIS & DISSEMINATION

The Strategic Information Division conducts routine analysis of disease surveillance data to monitor population-level patterns and trends in the occurrence, treatment, and outcomes of the infections addressed by

the administration. Information ascertained from such analyses is presented in the Annual Surveillance and Epidemiology Report; as well as targeted fact facts, infographics, presentations, and manuscripts. Presented information is utilized to inform local disease control and prevention programmatic and policy initiatives.

No Related Measures

4.16 DATA COLLECTION, PROCESSING, MANAGEMENT, & REPORTING

The Strategic Information Division promotes provider and laboratory compliance with local HIV, STD, Hepatitis, & TB infection reporting regulations through targeted provider outreach, educational, and technical assistance activities. Provides oversight in the development and modification of data collection and management software applications utilized for disease surveillance activities. The Division also participates in the implementation and expansion of electronic laboratory reporting as well as collecting and documenting information from provider case report forms and laboratory records into data management systems though both manual and electronic processes. Monitors the timeliness, completeness, and quality of surveillance data. Ensures the timely reporting of local surveillance data to federal partners.

No Related Measures

4.17 DATA MANAGEMENT AND ANALYSIS DIVISION (DMAD)

The Data Management and Analysis Division is responsible for the collection, analysis, and maintenance of statistical data for human service delivery program components of the Department of Health.

No Related Measures

4.18 DATA TO ACTION

The Strategic Information Division utilizes disease surveillance data to identify individuals living with HIV in the District that have evidence of potential gaps in the receipt of appropriate care and treatment and/or individuals that are part of growing molecular HIV clusters. Identified individuals are contacted for outreach, prevention, and reengagement services through primary health care providers and disease intervention specialist (DIS).

No Related Measures

4.19 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.

No Related Measures

4.20 DC RAPE PREVENTION AND EDUCATION

The District of Columbia Department of Health (DC Health) Rape Prevention Education Program creates strategic partnerships committed to achieving the overall goal of promoting health equity, decreasing sexual perpetration and victimization rates and reducing disparities in sexual violence among children and adolescents.

No Related Measures

4.21 DRUG USER HEALTH

The District of Columbia supports drug user health through harm reduction services including HIV, hepatitis, and STI testing, PrEP/PEP education and linkages, wellness. HAHSTA partners with a network of community-based organizations, governmental and non-governmental agencies who serve people with or at risk for opiate use disorder.

No Related Measures

4.22 EARLY CHILDHOOD CLINIC-BASE INITIATIVE (HEALTHYSTEPS)

Healthy Steps is an evidence-based, interdisciplinary pediatric primary care program that aims to provide families of infants and toddlers with social-emotional and developmental support by strengthening family engagement with the medical home.

No Related Measures

4.23 EARLY CHILDHOOD PLACE-BASED INTIATIVE (SMART FROM THE START)

The program partners with community organizations to provide strength-based, community and family-driven programming in places where people live, work, and play to improve early childhood health and development, improve educational outcomes and strengthen families.

No Related Measures

4.24 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.

Measure Type	Measure	Directionality	FY2023	FY2024	FY2025 Target	FY2026 Target
Quantity	Number of families participating in DC Health funded evidence-based home visiting programs	Neutral	282	237	*	*
Quantity	Number of resource referrals made through the DC Health funded evidence-based Home Visiting Program	Neutral	375	478	*	*

^{*} Specific targets are not set for this measure

4.25 FARMERS' MARKET NUTRITION PROGRAM (FMNP)

WIC FMNP provides pregnant women, new mothers, infants (6-12 months), and children up to age 5 with 1) food benefits to buy local fruits, vegetables and cut herbs from approved farmers between June-November and 2) nutrition education.

Measure Type	Measure	Directionality	FY2023	FY2024	FY2025 Target	FY2026 Target
Quantity	Number of District residents receiving supplemental groceries from School-Based Nutrition Markets	Neutral	11,290	Data is pending	*	*
Quantity	Number of District seniors receiving supplemental groceries from the Commodities Supplemental Food Program (CSFP)	Up is Better	5,570	5,730	*	*

^{*} Specific targets are not set for this measure

4.26 FIREARM INJURY SURVEILLANCE THROUGH EMERGENCY ROOMS (FASTER)

CPPE administers the Firearm Injury Surveillance through Emergency Rooms (FASTER) program in the District of Columbia. The goal of this CDC program is to improve the timeliness of surveillance of ED visits for nonfatal firearm injuries. Collaboration includes sharing data in order to improve syndrome definitions, data collection methods, analysis of surveillance data, and presentation and dissemination of findings. Additionally, this collaboration will result in tools and methods that can be used by state and local health departments across the nation to rapidly track and respond to firearm injuries.

