



# **DEPARTMENT OF HEALTH**

## **FY 2024 PERFORMANCE PLAN**

**DECEMBER 5, 2023**

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# 1 DEPARTMENT OF HEALTH

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*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 nations Capital.

*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.

## 2 2024 OBJECTIVES

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### Strategic Objective

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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.

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.

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.

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.

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.

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.

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

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### 3 2024 OPERATIONS

Operation Title	Operation Description	Type of Operation
<b>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.</b>		
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
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
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
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 Licensing	Receive, process, and review for compliance with District and Federal regulatory compliance license applications for over seventy different healthcare professions.	Daily Service

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Operation Title	Operation Description	Type of Operation
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
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
Pharmaceutical Control Division (PCD)	The 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.	Daily Service
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
Division of Food	Food Safety Division inspects food establishments (e.g. restaurants, food trucks, etc.) to prevent the spread of food-borne illness.	Daily Service
Division of Community Hygiene	Community Hygiene Division inspects public pools, barbershops and beauty salons for cleanliness.	Daily Service

**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.**

(continued)

Operation Title	Operation Description	Type of Operation
Data Development, Management & Evaluation	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 equity data development and modernization; support to design, develop, implement and evaluate Health Equity Programs; publication of reports that inform policy and practice change; as well as build the evidence base.	Daily Service
Health Equity Capacity Building	Development, delivery and support of selected programs and initiatives with demonstrable strategic health equity nexus and operational potential. The goal is to contribute to, and inform, the essential paradigm shift in policy and practice needed to improve population health and promote more equitable opportunities for health, especially amongst historically marginalized populations.	Daily Service
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 the healthcare sector and public health could never achieve alone.	Daily Service

**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.**

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



(continued)

Operation Title	Operation Description	Type of Operation
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.	Daily Service
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.	Daily Service
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.	Daily Service
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.	Daily Service
Healthy People	Healthy People serves as the city's shared agenda and Community Health Improvement Plan, which collaboratively sets goals and objectives and monitors progress toward 2020 targets for important population Health outcomes. There are continuous opportunities for residents and partners to get involved in the process and the development of the DC Healthy People 2030 goals and objectives by joining Our Healthy DC at OurHealthyDC.org, an online tool where you can help guide the conversation.	Daily Service
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.	Daily Service
Research, Measurement and Evaluation (REM)/Division of Epidemiology-Disease Surveillance and Investigation	The Disease Surveillance and Investigation Unit is responsible for the surveillance, investigation and control of reportable diseases within the District of Columbia, with the exception of sexually transmitted illnesses, hepatitis, HIV/AIDS, and Tuberculosis. The program collects, analyzes, interprets, disseminates data, and provides expertise and information on disease management.	Daily Service



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Operation Title	Operation Description	Type of Operation
National Violent Death Reporting System (NVDRS)	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.	Daily Service
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.	Daily Service

**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.**

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.	Daily Service
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
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
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

(continued)

Operation Title	Operation Description	Type of Operation
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
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
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
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
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
Perinatal Health Program	This program seeks to improve women's health, promote clinical quality and patient safety, and achieve collective impact.	Daily Service
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
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

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Operation Title	Operation Description	Type of Operation
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
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 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 using data-informed strategies to promote community-clinical linkages, health systems change activities and program monitoring & evaluation.	Daily Service
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
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
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
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
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
Produce Plus Program	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 October.	Daily Service

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Operation Title	Operation Description	Type of Operation
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
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
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
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
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
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
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
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.	Daily Service

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Operation Title	Operation Description	Type of Operation
<b>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.</b>		
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
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
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
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.	Daily Service
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.	Daily Service
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.	Daily Service
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.	Daily Service

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Operation Title	Operation Description	Type of Operation
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.	Daily Service
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 community 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. Aids in the implementation and expansion of electronic laboratory reporting. Inputs information from provider case report forms and laboratory records into data management systems through 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.	Daily Service
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 targeted for outreach, prevention, and reengagement services through primary health care providers and disease intervention specialist (DIS).	Daily Service
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.	Daily Service

