

# MDH - 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

<https://health.maryland.gov/ohcq/>

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

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

| Performance Measures                         | 2014 Act. | 2015 Act. | 2016 Act. | 2017 Act. | 2018 Act. | 2019 Est. | 2020 Est. |
|--|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Number of complaint investigations completed | 1,151     | 1,285     | 1,160     | 1,407     | 1,022     | 1,110     | 1,110     |
| Number of days to initiate investigation     | 27        | 34        | 47        | 51        | 35        | 17        | 15        |

**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** Annually, the Developmental Disabilities Unit will perform 45 percent of required annual surveys.

| Performance Measures   | 2014 Act. | 2015 Act. | 2016 Act. | 2017 Act. | 2018 Act. | 2019 Est. | 2020 Est. |
|--|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Number of licensed providers                                 | 221       | 224       | 231       | 231       | 241       | 245       | 249       |
| Percentage of licensed providers with required annual survey | 36%       | 32%       | 18%       | 34%       | 23%       | 35%       | 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** Annually, the Assisted Living Unit will perform 80 percent of required annual surveys.

| Performance Measures   | 2014 Act. | 2015 Act. | 2016 Act. | 2017 Act. | 2018 Act. | 2019 Est. | 2020 Est. |
|--|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Number of licensed sites                                     | 1,488     | 1,482     | 1,531     | 1,580     | 1,546     | 1,555     | 1,565     |
| Percentage of licensed providers with required annual survey | N/A       | 70%       | 65%       | 48%       | 51%       | 58%       | 65%       |

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## PREVENTION AND HEALTH PROMOTION ADMINISTRATION

phpa.health.maryland.gov

### 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** Through calendar year 2018, at least 85 percent of reported primary and secondary syphilis cases will be treated within 14 days.
- Obj. 1.3** Through calendar year 2018, the rate of chlamydia in 15-24 year olds will not increase by any more than 20 percent of the calendar year 2015 rate. (Comparison: CDC 2015 U.S. national rate for 15-24 year olds was 2,231 cases per 100,000 population).

| Performance Measures   | 2014 Act. | 2015 Act. | 2016 Act. | 2017 Act. | 2018 Est. | 2019 Est. | 2020 Est. |
|--|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| <sup>1</sup> Percent of two-year-olds with up-to-date immunizations    | 74%       | 77%       | 74%       | 75%       | 75%       | 75%       | 75%       |
| Rate of primary/secondary syphilis per 100,000 population              | 7.5       | 8.5       | 8.5       | 9.5       | 10.0      | 9.6       | 9.7       |
| Percent of syphilis cases treated within 14 days                       | 84%       | 85%       | 83%       | 81%       | 83%       | 83%       | 83%       |
| Rate of chlamydia (# of cases/100,000 population), all ages            | 458.9     | 457.0     | 509.6     | 552.1     | 569.1     | 555.7     | 557.4     |
| Rate of chlamydia (# of cases/100,000 population), 15- to 24-year-olds | 2,340.2   | 2,277.7   | 2,547.5   | 2,760.0   | 2,836.2   | 2,769.5   | 2,778.1   |
| Percent change from calendar year 2015 (all ages)                      | N/A       | N/A       | 11.5%     | 21%       | 25%       | 22%       | 22%       |
| Percent change from calendar year 2015 (15- to 24-year-olds)           | N/A       | N/A       | 11.8%     | 21%       | 25%       | 22%       | 22%       |
| Number of cases of tuberculosis  | 198       | 176       | 221       | 207       | 220       | 220       | 220       |
| Number of new HIV Diagnoses  | 1,263     | 1,207     | 1,119     | 1,043     | 1,086     | 1,019     | 952       |
| Percent change from calendar year 2015                                 | N/A       | N/A       | -7.3%     | -13.6%    | -10.0%    | -15.6%    | -21.1%    |
| Number of new AIDS diagnoses   | 650       | 644       | 594       | 586       | 411       | 339       | 267       |
| Percent change from calendar year 2015                                 | N/A       | N/A       | -7.8%     | -9.0%     | -36.2%    | -47.4%    | -58.5%    |
| Rate of HIV diagnoses  | 21.6      | 20.4      | 18.7      | 17.6      | 17.6      | 16.2      | 14.9      |
| Rate of AIDS diagnoses   | 11.0      | 10.8      | 9.9       | 9.8       | 7.5       | 6.1       | 4.8       |

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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 2018, the infant mortality rate will be no more than 6.2 per 1,000 live births for all races and 10.4 per 1,000 live births for African-Americans.

