



TOMÁS J. ARAGÓN, M.D., Dr.P.H.
Director and State Public Health Officer

State of California—Health and Human Services Agency
California Department of Public Health



GAVIN NEWSOM
Governor

June 30, 2022

Dr. Michael Sequeira, Health Officer County of San Bernardino 351 North Mountain View Avenue, Room 303 San Bernardino, CA 92415	Joshua Dugas, Health Director County of San Bernardino 351 N. Mountain View Avenue, Room 303 San Bernardino, CA 92415
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Future of Public Health Funding
Award Number FoPH-039
County of San Bernardino

Authority:

Budget Act of 2022 for budget year 2022-2023, H&S Code 101321, 101320.3 and 101320.5

Dear Dr. Michael Sequeira, Joshua Dugas:

The Budget Act of 2022 for budget year 2022-2023 [Health and Safety Code 101320, 101320.3, and 101320.5] provides \$200,400,000 annually to local health jurisdictions for public health workforce and infrastructure, referred to in this letter as the Future of Public Health Funding. These funds are considered ongoing funds and part of the ongoing baseline state budget. The California Department of Public Health (CDPH) is allocating **\$11,284,416** to **County of San Bernardino**.

As a condition of the funding, each local health jurisdiction shall, by Dec 30, 2023 and every three years thereafter, be required to submit a public health plan to CDPH pursuant to the requirements.

This letter provides submission requirements for the period of **July 1, 2022 to June 30, 2023**. Funds allocated for this period are available for encumbrance or expenditure until June 30, 2024 to support local health jurisdictions and strengthen local infrastructure.

Funding:

For the period of July 1, 2022 to June 30, 2023. CDPH will evaluate spending at the local level in January 2023. CDPH, in consultation with the California Conference of Local



Health Officers, the California Health Executives Association of California, and the Service Employees International Union (SEIU), will consider options for possible redirection of funds at that time.

The methodology for allocating these funds as set by statute are as follows:

1. Each Local Health Jurisdiction will receive a base funding amount of \$350,000 per year.
2. The remaining balance of the appropriation will be provided to Local Health Jurisdiction proportionally as follows:
 - a. 50 percent based on 2019, or most recent, population data
 - b. 25 percent based on 2019, or most recent, poverty data
 - c. 25 percent based on 2019, or most recent, the share of the population that is Black/African-American/Latinx/or Native Hawaiian/Pacific Islander.

Allocations to Local Health Jurisdictions are included in Attachment 1.

Funding Requirement:

Non-Supplantation

The funds allocated to each Local Health Jurisdiction may only be used to supplement, rather than supplant, existing levels of services provided by the Local Health Jurisdiction.

Each Local Health Jurisdiction receiving funds shall annually certify to the department that its portion of this funding shall be used to supplement and not supplant all other specific local city, county, or city and county funds including, but not limited to, 1991 health local realignment and city, county, or city and county general fund resources utilized for Local Health Jurisdiction purposes, and excluding federal funds in this determination. See Attachment 2 for certification form.

Required Use of Funding

1. Each Local Health Jurisdiction must dedicate at least 70 percent of funds to support the hiring of permanent city or county staff, including benefits and training.
2. Remaining funds, not to exceed 30 percent, may be used for equipment, supplies, and other administrative purposes such as facility space, furnishings, and travel.

Workplan/Spend Plan Requirements

1. Each Workplan should be informed by a Community Health Assessment, Community Health Improvement Plan, and/or local Strategic Plan.
2. If a current Community Health Assessment and Community Health Improvement Plan has not yet been completed by your Local Health Jurisdiction, the state fiscal year 2022-2023 Workplan should describe how the Local Health Jurisdiction will identify and address relevant community health issues and provide a plan and target date for completion of a Community Health Assessment and Community Health Improvement Plan. A Community Health Assessment and Community Health

Plan should be completed by December 30, 2023. Local Health Jurisdictions should describe in the Workplan and Spend Plan what positions your Agency plans to hire and how it will support your local objectives in which you have direct influence in achieving.