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Operation Title	Operation Description	Type of Operation
Grants Management	Provides fiscal and administrative monitoring of District and federally appropriated funds. The Grants Management team provides fiscal monitoring of over 130 grants and sub-grants to more than 50 providers, ensuring that grant funds are expended in accordance with federal and local grant regulations, conducting site visits, providing technical assistance to grantees and sub-grantees, and providing continued analysis of grant spending to program counterparts.	Daily Service
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.	Daily Service
Housing	Understanding the complex nature of the Washington Regional Metropolitan Statistical Area, this division 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.	Daily Service
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.	Daily Service
Youth STI Screening	The District's STD and TB Control Division provides traditional STD screening and treatment per CDC guidelines via the school-based screening and sexual health program.	Daily Service
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, and clinic-based disease intervention for treatment verification and partner services for select communicable diseases.	Daily Service
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.	Daily Service



(continued)

Operation Title	Operation Description	Type of Operation
<b>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.</b>		
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 distribution partner collaboration.	Daily Service
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
Special Events Permitting	HEPRA, as a member of the Mayor's Special Event Task Group, provides customer assistance to Event Organizers by reviewing and approving the Health, Medical and Safety Plan component of their Department of Buildings (DOB) 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
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

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Operation Title	Operation Description	Type of Operation
Emergency Medical Services and Prehospital Medicine Regulation	HEPRA regulates training and certification for Emergency Medical Services (EMS) Clinicians (Emergency Medical Responders (EMRs), Emergency Medical Technicians (EMTs), Advanced Emergency Medical Technicians (AEMTs), Paramedics, and prehospital healthcare providers), certifies/inspects EMS and emergency response vehicles (including ambulances, medical equipment aboard air ambulances, off road vehicles, EMS watercraft, and medical aid stations), in addition to Trauma and Specialty care hospitals operating in the District to ensure optimal emergency healthcare response in accordance with the District EMS Act of 2008 and DCMR, Title 29, Chapter 5 (Emergency Medical Services).	Daily Service
Medical Reserve Corps (MRC)	HEPRA maintains the roster of and trains a team of medical and non-medical volunteers who are called upon to assist in preparing for and responding to special events, public health, and all-hazard emergencies, referred to as the DC Medical Reserve Corps (MRC).	Daily Service
Emergency Operations Coordination	HEPRA directs and coordinates the implementation of other public health preparedness capabilities critical to public health emergency preparedness and response. HEPRA makes informed, timely and effective decisions that direct resources and personnel during ongoing and evolving health needs arising from emergencies.	Daily Service
Medical Countermeasures Dispensing	HEPRA 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.	Daily Service

## 4 2024 STRATEGIC INITIATIVES

Title	Description	Proposed Completion Date
Joseph's House	The Joseph's House Program will provide facility based housing support services to individuals living with HIV/AIDS. Activities will include assessment, case management and assistance with transitional and/or permanent stability housing with the goal of eliminating barriers to health care and treatment.	9/30/2024
Harm Reduction Vending Machine Pilot	The Prevention Bureau will assess effectiveness and impact of vending machine pilot program to make final recommendations regarding program sustainability. Evaluation components will include number of operational machines and total product distribution with a goal of providing 6,500 harm reduction and wellness products from 7 operable machines through FMCS and HIPS partnerships	9/30/2024
Framework to administer the High Need Healthcare Scholarship Program	The Health Regulation and Licensing Administration (HRLA) will hire and onboard a Program Specialist that will assist in the implementation and management of the Scholarship program. Additionally, HRLA will develop a framework in Salesforce to assist with the management of the applications for the programs and individuals. The additional personnel and IT system will aid in recruitment for high needs personnel and lead to a more robust workforce.	9/30/2024
Additional staffing for health professional licensing complaints	The Health Regulation and Licensing Administration (HRLA) will hire and onboard a Complaint Coordinator, Health Services Program Coordinator, and Investigator that will assist in handling the complaints received by the public for the health professionals and facilities. The additional staff will assist in processing the complaints and handling all components of the compliance/discipline process. Additionally, the enhancement will aid and facilitate a more efficient process will improve HRLA ability to address complaints in a timely manner.	9/30/2024
Sanitarian Funding	The Division of Food will hire one (1) Sanitarian to work an alternative schedule (Tuesday-Saturday 11:30am - 8pm) in order to provide night and weekend coverage for food facilities.	9/30/2024
Framework to implement micro-kitchen enterprise inspection program	The Division of Food will hire one (1) inspector and one (1) administrative staff member in order to facilitate the rules and regulations associated with the Street Vendor Advancement Amendment Act. This will allow HRLA properly focus on launching and administering the program.	9/30/2024