No Related Measures

4.27 HEALTH AND WELLNESS CENTER

The District's Health and Wellness Center provides core services including traditional TB and STI screening and treatment per CDC guidelines, PEP and PrEP for HIV prevention, rapid initiation or re-initiation of ART for persons living with HIV, treatment for hepatitis C, contraceptive services, Express Clinic (providerless visits for asymptomatic patients to self-collect specimens for testing) and doxyPEP (doxycycline after unprotected sex for STI prevention), and clinic-based disease intervention for treatment verification and partner services for select communicable diseases.

No Related Measures

4.28 HEALTH EQUITY CAPACITY BUILDING

Increase the effectiveness of DC Health programs and staff in advancing health equity and reducing health disparities throughout the District. Development, delivery and support of programs and initiatives with demonstrable strategic health equity nexus and operational potential, so as to drive equity informed policy and practice change essential to improve population health and promote more equitable opportunities for health, especially amongst historically marginalized populations and communities.

Measure Type	Measure	Directionality	FY2023	FY2024	FY2025 Target	FY2026 Target
Quantity	Number of partners/stakeholders engaged with Office of Health Equity collaborative practice change programs	Neutral	New in 2024	44	*	•

Measure Type	Measure	Directionality	FY2023	FY2024	FY2025 Target	FY2026 Target
Quantity	Number of public and private partners submitting data to the Office of Health Equity to support assessment of structural determinants of health	Neutral	New in 2024	7	*	•

^{*} Specific targets are not set for this measure

4.29 HEALTH PROFESSIONAL RECRUITMENT/RETENTION PROGRAM (HPRP)

Through programming, policy change, pipeline projects, and other measures, HPRP aims to recruit and retain health professionals in the District- especially those serving underserved populations. This broad umbrella includes the Health Professional Loan Repayment Program (HPLRP) which, 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.

No Related Measures

4.30 HEALTHY CORNER STORE PROGRAM

Program expands access to healthful foods and wellness education at corner stores in Wards 5, 7, and 8. Corner store owners order and stock fresh produce in smaller quantities than available through commercial distributors and receive healthy food marketing materials and refrigeration equipment.

No Related Measures

4.31 HEALTHY DC

Healthy DC serves as the city's shared population health improvement process and agenda, including the Community Health Needs Assessment and Improvement Plan. The program facilitates multi-sector collaboration to set goals and objectives and monitor progress toward decade-long targets for important population health outcomes. There are continuous opportunities for residents and partners to get involved in the process and the development and refinement of the Healthy DC 2030 Framework, including priorities, goals, objectives, and strategies, by joining Our Healthy DC at OurHealthyDC.org, an online tool where you can help guide the conversation.

No Related Measures

4.32 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.

Measure Type	Measure	Directionality	FY2023	FY2024	FY2025 Target	FY2026 Target
Quantity	Number of families/providers calls/referrals to Help-Me-Grow	Neutral	New in 2024	362	*	*
Quantity	Number of referrals provided by the Help Me Grow program that are successfully linked to resources	Neutral	New in 2024	428	*	*

^{*} Specific targets are not set for this measure

4.33 HEPATITIS

The District of Columbia collaborates with a range of community-based organizations, as well as governmental and non-governmental stakeholders to increase hepatitis awareness through screening, vaccinations and access to treatment options.

No Related Measures

4.34 HIV PROGRAM MONITORING

The Ryan White HIV/AIDS Program provides fiscal and programmatic compliance monitoring and oversight to sub-recipient organizations that are funded to deliver primary medical care, treatment, and essential support services to people with HIV and their families in the Washington Eligible Metropolitan Area.

No Related Measures

4.35 HIV TESTING

The District of Columbia makes HIV testing widely available in clinical and non-clinical settings through both point of care and conventional test. DC Health funded partners are encouraged to offer testing to focus populations to increase awareness of HIV status.

No Related Measures

4.36 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.