3. The Workplan should include an evaluation plan and metrics.
4. All Local Health Jurisdictions will be required to measure and evaluate the process and outcome of hiring permanent staff.

Redirection of Funding

A Local Health Jurisdiction may direct a portion of their funds to another local health jurisdiction in support of regional capacity. The Local Health Jurisdiction should submit a letter of support to CDPH from the Local Health Jurisdiction in which these funds are directed to, along with a description of the regional capacity the funds will support. The letter should be included as an additional attachment to the submission package.

Submission Requirements:

1. Complete a Workplan and Spend Plan by September 15, 2022 and submit to CDPH at: FoPHfunding@cdph.ca.gov. See *Attachments 3 and 4*. Your Agency should consider the following when developing your Workplan and Spend Plan:
 - It is recommended that your Agency fund an administrative position to ensure fiscal accountability and reporting requirements of the various Future of Public Health funds. At least seventy (70%) percent of your Agency funds must go towards the hiring of permanent city or county staff. Your agency must complete the table in Attachment 3 (Workplan and Reporting) to indicate how many positions in each type of classification across the listed public health areas your Agency plans to hire.
 - Your Agency may dedicate up to 30% of the allocated funding to fund partners and/or contractors, or used for equipment, supplies and other administrative purposes such as current staff compensation, staff development, facility space, furnishings, and travel.
 - Your Agency is encouraged to recruit and give hiring preference to unemployed workers, underemployed workers, and a diversity of applicants from local communities who are qualified to perform the work. In addition, you are encouraged to work with applicants from your community.
 - Your Agency is encouraged to explore transitioning limited-term or contracted staff/positions previously funded through limited term federal funding into permanent positions for the city; county; or city and county
 - If your Agency will be dedicating a portion of your funds to another Local Health Jurisdiction to increase regional capacity, your Agency should submit a letter of support from the Local Health Jurisdiction receiving those funds. Adjustments should be reflected in the workplan and spend plan that is

submitted to CDPH for review and approval. The letter should be included as an additional attachment to the submission package.

2. Your Agency must also meet the following minimum requirements for these funds and include descriptions in your Agency's Workplan:
 - i. A description of how your Agency will achieve 24/7 health officer coverage.
 - ii. A description of how your Agency will meet your Community Health Assessment (CHA)/Community Health Improvement plan (CHIP) and/or local Strategic plan goals. How do you plan to measure/evaluate the impact of these funds? Please either attach a copy or provide links to your CHA, CHIP, and Strategic Plan or provide a date when these will become available.
 - iii. A description of how your Agency will use these funds to meet your local Health Jurisdiction equity goals.
 - iv. A description of how your Agency will use these funds to become or sustain capacity as a learning organization including continuous quality improvement and Results-Based Accountability/evaluation.
 - v. Commit to Health Officer and Health Director participation in Regional Public Health Office monthly or quarterly meetings as determined by the Region and CDPH
3. In advance of the Workplan and Spend Plan due date, your Agency should respond to CDPH acknowledging that you accept the allocation funds outlined in this letter.

Reporting Requirements:

As a recipient of the Future of Public Health Funding, the following reporting documents will be required:

For your convenience, your Contract Manager will issue reminders as these dates get closer.

1. Submit quarterly progress reports on hiring progress to CDPH following the schedule below. Starting with the quarter 2 progress report, provide status of timelines, goals, and objectives outlined in your workplan. See *Attachment 3*. Note, if your workplan is under review by CDPH and has not been approved by the progress report due date, you are still required to submit your progress report to CDPH.

Year/Quarter	Reporting Period	Due Date
Year 1/Q1	July 1, 2022 – September 30, 2022	October 30, 2022
Year 1/Q2	October 1, 2022 – December 31, 2022	January 30, 2023
Year 1/Q3	January 1, 2023 – March 31, 2023	April 30, 2023
Final	April 1, 2023 – June 30, 2023	July 30, 2023

2. Submit quarterly expenditure reports to CDPH following the schedule below. Expenditure reporting should be completed within your Spend Plan. Note, if your spend plan is under review by CDPH and has not been approved by the reporting due date, you are still required to submit your expenditure report to CDPH. See Attachment 4.

