

# DHMH - Public Health Services

## MISSION

To protect, promote and improve the health and well-being of all Marylanders and their families through provision of public health leadership and through community-based public health efforts in partnership with local health departments, providers, community based organizations, and public and private sector agencies, giving special attention to at-risk and vulnerable populations.

## VISION

A future in which all Marylanders and their families enjoy optimal health and well-being.

## KEY GOALS, OBJECTIVES, AND PERFORMANCE MEASURES

### OFFICE OF HEALTH CARE QUALITY

**Goal 1. To minimize delays in handling serious complaint investigations in nursing home facilities.**

**Obj. 1.1** By June 30, 2016, complaint investigations alleging actual harm will be initiated on-site within 16 work days.

Performance Measures	2012 Act.	2013 Act.	2014 Act.	2015 Act.	2016 Act.	2017 Est.	2018 Est.
Number of complaint investigations completed	1,324	1,212	1,151	1,285	1,160	1,200	1,250
Number of days to initiate investigation	37	38	27	34	47	38	33

**Goal 2. To provide timely and comprehensive annual surveys for the continuing protection of individuals with developmental disabilities receiving services from agencies licensed by the Developmental Disabilities Administration.**

**Obj. 2.1** By June 30, 2016, the Developmental Disabilities Unit will perform 45 percent of required annual surveys.

Performance Measures	2012 Act.	2013 Act.	2014 Act.	2015 Act.	2016 Act.	2017 Est.	2018 Est.
Number of licensed providers	209	218	221	224	231	235	240
Percentage of licensed providers with required annual survey	24%	26%	36%	32%	18%	25%	45%

**Goal 3. To provide timely and comprehensive annual surveys of Assisted Living sites for the continuing protection of individuals receiving services from community-based assisted living providers.**

**Obj. 3.1** By June 30, 2016, the Assisted Living Unit will perform 80 percent of required annual surveys.

Performance Measures	2012 Act.	2013 Act.	2014 Act.	2015 Act.	2016 Act.	2017 Est.	2018 Est.
Number of licensed sites	1,364	1,406	1,488	1,482	1,531	1,550	1,600
Percentage of licensed providers with required annual survey	N/A	N/A	N/A	70%	65%	60%	80%

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## PREVENTION AND HEALTH PROMOTION ADMINISTRATION

### INFECTIOUS DISEASE AND ENVIRONMENTAL HEALTH SERVICES

#### Goal 1. To reduce the incidence of infectious diseases in Maryland.

**Obj. 1.1** On a calendar year basis, at least 80 percent of two-year-olds (the Centers for Disease Control (CDC) national goal for states) will have up-to-date immunizations.

**Obj. 1.2** By the end of calendar year 2015, at least 85 percent of reported primary and secondary syphilis cases will be treated within 14 days.

**Obj. 1.3** Through calendar year 2015, the rate of chlamydia in 15- to 24-year-olds will increase no more than two percent from the calendar year 2012 rate. (Comparison: CDC 2012 U.S. national rate for 15- to 24-year-olds was 2,255 cases per 100,000 population)

Performance Measures	2012 Act.	2013 Act.	2014 Act.	2015 Act.	2016 Est.	2017 Est.	2018 Est.
Percent of two-year-olds with up-to-date immunizations	67%	76%	74%	74%	75%	75%	75%
Rate of primary/secondary syphilis per 100,000 population	7.3	7.7	7.5	8.5	6.5	6.9	7.2
Percent of syphilis cases treated within 14 days	92%	87%	85%	85%	85%	86%	86%
Rate of chlamydia (# of cases/100,000 population), all ages	450.9	450.7	458.9	457.0	450.2	447.0	443.9
15- to 24-year-olds	2,365.7	2,316.3	2,340.2	2,277.7	2,313.4	2,297.3	2,281.3
Percent change from calendar year 2014 (all ages)	N/A	N/A	N/A	0%	-2%	-3%	-3%
Percent change from calendar year 2014 (15- to 24-year-olds)	N/A	N/A	N/A	-3%	-1%	-2%	-3%
Number of cases of tuberculosis	226	178	198	176	206	206	206
1 Number of new HIV Diagnoses	1,393	1,320	1,461	1,400	1,338	1,277	1,216
1 Percent change from calendar year 2014	N/A	N/A	N/A	-4.2%	-8.4%	-12.6%	-16.8%
1 Number of new AIDS diagnoses	905	868	679	603	526	450	374
1 Percent change from calendar year 2014	N/A	N/A	N/A	-11.2%	-22.5%	-33.7%	-44.9%
1 Rate of HIV diagnoses	23.6	22.4	24.6	23.3	22.1	20.8	19.6
1 Rate of AIDS diagnoses	15.1	14.5	11.1	9.6	8.2	6.7	5.2

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## FAMILY HEALTH AND CHRONIC DISEASE SERVICES

**Goal 2. To improve the health status of Marylanders and their families by assuring the provision of quality primary, preventive and specialty care services.**

**Obj. 2.1** By calendar year 2015, the infant mortality rate will be no more than 6.1 per 1,000 live births for all races and 9.9 per 1,000 live births for African-Americans.