Animal Shelter Funding	DC Health HRLA will provide funding to support the best practices for animal care and control in the animal sheltering environment. The additional funding will bridge the gap to provide for fully funding the costs of operations and extended animal services. The public will have improved access to the existing animal shelter facility and enhanced interaction with the animals residing in the shelter.	9/30/2024
Framework of Dementia Training Program	The Health Regulation and Licensing Administration (HRLA) will identify and designate standardized dementia training, including online training for direct care workers.	9/30/2024
Free Dental Services for Seniors	Free covered dental health care services to seniors 65+ who have incomes at or below \$100,000. Provided through a grant to a health center.	9/30/2024
Improvements to food access services	This project will support improved food across a variety of settings in the District. DC Health will provide enhancement funding and technical assistance to FRESHFARM, DC Central Kitchen, and Food and Friends to meet residents with low socio-economic status where they are and increase utilization of food access benefits at farmers markets, corner stores, and residences. FRESHFARM will provide a monthly monetary incentive on a debit card for residents to purchase fresh produce at local farmers markets. DC Central Kitchen will deliver monthly fresh produce and minimally processed healthy food at or below cost to small, independent stores in DC. DCCCK will also provide District SNAP customers a \$5 for \$5 matching program, a dollar-for-dollar match of SNAP dollars spent on produce. Food and Friends will deliver medically tailored meals and shelf-stable groceries to homebound residents with cancer, diabetes and other serious medical conditions and their caregivers on a weekly basis.	9/30/2024
Launch Health Literacy Strategy for the District	Leveraging funding from a two-year Advancing Health Literacy Grant from the Office of Minority Health (including NCE through June 2024) OHE will continue to lead implementation and development of the Health Literacy Plan for the District. This includes completing project goals, and expansion of efforts related to build-out of Organization Health Literacy Capacity, with focus on FQHC's and DC Health.	9/30/2024
Build & Launch Health Opportunity Index (HOI) for the District	Leveraging funding from a two-year CDC COVID19 Health Disparities Grant (including NCE through May 2024) OHE will continue to lead implementation and development of the District's Inaugural Health Opportunity Index (DC HOI). Rapid progress to date with the HOI Proof of concept, has included preliminary data and maps to the census tract level; completion of a composite score index and four profiles. Testing and refinement is currently underway.	9/30/2024

