The mission of the Public Health Department is to improve the health of our communities by preventing disease, promoting wellness, and ensuring access to needed health care.

The Public Health Department has two service divisions, "Community Health" and "Primary Care and Family Health," and two administrative divisions, "Administration and Support" and "Tobacco Settlement." The Department has a total of 544 staff positions in 9 permanent locations and a variety of community service locations throughout the county.

Administration and Support:
Provide an executive focus on community partnerships, leadership, and medical science that is responsive to both internal and external demands for financial planning and accounting, information technology development, human resource guidance, quality improvement, and facility management.

Primary Care and Family Health:
Provide prevention and early intervention health care at seven Federally Qualified Health Centers. Ensure access to necessary medical care, and assessment for children, low-income families, and adults with medical emergencies, and other people with special needs.

Community Health:
Prevent disease and promote healthy behaviors for the entire community by monitoring, investigating, and controlling environmental hazards and communicable diseases. Inform and empower people about nutrition, maternal child and family health, chronic diseases, and human services issues.

Tobacco Settlement:
The Tobacco Settlement Division administers the tobacco settlement revenues and provides staff support to the Tobacco Settlement Advisory Committee (TSAC) and the programs funded through TSAC.

Ensure that 95% of preschool children are fully immunized.

The percentage of children fully immunized helps track children's health and identify areas where additional resources may be needed to insure compliance.

The trend of the number of indigent patients receiving health care services is an indicator of the state of the local economy and the needs for additional health care services and resources.
To ensure an efficient and responsive government, the County will maintain the rate of General Liability claims filed at no more than 90 - 100% of the previous year’s actual claims filed.

As an efficient and responsive government, the County will maintain the cost of worker’s compensation incident claims to $1.17 per $100 payroll.

To improve workers safety, the County will conduct its operations in order to maintain the rate of Workers’ Compensation incident claims to 12 or less per 100 FTE employees Countywide.

As an efficient and responsive government, the County will maintain the rate of Workers’ Compensation claims filed between 90 - 100% of the previous year’s actual claims filed.

As an efficient and responsive government, the County will maintain a productive workforce through a countywide Lost Time Rate of 5.9% or less.

To ensure an efficient and responsive government, the County will maintain a count of 3 or less Medical Malpractice claims filed per quarter.

As an efficient and responsive government, the County will maintain a quality workforce through completing 95 -100% of departmental Employee Performance Reviews (EPRs) by the Anniversary Due Date.

NOTE: This cost center is for fiscal tracking purposes only.
Divn 11 – Administration
$6.7M / $2.0M
FTE 60.8

Sub-Divn 05: Facilities
Obj: Direct Department facility maintenance and repair activities, conducts inspections of facilities, and implements capital projects plans.

Sub-Divn 04: Fiscal Services
Obj; Provide overall financial management of the Department, administers all financial activities relating to program development and operation, including production and maintenance of financial statement, budgets, and fiscal policies.

Sub-Divn 02: Information Technology
Obj: improve Department’s business processes by implementing efficient applications, supporting a technologically current infrastructure and promoting data-driven decision making.

Sub-Divn 03: Human Resources
Obj: Develop recruitment & hiring plans, advise management and staff on HR issues, process payroll, advise and represent Department on Affirmative Action, workers’ compensation and labor negotiation teams.

Program: Title from CCID
Number from CCID
Budget/GFC from CCID

Program Budgets are $Total Uses / $Total General Fund Contribution

Performance Measure Legend
- Department-wide Effectiveness Performance Measure
- Change to Performance Measure
- Performance Measure to Delete
- New Performance Measure

FTE: CCID

Costs shown in Millions ($M) or Thousands ($K)
Program Budgets are $Total Uses / $Total General Fund Contribution

At least 95% of medical chart reviews will document accurate medical records coding and service documentation.

Ensure that 80% - 90% of requests assigned to Public Health Department Facilities will be completed within the timeline goals.

Ensure that at least 95% of requests assigned to Public Health Department Facilities will be followed up within 4 hours.
Ensure that 99.1% of Public Health clinic infants born at >37 weeks gestation weigh at least 2,500 grams (5.5 pounds).

Increase the percentage of females 11-18 years of age at the Public Health clinics that have received the HPV vaccine from 10% in FY 07/08 to 50% in FY 09/10.

Annually screen for Chlamydia and treat as appropriate in at least 80% of family planning patients aged 16-25.

Provide medical care to 30,760 indigent patients each year.

Decrease the number of the Public Health Department’s Santa Barbara Regional Health Authority (SBRHA) Medi-Cal patients who meet the definition of persistent asthma from 28% in FY 06/07 to 20% in FY 07/08.

Ensure that 70% of Santa Barbara Clinic Family Practice patients with the primary or secondary diagnosis of depression will have completed a depression assessment within the past 12 months.

At least 80% of diabetic patients in Public Health Department clinics will have a dilated eye exam annually.

At least 80% of women aged 40 and older seen in Public Health clinics will have a mammogram every 2 years.

Ensure that 95% of people completing the California Children’s Services (CCS) Family Survey will rate the overall experience of getting their child CCS services as good or very good.

Provide occupational or physical therapy evaluations to at least 95% of California Children’s Services (CCS) eligible children within 30 days per State requirements.

At least 95% of people completing the California Children’s Services (CCS) Family Survey will rate the overall experience of getting their child CCS services as good or very good.

Screen 100% of the applications for eligibility prior to authorizing treatment.
Performance Measure Legend
Department-wide Effectiveness Performance Measure
Change to Performance Measure
Performance Measure to Delete
New Performance Measure
Budgets shown in Millions ($M) or Thousands ($K)
Program Budgets are $Total Uses / $Total General Fund Contribution

PUBLIC HEALTH DEPARTMENT

Div 12 – Family Health & Primary Care
$55.8M / $1.7M
FTE: 287.9

Sub-Div 03: Medically Indigent
Adult MIA/Indigent Care
Obj: Plan organize and provides direction for the Adult Services Division.

