

DEPARTMENT OF HEALTH

PROPOSED FY 2025 PERFORMANCE PLAN

APRIL 3, 2024



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1 DEPARTMENT OF HEALTH

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.

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 PROPOSED 2025 OBJECTIVES

Strategic Objective

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.

3 PROPOSED 2025 OPERATIONS

Operation Title	Operation Description	Type of Operation
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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.

Criminal Background Check	The Division is responsible for processing criminal	Daily Service
Program	background checks for health care professionals and prospective applicants of long term care facilities.	Dairy 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 Professional Licensing	Receive, process, and review for compliance with District and Federal regulatory compliance license applications for over seventy different healthcare professions.	Daily Service
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).	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 compliant, 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

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Operation Title	Operation Description	Type of Operation
Intermediate Care Facilities Division (ICFD)	The 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.	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 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.	Daily Service

Operation Title	Operation Description	Type of Operation
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), 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.	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.

in health outcomes.		
Social Epidemiology,	OHE applies data driven and evidence-based	Daily Service
Evaluation and Data	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.	

Operation Title	Operation Description	Type of Operation
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.	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, that 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.

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
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

Operation Description	Type of Operation
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), 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 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.	Daily Service
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
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, an provides expertise and information on	Daily Service
	 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. Occupational Safety and Health Statistics Program (OSHS), DC 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. 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. 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. 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

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.

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
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
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

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

Operation Title	Operation Description	Type of Operation
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.	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 Iementary 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
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

Operation Title	Operation Description	Type of Operation
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)	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.	Daily Service
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.	Daily Service
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.	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
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

Operation Title	Operation Description	Type of Operation
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
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.	Daily Service

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.

the cases and status of the epi AIDS Drug Assistance	The AIDS Drug Assistance Program (ADAP) provides	Daily Service
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
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, Aanagement, & 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.	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 contacted 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
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
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.	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

Operation Title	Operation Description	Type of Operation
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.	Daily Service

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.

can respond to, and recover fro	m public health and health care system events and em	ergencies.
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
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
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

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Operation Title	Operation Description	Type of Operation
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
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
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
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 PROPOSED 2025 KEY PERFORMANCE INDICATORS AND WORKLOAD MEASURES

Key Performance Indicators						
Measure	Directionality FY 2022	FY 2023	FY 2024 Target	FY 2025 Target		

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.

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Percent of pharmaceutical facilities receiving at least one annual inspection	Up is Better	95.8%	96.6%	100%	95%
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%	100%
Percent of confirmed foodborne illness cases by DC Health epidemiologists investigated within three (3) business days of notification to HRLA	Up is Better	94.4%	95%	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	95%
Percent of Registered Controlled Substance Facilities inspected annually	Up is Better	95.3%	96.6%	100%	95%
Percent of follow-up inspections of health care facilities with harm level deficiencies completed within 30 days	Up is Better	100%	100%	100%	100%
Percent of samples taken from rabies suspect animals submitted for testing within 48 hours	Up is Better	100%	97.5%	100%	100%
Percent of food establishment complaint inspections initiated within five (5) business days of receipt	Up is Better	97.6%	95.9%	95%	95%
Percent of rodent activity complaints inspected or baited, and closed in the 311 system within three (5) business days of receipt	Up is Better	New in 2025	New in 2025	New in 2025	New in 2025

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.

Percentage of vaccine preventable	Up is Better	100%	100%	90%	90%
disease cases with contact tracing					
initiated within 24 hours of receipt of line					
list of exposed contacts					
Percentage of foodborne disease	Up is Better	100%	100%	90%	90%
cases with first interview attempt within					
72 hours of receipt of the case report					
Average wait time for vital records	Down is	16.9	21.5	30	30
walk-in issuance requests (in minutes)	Better				

Key Performance Indicators (continued)