Multi-Sectoral Collaborative Actions for Change	Having launched the HealthyDC 2030 Steering Committee in March 2023, two quarterly meetings have been held to date, with process on track to meet the Year 1 goal of producing a HealthyDC2030 Action Plan with community-wide priorities, by the end of 2023. OHE will support sustaining this process, by leveraging multi-sectoral engagement to support implementation of the Action Plan, including identification of demonstration projects that apply a health equity informed lens and collaborative practice change approaches.	9/30/2024
Data Repository	HEPRA will develop upgraded dashboards using a cloud-based registry and repository for EMS and trauma data in the District. These dashboards will be based on data contained in the DC EMS Data Repository and the DC Trauma Registry. The dashboards will provide data transparency and enable decision-makers, medical professionals, and members of the public to access emergency medical care statistics that demonstrate system utilization and demand.	9/30/2024
Emergency Medical Services (EMS) Regulations	HEPRA will focus efforts on completing the revision and enhancement of emergency medical services (EMS) regulations to create a stronger, improved, and modernized EMS system in Washington, DC. HEPRA efforts encompass updating manuals and standard operating procedures (SOPs) with the primary goal of bolstering DC Health's enforcement of regulations across certified EMS agencies, EMS educational institutions, individual EMS providers, and specialty care centers.	9/30/2024
Emergency Medical Services (EMS) Fees, Fines, and Regulations	HEPRA will revise emergency medical services (EMS) regulations in order to strengthen, improve, and modernize the EMS system in Washington, DC. This includes updating the fine schedule aimed at strengthening DC Health enforcement of regulations over the DC Health certified EMS agencies, EMS educational institutions, and individual EMS providers.	9/30/2024
Incident Management Digitization Initiative	HEPRA will enhance and utilize a web-based software system, referred to as VEOCI, to support emergency response operations, including maintaining situational awareness of field activities, supporting operational needs coordination, procurement and cost recovery tracking and data reporting. This initiative enables coordinated information sharing in real time across DC Health stakeholders and allows future Health Emergency Operations Center (EOC) activations to be effectively managed virtually when needed.	9/30/2024
Implementation of Enhanced Notification System	HEPRA will fully implement Everbridge, a robust mass notification system, to strengthen emergency response capabilities. This critical strategic initiative aims to link the Virtual Emergency Operations Center Interface (VEOCI) with Everbridge and enable seamless information sharing, real-time coordination, and effective virtual management of Health Emergency Operations Center (EOC) activations when required.	9/30/2024

Planning and Execution of Three Comprehensive Emergency Training Exercises	HEPRA will conduct three comprehensive training exercises involving DC Health and Health and Medical Coalition members, with one exercise focused on Chemical/Biological Incident Responses. Through these exercises, DC Health will be better prepared as the ESF8 Lead in the District to plan, execute, and respond effectively to potential emergencies.	9/30/2024
Sentinel Respiratory Surveillance	This program will lead to more timely and efficient efforts to improve turnaround time, detection of outbreaks, response to outbreaks, investigation of outbreaks and implementation of control measures for both influenza and non-influenza viruses. Identification of these viruses and appropriate public health response measures have been critical in mitigating their spread. The Division of Epidemiology will increase the number of sentinel sites thus promoting racial equity within the jurisdiction.	9/30/2024
Wastewater Respiratory Surveillance	WastewaterScan in collaboration with DC water will be providing DC Health information on the following organisms starting mid-September 2023: SARS-CoV-2, and variants, influenza A & B, Human Metapneumovirus (hMPV), Norovirus, Mpox, and RSV. The Public Health Lab (PHL) will start conducting wastewater sampling in late September 2023 on the following organisms: Influenza A and B, RSV, Human Parainfluenza virus, Human Enterovirus, Human Rhinovirus, Human Adenovirus, Human coronavirus and Human parechovirus. DC Health will incorporate wastewater surveillance data into its weekly updates to external dashboards.	9/30/2024
DC Health Internal Strategy for Equity Practice Operationalization	Design and implement a comprehensive strategy to drive internal Implementation for strategic and system level change, through internal operationalization of healthy equity learning and practice change across all DC Health Administrations, applying CQI processes to support progress on equity applications and outcomes.	9/30/2024