MIA Hospital Program 1570
$3.6M / $0.0K
FTE: 0.0

MIA Clinic Referral Program 1572
$2.0M / $0.0K
FTE: 0.0

TSAC Internal Special Clinics Program 1573
$7.5K / $0.0K
FTE: 0.0

Child Health Disability Program (CHDP-TSAC) Dental Program 1574
$150.0K / $0.0K
FTE: 0.0

Maddy – Emergency Medical Services Program 1575
$3.2M / $0.0K
FTE: 0.0

TSAC Emergency Room Doctors Program 1576
$216.0K / $0.0K
FTE: 0.0

TSAC Primary & Specialty Care Program 1577
$275.0K / $0.0K
FTE: 0.0

TSAC Hospital & Emergency Room Care Program 1578
$908.2K / $0.0K
FTE: 0.0

UR Miscellaneous Program 1579
$127.8K / $0.0K
FTE: 0.0

Maddy – Emergency Medical Services Program 1575
$3.2M / $0.0K
FTE: 0.0

Medical Social Service Program 1580
$302.8K / $0.0K
FTE: 3.3

TSAC Hospital & Emergency Room Care Program 1578
$908.2K / $0.0K
FTE: 0.0

TSAC Primary & Specialty Care Program 1577
$275.0K / $0.0K
FTE: 0.0

UR Miscellaneous Program 1579
$127.8K / $0.0K
FTE: 0.0

TSAC Hospital & Emergency Room Care Program 1578
$908.2K / $0.0K
FTE: 0.0

Yard Medical Social Worker Program 1583
$965.3K / $0.0K
FTE: 11.3

100% of patients referred for MIA, TSAC or Maddy will be financially screened for other eligible programs prior to funding from these programs.

100% of patients referred for MIA, TSAC or Maddy will be financially screened for other eligible programs prior to funding from these programs.

100% of patients referred for MIA, TSAC or Maddy will be financially screened for other eligible programs prior to funding from these programs.

100% of patients referred for MIA, TSAC or Maddy will be financially screened for other eligible programs prior to funding from these programs.

100% of patients referred for MIA, TSAC or Maddy will be financially screened for other eligible programs prior to funding from these programs.

100% of patients referred for MIA, TSAC or Maddy will be financially screened for other eligible programs prior to funding from these programs.

100% of patients referred for MIA, TSAC or Maddy will be financially screened for other eligible programs prior to funding from these programs.

100% of patients referred for MIA, TSAC or Maddy will be financially screened for other eligible programs prior to funding from these programs.

100% of patients referred for MIA, TSAC or Maddy will be financially screened for other eligible programs prior to funding from these programs.

100% of patients referred for MIA, TSAC or Maddy will be financially screened for other eligible programs prior to funding from these programs.

20% of clients who apply for MIA will receive consultation from the Medical Social Worker.

Increase funding recovered by obtaining at least $550,000 Medi-Cal reimbursement for Medically Indigent Adult (MIA) patients subsequently granted retroactive Medi-Cal coverage.

Increase funding recovered by obtaining at least $550,000 Medi-Cal reimbursement for Medically Indigent Adult (MIA) patients subsequently granted retroactive Medi-Cal coverage.

Increase funding recovered by obtaining at least $550,000 Medi-Cal reimbursement for Medically Indigent Adult (MIA) patients subsequently granted retroactive Medi-Cal coverage.

Increase funding recovered by obtaining at least $550,000 Medi-Cal reimbursement for Medically Indigent Adult (MIA) patients subsequently granted retroactive Medi-Cal coverage.

Increase funding recovered by obtaining at least $550,000 Medi-Cal reimbursement for Medically Indigent Adult (MIA) patients subsequently granted retroactive Medi-Cal coverage.

Increase funding recovered by obtaining at least $550,000 Medi-Cal reimbursement for Medically Indigent Adult (MIA) patients subsequently granted retroactive Medi-Cal coverage.

Increase funding recovered by obtaining at least $550,000 Medi-Cal reimbursement for Medically Indigent Adult (MIA) patients subsequently granted retroactive Medi-Cal coverage.

Increase funding recovered by obtaining at least $550,000 Medi-Cal reimbursement for Medically Indigent Adult (MIA) patients subsequently granted retroactive Medi-Cal coverage.

Increase funding recovered by obtaining at least $550,000 Medi-Cal reimbursement for Medically Indigent Adult (MIA) patients subsequently granted retroactive Medi-Cal coverage.
**PUBLIC HEALTH DEPARTMENT**

### Div 12 – Family Health & Primary Care

- **Budget**: $55.8M
- **General Fund Contribution**: $1.7M
- **FTE**: 287.9

### Sub-Div 05: Healthcare for Homeless

**Obj**: Provide assessment and case management services to women, teens, and children in a community setting.

### Sub-Div 06: Clinical Labs

**Obj**: Provides advanced diagnostic services to seven outpatient clinics using patient specimens.

### Performance Measure Legend

- **Department-wide Effectiveness Performance Measure**
- **Change to Performance Measure**
- **Performance Measure to Delete**
- **New Performance Measure**
- **Budgets shown in Millions ($M) or Thousands ($K)**
- **Program Budgets are $ Total Uses / $Total General Fund Contribution**

### Cost Center Performance Plan Health and Public Assistance

**NOTE**: This cost center is for fiscal tracking purposes only.

<table>
<thead>
<tr>
<th>Hospital Services - Formula</th>
<th>Hospital Services - Discretionary</th>
<th>Physician Services - ER Physicians</th>
<th>Other Health Care</th>
<th>Homeless Program</th>
<th>Clinical Lab – Santa Maria</th>
<th>Clinical Lab – Santa Barbara</th>
<th>Clinical Lab – Lompoc</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program 2100</td>
<td>Program 2150</td>
<td>Program 2200</td>
<td>Program 2300</td>
<td>Program 1361</td>
<td>Program 1701</td>
<td>Program 1702</td>
<td>Program 1703</td>
</tr>
<tr>
<td>$26.5K / $0.0K FTE: 0.0</td>
<td>$26.5K / $0.0K FTE: 0.0</td>
<td>$167.6K / $0.0K FTE: 0.0</td>
<td>$9.9K / $0.0K FTE: 0.0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Increase the percent-age of homeless women who receive care in the first trimester from 10% to 45%, thus complying with federal standards.*