Measure	Directionality	FY 2022	FY 2023	FY 2024 Target	FY 2025 Target
Percentage of radiation compliants received initiatied within (3) business days	Up is Better	New in 2025	New in 2025	New in 2025	New in 2025
Percentage of radiation applications approve within (3) business days	Up is Better	New in 2025	New in 2025	New in 2025	New in 2025
Percentage 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	New in 2025
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	New in 2025
Percent of Certificates of Need (CONs) reviewed within the period required by District law	Up is Better	New in 2025	New in 2025	New in 2025	New in 2025

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.

parties in the leading causes of alsease t		e Bistilieti			
Percent of kindergarten-enrolled	Up is Better	73.8%	87%	85%	90%
children with up-to-date immunizations					
Percent of infants who receive an	Up is Better	Not	Not Yet	95%	95%
initial hearing screen at birth		Available	Available		
Percent of infants that receive a	Up is Better	Not	Not Yet	75%	75%
repeat screening after failing an intial		Available	Available		
hearing screening					
Percent of families with one or more	Up is Better	76.5%	88.5%	70%	91%
completed referrals through Help Me					
Grow within three months of referral					
Percent of Oral Health Program	Up is Better	53.1%	93.2%	50%	95%
participants referred to a dental home					
Percent of WIC households that	Up is Better	63.9%	84.2%	90%	90%
redeem their benefits					
Percent of adults with high blood	Up is Better	New in	83%	86%	82.3%
cholesterol in Million-Hearts		2023			
participating facilities who are on statin					
therapy					
Percent of adults with diabetes with	Down is	New in	39.7%	32%	32.2%
poor HbA1c control (A1C > 9%) at	Better	2023			
Million-Hearts participating facilities					
Percent of WIC enrollees	Up is Better	New in	38%	40%	40%
breastfeeding at six months		2023			
Percent of Black/African American	Up is Better	New in	16.6%	25%	25%
WIC enrollees breastfeeding at six		2023			
months					

Measure	Directionality	FY 2022	FY 2023	FY 2024 Target	FY 2025 Target
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	80%
Proportion of adults with hypertension who have achieved blood pressure control (seen at Million-Hearts-participating facilities)	Up is Better	60%	62.4%	62.4%	70%
Percent of eligible children enrolled in DC Health funded evidence-based home visiting programs who receive developmental and social-emotional screenings	Up is Better	81.8%	83.3%	85%	85%
Percent of women enrolled in DC Health funded evidence-based home visiting programs that are screened for depression	Up is Better	86.8%	83.3%	90%	86%
Percent of Kindergarten-enrolled hildren with 2 doses of MMR vaccine	Up is Better	New in 2025	New in 2025	New in 2025	New in 2025
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	New in 2025
Percent of immunization providers reporting data electronically to the mmunization registry (DOCIIS) that have query by parameter (QBP) functionality	Up is Better	New in 2025	New in 2025	New in 2025	New in 2025

Key Performance Indicators (continued)

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.

the cases and status of the epidemics in	the District.				
Percent of Ryan White clients living in the District that are prescribed Anti-Retroviral Therapy	Up is Better	95.1%	95.6%	98%	98%
Percent of diagnosed HIV positive individuals retained in care that are virally suppressed	Up is Better	81.3%	84.3%	85%	90%
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	100%	20%	10%	15%
Percent of AIDS Drug Assistance Program (ADAP) beneficiaries who are	Up is Better	94%	90.4%	85%	85%

currently virally suppressed

Key Performance	Indicators	(continued)
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Measure	Directionality	FY 2022	FY 2023	FY 2024 Target	FY 2025 Target
Percentage of individuals prescribed PrEP at the DC Health & Wellness Center who are members of the demographic groups disproportionately impacted by HIV (e.g., Black Women, men who have sex with men, Transgender Women of Color)	Up is Better	83.8%	90.1%	65%	70%
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	98.9%	96%	90%	92%
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	90%	100%	90%	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	80%
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	60%
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	55.9%	20%	25%

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.