**Obj. 2.2** By calendar year 2015, the percentage of infants born to women receiving prenatal care in the first trimester will be at least 80 percent.

**Obj. 2.3** By calendar year 2015, the teen birth rate will be no more than 15.8 per 1,000 women.

Performance Measures	2012 Act.	2013 Act.	2014 Act.	2015 Act.	2016 Est.	2017 Est.	2018 Est.
Infant mortality rate for all races	6.3	6.6	6.5	6.3	6.2	6.0	5.9
Infant mortality rate for African-Americans	10.3	10.5	10.6	10.2	10.1	9.8	9.5
Percent births with first trimester care	67.9%	67.0%	66.6%	71.1%	73.3%	76.7%	80.0%
Teen birth rate per 1,000 women, ages 15-19	22.1	19.3	17.0	16.6	15.3	14.2	13.1

**Goal 3. To prevent chronic diseases and disabilities, detect cancer early, and ensure accurate public health surveillance.**

**Obj. 3.1** By calendar year 2015, reduce breast cancer mortality to a rate of no more than 20.6 per 100,000 persons in Maryland.

**Obj. 3.2** By calendar year 2015, reduce the heart disease mortality rate in Maryland to a rate of no more than 163.3 per 100,000 persons of all races and 188.7 per 100,000 persons for African-Americans.

Performance Measures	2012 Act.	2013 Act.	2014 Act.	2015 Act.	2016 Est.	2017 Est.	2018 Est.
Breast cancer mortality rate	23.4	21.4	22.7	22.3	22	21.6	21.3
Heart disease mortality rate for all races	171.9	171.7	167.2	158.7	153.5	148.3	143.2
Heart disease mortality rate for African Americans	203.4	197.3	186.4	178.6	170.7	162.7	154.8

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## CIGARETTE RESTITUTION FUND - CANCER PREVENTION, EDUCATION, SCREENING AND TREATMENT PROGRAM

### Goal 4. To reduce overall cancer mortality in Maryland.

**Obj. 4.1** By calendar year 2015, reduce overall cancer mortality to a rate of no more than 156.1 per 100,000 persons. (Age-adjusted to the 2000 U.S. standard population.)

**Obj. 4.2** By calendar year 2015, reduce colorectal cancer mortality to a rate of no more than 12.9 per 100,000 persons in Maryland. (Age-adjusted to the 2000 U.S. standard population.)

### Goal 5. To reduce disparities in cancer mortality between ethnic minorities and whites.

**Obj. 5.1** By calendar year 2015, reduce disparities in overall cancer mortality between blacks and whites to a rate of no more than 1.13. (Age-adjusted to the 2000 U.S. standard population.)

Performance Measures	2012 Act.	2013 Act.	2014 Act.	2015 Act.	2016 Est.	2017 Est.	2018 Est.
Overall cancer mortality rate	163.7	161.9	160.9	157.8	154.9	151.9	149.0
Colorectal cancer mortality rate	14.7	13.9	14.3	13.8	13.4	12.9	12.5
Cancer death rate ratio between blacks/whites	1.11	1.13	1.13	1.13	1.13	1.13	1.13

## CIGARETTE RESTITUTION FUND - TOBACCO USE PREVENTION AND CESSATION PROGRAM

### Goal 6. To reduce the proportion of Maryland youth and adults who currently smoke cigarettes.

**Obj. 6.1** Annually reduce the proportion of under-age Maryland middle and high school youth that currently smoke cigarettes.

**Obj. 6.2** Annually reduce the proportion of Maryland adults that currently smoke cigarettes.

Performance Measures	2012 Act.	2013 Act.	2014 Act.	2015 Act.	2016 Est.	2017 Est.	2018 Est.
<sup>1</sup> Under-age middle school students who currently smoke		3.9%	2.5%		2.0%		1.5%
<sup>1</sup> Under-age high school students who currently smoke cigarettes		11.0%	8.2%		8.0%		7.5%
Percent of adults who currently smoke cigarettes	16.2%	16.4%	14.6%	15.1%	14.5%	14.0%	13.5%

### Goal 7. To reduce the prevalence of current smoking among minority populations.

**Obj. 7.1** Annually reduce the proportion of African American adults who currently smoke cigarettes.

**Obj. 7.2** Annually reduce the proportion of Hispanic adults who currently smoke cigarettes.

Performance Measures	2012 Act.	2013 Act.	2014 Act.	2015 Act.	2016 Est.	2017 Est.	2018 Est.
Percent of adult African Americans who smoke cigarettes	16.7%	17.4%	16.8%	15.3%	14.8%	14.3%	14.0%
Percent of adult Hispanics who currently smoke cigarettes	10.1%	11.0%	8.2%	10.2%	9.5%	9.0%	8.5%

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## OFFICE OF THE CHIEF MEDICAL EXAMINER

**Goal 1. Provide timely death investigation with sensitivity and balance towards family members.**

**Obj. 1.1** During fiscal year 2016, 99 percent of all medical examiner cases requiring further examination will be examined and ready for release within 24 hours of admission to the Office of the Chief Medical Examiner.