*Increase the percent-age of homeless children up-to-date on their immunizations by 5% to 90%.*

*At least 99% of proficiency tests in the clinical laboratory will be accurate.*

*Certified phlebotomy technicians will correctly collect and process 100% of patient specimens for clinical lab testing.*
Performance Measure Legend

<table>
<thead>
<tr>
<th>Department-wide Effectiveness Performance Measure</th>
<th>Change to Performance Measure</th>
<th>Performance Measure to Delete</th>
<th>New Performance Measure</th>
</tr>
</thead>
</table>

Budgets shown in Millions ($M) or Thousands ($K)

Program Budgets are $Total Use / $Total General Fund Contribution

### PUBLIC HEALTH DEPARTMENT

**Divn 12 – Family Health & Primary Care**  
$56.8M / $1.7M  
FTE: 287.9

**Sub-Divn 09: Inmate Health**  
Obj: Provides review of health & safety practices to the jail, juvenile hall and camps.

**Sub-Divn 08: Pharmacy**  
Obj: Provide pharmaceutical services to seven outpatient clinics.

**Sub-Divn 07: Radiology**  
Obj: Provide diagnostic radiology services to seven outpatient clinics and outside provider contracts.

---

**Cost Center Performance Plan**

**Clinic X-Ray**  
**Santa Maria**  
Program 1711  
$143.8K / $0.0K  
FTE: 1.2

**Clinic X-Ray**  
**Santa Barbara**  
Program 1712  
$200.0K / $0.0K  
FTE: 1.6

**Clinical X-Ray**  
**Lompoc**  
Program 1713  
$145.0K / $0.0K  
FTE: 1.3

**Pharmacy**  
**Santa Maria**  
Program 1720  
$1.7M / $0.0K  
FTE: 3.2

**Pharmacy**  
**Santa Barbara**  
Program 1721  
$2.3M / $0.0K  
FTE: 7.0

**Pharmacy**  
**Lompoc**  
Program 1723  
$1.7M / $0.0K  
FTE: 4.7

**Jail Medical Services**  
Program 1650  
$1.1K / $0.0K  
FTE: 0.0

**Probation Medical Services**  
Program 1651  
$66.1K / $0.0K  
FTE: 4.9

**Lompoc Medical Records**  
Program 1694  
$429.6K / $0.0K  
FTE: 4.9

**Santa Maria Medical Records**  
Program 1696  
$492.4K / $0.0K  
FTE: 6.8

**Santa Barbara Medical Records**  
Program 1697  
$502.5K / $0.0K  
FTE: 5.8

Ensure that 95% of dictated medical reports will be transcribed and electronically delivered within 24 hours.  
Medical records will be available on-demand for at least 95% of open access appointments at the Lompoc clinic.

---

**Probation Medical Services**

Ensure that 95% of dictated medical reports will be transcribed and electronically delivered within 24 hours.  
Medical records will be available on-demand for at least 95% of open access appointments at the Santa Barbara clinic.
Performance Measure Legend

PUBLIC HEALTH DEPARTMENT
Department-wide Effectiveness Performance Measure
Performance Measure to Delete

Program Budgets are $Total Uses / $Total General Fund Contribution

$55.8M / $1.7M
FTE 287.9

Sub-Div: 12: Santa Maria Clinics
Obj: Provides primary care and specialty programs to the uninsured and under insured population in and around the Santa Maria and Cuyama area.

Program: Title from CCID
Number from CCID
Budget/GFC from CCID
(Communicated by Prog)
FTE: CCID

Cost Center Performance Plan Health and Public Assistance

Division # & Title from CCID
Cost Center Report
Budget/GFC from CCID
(Communicated by Prog)
FTE: CCID

Sub-Div: # & Name from Cost Center Report
Obj: from CCID Inventory

Program Title from CCID
Number from CCID
Budget/GFC from CCID
(Communicated by Prog)
FTE: CCID

Increase the number of Preventive Medicine Evaluations that are performed on Santa Barbara Regional Health Authority members by 5% at the Santa Maria Clinic.

Reduce the average number of days to get an appointment in the Lompoc Internal Medicine and/or Family Practice Clinic to 3 days or less.

60% of children ages 13-18 will be up to date for TdaP and meningococcal vaccines.

60% of children and adolescents with a BMI indicating overweight or obesity will receive counseling and/or related intervention or treatment.

80% of children by age 2 will have a 4 DPT, 3 polio, 2 HB, 1 MMR, 1 varicella.

67% of women ages 16-25 will receive Chlamydia screening, which exceeds the national standard of 50%.

60% of age appropriate women will be screened for annual mammograms, which exceeds the national standard of 50%.

77% of age appropriate women will be screened for cervical cancer which exceeds the national standard of 70%.

100% of patients will have access to an Internal Medicine and/or Family Practice appointment within 3 days of their request.

80% of patients will keep their appointments, which exceeds the national standard of 70% for community health clinics.

80% of children by age 2 will have a 4 DPT, 3 polio, 2 HB, 1 MMR, 1 varicella.

60% of adolescents ages 13-18 will be up to date for TdaP and meningococcal vaccines.

60% of children and adolescents with a BMI indicating overweight or obesity will receive counseling and/or related intervention or treatment.

100% of patients will have access to an Internal Medicine and/or Family Practice appointment within 3 days of their request.

80% of patients will keep their appointments, which exceeds the national standard of 70% for community health clinics.
PUBLIC HEALTH DEPARTMENT

Sub-Divn 13: Calle Real Clinics
Obj: Provides primary care and specialty programs to the uninsured and under insured population in and around the east side of Santa Barbara and Carpinteria area.

Calle Real CHDP Program 1011 $23.6K / $0.0K FTE: 0.3
80% of children by age 2 will have a 4 DPT, 3 polio, 1 HB, 1 MMR, 1 varicella.

87% of women ages 16-25 will receive Chlamydia screening, which exceeds the national standard of 50%.

Calle Real Family Planning Program 1281 $96.1K / $0.0K FTE: 0.6
80% of patients will have access to an Internal Medicine and/or Family Practice appointment within 3 days of their request.

Provide an OB registration appointment within 5 days.

70% of women will receive care in their first trimester.