Percent of closed points of	Up is Better	42%	63.6%	100%	100%
distribution (CPOD) partners meeting all					
program requirements					
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	94.2%	82%	100%	100%

Measure	Directionality	FY 2022	FY 2023	FY 2024 Target	FY 2025 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	45.2%	45.2%	60%	60%
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	No Applicable Incidents	100%	100%	100%
Percent of employee and partner alert recipients who acknowledge receipt after the first alert attempt	Up is Better	No Applicable Incidents	No Applicable Incidents	90%	90%
Average number of days to respond to EMS patient care complaints	Down is Better	New in 2024	New in 2024	New in 2024	14
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	45%
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	20%	55.3%	50%	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	100%

Key Performance Indicators (continued)

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

Percent of MSS employees who complete the required MSS training curriculum	Up is Better	56.9%	88.9%	80%	80%
Percent of eligible employee reviews completed on time	Up is Better	96.9%	91.2%	100%	100%
Percent of required attendees completing trainings mandated by EOM, DCHR, or the DOH Director	Up is Better	95.1%	96%	70%	70%
Average days to hire new employees	Down is Better	54.5	62	90	90
Percent of lapsed dollar amounts on federal awards	Down is Better	22.4%	Not Yet Available	3%	3%
Percent of new subgrants with approved risk-based monitoring plans within 30 days of award	Up is Better	71.2%	57.5%	75%	75%
Percent of completed interim subgrant budget periods with performance ratings completed and submitted within 45 days	Up is Better	67.3%	73%	60%	60%

Measure	Directionality	FY 2022	FY 2023	FY 2024 Target	FY 2025 Target
Percent of targeted visits completed by monitors per the most recent version of the risk-based monitoring plan	Up is Better	45.5%	69.2%	60%	60%
Percent of new hires that are District residents	Up is Better	New in 2023	41.6%	No Target Set	No Target Set
Percent of employees that are District residents	Up is Better	New in 2023	43.1%	No Target Set	No Target Set
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	New in 2023	19.3%	No Target Set	No Target Set
Percent of required contractor evaluations submitted to the Office of Contracting and Procurement on time	Up is Better	New in 2023	55.6%	No Target Set	No Target Set
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	New in 2023	Not Available	No Target Set	No Target Set

Key Performance Indicators (continued)

Workload Measures

Measure	FY 2022	FY 2023
Animal Services Program (ASP)		
Number of calls responded to by Animal	1,881	18,462
Control Officers	,	
Number of dog licenses processed	2,855	3,813
Compliance, Quality Assurance and Investigation	n	
Number of Intermediate Care and Nursing	534	360
Home-related incidents received		
Number of investigations performed	105	63
Criminal Background Check Program		
Number of Criminal Background Checks	15,375	51,249
processed for health professionals		
Number of Criminal Background Checks	5,338	5,950
processed for non-health professionals		
Division of Community Hygiene		
Number of Bedding and Upholstery	Not Available	Not Available
registration applications processed by the		
Division of Community Hygiene		
Number of inspections completed by the	New in 2025	New in 2025
Division of Community Hygiene		
Division of Food		
Number of new and routine food	2,720	3,599
establishments inspected		
Health Care Facilities Division		
Number of inspections completed by the	103	117
Health Care Facilities Division		
Health Professional Licensing		
Number of new health professional licenses	14,062	18,829
issued		
Number of walk-in customers to Processing	12,939	7,534
Center		
Number of investigations performed based on	Not Available	Not Available
suspected unlicensed practice		
Intermediate Care Facilities Division (ICFD)		
Number of inspections completed by the	188	184
Intermediate Care Facilities Division		
Pharmaceutical Control Division (PCD)		
Number of pharmacies inspected	161	157
Number of Registered Controlled Substance	221	227
Facilities inspected		
Radiation Protection Division (RPD)		
		N. 1
Number of Radiation Inspections at Body Arts	New in 2025	New in 2025
Number of Radiation Inspections at Body Arts Facilities	New in 2025	New in 2025

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FSS)	
2,694	2,668
7/	70
30	38
31,139	47,013
105	678
325	996
New in 2023	124
0	
	New in 2025 New in 2025 New in 2024 New in 2024 FSS) 2,694 36 31,139 105