No Related Measures

4.37 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.

No Related Measures

4.38 INSTITUTIONAL REVIEW BOARD

DMAD has oversight of the Institutional Review Board for Public Health, which is an administrative body established to protect the rights and welfare of human research subject recruited to participate in research activities or data collected on human subjects in the DC Department of Health.

No Related Measures

4.39 NATIONAL VIOLENT DEATH REPORTING SYSTEM (NYDRS)

CPPE administers the National Violent Death Reporting System (NVDRS) for the District of Columbia. NVDRS is a surveillance system initiated by the Centers for Disease Control for collecting data regarding violent deaths in the United States. The initiative involves collaboration between state agencies and local police, coroners, and medical examiners, with the goal of creating a more complete and up-to-date database of violent deaths and their circumstances in the United States. NVDRS is the only state-based surveillance (reporting) system that pools more than 600 unique data elements from multiple sources into a usable, anonymous database.

No Related Measures

4.40 NEWBORN HEARING 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.

Measure Type	Measure	Directionality	FY2023	FY2024	FY2025 Target	FY2026 Target
Quantity	Number of infants receiving a hearing screening in their first month of life	Neutral	10,941	10,777	*	*

^{*} Specific targets are not set for this measure

4.41 OCCUPATIONAL SAFETY AND HEALTH STATISTICS PROGRAM (OSHS)

Occupational Safety and Health Statistics Program (OSHS), DC Department of Health collaborates with the US Department of Labor, Bureau of Labor Statistics to serve as the premier source of information on the safety and health of the District of Columbia workers.

No Related Measures

4.42 PERINATAL HEALTH PROGRAM

This program seeks to improve women's health, promote clinical quality and patient safety, and achieve collective impact.

No Related Measures

4.43 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.

No Related Measures

4.44 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.

Measure Type	Measure	Directionality	FY2023	FY2024	FY2025 Target	FY2026 Target
Quantity	Number of patient encounters (physically or virtually) at the DC Health and Wellness Center	Neutral	8,281	9,978	*	*

^{*} Specific targets are not set for this measure

4.45 PREGNANCY RISK ASSESSMENT MONITORING SYSTEM (PRAMS)

The Pregnancy Risk Assessment Monitoring System (PRAMS) is a surveillance project of the Centers for Disease Control and Prevention (CDC) and District of Columbia Department of Health. PRAMS collects state-specific, population-based data on maternal attitudes and experiences before, during, and shortly after pregnancy. About 100 surveys/questionnaires are mailed monthly to DC resident women who deliver their babies in the District.

No Related Measures

4.46 PREVENTIVE HEALTH AND HEALTH SERVICES BLOCK GRANT (PHHSBG)

The PHHSBG aligns with DC Healthy People 2030 to identify current and emerging public health needs and to support innovative programs and policies within the local context.

No Related Measures

4.47 QUALITY IMPROVEMENT

The Quality Management Program supports a network of high quality, equitable care for consumers of HIV services in DC and the metro area through data driven decision making addressing social determinates of health through process improvement and evidence based clinical interventions.

No Related Measures

4.48 SCHOOL HEALTH PROGRAMS

School Health Programs provide services including acute care, emergency support, care coordination, chronic disease management, and family engagement.

Measure Type	Measure	Directionality	FY2023	FY2024	FY2025 Target	FY2026 Target
Quantity	Number of students enrolled in DCPS/DCPCS schools served by the School Health Services Program (SHSP)	Neutral	81,707	84,530	*	*
Quantity	Number of unique individuals who received services in a School Based Health Center (SBHC)	Neutral	5,563	New in 2025	New in 2025	*

^{*} Specific targets are not set for this measure

4.49 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.

Measure Type	Measure	Directionality	FY2023	FY2024	FY2025 Target	FY2026 Target
Quantity	Number of Oral Health Program participants who received a dental screening	Neutral	2,181	2,345	*	*

^{*} Specific targets are not set for this measure

4.50 SENIOR FARMERS' MARKET NUTRITION PROGRAM (SFMNP)

Senior FMNP provides seniors 60+ with 1) food benefits to buy local fruits, vegetables and cut herbs from approved farmers between June-November and 2) nutrition education.