## 5 2024 KEY PERFORMANCE INDICATORS AND WORKLOAD MEASURES

### Key Performance Indicators

Measure	Directionality	FY 2021	FY 2022	FY 2023	FY 2024 Target
<b>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.</b>					
Percent of Registered Controlled Substance Facilities inspected annually	Up is Better	98.3%	95.3%	96.6%	100%
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	64.5%	100%	97.5%	100%
Percent of food establishment complaint inspections initiated within five (5) business days of receipt	Up is Better	97.1%	97.6%	95.9%	95%
Percent of pharmaceutical facilities receiving at least one annual inspection	Up is Better	98.1%	95.8%	96.6%	100%
Percent of rodent activity complaints inspected or baited, and closed in the 311 system within three (3) business days of receipt	Up is Better	99.9%	100%	100%	100%
Percent of confirmed foodborne illness cases by DC Health epidemiologists investigated within three (3) business days of notification to HRLA	Up is Better	85%	94.4%	95%	95%
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	New in 2024	New in 2024	New in 2024
<b>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.</b>					
Percent of Certificates of Need (CONs) reviewed within 90 days	Up is Better	79.4%	100%	94.7%	100%
Percentage of vaccine preventable disease cases with contact tracing initiated within 24 hours of receipt of line list of exposed contacts	Up is Better	100%	100%	100%	90%
Percentage of foodborne disease cases with first interview attempt within 72 hours of receipt of the case report	Up is Better	96.6%	100%	100%	90%
Average wait time for vital records walk-in issuance requests (in minutes)	Down is Better	8	16.9	21.5	30



Key Performance Indicators (continued)

Measure	Directionality	FY 2021	FY 2022	FY 2023	FY 2024 Target
<b>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.</b>					
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	86.1%	81.8%	83.3%	85%
Percent of kindergarten-enrolled children with up-to-date immunizations	Up is Better	77.4%	73.8%	87%	85%
Percent of infants who receive an initial hearing screen at birth	Up is Better	97.5%	Not Available	Not Yet Available	95%
Proportion of adults with hypertension who have achieved blood pressure control (seen at Million-Hearts-participating facilities)	Up is Better	49%	60%	63.4%	70%
Percent of students in the School Health Services program with asthma with an asthma action plan on file	Up is Better	4.3%	17.7%	15.2%	48%
Percent of infants that receive a repeat screening after failing an initial hearing screening	Up is Better	46.7%	Not Available	Not Yet Available	75%
Percent of families with one or more completed referrals through Help Me Grow within three months of referral	Up is Better	70.7%	76.5%	88.5%	70%
Percent of Oral Health Program participants referred to a dental home	Up is Better	Not Available	53.1%	93.2%	50%
Percent of women enrolled in the Maternal Infant and Early Childhood Home Visiting (MIECHV) programs that are screened for depression	Up is Better	93.8%	86.8%	83.3%	90%
Percent of WIC households that redeem their benefits	Up is Better	New in 2022	63.9%	84.2%	90%
Percent of adults with high blood cholesterol in Million-Hearts participating facilities who are on statin therapy	Up is Better	New in 2023	New in 2023	83%	86%
Percent of adults with diabetes with poor HbA1c control (A1C > 9%) at Million-Hearts participating facilities	Down is Better	New in 2023	New in 2023	39.7%	32%
Percent of WIC enrollees breastfeeding at six months	Up is Better	New in 2023	New in 2023	38%	40%
Percent of Black/African American WIC enrollees breastfeeding at six months	Up is Better	New in 2023	New in 2023	16.6%	25%

Key Performance Indicators (*continued*)

Measure	Directionality	FY 2021	FY 2022	FY 2023	FY 2024 Target
Percent of immunization providers reporting data electronically to the immunization registry (DOCIS) within six weeks of being onboarded to the Immunization Information System (IIS)	Up is Better	New in 2024	New in 2024	New in 2024	New in 2024
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	New in 2024	New in 2024	New in 2024
<b>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.</b>					
Percent of Ryan White clients living in the District that are prescribed Anti-Retroviral Therapy	Up is Better	92.2%	95.1%	95.6%	98%
Percent of diagnosed HIV positive individuals retained in care that are virally suppressed	Up is Better	87.3%	81.3%	84.3%	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	7.1%	100%	20%	10%
Percent of AIDS Drug Assistance Program (ADAP) beneficiaries who are currently virally suppressed	Up is Better	94.4%	94%	90.4%	85%
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	88.5%	83.8%	90.1%	65%
Percentage of gonorrhea cases with appropriate treatment confirmed among clients seen at the Health and Wellness Center with at least 15 days elapsed from diagnosis date	Up is Better	98.7%	98.9%	96%	90%
For patients with newly diagnosed TB disease for whom 12 months or less of treatment is indicated, the percentage who complete treatment within 12 months	Up is Better	88.9%	90%	100%	90%
Percentage of confirmed new HIV cases linked to care within 30 days of diagnosis	Up is Better	New in 2024	New in 2024	New in 2024	New in 2024