Measure	FY 2022	FY 2023
Number of resource referrals made through the evidence-based Home Visiting Program	564	375
Number of families participating in DC Health funded evidence-based home visiting programs	344	282
Farmers' Market Nutrition Program (FMNP)		
Number of District residents receiving supplemental groceries from School-Based Nutrition Markets	8,959	11,290
Number of District seniors receiving supplemental groceries from the Commodities Supplemental Food Program (CSFP)	5,411	5,570
Help Me Grow (HMG)		
Number of referrals provided by the Help Me Grow program that are successfully linked to resources.	New in 2024	New in 2024
Number of families/providers calls/referrals to Help Me Grow	New in 2024	New in 2024
Home Delivered Meals		
Number of District residents redeeming Produce Plus benefits	23,014	14,465
Newborn Hearing Screening Program		
Number of infants receiving a hearing screening in their first month of life	Not Available	Not Yet Available
Perinatal Health Program		
Number of participants receiving services though DC Healthy Start	634	444
School Health Programs		
Number of students served by the School Health Services Program	82,886	81,707
School-Based Oral Health Program		
Number of Oral Health Program participants who received a dental screening	898	2,181
Number of individuals served by the Senior Dental Program	New in 2024	New in 2024
Special Supplemental Nutrition Program for Wo	omen, Infants and Children (WIC)
Number of Special Supplemental Nutrition Program for Women, Infants, Children (WIC) enrollees	Not Available	21,414
The Safe Sleep Program		
Number of parents/caregivers educated on infant safe sleep practices	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

Measure	FY 2022	FY 2023
Tobacco Control Program		
Number of calls to the DC Tobacco Quitline	3,105	2,775
AIDS Drug Assistance		
Number of DC ADAP prescriptions	8,096	8,221
Number of DC ADAP clients served	738	959
Number of reported HIV cases investigated	611	596
Number of HIV, STD, and hepatitis laboratory	108,486	175,006
reports processed		
Condom Distribution		
Number of condoms (female and male)	3,151,000	3,029,000
distributed by DC Health Condom Program		
Number of youth (15-19 years) screened for	561	Not Available
chlamydia and gonorrhea (CT and GC) through		
HAHSTA-supported programs		
Grants Management		
Number of site visits conducted annually	New in 2024	New in 2024
within Care and Treatment		·
Pre-Exposure Prophylaxis (PrEP)		
Number of patient encounters (physically or	New in 2023	8,281
virtually) at the DC Health and Wellness Center.		
Emergency Medical Services and Prehospital Me	edicine Regulation	
Number of scheduled/announced EMS	474	456
vehicle inspections conducted	., .	
Number of new EMT certifications issued by	539	612
DC Health ,	•••	
Number of EMS Agency certifications issued	New in 2024	New in 2024
by DC Health		
Number of EMS Education Institution	New in 2024	New in 2024
certifications issued by DC Health		
Number of EMS Provider certification	New in 2024	New in 2024
applications received and processed		
Healthcare Coalition Development		
Number of Health and Medical Coalition	69	85
(HMC) Meetings held		
Number of Radio Drills conducted	35	25
Number of HMC facilities participating in	115	115
exercises and special events involving HMC		
Coordination		
Number of HMC-sponsored trainings,	New in 2023	6
workshops, exercises, learning and education		
opportunities		
Medical Materiel Management and Distribution		
Number of emergency preparedness-related	3	4
i annoci of chicigene, prepareaness related		4

Number of emergency preparedness-related	3	4
trainings and exercises coordinated by HEPRA		

Measure	FY 2022	FY 2023
Number of DC Health personnel trained for point of distribution (POD) operations	16	31
Special Events Permitting		
Number of Medical Reserve Corps (MRC) activations	42	2
Total number of (Medical Reserve Corps (MRC) volunteer hours	247	36.5
Number of Health Emergency Command Center (HECC) Activations	0	1
Number of Medical Reserve Corps (MRC) personnel activated in response to an incident or planned event	62	7
Number of special event permit applications which require a health, medical and safety plan review by HEPRA	103	150