Calle Real OB Program 1291 $82.0K / $0.0K FTE: 0.6
67% of women ages 16-25 will receive Chlamydia screening, which exceeds the national standard of 50%.

80% of age appropriate women will be screened for annual mammograms which exceeds the national standard of 50%.

77% of age appropriate women will be screened for cervical cancer which exceeds the national standard of 70%.

Calle Real Primary Care Program 1601 $1.4M / $0.0K FTE: 12.0
100% of patients will have access to an Internal Medicine and/or Family Practice appointment within 3 days of their request.

80% of patients will keep their appoint-ments, which exceeds the national standard of 50%.

70% of women will receive care in their first trimester.

NOTE: This cost center is for fiscal tracking only.

Calle Real Family Planning Program 1282 $133.6K / $0.0K FTE: 0.8
60% of children ages 13 to 18 will be up to date for Tdap and meningococcal vaccines.

60% of children and adolescents with a BMI indicating overweight or obesity will receive counseling and/or related intervention or treatment.

Calle Real OB Program 1292 $239.0K / $0.0K FTE: 2.3
Provide an OB registration appointment within 5 days.

70% of women will receive care in their first trimester.

Calle Real Primary Care Program 1602 $2.0M / $0.0K FTE: 16.8
100% of patients will have access to an Internal Medicine and/or Family Practice appointment within 3 days of their request.

80% of patients will keep their appoint-ments, which exceeds the national standard of 70% for community health clinics.

Calle Real OB Program 1603 $829.6K / $0.0K FTE: 27.4
100% of patients will have access to a new Internal Medicine office appointment within 30 days of their request.

100% of patients will have access to a new Family Practice appointment within 3 days of their request.

Program: Title from CCID Number from CCID Budget/GFC from CCID (Financial Data by Prog) FTE: CCID

Sub-Divn 14: Homeless Clinics
Obj: Provides primary care and specialty programs to the uninsured and under insured population in and around Santa Barbara, Montecito and Goleta area.

Santa Barbara CHDP Program 1011 $5.7K / $0.0K FTE: 0.6
Reduce the average number of days to get an appointment in the Calle Real Maria Internal Medicine and/or Family Practice Clinics to 3 days or less.

100% of patients will have access to a Family Practice appointment within 3 days of their request.

80% of patients will keep their appoint-ments, which exceeds the national standard of 70% for community health clinics.

Santa Barbara Family Planning Program 1282 $41.5K / $0.0K FTE: 0.4
Reduce the average number of days to get an appointment in the Calle Real Maria Internal Medicine and/or Family Practice Clinics to 3 days or less.

67% of women ages 16-25 will receive Chlamydia screening, which exceeds the national standard of 50%.

80% of age appropriate women will be screened for annual mammograms which exceeds the national standard of 50%.

77% of age appropriate women will be screened for cervical cancer which exceeds the national standard of 70%.

Santa Barbara OB Program 1291 $82.0K / $0.0K FTE: 0.9
Provide an OB registration appointment within 5 days.

70% of women will receive care in their first trimester.

NOTE: This cost center is for fiscal tracking only.

Santa Barbara OB Program 1292 $239.0K / $0.0K FTE: 2.3
Provide an OB registration appointment within 5 days.

70% of women will receive care in their first trimester.

Santa Barbara OB Program 1601 $1.4M / $0.0K FTE: 12.0
100% of patients will have access to an Internal Medicine and/or Family Practice appointment within 3 days of their request.

80% of patients will keep their appoint-ments, which exceeds the national standard of 50% for community health clinics.

Program 1281 $12.9K / $0.0K FTE: 0.6
Reduce the average number of days to get an appointment in the Calle Real Maria Internal Medicine and/or Family Practice Clinics to 3 days or less.

67% of women ages 16-25 will receive Chlamydia screening, which exceeds the national standard of 50%.

80% of age appropriate women will be screened for annual mammograms which exceeds the national standard of 50%.

77% of age appropriate women will be screened for cervical cancer which exceeds the national standard of 70%.

Program 1287 $911.7K / $0.0K FTE: 16.8
100% of patients will have access to an Internal Medicine and/or Family Practice appointment within 3 days of their request.

80% of patients will keep their appoint-ments, which exceeds the national standard of 70% for community health clinics.

Program 1291 $82.0K / $0.0K FTE: 0.6
Provide an OB registration appointment within 5 days.

70% of women will receive care in their first trimester.

Program 1292 $239.0K / $0.0K FTE: 2.3
Provide an OB registration appointment within 5 days.

70% of women will receive care in their first trimester.

Program 1601 $1.4M / $0.0K FTE: 12.0
100% of patients will have access to an Internal Medicine and/or Family Practice appointment within 3 days of their request.

80% of patients will keep their appoint-ments, which exceeds the national standard of 70% for community health clinics.

Program 1602 $2.0M / $0.0K FTE: 16.8
100% of patients will have access to a new Internal Medicine office appointment within 30 days of their request.

Program 1603 $829.6K / $0.0K FTE: 27.4
100% of patients will have access to a new Family Practice appointment within 3 days of their request

Program 1607 $1.2M / $0.0K FTE: 27.4
100% of patients will have access to a new Internal Medicine office appointment within 30 days of their request.

Program 1608 $75.7K / $0.0K FTE: 0.4
Increase the number of Preventive Medicine Evaluations that are performed on Santa Barbara Regional Health Authority members by 5% at the Calle Real Clinics.

Increase the number of Preventive Medicine Evaluations that are performed on Santa Barbara Regional Health Authority members by 5% at the Calle Real Clinics.

Program: Title from CCID Number from CCID Budget/GFC from CCID (Financial Data by Prog) FTE: CCID

Cost Center Performance Plan
Health and Public Assistance

Page 56
Santa Maria Women's Center
Family Planning
Program 1289
$88.0K / $0.0K
FTE: 0.0

Provide OB intake appointments within an average of 3 days at the Santa Maria Women's Health Center.

76% of women ages 16-25 will receive Chlamydia screening, which exceeds the national standard of 50%.

60% of age appropriate women will be screened for annual mammograms which exceeds the national standard of 50%.

77% of age appropriate women will be screened for cervical cancer which exceeds the national standard of 70%.