No Related Measures

4.51 SOCIAL EPIDEMIOLOGY, EVALUATION AND DATA

OHE applies data driven and evidence-based research methods, tools and practices, including Geographic Information Systems (GIS) and other preeminent methodologies, to measure social determinant and population health outcomes. This includes Key Drivers of Opportunities for Health, disparate outcomes and inequities by socio-economic and demographic subpopulation and geographic location. This core function includes development and modernization of equity data equity data; support design, development, implementation and evaluation of Health Equity Programs; publication of reports that inform policy and practice change; and build the evidence base.

No Related Measures

4.52 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.

Measure Type	Measure	Directionality	FY2023	FY2024	FY2025 Target	FY2026 Target
Quantity	Number of Special Supplemental Nutrition Program for Women, Infants, Children (WIC) enrollees	Neutral	21,414	21,621	*	*

^{*} Specific targets are not set for this measure

4.53 THE EMERGENCY FOOD ASSISTANCE PROGRAM (TEFAP)

TEFAP provides emergency food assistance to District residents by providing fresh and shelf-stable foods to food banks, food pantries, soup kitchens, and other emergency feeding organizations.

No Related Measures

4.54 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.

Measure Type	Measure	Directionality	FY2023	FY2024	FY2025 Target	FY2026 Target
Quantity	Number of parents/caregivers educated on infant safe sleep practices	Neutral	1,581	1,147	*	*
Quantity	Number of partners and childcare providers that are educated by DC Health Safe Sleep programs on infant safe sleep practices	Neutral	New in 2024	372	*	*

^{*} Specific targets are not set for this measure

4.55 TITLE V ADOLESCENT HEALTH AND TEEN PREGNANCY PREVENTION PROGRAMS

DC Health's Adolescent Health Programs are a consortium of community-based organizations, School-Based programs, and place-based care settings funded through DC Health. These programs deliver evidence-based practices and innovative programs for adolescents in the District of Columbia to support a healthy and effortless transition from childhood to adulthood with focus areas on positive youth development, mental health (including grief and trauma-informed care) and pregnancy prevention among adolescents.

No Related Measures

4.56 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.

Measure Type	Measure	Directionality	FY2023	FY2024	FY2025 Target	FY2026 Target
Quantity	Number of calls to the DC Tobacco Quitline	Neutral	2,775	2,642	*	*

^{*} Specific targets are not set for this measure

4.57 VITAL RECORDS

Vital Records is responsible for collecting, preserving and administering the District's system of birth, death and domestic partnership records.

Measure Type	Measure	Directionality	FY2023	FY2024	FY2025 Target	FY2026 Target
Quantity	Number of walk-in customers to the Vital Records Office	Neutral	47,013	31,964	*	*

^{*} Specific targets are not set for this measure

4.58 YOUTH ADVISORY COUNCIL

The Youth Advisory Council (YAC) is designed to utilize a positive youth development approach framework to promote health and build leadership skills among DC youth. The goal is to collaboratively engage and support young people and develop their ability to successfully navigate transitions in life and education, while building meaningful relationships and living healthy lives. Core program topics include but are not limited to healthy relationships, education, health and wellness, leadership, employment and entrepreneurship.

No Related Measures

4.59 YOUTH STI SCREENING

The District's STD & TB Control Division and Prevention Division provide traditional STD screening and treatment per CDC guidelines via the school-based screening and sexual health program.

No Related Measures

4.60 PHARMACEUTICAL CONTROL DIVISION (PCD)

HSPA Office of Health Professional Licensing's Pharmaceutical Control Division (PCD) licenses, regulates and inspects community and hospital pharmacies and distributor manufactures. 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.

Measure Type	Measure	Directionality	FY2023	FY2024	FY2025 Target	FY2026 Target
Quantity	Number of pharmacies inspected	Neutral	157	146	*	*
Quantity	Number of Registered Controlled Substance Facilities inspected	Neutral	227	201	*	*

^{*} Specific targets are not set for this measure

4.61 OUTDOOR ENVIROMENT

The Division of Outdoor Environment seeks to reduce and/or eliminate radiation overexposure of naturally occurring or man-made radiation (with the exception of health facilities), monitor climate trends and make recommendations for intervention, and regulate workplace and occupational health (such as the smoke-free workplace laws) in the District of Columbia.