**Obj. 2.2** By calendar year 2018, the percentage of infants born to women receiving prenatal care in the first trimester will be at least 76.7 percent.

**Obj. 2.3** By calendar year 2018, the teen birth rate will be no more than 13.3 per 1,000 women.

| Performance Measures                        | 2014 Act. | 2015 Act. | 2016 Act. | 2017 Est. | 2018 Est. | 2019 Est. | 2020 Est. |
|---|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Infant mortality rate for all races         | 6.5       | 6.7       | 6.5       | 6.3       | 6.2       | 6.0       | 5.9       |
| Infant mortality rate for African-Americans | 10.6      | 11.2      | 10.4      | 10.1      | 9.9       | 9.6       | 9.4       |
| Percent births with first trimester care    | 66.6%     | 66.9%     | 67.8%     | 70.9%     | 73.9%     | 77.0%     | 80.0%     |
| Teen birth rate per 1,000 women, ages 15-19 | 17.8      | 16.9      | 15.9      | 14.5      | 13.5      | 12.5      | 11.6      |

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

**Obj. 3.1** By calendar year 2018, reduce breast cancer mortality to a rate of no more than 20.8 per 100,000 persons in Maryland.

**Obj. 3.2** By calendar year 2018, reduce the heart disease mortality rate in Maryland to a rate of no more than 148.3 per 100,000 persons of all races and 161.9 per 100,000 persons for African-Americans.

| Performance Measures                               | 2014 Act. | 2015 Act. | 2016 Act. | 2017 Est. | 2018 Est. | 2019 Est. | 2020 Est. |
|--|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Breast cancer mortality rate                       | 22.7      | 21.8      | 21.3      | 20.9      | 20.6      | 20.2      | 19.9      |
| Heart disease mortality rate for all races         | 167.2     | 169.3     | 164.6     | 155.5     | 151.2     | 146.9     | 142.5     |
| Heart disease mortality rate for African Americans | 186.4     | 196.2     | 187.5     | 173.1     | 165.9     | 159.5     | 152.1     |

## 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 2018, reduce overall cancer mortality to a rate of no more than 146.0 per 100,000 persons (age-adjusted to the 2000 U.S. standard population).

**Obj. 4.2** By calendar year 2018, reduce colorectal cancer mortality to a rate of no more than 12.2 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 2018, ensure disparities in overall cancer mortality between blacks and whites are at a rate of no more than 1.15 (age adjusted to the 2000 U.S. standard population).

| Performance Measures                          | 2014 Act. | 2015 Act. | 2016 Act. | 2017 Est. | 2018 Est. | 2019 Est. | 2020 Est. |
|---|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Overall cancer mortality rate                 | 160.9     | 155.0     | 156.6     | 153.8     | 151.0     | 148.3     | 145.6     |
| Colorectal cancer mortality rate              | 14.3      | 13.5      | 14.2      | 13.8      | 13.5      | 13.2      | 12.8      |
| Cancer death rate ratio between blacks/whites | 1.13      | 1.16      | 1.15      | 1.14      | 1.14      | 1.14      | 1.13      |

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## 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** By the end of calendar year 2020, reduce the proportion of under-age Maryland middle and high school youth that currently smoke cigarettes by 87.7 percent and 67.5 percent, respectively, from the calendar year 2000 baseline rate.
- Obj. 6.2** By the end of calendar year 2019, reduce the proportion of Maryland adults that currently smoke cigarettes by 31.9 percent from the calendar year 2011 baseline rate.

| Performance Measures   | 2014 Act. | 2015 Act. | 2016 Act. | 2017 Act. | 2018 Est. | 2019 Est. | 2020 Est. |
|--|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Middle school students who currently smoke cigarettes          | 2.5%      | N/A       | 1.3%      | N/A       | 1.1%      | N/A       | 0.9%      |
| High school students who currently smoke cigarettes (all ages) | 8.7%      | N/A       | 8.2%      | N/A       | 7.7%      | N/A       | 7.2%      |
| Percent of adults who currently smoke cigarettes               | 14.6%     | 15.1%     | 13.7%     | 13.5%     | 13.2%     | 13.0%     | 12.8%     |

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

- Obj. 7.1** By the end of calendar year 2019, reduce the proportion of African-American adults who currently smoke cigarettes by 31.2 percent from the calendar year 2011 baseline rate.
- Obj. 7.2** By the end of calendar year 2019, reduce the proportion of Hispanic adults who currently smoke cigarettes by 54.8 percent from the calendar year 2011 baseline rate.