Provide OB registration within an average of 3 days at the Santa Maria Women's Health Center.

Santa Maria Women's Center
Obstetrics
Program 1299
$3.1M / $0.0K
FTE: 19.1

Provide OB registration within an average of 3 days at the Santa Maria Women's Health Center.

70% of women will receive care in their first trimester.

80% of patients will keep their appointments, which exceeds the national standard of 70% for community health clinics.

Program has been moved into other Women's center programs

Screen 100% of the applications for eligibility prior to authorizing treatment.

Division # & Title from CCID
Cost Center Report
Budget/GFC from CCID
(Financial Data by Cost Ctr)

Sub-Divn # & Name from Cost Center Report
Obj. from CCID Inventory

Program: Title from CCID
Number from CCID
Budget/GFC from CCID
(Financial Data by Prog)
FTE: CCID

Performance Measure Legend
Department-wide Effectiveness Performance Measure
Change to Performance Measure
Performance Measure to Delete
New Performance Measure
Budgets shown in Millions ($M) or Thousands ($K)
Program Budgets are $Total Uses / $Total General Fund Contribution
**Public Health Department**

**Division 13 – Community Health**

- **Budget**: $23.6M / $7.4M
- **FTE**: 287.9

**Sub-Division 01: CH Administration**

- **Objective**: Administration of all preventative health programs in the Department.

**Sub-Division 02: Health Promotion**

- **Objective**: Provides children’s dental health education and services.

**Sub-Division 03: Nutrition Services**

- **Objective**: Provides nutrition services to pregnant and breastfeeding women, infants and children.

---

**Performance Measure Legend**

- **Department-wide Effectiveness Performance Measure**
- **Change to Performance Measure**
- **Performance Measure to Delete**
- **New Performance Measure**

- **Budgets shown in Millions ($M) or Thousands ($K)**

- **Program Budgets are $Total Uses / $Total General Fund Contribution**

---

**Public Health Department**

**Division: # & Title from CCID**

**Cost Center Report**

**Budget/GFC from CCID**

**(Financial Data by Cost Ctr)**

**Sub-Divn: # & Name from Cost Center Report**

**Obj: from CCID Inventory**

**Program: Title from CCID**

**Number from CCID**

**Budget/GFC from CCID**

**(Financial Data by Prog)**

**FTE: CCID**

---

**Division: # & Title from CCID**

**Cost Center Report**

**Budget/GFC from CCID**

**(Financial Data by Cost Ctr)**

**Sub-Divn: # & Name from Cost Center Report**

**Obj: from CCID Inventory**

**Program: Title from CCID**

**Number from CCID**

**Budget/GFC from CCID**

**(Financial Data by Prog)**

**FTE: CCID**

---

**Public Health Nursing**

- **Program 3002**
  - **Budget**: $1.6M / $3.6M
  - **FTE**: 1.0

**Community Health Administration**

- **Program 3012**
  - **Budget**: $176.9K / $0.0K
  - **FTE**: 1.0

**Public Health Nursing Administration**

- **Program 3012**
  - **Budget**: $176.9K / $0.0K
  - **FTE**: 1.0

**Dental Health Program 1254**

- **Budget**: $117.9K / $0.0K
  - **FTE**: 1.3

**Cancer Detection (CDIC) Program 1275**

- **Budget**: $146.3K / $0.0K
  - **FTE**: 2.0

**Health Education Program 3008**

- **Budget**: $146.3K / $0.0K
  - **FTE**: 1.0

**Nutritional Networking Program 1256**

- **Budget**: $218.2K / $0.0K
  - **FTE**: 2.3

**Leaders Encouraging Activity & Nutrition (L.E.A.N.) Grant Program 1257**

- **Budget**: $19.4K / $0.0K
  - **FTE**: 0.2

**Lactation Education/Counseling Program 1258**

- **Budget**: $146.7K / $175.0K
  - **FTE**: 1.5

---

**Cost Center Performance Plan**

**Health and Public Assistance**

---

**Page 58**
Divn 13 – Community Health
$23.8M / $7.38M
FTE: 165.0

Sub-Divn 09: Emergency Medical Services

Obj: Plans, implements, and evaluates the emergency medical systems of an organized pattern of readiness and response services.

Ensure that 100% of 8 PHD healthcare sites will be able to communicate emergency exercise status messages within 60 minutes via radio or satellite phone.

Ensure that within 3 months of hire date, 98% of all new PHD employees will complete National Incident Management System (NIMS) training, for Public Health disaster preparedness and response.

Increase from 0 to 10 the number of outpatient clinics with disaster plans consistent with the Public Health Department’s model.

Ensure that 80% of 120 public health and community partners respond to the California Health Alert Network (CAHAN) notification system alerts issued within 60 minutes.

The Public Health Operations Center will be functional (10 positions staffed) within 120 minutes of notification to exercise a comprehensive public health response to a disaster.

Ensure that the Public Health Department, linked with our community healthcare partners, is ready to respond to emergency or disasters by the following ensuring 100% of action reports and corrective action plans for 3 disaster preparedness exercises will be completed in 90 days.

Ensure that 100% of 8 PHD healthcare sites will be able to communicate emergency exercise status messages within 60 minutes via radio or satellite phone.

Ensure that within 3 months of hire date, 98% of all new PHD employees will complete National Incident Management System (NIMS) training, for Public Health disaster preparedness and response.

Increase from 0 to 10 the number of outpatient clinics with disaster plans consistent with the Public Health Department’s model.

Ensure that 80% of 120 public health and community partners respond to the California Health Alert Network (CAHAN) notification system alerts issued within 60 minutes.

The Public Health Operations Center will be functional (10 positions staffed) within 120 minutes of notification to exercise a comprehensive public health response to a disaster.

Ensure that the Public Health Department, linked with our community healthcare partners, is ready to respond to emergency or disasters by the following ensuring 100% of action reports and corrective action plans for 3 disaster preparedness exercises will be completed in 90 days.

Ensure that 100% of 8 PHD healthcare sites will be able to communicate emergency exercise status messages within 60 minutes via radio or satellite phone.

Ensure that within 3 months of hire date, 98% of all new PHD employees will complete National Incident Management System (NIMS) training, for Public Health disaster preparedness and response.