Measure Type	Measure	Directionality	FY2023	FY2024	FY2025 Target	FY2026 Target
Efficiency	Number of Inspections at Body Arts Facilities	Neutral	New in 2025	New in 2025	New in 2025	*
Efficiency	Number of Inspections at Tanning Facilities	Neutral	New in 2025	New in 2025	New in 2025	*
Outcome	Number of ProjectDox received	Neutral	New in 2025	New in 2025	New in 2025	*
Quantity	Number of complaints investigated related to body arts facilities	Neutral	New in 2025	New in 2025	New in 2025	*
Quantity	Number of complaints received related to body arts facilities	Neutral	New in 2025	New in 2025	New in 2025	*
Quantity	Number of facilites closed due to unforeseen events	Neutral	New in 2025	New in 2025	New in 2025	*
Quantity	Number of Outreach/Community events and meetings attended or hosted	Neutral	New in 2025	New in 2025	New in 2025	*
Quantity	Number of Radiation Producing Dental Devices Inspections	Neutral	New in 2025	New in 2025	New in 2025	*
Quantity	Number of Radiation Producing Medical Devices Inspections	Neutral	New in 2025	New in 2025	New in 2025	*
Quantity	Number of Shielding Plans received	Neutral	New in 2025	New in 2025	New in 2025	*

^{*} Specific targets are not set for this measure

4.62 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 compliant, and is responsible for zoonotic surveillance.

Measure Type	Measure	Directionality	FY2023	FY2024	FY2025 Target	FY2026 Target
Quantity	Number of calls responded to by Animal Control Officers	Neutral	18,462	16,315	*	*
Quantity	Number of dog licenses processed	Neutral	3,813	3,947	*	*

^{*} Specific targets are not set for this measure

4.63 DIVISION OF FOOD

Food Safety Division inspects food establishments (e.g. restaurants, food trucks, etc.) to prevent the spread of food-borne illness.

Measure Type	Measure	Directionality	FY2023	FY2024	FY2025 Target	FY2026 Target
Quantity	Number of new and routine food establishments inspected	Neutral	3,599	3,301	*	*

^{*} Specific targets are not set for this measure

4.64 DIVISION OF COMMUNITY HYGIENE

Community Hygiene Division regulates and inspects three (3) distinct program areas to include Swimming Pools and Aquatics; Barbering, Cosmetology, and Personal Grooming; and Bedding and Upholstery. Each program area is regulated to help prevent recreational water illnesses (RWIs), drowning, injuries, and ensure that facilities are operating in clean and sanitary environment, and that regulated products are honestly presented as applicable.

Measure Type	Measure	Directionality	FY2023	FY2024	FY2025 Target	FY2026 Target
Quantity	Number of Bedding and Upholstery registration applications processed by the Division of Community Hygiene	Neutral	New in 2025	New in 2025	New in 2025	*
Quantity	Number of inspections completed by the Division of Community Hygiene	Neutral	New in 2025	New in 2025	New in 2025	*

^{*} Specific targets are not set for this measure

4.65 MEDICAL RESERVE CORPS (MRC) PROGRAM

HSPA Office of Emergency Preparedness and Resilience (OEPR) supports the District of Columbia's Medical Reserve Corps (MRC) comprised of volunteer medical and non-medical personnel who can be called upon to assist with preparation, response, recovery, and resiliency efforts within the community. The program maintains a volunteer and credentialing management system to ensure that all personnel, medical or not, are appropriately screened and credentialed before they can be deployed. Team members also support training and educational opportunities for volunteers to ensure mission ready status for members of the MRC.

No Related Measures

4.66 EMERGENCY OPERATIONS COORDINATION

HSPA directs and coordinates the implementation of other public health preparedness capabilities critical to public health emergency preparedness and response. HSPA makes informed, timely and effective decisions that direct resources and personnel during ongoing and evolving health needs arising from emergencies.

No Related Measures

4.67 SPECIAL EVENTS PERMITTING

HSPA Office of Emergency Preparedness and Resilience (OEPR) supports the Mayor's Special Events Task Group by evaluating the Health, Medical, and Safety Plan submitted by special event organizers to ensure the wellbeing and safety of those who may attend the event.