Key Performance Indicators (*continued*)

Measure	Directionality	FY 2021	FY 2022	FY 2023	FY 2024 Target
Percentage of confirmed new HIV cases achieving viral suppression within 90 days of diagnosis	Up is Better	New in 2024	New in 2024	New in 2024	New in 2024
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	New in 2023	New in 2023	55.9%	20%
<b>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.</b>					
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	Not Available	No Applicable Incidents	No Applicable Incidents	100%
Percent of closed points of distribution (CPOD) partners meeting all program requirements	Up is Better	42.6%	42%	63.6%	100%
Percent of employee and partner alert recipients who acknowledge receipt after the first alert attempt	Up is Better	31.9%	No Applicable Incidents	No Applicable Incidents	90%
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	96.2%	94.2%	82%	100%
Percent of District hospitals, skilled nursing facilities, clinics, and other DC HMC members that participate in at least two (2) HMC sponsored trainings and workshops annually	Up is Better	18.9%	20%	55.3%	50%
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	New in 2024	New in 2024	New in 2024
Percent of Medical Reserve Corps (MRC) volunteers that acknowledge the alert notification drill message within 4 hours	Up is Better	New in 2024	New in 2024	New in 2024	New in 2024
Average number of days to respond to EMS patient care complaints	Down is Better	New in 2024	New in 2024	New in 2024	New in 2024

Key Performance Indicators (*continued*)

Measure	Directionality	FY 2021	FY 2022	FY 2023	FY 2024 Target
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 HEPRA prescribed training, as outlined in DC Health Standard Operating Procedure 1380	Up is Better	35.6%	45.2%	45.2%	60%
<b>Create and maintain a highly efficient, transparent, and responsive District government.</b>					
Percent of MSS employees who complete the required MSS training curriculum	Up is Better	89%	56.9%	88.9%	80%
Percent of lapsed dollar amounts on federal awards	Down is Better	16.9%	22.4%	Not Yet Available	3%
Percent of eligible employee reviews completed on time	Up is Better	91.2%	96.9%	91.2%	100%
Percent of required attendees completing trainings mandated by EOM, DCHR, or the DOH Director	Up is Better	81.1%	95.1%	96%	70%
Percent of new subgrants with approved risk-based monitoring plans within 30 days of award	Up is Better	80.3%	71.2%	57.5%	75%
Percent of completed interim subgrant budget periods with performance ratings completed and submitted within 45 days	Up is Better	70.6%	67.3%	73%	60%
Percent of targeted visits completed by monitors per the most recent version of the risk-based monitoring plan	Up is Better	65%	45.5%	69.2%	60%
Average days to hire new employees	Down is Better	82	54.5	62	90