Increase from 0 to 10 the number of outpatient clinics with disaster plans consistent with the Public Health Department’s model.

Ensure that 80% of 120 public health and community partners respond to the California Health Alert Network (CAHAN) notification system alerts issued within 60 minutes.

The Public Health Operations Center will be functional (10 positions staffed) within 120 minutes of notification to exercise a comprehensive public health response to a disaster.

Ensure that the Public Health Department, linked with our community healthcare partners, is ready to respond to emergency or disasters by the following ensuring 100% of action reports and corrective action plans for 3 disaster preparedness exercises will be completed in 90 days.

Ensure that 100% of 8 PHD healthcare sites will be able to communicate emergency exercise status messages within 60 minutes via radio or satellite phone.

Ensure that within 3 months of hire date, 98% of all new PHD employees will complete National Incident Management System (NIMS) training, for Public Health disaster preparedness and response.

Increase from 0 to 10 the number of outpatient clinics with disaster plans consistent with the Public Health Department’s model.

Ensure that 80% of 120 public health and community partners respond to the California Health Alert Network (CAHAN) notification system alerts issued within 60 minutes.

The Public Health Operations Center will be functional (10 positions staffed) within 120 minutes of notification to exercise a comprehensive public health response to a disaster.

Ensure that the Public Health Department, linked with our community healthcare partners, is ready to respond to emergency or disasters by the following ensuring 100% of action reports and corrective action plans for 3 disaster preparedness exercises will be completed in 90 days.

Ensure that 100% of 8 PHD healthcare sites will be able to communicate emergency exercise status messages within 60 minutes via radio or satellite phone.

Ensure that within 3 months of hire date, 98% of all new PHD employees will complete National Incident Management System (NIMS) training, for Public Health disaster preparedness and response.

Increase from 0 to 10 the number of outpatient clinics with disaster plans consistent with the Public Health Department’s model.

Ensure that 80% of 120 public health and community partners respond to the California Health Alert Network (CAHAN) notification system alerts issued within 60 minutes.

The Public Health Operations Center will be functional (10 positions staffed) within 120 minutes of notification to exercise a comprehensive public health response to a disaster.

Ensure that the Public Health Department, linked with our community healthcare partners, is ready to respond to emergency or disasters by the following ensuring 100% of action reports and corrective action plans for 3 disaster preparedness exercises will be completed in 90 days.

Ensure that 100% of 8 PHD healthcare sites will be able to communicate emergency exercise status messages within 60 minutes via radio or satellite phone.

Ensure that within 3 months of hire date, 98% of all new PHD employees will complete National Incident Management System (NIMS) training, for Public Health disaster preparedness and response.

Increase from 0 to 10 the number of outpatient clinics with disaster plans consistent with the Public Health Department’s model.

Ensure that 80% of 120 public health and community partners respond to the California Health Alert Network (CAHAN) notification system alerts issued within 60 minutes.

The Public Health Operations Center will be functional (10 positions staffed) within 120 minutes of notification to exercise a comprehensive public health response to a disaster.

Ensure that the Public Health Department, linked with our community healthcare partners, is ready to respond to emergency or disasters by the following ensuring 100% of action reports and corrective action plans for 3 disaster preparedness exercises will be completed in 90 days.

Ensure that 100% of 8 PHD healthcare sites will be able to communicate emergency exercise status messages within 60 minutes via radio or satellite phone.

Ensure that within 3 months of hire date, 98% of all new PHD employees will complete National Incident Management System (NIMS) training, for Public Health disaster preparedness and response.

Increase from 0 to 10 the number of outpatient clinics with disaster plans consistent with the Public Health Department’s model.

Ensure that 80% of 120 public health and community partners respond to the California Health Alert Network (CAHAN) notification system alerts issued within 60 minutes.

The Public Health Operations Center will be functional (10 positions staffed) within 120 minutes of notification to exercise a comprehensive public health response to a disaster.

Ensure that the Public Health Department, linked with our community healthcare partners, is ready to respond to emergency or disasters by the following ensuring 100% of action reports and corrective action plans for 3 disaster preparedness exercises will be completed in 90 days.

Ensure that 100% of 8 PHD healthcare sites will be able to communicate emergency exercise status messages within 60 minutes via radio or satellite phone.

Ensure that within 3 months of hire date, 98% of all new PHD employees will complete National Incident Management System (NIMS) training, for Public Health disaster preparedness and response.

Increase from 0 to 10 the number of outpatient clinics with disaster plans consistent with the Public Health Department’s model.

Ensure that 80% of 120 public health and community partners respond to the California Health Alert Network (CAHAN) notification system alerts issued within 60 minutes.

The Public Health Operations Center will be functional (10 positions staffed) within 120 minutes of notification to exercise a comprehensive public health response to a disaster.

Ensure that the Public Health Department, linked with our community healthcare partners, is ready to respond to emergency or disasters by the following ensuring 100% of action reports and corrective action plans for 3 disaster preparedness exercises will be completed in 90 days.

Ensure that 100% of 8 PHD healthcare sites will be able to communicate emergency exercise status messages within 60 minutes via radio or satellite phone.

Ensure that within 3 months of hire date, 98% of all new PHD employees will complete National Incident Management System (NIMS) training, for Public Health disaster preparedness and response.

Increase from 0 to 10 the number of outpatient clinics with disaster plans consistent with the Public Health Department’s model.

Ensure that 80% of 120 public health and community partners respond to the California Health Alert Network (CAHAN) notification system alerts issued within 60 minutes.

The Public Health Operations Center will be functional (10 positions staffed) within 120 minutes of notification to exercise a comprehensive public health response to a disaster.

Ensure that the Public Health Department, linked with our community healthcare partners, is ready to respond to emergency or disasters by the following ensuring 100% of action reports and corrective action plans for 3 disaster preparedness exercises will be completed in 90 days.

Ensure that 100% of 8 PHD healthcare sites will be able to communicate emergency exercise status messages within 60 minutes via radio or satellite phone.

Ensure that within 3 months of hire date, 98% of all new PHD employees will complete National Incident Management System (NIMS) training, for Public Health disaster preparedness and response.