Measure Type	Measure	Directionality	FY2023	FY2024	FY2025 Target	FY2026 Target
Quantity	Number of Health Emergency Command Center (HECC) Activations	Neutral	1	12	*	*
Quantity	Number of Medical Reserve Corps (MRC) activations	Neutral	2	14	*	*
Quantity	Number of Medical Reserve Corps (MRC) personnel activated in response to an incident or planned event	Neutral	7	71	*	*
Quantity	Number of special event permit applications which require a health, medical and safety plan review by HSPA	Neutral	150	83	*	*
Quantity	Total number of Medical Reserve Corps (MRC) volunteer hours	Neutral	36.5	31	*	*

^{*} Specific targets are not set for this measure

4.68 MEDICAL MATERIEL MANAGEMENT AND DISTRIBUTION

HSPA ensures the secure distribution and integrity of the stockpile from receipt to recovery of the materiel through planning, real time inventory tracking, and distribution partner collaboration.

Measure Type	Measure	Directionality	FY2023	FY2024	FY2025 Target	FY2026 Target
Quantity	Number of DC Health personnel trained for point of distribution (POD) operations	Neutral	31	23	*	*
Quantity	Number of emergency preparedness-related trainings and exercises coordinated by HSPA	Neutral	4	4	*	*

^{*} Specific targets are not set for this measure

4.69 MEDICAL COUNTERMEASURES DISPENSING

HSPA directs and coordinates the implementation of Medical Countermeasures (MCM) dispensing within the District of Columbia during declared Public Health Emergencies through the Open and Closed Points of Dispensing (POD) programs.

No Related Measures

4.70 CRIMINAL BACKGROUND CHECK PROGRAM

HSPA's Office of Health Professional Licensing processes criminal background checks for healthcare professionals and prospective applicants for long-term care facilities so that they may obtain licensure and support the needs of the healthcare system.

Measure Type	Measure	Directionality	FY2023	FY2024	FY2025 Target	FY2026 Target
Quantity	Number of Criminal Background Checks processed for health professionals	Neutral	51,249	57,173	*	*
Quantity	Number of Criminal Background Checks processed for non-health professionals	Neutral	5,950	6,602	*	*

^{*} Specific targets are not set for this measure

4.71 INTERMEDIATE CARE FACILITIES DIVISION (ICFD)

HSPA Office of Healthcare Facilities' Intermediate Care Facilities Division (ICFD) inspects, monitors, and investigates Intermediate Care Facilities for Individuals with Intellectual Disabilities; Child Placement Agencies; Home Care Agencies; Assisted Living Residences; Community Residence Facilities for the Disabled/Elderly and Individuals with Intellectual Disabilities; Nurse Staffing Agencies; and Home Support Agencies. The Division inspects these sites to determine compliance with local licensure health and safety regulations and federal standards for participation in Medicaid programs under Title XIX of the Social Security Act for Group Homes for Individuals with Intellectual Disabilities. The oversight of these facilities is conducted at least annually and when necessary to ensure the health and safety of residents.

Measure Type	Measure	Directionality	FY2023	FY2024	FY2025 Target	FY2026 Target
Quantity	Number of inspections completed by the Intermediate Care Facilities Division	Neutral	184	180	*	*
Quantity	Number of Intermediate Care and Nursing Home facility reported incidents received	Neutral	360	427	*	*

^{*} Specific targets are not set for this measure

4.72 EMERGENCY MEDICAL SERVICES (EMS) PROGRAM

HSPA Office of Emergency Preparedness and Resilience's (OEPR) Emergency Medical Services (EMS) Program serves as the state-wide regulatory body for the EMS system within the District of Columbia supporting coordination, facilitation, and regulation across the system. This includes all emergency medical vehicles (e.g., ambulances, quick response vehicles, helicopters, etc.), personnel (i.e., emergency medical responders (EMR), emergency medical technicians (EMTs), Advanced EMTs, and paramedics), EMS agencies, EMS educational institutions, EMS education, and EMS instructors. This program also supports systems of care and time-sensitive conditions (i.e., trauma, stroke, STEMI, etc.) by ensuring healthcare facilities designated to provide specialty care maintain high-quality, equitable care and provide the necessary data to support public health programming that limits morbidity and mortality related to these conditions.