## Workload Measures

Measure	FY 2021	FY 2022	FY 2023
<b>Animal Services Program (ASP)</b>			
Number of calls responded to by Animal Control Officers	18,689	1,881	18,462
Number of dog licenses processed	2,560	2,855	3,813
<b>Compliance, Quality Assurance and Investigation</b>			
Number of Intermediate Care and Nursing Home-related incidents received	194	534	360
Number of investigations performed	355	105	63
<b>Criminal Background Check Program</b>			
Number of Criminal Background Checks processed for health professionals	14,476	15,375	51,249
Number of Criminal Background Checks processed for non-health professionals	5,449	5,338	5,950
<b>Division of Food</b>			
Number of new and routine food establishments inspected	3,418	2,720	3,599
<b>Health Care Facilities Division</b>			
Number of inspections completed by the Health Care Facilities Division	126	103	117
<b>Health Professional Licensing</b>			
Number of new health professional licenses issued	13,549	14,062	18,829
Number of walk-in customers to Processing Center	3,060	12,939	7,534
<b>Intermediate Care Facilities Division (ICFD)</b>			
Number of inspections completed by the Intermediate Care Facilities Division	237	188	184
<b>Pharmaceutical Control Division (PCD)</b>			
Number of pharmacies inspected	167	161	157
Number of Registered Controlled Substance Facilities inspected	234	221	227
<b>Health Equity Capacity Building</b>			
Number of partners/stakeholders engaged with Office of Health Equity collaborative practice change programs	New in 2024	New in 2024	New in 2024

Workload Measures (continued)

Measure	FY 2021	FY 2022	FY 2023
Number of public and private partners submitting data to the Office of Health Equity to support assessment of structural determinants of health	New in 2024	New in 2024	New in 2024
<b>Behavioral Risk Factor Surveillance System (BRFSS)</b>			
Number of Behavioral Risk Factor Surveillance System (BRFSS) surveys administered	2,043	2,694	2,668
<b>Certificate of Need (CON) Program</b>			
Number of Certificate of Need application decisions	34	36	38
<b>Vital Records</b>			
Number of walk-in customers to the Vital Records Office	10,721	31,139	47,013
<b>Cancer Programs Division</b>			
Number of women provided with navigation services for breast cancer screening, diagnosis and treatment through Project WISH	110	105	678
Number of people provided with navigation services for colorectal cancer screening, diagnosis and treatment through DC3C	100	325	996
<b>Chronic Disease Division</b>			
Number of residents enrolled in evidence based chronic disease self-management or lifestyle change programs	New in 2023	New in 2023	Not Yet Available
<b>Evidence-Based Home Visiting Program</b>			
Number of families participating in evidence-based home visiting programs	360	344	282
Number of resource referrals made through the evidence-based Home Visiting Program	705	564	375
<b>Farmers' Market Nutrition Program (FMNP)</b>			
Number of District residents receiving supplemental groceries from School-Based Nutrition Markets	7,020	8,959	11,290
Number of District residents receiving meals from the Home Delivered Meals program	Not Available	2,440	4,632

Workload Measures (continued)

Measure	FY 2021	FY 2022	FY 2023
Number of District seniors receiving supplemental groceries from the Commodities Supplemental Food Program (CSFP)	5,411	5,411	5,570
Number of stores participating in Healthy Corner Store Program	New in 2023	New in 2023	54
Number of SNAP Match stores	New in 2023	New in 2023	32
<b>Help Me Grow (HMG)</b>			
Number of referrals provided by the Help Me Grow program that are successfully linked to resources.	New in 2024	New in 2024	New in 2024
Number of families/providers calls/referrals to Help Me Grow	New in 2024	New in 2024	New in 2024
<b>Home Delivered Meals</b>			
Number of District residents redeeming Produce Plus benefits	20,711	23,014	14,465
<b>Newborn Screening Program</b>			
Number of infants receiving a hearing screening in their first month of life	11,577	Not Available	Not Yet Available
<b>Perinatal Health Program</b>			
Number of participants receiving services through DC Healthy Start	460	634	444
<b>Pop-Up Markets in Elementary Schools</b>			
Number of grocery bags distributed through the Joyful Food Markets Program	New in 2023	New in 2023	54,916
Number of markets held through the Joyful Food Markets Program	New in 2023	New in 2023	449
<b>Primary Care Office (PCO) Grant Programs</b>			
Number of health care workforce supported by the Primary Care Office	New in 2024	New in 2024	New in 2024
<b>Produce Plus Program</b>			
Number of individuals receiving produce from Produce Plus program	New in 2024	New in 2024	New in 2024
Number of produce boxes distributed through the partnership with the Capital Area Food Bank	New in 2023	New in 2023	61,200
Number of households reached through the partnership with the Capital Area Food Bank	New in 2023	New in 2023	12,000
<b>School Health Programs</b>			