| Performance Measures                                      | 2014 Act. | 2015 Act. | 2016 Act. | 2017 Act. | 2018 Est. | 2019 Est. | 2020 Est. |
|---|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Percent of adult African Americans who smoke cigarettes   | 16.8%     | 15.3%     | 13.7%     | 13.5%     | 13.2%     | 13.0%     | 12.8%     |
| Percent of adult Hispanics who currently smoke cigarettes | 8.2%      | 10.2%     | 10.2%     | 10.0%     | 9.5%      | 9.0%      | 8.5%      |

## OFFICE OF THE CHIEF MEDICAL EXAMINER

<https://health.maryland.gov/ocme>

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

- Obj. 1.1** During fiscal year 2020, 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                      | 2014 Act. | 2015 Act. | 2016 Act. | 2017 Act. | 2018 Act. | 2019 Est. | 2020 Est. |
|---|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Total deaths investigated                 | 11,020    | 11,547    | 13,571    | 14,592    | 15,716    | 16,816    | 17,993    |
| Cases examined                            | 4,116     | 4,402     | 5,099     | 5,613     | 5,676     | 5,761     | 5,847     |
| 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 2020, 85 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                               | 2014 Act. | 2015 Act. | 2016 Act. | 2017 Act. | 2018 Act. | 2019 Est. | 2020 Est. |
|--|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Examinations performed                             | 4,116     | 4,402     | 5,099     | 5,613     | 5,676     | 5,761     | 5,847     |
| Number of Medical Examiners (full-time equivalent) | 14        | 15        | 15        | 18        | 17        | 17        | 18        |
| Percent of reports completed within 60 days        | 70%       | 73%       | 76%       | 81%       | 85%       | 85%       | 85%       |
| Ratio of autopsies to Medical Examiners            | 294       | 293       | 340       | 321       | 334       | 349       | 325       |

# MDH - Public Health Services

## OFFICE OF PREPAREDNESS AND RESPONSE

<https://preparedness.health.maryland.gov>

**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 (MCM) 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 MCM 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 MCM Operational Readiness Review Tool.

| Performance Measures  | 2014 Act. | 2015 Act. | 2016 Act. | 2017 Act. | 2018 Act. | 2019 Est. | 2020 Est. |
|---|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| <sup>2</sup> Percent of preparedness planning elements scored as "established" Maryland receives on the State ORR | 100%      | N/A       | 85%       | 85%       | N/A       | 85%       | N/A       |
| <sup>2</sup> Percent of LHDs with 90 percent of preparedness planning elements rated as "established" on the ORR  | N/A       | N/A       | 50.0%     | 50%       | 0%        | 50%       | 50%       |

**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 of Maryland Responds volunteers who have reached "Ready Responder" (i.e. readiness to deploy) status by 20 percent.

| Performance Measures  | 2014 Act. | 2015 Act. | 2016 Act. | 2017 Act. | 2018 Act. | 2019 Est. | 2020 Est. |
|---|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Percent of Maryland Responds volunteers who have reached "Ready Responder" status | N/A       | 4.6%      | 16.2%     | 31.8%     | 19.1%     | 22.1%     | 25.4%     |

## LABORATORIES ADMINISTRATION

[health.maryland.gov/laboratories](http://health.maryland.gov/laboratories)

**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  | 2014 Act. | 2015 Act. | 2016 Act. | 2017 Act. | 2018 Act. | 2019 Est. | 2020 Est. |
|---|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Number of genetic amplification techniques  | 28        | 30        | 32        | 34        | 36        | 38        | 40        |
| <sup>3</sup> Number of isolates sequenced by Whole Genome Sequencing (WGS)-Molecular Epi Purposes | N/A       | N/A       | N/A       | N/A       | N/A       | 2,500     | 3,000     |

**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   | 2014 Act. | 2015 Act. | 2016 Act. | 2017 Act. | 2018 Act. | 2019 Est. | 2020 Est. |
|--|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Percent accuracy of environmental testing in proficiency testing | 95%       | 96%       | 98%       | 94%       | 98%       | 98%       | 98%       |

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## NOTES

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<sup>1</sup> Data for 2016 is estimated.

<sup>2</sup> Data for 2011 to 2014 is from the previous scoring metric used by CDC. CDC's new system will only report sections as Early, Intermediate, Established and Advanced.

<sup>3</sup> The performance measures for OBJ 1.1 was changed from PFGE to WGS because the CDC is in the process of discontinuing PFGE testing technology.