Year/Quarter	Reporting Period	Due Date
Year 1/Q1	July 1, 2022 – September 30, 2022	October 30, 2022
Year 1/Q2	October 1, 2022 – December 31, 2022	January 30, 2023
Year 1/Q3	January 1, 2023 – March 31, 2023	April 30, 2023
Final	April 1, 2023 – June 30, 2023	July 30, 2023

3. CDPH will provide a template to use to facilitate the reporting of these data metrics.

Reimbursement/Invoicing:

CDPH will reimburse your Agency upon receipt of invoice. In order to receive your reimbursements, please complete and submit your invoice(s) to:

FoPHfunding@cdph.ca.gov. See Attachment 5.

1. First Quarter Payment: CDPH will issue a warrant (check) to your Agency for 25% of your total allocation, this will be issued as an advance payment.
2. Future payments will be based on reimbursement of expenditures once the 25% advance payment has been fully expended. In order to receive future payments, your Agency must complete and submit reporting documentation within Attachments 3 and 4 following the due dates above within Reporting Requirements.
3. Your Agency must maintain supporting documentation for any expenditures invoiced to CDPH against this source of funding. Documentation should be readily available in the event of an audit or upon request from CDPH. Documentation should be maintained onsite for five years.

Thank you for the time your Agency has invested to strengthen public health capacity and preparedness to respond to future emergencies throughout California communities. We are hopeful that this funding will collectively achieve the goal of developing and strengthening California's public health workforce. CDPH is hosting a webinar on **July 14, 2022 from 11:00 AM – 12:00 PM** to go over the requirements and activities of this funding. If you have any questions or need further clarification, please reach out to FoPHfunding@cdph.ca.gov.

Sincerely,

A handwritten signature in blue ink that reads "Susan Fanelli".

Susan Fanelli
Chief Deputy Director
California Department of Public Health

Acknowledgement of Allocation Letter

Instruction: Please check one statement below, sign, and return to FoPHfunding@cdph.ca.gov

☐ **County of San Bernardino** acknowledges receipt of this Allocation letter and accepts the funds to be used as outlined under the Submission Requirements section.

☐ **County of San Bernardino** acknowledges receipt of this Allocation letter and does not accept the funds. **County of San Bernardino** understands that these funds cannot be delegated to another Agency and CDPH will redistribute funds.

Name of Local Health Jurisdiction designated signee(s): Curt Hagman

Title/Role: Chairman, Board of Supervisors

Signature of Local Health Jurisdiction designee: _____

Date: _____

Attachments

Attachment 1: Local Allocations Table
Attachment 2: Certification Form
Attachment 3: Workplan and Reporting
Attachment 4: Spend Plan
Attachment 5: Invoice



TOMÁS J. ARAGÓN, MD, DrPH
Director and State Public Health Officer

State of California—Health and Human Services Agency
California Department of Public Health



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FUTURE OF PUBLIC HEALTH FUNDING
ANNUAL CERTIFICATION

The undersigned hereby affirms that they have read and agree with the funding requirements specified in the Future of Public Health Funding Award Agreement. The undersigned certifies:

1. That the funding provided under this agreement shall be used to supplement and not supplant all other specific local county funds.
2. That at least 70 percent of funds to support the hiring of permanent city; county; or city and county staff, including benefits and training.
3. Remaining funds, not to exceed 30 percent, may be used for equipment, supplies, and other administrative purposes such as facility space, furnishings, travel.

Designee authorized to commit the Local Health Jurisdiction to this Agreement

Name (Print) Title

Signature Date

Local Health Jurisdiction Name

Agreement Number



Future of Public Health (FoPH) Funding

Attachment 3 - Workplan & Progress Report

INSTRUCTIONS

Enter the name of the LHJ at the top of the page on each tab.
Enter data into unshaded areas only.