Workload Measures (continued)

Measure	FY 2021	FY 2022	FY 2023
Number of students served by the School Health Services Program	82,199	82,886	81,707
Number of individuals who receive services in a school based health center	New in 2023	New in 2023	4,750
<b>School-Based Oral Health Program</b>			
Number of Oral Health Program participants who received a dental screening	540	898	2,181
Number of individuals served by the Senior Dental Program	New in 2024	New in 2024	New in 2024
<b>Special Supplemental Nutrition Program for Women, Infants and Children (WIC)</b>			
Number of Special Supplemental Nutrition Program for Women, Infants, Children (WIC) enrollees	21,781	Not Available	21,414
<b>The Safe Sleep Program</b>			
Number of parents/caregivers educated on infant safe sleep practices	743	1,128	1,581
Number of partners and childcare providers that are educated by DC Health Safe Sleep programs on infant safe sleep practices	New in 2024	New in 2024	New in 2024
<b>Tobacco Control Program</b>			
Number of calls to the DC Tobacco Quitline	3,640	3,105	2,775
<b>AIDS Drug Assistance</b>			
Number of DC ADAP prescriptions	Not Available	8,096	8,221
Number of DC ADAP clients served	733	738	959
Number of reported HIV cases investigated	Not Available	611	596
Number of HIV, STD, and hepatitis laboratory reports processed	Not Available	108,486	175,006
<b>Condom Distribution</b>			
Number of condoms (female and male) distributed by DC Health Condom Program	2,439,900	3,151,000	3,029,000
Number of youth (15-19 years) screened for chlamydia and gonorrhea (CT and GC) through HAHSTA-supported programs	653	561	Not Available
<b>Grants Management</b>			

Workload Measures (continued)

Measure	FY 2021	FY 2022	FY 2023
Number of site visits conducted annually within Care and Treatment	New in 2024	New in 2024	New in 2024
<b>Pre-Exposure Prophylaxis (PrEP)</b>			
Number of patient encounters (physically or virtually) at the DC Health and Wellness Center.	New in 2023	New in 2023	8,281
<b>Emergency Medical Services and Prehospital Medicine Regulation</b>			
Number of scheduled/announced EMS vehicle inspections conducted	683	474	456
Number of new EMT certifications issued by DC Health	347	539	612
Number of EMS Agency certifications issued by DC Health	New in 2024	New in 2024	New in 2024
Number of EMS Education Institution certifications issued by DC Health	New in 2024	New in 2024	New in 2024
Number of EMS Provider certification applications received and processed	New in 2024	New in 2024	New in 2024
<b>Healthcare Coalition Development</b>			
Number of Health and Medical Coalition (HMC) Meetings held	81	69	85
Number of Radio Drills conducted	39	35	25
Number of HMC facilities participating in exercises and special events involving HMC Coordination	115	115	115
Number of HMC-sponsored trainings, workshops, exercises, learning and education opportunities	New in 2023	New in 2023	6
<b>Medical Materiel Management and Distribution</b>			
Number of emergency preparedness-related trainings and exercises coordinated by HEPRA	0	3	4
Number of DC Health personnel trained for point of distribution (POD) operations	40	16	31
<b>Special Events Permitting</b>			
Number of Medical Reserve Corps (MRC) activations	85	42	2
Total number of (Medical Reserve Corps (MRC) volunteer hours	40,850	247	36.5
Number of Health Emergency Command Center (HECC) Activations	2	0	1

Workload Measures *(continued)*

Measure	FY 2021	FY 2022	FY 2023
Number of Medical Reserve Corps (MRC) personnel activated in response to an incident or planned event	2,650	62	7
Number of special event permit applications which require a health, medical and safety plan review by HEPRA	12	103	150