Performance Measures	2012 Act.	2013 Act.	2014 Act.	2015 Act.	2016 Act.	2017 Est.	2018 Est.
Total deaths investigated	9,872	10,556	11,020	11,547	13,571	13,992	14,400
Cases examined	3,702	3,915	4,116	4,402	5,099	5,700	6,300
Percent of cases released within 24 hours	99%	99%	99%	99%	99%	99%	99%

**Goal 2. Provide State's Attorneys with autopsy reports on all medical examiner cases where further investigation is deemed advisable.**

**Obj. 2.1** By fiscal year 2016, 90 percent of all autopsy reports will be completed and forwarded, when necessary, to the State's Attorney's office within 60 working days following the investigation.

Performance Measures	2012 Act.	2013 Act.	2014 Act.	2015 Act.	2016 Act.	2017 Est.	2018 Est.
Examinations performed	3,702	3,915	4,116	4,402	5,099	5,700	6,300
Number of Medical Examiners (full-time equivalent)	15	14	14	15	15	18	17
Percent of reports completed within 60 days	64%	65%	70%	73%	76%	76%	76%
Ratio of autopsies to Medical Examiners	247	280	294	293	340	326	371

## OFFICE OF PREPAREDNESS AND RESPONSE

**Goal 1. To improve Maryland's ability to maintain operational readiness to respond to public health emergencies by achieving the planning and operations standards set forth by the Center for Disease Control and Prevention (CDC) Medical Countermeasure Operational Readiness Review (ORR) Guidance.**

**Obj. 1.1** To achieve a level of readiness no less than "established" on at least 90 percent of the elements on the CDC Operational Readiness Review Tool.

**Obj. 1.2** To ensure all Local Health Departments (LHDs) readiness will be no less than "established" on at least 90 percent of the elements on the CDC Operational Readiness Review Tool.

Performance Measures	2012 Act.	2013 Act.	2014 Act.	2015 Act.	2016 Act.	2017 Est.	2018 Est.
Percent of preparedness planning elements scored as "established" Maryland receives on the State ORR	100%	100%	100%	N/A	85%	88%	90%
Percent of LHDs with 90% of preparedness planning elements rated as "established" on the ORR	N/A	N/A	N/A	N/A	50%	75%	100%

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**Goal 2. To improve availability and utilization of Maryland Responds volunteers for state and local public health emergencies.**

**Obj. 2.1** To increase the number Maryland Responds volunteers who have reached "Ready Responder" (i.e. readiness to deploy) status by 20 percent.

Performance Measures	2012 Act.	2013 Act.	2014 Act.	2015 Act.	2016 Act.	2017 Est.	2018 Est.
Percent of Maryland Responds volunteers who have reached "Ready Responder" status	N/A	N/A	N/A	4.6%	16.2%	18.0%	20.0%

## LABORATORIES ADMINISTRATION

**Goal 1. Adopt cutting edge scientific technology to improve the quality and reliability of public health laboratory practice for prevention of disease and promotion of health.**

**Obj. 1.1** Annually maintain the number of new tests developed or validated and implemented to detect and characterize emerging and reemerging infectious diseases, bioterrorism, anti-microbial and anti-viral drug resistance agents in clinical specimens, and chemical, radiological, microbiological contaminants in environmental matrices.

Performance Measures	2012 Act.	2013 Act.	2014 Act.	2015 Act.	2016 Act.	2017 Est.	2018 Est.
Number of genetic amplification techniques	28	28	28	30	30	30	30
Types of microbes identified by pulse field gel electrophoresis	9	9	9	10	10	10	10

**Goal 2. Promote quality and reliability of laboratory test results to support public health, environmental, and BT/CT programs.**

**Obj. 2.1** Annually maintain accuracy of 90 percent or greater for proficiency testing of infectious bacterial disease, viral disease, newborn screening for hereditary disorders, environmental, and bleeding time/clotting time (BT/CT) based on nationally standardized testing programs.

Performance Measures	2012 Act.	2013 Act.	2014 Act.	2015 Act.	2016 Act.	2017 Est.	2018 Est.
Percent accuracy of environmental testing in proficiency testing	96%	98%	95%	96%	98%	98%	98%

## NOTES

<sup>1</sup>Tobacco surveys are conducted in even years only.