A. The LHJ Future of Public Health (FoPH) Workplan is due on or before September 15, 2022 by COB.

a. The workplan should be emailed to FoPHfunding@cdph.ca.gov.

B. Quarterly Progress Reports

a. Submit quarterly progress reports on hiring progress to CDPH following the schedule to the right. Progress reports starting quarter 2 should also to provide status of timelines, goals, and objectives outlined in your workplan.

b. The progress report are entered on the "Staffing Plan" (beginning on Column G) and "Objectives and Progress Report" tabs (beginning on Column H). For each objective, indicate progress to date in meeting objective and include a brief description of progress made toward the objective and any challenges, if applicable.

c. The progress report should be emailed by the due date to FoPHfunding@cdph.ca.gov.

C. Workplan Sections

1. Future of Public Health Minimum Requirements

- a. Complete each of the five questions addressing the minimum requirements for accepting FoPH funding.
- b. For question 5, select "Yes" or "No" from the dropdown.

2. **Staffing Plan**

- a. For each Classification or Position type, enter the total number of positions (by FTE) planned by Public Health Topic.
- b. Column K will auto sum the total number of classification type by Public Health Topic.
- c. In row 22, the table will auto sum the number of positions in each Public Health Topic.

CDPH Future of Public Health (FoPH) Funding Minimum Requirements

Local Health Jurisdiction Name:	
Agreement Number:	

Future of Public Health (FoPH) Minimum Requirements	LHJ Response
1. Describe how your local health jurisdiction achieves 24/7 health officer coverage. Include backup plans for times when the health officer is unavailable, such as Deputy Health Officer positions, contracts, or regional coverage agreements.	Dr Sequeira carries his Department of Public Health phone with him and answers to cover any issues that may arise. Since we have taken on a new full time Deputy Health Officer, Dr. Sharon Wang, she will cover when I am indisposed. She also has a work phone. In the rare circumstances that we are unable to be contacted, the Medical Director of our Public Health Clinics (Currently Dr. Jeanne Rorabeck) will cover.
2. Describe how these new funds will assist your jurisdiction in meeting your community health assessment/community health improvement plan and strategic plan goals. How do you plan to measure/evaluate the impact of these funds? Please either attach a copy or provide links to your CHA, CHIP and Strategic Plan or provide a date when these will become available.	San Bernardino County's CHA and CHIP (known as the Community Transformation Plan) are conducted, developed and implemented through a multi-sectoral community collaborative known as the Community Vital Signs initiative. Although FoPH is not directly funding this initiative, the additional staffing throughout the department will support our Public Health Department's role in each priority area, goal, objective and strategy in the plan. Staff and external partners who are assigned to these efforts will submit work plans and routine progress updates. Additional research and evaluation staff and information technology staff funded
3. Describe how these new funds will assist your jurisdiction in meeting equity goals.	FoPH funding will add positions to evaluate existing and future programs' and initiatives' efficacy in advancing health equity. Increased research and evaluation will lead to quality improvement, capacity building, and enhanced service delivery to meet equity goals in our county. The funding will support implementation of

<p>4. Describe efforts your jurisdiction will take in becoming or sustaining capacity as a learning organization including continuous quality improvement and results-based accountability/evaluation.</p>	<p>San Bernardino County's Public Health Department implemented the Plan-Do-Study-Act framework several years ago and maintains an internal web site to report quality improvement (QI) cycles and projects, as well as inform and provide QI learning and reference resources to staff. QI training is offered through the County's learning management system and "just-in-time" training for QI project teams. A QI Coordinator is fully funded to oversee the department's accreditation and QI efforts. Our QI plan met the Public Health Accreditation Board's</p>
<p>5. Commit to Health Officer and Health Director participation in the Regional Public Office monthly/quarterly meetings as determined by the Region and CDPH. (Select from dropdown)</p>	<p>Yes</p>

CDPH Future of Public Health (FoPH) Funding Minimum Requirements

Local Health Jurisdiction Name:	San Bernardino County Department of Public Health
Agreement Number:	TBD