Increase from 0 to 10 the number of outpatient clinics with disaster plans consistent with the Public Health Department’s model.

Ensure that 80% of 120 public health and community partners respond to the California Health Alert Network (CAHAN) notification system alerts issued within 60 minutes.

The Public Health Operations Center will be functional (10 positions staffed) within 120 minutes of notification to exercise a comprehensive public health response to a disaster.

Ensure that the Public Health Department, linked with our community healthcare partners, is ready to respond to emergency or disasters by the following ensuring 100% of action reports and corrective action plans for 3 disaster preparedness exercises will be completed in 90 days.

Ensure that 100% of 8 PHD healthcare sites will be able to communicate emergency exercise status messages within 60 minutes via radio or satellite phone.

Ensure that within 3 months of hire date, 98% of all new PHD employees will complete National Incident Management System (NIMS) training, for Public Health disaster preparedness and response.

Increase from 0 to 10 the number of outpatient clinics with disaster plans consistent with the Public Health Department’s model.

Ensure that 80% of 120 public health and community partners respond to the California Health Alert Network (CAHAN) notification system alerts issued within 60 minutes.

The Public Health Operations Center will be functional (10 positions staffed) within 120 minutes of notification to exercise a comprehensive public health response to a disaster.

Ensure that the Public Health Department, linked with our community healthcare partners, is ready to respond to emergency or disasters by the following ensuring 100% of action reports and corrective action plans for 3 disaster preparedness exercises will be completed in 90 days.

Ensure that 100% of 8 PHD healthcare sites will be able to communicate emergency exercise status messages within 60 minutes via radio or satellite phone.

Ensure that within 3 months of hire date, 98% of all new PHD employees will complete National Incident Management System (NIMS) training, for Public Health disaster preparedness and response.

Increase from 0 to 10 the number of outpatient clinics with disaster plans consistent with the Public Health Department’s model.

Ensure that 80% of 120 public health and community partners respond to the California Health Alert Network (CAHAN) notification system alerts issued within 60 minutes.

The Public Health Operations Center will be functional (10 positions staffed) within 120 minutes of notification to exercise a comprehensive public health response to a disaster.

Ensure that the Public Health Department, linked with our community healthcare partners, is ready to respond to emergency or disasters by the following ensuring 100% of action reports and corrective action plans for 3 disaster preparedness exercises will be completed in 90 days.
The Human Services Unit will process quarterly invoices from nonprofit agencies within 2 business days of receipt of invoice.

Ensure that 80% of Human Services Commissioners and nonprofit grantees will indicate that Human Services staff support is “very good” or “excellent.”

The Human Services Unit will process quarterly invoices from nonprofit agencies within 2 business days of receipt of invoice.

Ensure that 80% of Human Services Commissioners and nonprofit grantees will indicate that Human Services staff support is “very good” or “excellent.”

The Human Services Unit will process quarterly invoices from nonprofit agencies within 2 business days of receipt of invoice.

Ensure that 80% of Human Services Commissioners and nonprofit grantees will indicate that Human Services staff support is “very good” or “excellent.”

The Human Services Unit will process quarterly invoices from nonprofit agencies within 2 business days of receipt of invoice.

Ensure that 80% of Human Services Commissioners and nonprofit grantees will indicate that Human Services staff support is “very good” or “excellent.”

The Human Services Unit will process quarterly invoices from nonprofit agencies within 2 business days of receipt of invoice.

Ensure that 80% of Human Services Commissioners and nonprofit grantees will indicate that Human Services staff support is “very good” or “excellent.”

The Human Services Unit will process quarterly invoices from nonprofit agencies within 2 business days of receipt of invoice.

Ensure that 80% of Human Services Commissioners and nonprofit grantees will indicate that Human Services staff support is “very good” or “excellent.”

The Human Services Unit will process quarterly invoices from nonprofit agencies within 2 business days of receipt of invoice.
**Division: # & Title from CCID**

**Cost Center Report**

**Budget/GFC from CCID**

(Financial Data by Cost Ctr)

**Sub-Divn: # & Name from Cost Center Report**

**Obj: from CCID Inventory**

**Program: Title from CCID**

**Number From CCID**

**Budget/GFC from CCID**

(Financial Data by Prog)

**FTE: CCID**

---

**Administration Program 1000**

$636.3K / $202.3K

FTE: 3.0

Complete annual review of nine fee resolutions and determine need or advisability of adjustments by end of January.

**Disaster Response Program 1200**

$20.9K / $0.0K

FTE: 0.0

Participate in 1 disaster training exercise during the fiscal year.

**EH-Housing Program 2400**

$21.2K / $0.0K

FTE: 0.2

Respond to 100% of reported sewage spills within one working day of the notification.

**EH-Land Use Program 2600**

$11.5K / $0.0K

FTE: 0.6

Annually inspect 100% of ~750 public & semi-public swimming pools and spas. Complete initial plan checks within 15 days.

**Ocean Monitoring Program 3800**

$59.9K / $0.0K

FTE: 0.4

Ensure initial review of ~100 new discretionary land use cases within 5 working days of receipt.

**NPDES Permit Project Program 3825**

$29.6K / $0.0K

FTE: 0.3

Respond to 100% of non-sewage illicit discharge complaints within 2 working days of notification.

**EH Solid Waste Grant Program 4444**

$169.6K / $0.0K

FTE: 1.4

Provide routine inspections of all four active landfills at least once per month.

**EH Solid Waste Program 4460**

$70.2K / $0.0K

FTE: 0.2

Provide initial plan check for all new septic system applications within 5 days of receipt.

---

**Program Administration Program 1010**

$293.1K / $0.0K

FTE: 9.4

Complete data entry of all service requests and onsite permit applications within two working days of receipt.

**Flood Program 1600**

$803.5K / $0.0K

FTE: 7.3

Annually inspect at least 95% of retail food facilities each year.

**EH-Body Adornments Program 1900**

$11.5K / $0.0K

FTE: 0.1

Respond to 100% of all food borne illness complaints within 1 working day.

**EH-Vector Program 4000**

$3.3K / $0.0K

FTE: 0.0

Annually inspect 100% of ~95% of retail food facilities each year.