Measure Type	Measure	Directionality	FY2023	FY2024	FY2025 Target	FY2026 Target
Quantity	Number of EMS Agency certifications issued by DC Health	Neutral	New in 2024	0	*	*
Quantity	Number of EMS clinician certification applications received and processed	Neutral	New in 2024	3,508	*	*
Quantity	Number of EMS Education Institution certifications issued by DC Health	Neutral	New in 2024	0	*	*
Quantity	Number of new EMT certifications issued by DC Health	Neutral	612	1,022	*	*
Quantity	Number of scheduled/announced EMS vehicle inspections conducted	Neutral	456	511	*	*

^{*} Specific targets are not set for this measure

4.73 HOUSING

Understanding the complex nature of the Washington Regional Metropolitan Statistical Area, this division will ensure adequate service delivery that addresses the housing needs of those residents in the region who are who are living with HIV through our Housing Opportunities for Persons living With HIV/AIDS.

No Related Measures

4.74 PRODUCE PLUS

Program increases resident access to affordable, nutritious, locally sourced produce. The program uses debit card to issue benefits to eligible low-income residents. Benefits can be used to purchase fresh produce at any of the authorized farmers' markets between June and November.

Measure Type	Measure	Directionality	FY2023	FY2024	FY2025 Target	FY2026 Target
Quantity	Number of individuals receiving produce from Produce Plus program	Neutral	New in 2024	6,117	*	*

^{*} Specific targets are not set for this measure

4.75 SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM, EDUCATION AND OBESITY GRANT (SNAP-ED)

Program provides nutrition and physical activity education across the lifespan; policy, systems, and environmental change strategies to improve the food and built environments; and collaborates with SNAP Outreach to provide SNAP referrals to eligible District residents. Eligibility for program services includes participation in SNAP or where at least 50 percent of the audience is SNAP eligible.

No Related Measures

4.76 HEALTH AND MEDICAL COALITION

HSPA Office of Emergency Preparedness and Resilience's (OEPR) Health and Medical Coalition (HMC) Program supports the DC Health and Medical Coalition (HMC) by providing coordination, oversight, policy guidance, and leadership. DC Health serves as the co-lead of the District's healthcare caolition, the HMC. The program team members participate in meetings, support planning efforts, facilitate communications, and support the healthcare system during steady-state and emergent operations. The Program also supports and facilitates exercises, training opportunites, and other drills to test and ensure the resiliency of the District's healthcare system.

Measure Type	Measure	Directionality	FY2023	FY2024	FY2025 Target	FY2026 Target
Quantity	Number of Health and Medical Coalition (HMC) Meetings held	Neutral	85	85	*	*
Quantity	Number of HMC facilities participating in exercises and special events involving HMC Coordination	Neutral	115	87	*	*
Quantity	Number of HMC-sponsored trainings, workshops, exercises, learning and education opportunities	Neutral	6	8	*	*
Quantity	Number of Radio Drills conducted	Neutral	25	21	*	*

^{*} Specific targets are not set for this measure

4.77 INCIDENT COMMAND SYSTEM (ICS) AND NATIONAL INCIDENT MANAGEMENT SYSTEM (NIMS) TRAINING

HSPA 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.

No Related Measures

4.78 COMPLIANCE, QUALITY ASSURANCE AND INVESTIGATION

HSPA Office of Health Professional Licensing's Compliance, Quality Assurance, and Investigation Program ensures compliance with applicable laws and regulations governing licensed healthcare professionals.

Measure Type	Measure	Directionality	FY2023	FY2024	FY2025 Target	FY2026 Target
Quantity	Number of investigations conducted for health professional licensing boards	Neutral	63	13	*	*

^{*} Specific targets are not set for this measure

4.79 HEALTH PROFESSIONAL LICENSING

HSPA's Office of Health Professional Licensing is responsible for supporting the licensure process for over 70 different healthcare professionals practicing within the District of Columbia by ensuring regulatory compliance among licensees and license applicants.

Measure Type	Measure	Directionality	FY2023	FY2024	FY2025 Target	FY2026 Target
Outcome	Number of walk-in customers to Processing Center	Neutral	7,534	8,425	*	*
Quantity	Number of denied health professional licensure applications	Neutral	New in 2025	New in 2025	New in 2025	*
Quantity	Number of investigations performed based on suspected unlicensed practice	Neutral	New in 2025	New in 2025	New in 2025	*
Quantity	Number of new health professional licenses issued	Neutral	18,829	16,120	*	*

^{*} Specific targets are not set for this measure

4.80 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.

No Related Measures