Future of Public Health (FoPH) Minimum Requirements	LHJ Response
1. Describe how your local health jurisdiction achieves 24/7 health officer coverage. Include backup plans for times when the health officer is unavailable, such as Deputy Health Officer positions, contracts, or regional coverage agreements.	Dr Sequeira carries his Department of Public Health phone with him and answers to cover any issues that may arise. Since we have taken on a new full time Deputy Health Officer, Dr. Sharon Wang, she will cover when I am indisposed. She also has a work phone. In the rare circumstances that we are unable to be contacted, the Medical Director of our Public Health Clinics (Currently Dr. Jeanne Rorabeck) will cover.
2. Describe how these new funds will assist your jurisdiction in meeting your community health assessment/community health improvement plan and strategic plan goals. How do you plan to measure/evaluate the impact of these funds? Please either attach a copy or provide links to your CHA, CHIP and Strategic Plan or provide a date when these will become available.	San Bernardino County's CHA and CHIP (known as the Community Transformation Plan) are conducted, developed and implemented through a multi-sectoral community collaborative known as the Community Vital Signs initiative. Although FoPH is not directly funding this initiative, the additional staffing throughout the department will support our Public Health Department's role in each priority area, goal, objective and strategy in the plan. Staff and external partners who are assigned to these efforts will submit work plans and routine progress updates. Additional research and evaluation staff and information technology staff funded through FoPH are building a comprehensive, visual public data dashboard that will present goals, performance measures, and progress. www.communityvitalsigns.org contains the current Community Transformation Plan and most recent Community Health Status Data report. The new CHA and CHIP will be complete in the first half of 2023.
3. Describe how these new funds will assist your jurisdiction in meeting equity goals.	FoPH funding will add positions to evaluate existing and future programs' and initiatives' efficacy in advancing health equity. Increased research and evaluation will lead to quality improvement, capacity building, and enhanced service delivery to meet equity goals in our county. The funding will support: implementation of evidence-based strategies and frameworks; contribution to a knowledge base to equip staff, external partners and stakeholders; and increasing skills in community-based participatory research. The funding will help drive ongoing community engagement through Community Health Workers, Health Education Specialists, and Health Services Assistants that will provide culturally competent guidance, support and linkage to care for individuals in disadvantaged communities and sub-populations. The funding will greatly increase capacity in the areas of data analysis and data sharing to enhance informed decision-making and equity-focused strategies. New surveillance and response staff will build upon lessons learned during the COVID-19 pandemic to equitably serve communities who are disproportionately impacted by communicable disease.

<p>4. Describe efforts your jurisdiction will take in becoming or sustaining capacity as a learning organization including continuous quality improvement and results-based accountability/evaluation.</p>	<p>San Bernardino County's Public Health Department implemented the Plan-Do-Study-Act framework several years ago and maintains an internal web site to report quality improvement (QI) cycles and projects, as well as inform and provide QI learning and reference resources to staff. QI training is offered through the County's learning management system and "just-in-time" training for QI project teams. A QI Coordinator is fully funded to oversee the department's accreditation and QI efforts. Our QI plan met the Public Health Accreditation Board's requirements and is updated annually. This year, the department will be imbedding QI Champions in nearly all program areas. Additionally, our Performance Management Committee, with employee representatives from across the department, meets regularly to evaluate, coordinate, and advise data-driven continuous process improvement opportunities and activities.</p>
<p>5. Commit to Health Officer and Health Director participation in the Regional Public Office monthly/quarterly meetings as determined by the Region and CDPH. (Select from dropdown)</p>	<p>Yes</p>

CDPH Future of Public Health (FoPH) Funding
Staffing Plan

Local Health Jurisdiction Name:
Agreement Number:

San Bernardino County Department of Public Health
TBD

Workplan Staffing Considerations	LHJ Response
List any anticipated challenges and/or barriers to hiring and/or technical assistance needs from CDPH.	
If applicable, describe your strategies to overcome potential hiring barriers.	