**EH-Body Adornments Program 1900**

$11.5K / $0.0K

FTE: 0.1

Annually inspect 100% of ~39 body art facilities and ~80 practitioners.

**EH-Body Adornments Program 1900**

$11.5K / $0.0K

FTE: 0.1

Annually inspect 100% of ~39 body art facilities and ~80 practitioners.

---

**EH-Fiscal Program 1020**

$100.0K / $0.0K

FTE: 1.3

Process hourly billing for all EHS programs by the 3rd Tuesday of odd numbered months.

**EH-Fiscal Program 1020**

$100.0K / $0.0K

FTE: 1.3

Provide initial response to reported issues related to the Envision database within 3 working days.

**EH-Body Adornments Program 1900**

$11.5K / $0.0K

FTE: 0.1

Annually inspect 100% of ~39 body art facilities and ~80 practitioners.

---

**Black Swalk Grant Program 9805**

$50.0K / $0.0K

FTE: 0.5

Provide initial response to reported issues related to the Envision database within 3 working days.

**EH-Fiscal Program 1020**

$100.0K / $0.0K

FTE: 1.3

Provide initial response to reported issues related to the Envision database within 3 working days.

**NPDES Permit Project Program 3825**

$29.6K / $0.0K

FTE: 0.3

Respond to 100% of non-sewage illicit discharge complaints within 2 working days of notification.

**EH-State Septic Tank Programs**

$275.8K / $0.0K

FTE: 0.1

Annually process contracts for a minimum of $100,000 for improvement of onsite wastewater infrastructure.

---

**EH-Vector Program 4000**

$3.3K / $0.0K

FTE: 0.0

Annually inspect at least 30 of 107 small public water systems.

**EH Water Program 4600**

$140.0K / $0.0K

FTE: 1.2

Annually inspect at least 30 of 107 small public water systems.
**Performance Measure Legend**
- Department-wide Effectiveness Performance Measure
- Change to Performance Measure
- Performance Measure to Delete
- New Performance Measure

Budgets shown in Millions ($M) or Thousands ($K)
Program Budgets are $Total Uses / $Total General Fund Contribution

**PUBLIC HEALTH DEPARTMENT**

Div 13 – Community Health
$23.6M / $7.4M
FTE: 165.0

**Sub-Divn 13: Family Program**
Obj: Provide medical care and case management to children and adults with special needs.

- **Maternal Child Health Program**
  - Program 1251
  - $1.7M / $0.0K
  - FTE: 16.1

- **Fetal Infant Mortality Review Grant Program**
  - Program 1253
  - $24.2K / $0.0K
  - FTE: 0.2

- **Sexual Assault Response Team Program**
  - Program 1501
  - $288.5K / $192.5K
  - FTE: 0.2

- **Multi-Disciplinary Interagency System of Care Grant Program**
  - Program 1652
  - $224.8K / $0.0K
  - FTE: 1.9

- **Comprehensive Peri-Natal Outreach Program**
  - Program 7500
  - $83.9K / $0.0K
  - FTE: 0.9

**Sub-Divn 13: Tobacco Control**
Obj: Program to reduce secondhand smoke exposures, keeping tobacco away from minors and mediating tobacco industry influences.

- **Tobacco Health Education Program**
  - Program 7300
  - $139.1K / $0.0K
  - FTE: 1.3

- **Tobacco Prevention & Treatment Program**
  - Program 7600
  - $528.1K / $0.0K
  - FTE: 2.5

- **Medi-Cal Administrative Activities/Targeted Case Management Program**
  - Program 1235
  - $3.8K / $0.0K
  - FTE: 0.0

- **Tobacco Health Education Program**
  - Program 7300
  - $50.0K / $0.0K
  - FTE: 0.0

- **Tobacco Prevention & Treatment Program**
  - Program 7600
  - $1.7M / $0.0K
  - FTE: 16.1

- **Fetal Infant Mortality Review Grant Program**
  - Program 1253
  - $24.2K / $0.0K
  - FTE: 0.2

- **Sexual Assault Response Team Program**
  - Program 1501
  - $288.5K / $192.5K
  - FTE: 0.2

- **Multi-Disciplinary Interagency System of Care Grant Program**
  - Program 1652
  - $224.8K / $0.0K
  - FTE: 1.9

- **Comprehensive Peri-Natal Outreach Program**
  - Program 7500
  - $83.9K / $0.0K
  - FTE: 0.9

**Note:** Program deleted in FY 2008-09

Reduce cigarette butt litter by 25% at 8 targeted parks and beaches by June 30, 2010.

At least 75% of smokers who quit based on referral to the CA Smokers Helpline will receive follow-up services and medications cessation program participants will be tobacco-free at 3 6-month assessment.

Maintain a 9% or lower percentage of vendors who sell tobacco products to minors in undercover surveys.

Ensure that 85% of Maternal Child Adolescent Health (MCAN) infants and children under age 18 obtain health insurance within 2 months of Public Health Nurse referral.

75% of family cases referred with high risk factor receive PHN services within 10 working days of initial referral.

At least 40% of smokers who quit based on referral to the CA Smokers Helpline will receive follow-up services and medications cessation program participants will be tobacco-free at 3 6-month assessment.

Maintain a 9% or lower percentage of vendors who sell tobacco products to minors in undercover surveys.

Note: Program deleted in FY 2008-09

Provide medical exams to sexual assault patients 13 years old and older within 4 hours of the request from law enforcement.

Children will remain medically stable in the family home.

**Performance Measure Legend**

- Department-wide Effectiveness Performance Measure
- Change to Performance Measure
- Performance Measure to Delete
- New Performance Measure

Budgets shown in Millions ($M) or Thousands ($K)
Program Budgets are $Total Uses / $Total General Fund Contribution

**Division # & Title from CCID**
Cost Center Report
Budget/GFC from CCID
(Financial Data by Cost Ctr)

**Sub-Divn: # & Name from Cost Center Report**
Obj. from Cost Center Inventory

**Program: Title from CCID**
Number From CCID
Budget/GFC from CCID
(Financial Data by Prog)
FTE: CCID

**Cost Center Performance Plan**

- **Health and Public Assistance**
  - EH Water Pgm 4600
  - NOT USED

**Page 64**