Progress Report*	YR1/Q1 Progress Update (July 1, 2022 - September 30, 2022)	YR1/Q2 Progress Update (October 1, 2022 - December 31, 2022)	YR1/Q3 Progress Update (January 1, 2023 - March 31, 2023)	YR1/Q4 Progress Update (April 1, 2023 - June 30, 2023)
Briefly describe progress to date and challenges on your proposed staffing plan.				

Type of Position/Classification	Public Health Topics										# of Positions (Total FTE)
	Health Information Technology	Community & Family Health	Clinic Operations	Quality & Compliance	Public Health Lab	Surveillance & Response	Research, Assessment & Planning	Fiscal/Administration	Fiscal/Administration		
1. Professional or clinical staff, including public health physicians and nurses (not Public Health Nurses, but Registered Nurses working in clinical capacity at a public health clinic); mental or behavioral health specialists to support workforce and community resilience; social service specialists; vaccinators;	2										2
2. Public Health Nurses						2					2
3. Research, evaluation, and surveillance specialists and scientists such as population Health and Disease Investigation staff, epidemiologists, surveillance specialists, program evaluators, case investigators; contact tracers; or disease intervention specialists; data management and informatics staff;	2			2	1	15	2				22
4. Laboratory scientists or technicians					5						5
5. Program development and implementation staff, including program managers; health program specialists, communications and policy staff; translation and trans-adaptation services; training development staff, trainers or health educators; or other community health workers; emergency preparedness and response coordinators to support planning, exercises, and response and identify lessons learned to help prepare for possible future disease outbreaks; health equity officers or teams;	1	5	2	11		2		5			26
6. Environmental Health Investigators											0
7. Administrative staff, including human resources personnel; fiscal or grant managers; grant writers; clerical staff; or others needed to ensure rapid hiring and procurement of goods and services and other administrative services associated with successfully managing multiple funding streams that have been leveraged and/or braided across multiple programs		1	1	2	1	1		3			9
8. Other positions that support strategic alignment, coordination, collaboration or facilitation of cross-cutting programmatic work in your jurisdiction, particularly across public health programs	1		2	1		1		2			7
9. Policy Development											0
Total	6	6	5	16	7	21	2	10	0		73

Notes

CDPH Future of Public Health (FoPH) Funding
Local Objectives & Quarterly Progress Report

Local Health Jurisdiction Name:	San Bernardino County Department of Public Health
Agreement Number:	TBD

Local Objective #1		
Objective (SMART Objective)	All staff will be provided education and competency evaluation related to disaster preparedness response to include infection control, fit testing, medication and/or vaccine administration, and shelter support education upon hire and annually as needed. This will include Public Health Nursing as well to assist in measuring and coordinating training.	
Implementation Plan (Bulleted items or brief sentences)	1) Identified CDPH Education staff will create baseline list of licensed nurses and DSWs that will need annual education and competency training 2) Identify which training will be completed each month (or longer if needed) until all training has been captured 3) the goal is to have all education training and/or competencies completed in the first 6 months following implementation.	
Evaluation Plan: How will LHI measure and track this objective?	Nurse Education and Health Ed staff will create a list of licensed nurses and DSWs in the LMS system to track completed trainings, testing and/or competencies. Ongoing evaluation, planning and scheduling to ensure annual requirements are met.	
Issue Area (select from drop down)	Issue Area 1	Other Core LHI Infrastructure
	Issue Area 2	
	Issue Area 3	
	Issue Area 4	
	Issue Area 5	
	Specify if "other" Selected	Workforce training and competency
Strategy Area (select from drop down)	Strategy Area 1	Build and support a diverse and skilled public health workforce
	Strategy Area 2	
	Strategy Area 3	
	Strategy Area 4	
	Strategy Area 5	
	Specify additional Strategy Area	
Expected Achieve By Date (select from drop down)	September 2023	

Local Objective #2		
Objective (SMART Objective)	San Bernardino County Department of Public Health, Health Promotion & Education Section will deliver staff development training in such areas as, but not limited to: health equity, cultural and linguistic sensitivity, trauma informed care, outreach and engagement, and building community partnership.	
Implementation Plan (Bulleted items or brief sentences)	SBCDH HPES will identify and secure trainers for designated topics, utilizing "train the trainer" options when available; HPES will schedule training opportunities for HPES staff, Health Ambassador teams, and other relevant work groups. HPES will develop use survey tools to determine appropriateness and effectiveness of trainings; HPES will announce and promote training sessions to appropriate participants; HPES will develop post-training application plans.	
Evaluation Plan: How will LHI measure and track this objective?	HPES will use tracking methods to record trainings by date, topic, number of attendees, and outcomes; HPES will coordinate with Workforce Development Team to enter trainings into the Learning Management System for historical record purposes and for tracking any routine refresher course requirements; proportion of HPES staff completing training plans.	
Issue Area (select from drop down)	Issue Area 1	Prevention and Health Promotion
	Issue Area 2	
	Issue Area 3	
	Issue Area 4	
	Issue Area 5	
	Specify if "other" Selected	
Strategy Area (select from drop down)	Strategy Area 1	Build and support a diverse and skilled public health workforce
	Strategy Area 2	
	Strategy Area 3	
	Strategy Area 4	
	Strategy Area 5	
	Specify additional Strategy Area	
Expected Achieve By Date (select from drop down)	September 2023	

Local Objective #3		
Objective (SMART Objective)	San Bernardino County Department of Public Health will develop a training program that reinforces Public Health Science competency and learning for both administrative and public health professionals.	

YR1/Q1 Progress Update (July 1 - September 30, 2022)	
Progress Status: (Select from drop down)	
Briefly describe progress to date and challenges that might affect your ability to complete this objective in the expected timeframe. For Quarter 1, please provide progress updates related to staffing and hiring, if applicable to this objective. Otherwise, indicate "Not Applicable. "	

YR1/Q1 Progress Update (July 1 - September 30, 2022)	
Progress Status: (Select from drop down)	
Briefly describe progress to date and challenges that might affect your ability to complete this objective in the expected timeframe. For Quarter 1, please provide progress updates related to staffing and hiring, if applicable to this objective. Otherwise, indicate "Not Applicable. "	

YR1/Q1 Progress Update (July 1 - September 30, 2022)	
Progress Status: (Select from drop down)	

YR1/Q2 Progress Update (October 1, 2022 - December 31, 2022)	
Progress Status: (Select from drop down)	
Briefly describe progress to date and challenges that might affect your ability to complete this objective in the expected timeframe.	

YR1/Q2 Progress Update (October 1, 2022 - December 31, 2022)	
Progress Status: (Select from drop down)	
Briefly describe progress to date and challenges that might affect your ability to complete this objective in the expected timeframe.	

YR1/Q2 Progress Update (October 1, 2022 - December 31, 2022)	
Progress Status: (Select from drop down)	

YR1/Q3 Progress Update (January 1 - March 31, 2023)	
Progress Status: (Select from drop down)	
Briefly describe progress to date and challenges that might affect your ability to complete this objective in the expected timeframe.	

YR1/Q3 Progress Update (January 1 - March 31, 2023)	
Progress Status: (Select from drop down)	
Briefly describe progress to date and challenges that might affect your ability to complete this objective in the expected timeframe.	

YR1/Q3 Progress Update (January 1 - March 31, 2023)	
Progress Status: (Select from drop down)	

YR1/Q4 Progress Update (April 1 - June 30, 2023)	
Progress Status: (Select from drop down)	
Briefly describe progress to date and challenges that might affect your ability to complete this objective in the expected timeframe.	

YR1/Q4 Progress Update (April 1 - June 30, 2023)	
Progress Status: (Select from drop down)	
Briefly describe progress to date and challenges that might affect your ability to complete this objective in the expected timeframe.	

YR1/Q4 Progress Update (April 1 - June 30, 2023)	
Progress Status: (Select from drop down)	

	Implementation Plan (Bulleted items or brief sentences)	1. Identify a project lead 2. Establish a committee to assist with curriculum planning and development 3. Identify Public Health Science topics 4. Schedule method of distribution of curriculum material 5. Develop curriculum 6. Open application process for instructor led trainings 6. Conduct instructor led training 7. Test learner's knowledge in Public Health Sciences 8. Evaluate curriculum and training	
	Evaluation Plan: How will LHI measure and track this objective?	DPH will track number of employees who complete Public Health Sciences trainings via the Learning Management System. DPH will also evaluate an increase in employees' knowledge in Public Health Sciences through pre and post tests.	
	Issue Area (select from drop down)	Issue Area 1	Prevention and Health Promotion
		Issue Area 2	
		Issue Area 3	
		Issue Area 4	
		Issue Area 5	
		Specify if "other" Selected	
	Strategy Area (select from drop down)	Strategy Area 1	Build and support a diverse and skilled public health workforce
		Strategy Area 2	
		Strategy Area 3	
		Strategy Area 4	
		Strategy Area 5	
		Specify additional Strategy Area	
	Expected Achieve By Date (select from drop down)	December 2023	

	Local Objective #4		
	Objective (SMART Objective)	Increasing laboratory testing capacity to support community health and communicable disease surveillance	
	Implementation Plan (Bulleted items or brief sentences)	*Hire additional permanent technical staff to implement, perform, analyze and report complex laboratory testing including the identification and genetic sequencing of pathogenic organisms from clinical and environmental samples. *Reallocate lab spaces to accommodate additional testing. *Work with healthcare facility partners and DPH communicable disease investigators to obtain samples to screen for antimicrobial resistant hospital acquired infections. Early detection can identify pathogen sources and prevent or slow transmission. *Wastewater surveillance testing for pathogenic organisms in underserved populations. This currently involves projects to identify SARS-CoV-2 in prison and detention center wastewater. *Whole Genome Sequencing (WGS) techniques will be expanded to test and report clinical and environmental samples for the presence of SARS-CoV-2, antimicrobial resistant healthcare pathogens, healthcare pathogens and other emerging pathogens in the community. This method allows community disease surveillance and the tracking of outbreak sources. This lab's participation in national networks support the creation of phage-typing to further trace the source of infection. *Work with SBCDPH programs, other local health jurisdictions and healthcare facilities to provide testing based on needs assessment and under the direction of memorandums of understanding (MOUs) or contracts.	
	Evaluation Plan: How will LHI measure and track this objective?	*Newly hired staff receive written competency assessments and regular work performance evaluations. *Test results are approved by testing staff and reviewed daily by supervisory staff and monthly by lab management. *Lab results are further reported to state and national networks. *Partner needs assessment surveys will be quantified and analyzed to provide required services. MOUs and contracts will be logged and monitored.	
	Issue Area (select from drop down)	Issue Area 1	Prevention and Health Promotion
		Issue Area 2	High Quality, Patient-Centered Care
		Issue Area 3	
		Issue Area 4	
		Issue Area 5	
		Specify if "other" Selected	
	Strategy Area (select from drop down)	Strategy Area 1	Investigate, diagnose, and address health problems and hazards affecting the population
		Strategy Area 2	Build and support a diverse and skilled public health workforce
		Strategy Area 3	Improve and innovate public health functions through ongoing evaluation, research, and continuous quality improvement
		Strategy Area 4	
		Strategy Area 5	
		Specify additional Strategy Area	
	Expected Achieve By Date (select from drop down)	September 2023	

	Local Objective #5		
	Objective (SMART Objective)	San Bernardino County Department of Public Health, Health Promotion and Education Section will demonstrate enhanced community partnerships, outreach and engagement of the population to address trending health matters and respond to emerging threats to the health and wellness of the community (ex: help A outbreaks among unhoused, episodic/tertiary prevention, youth mental health support, accident prevention, special projects of local jurisdictions)	
	Implementation Plan (Bulleted items or brief sentences)	Growth of Health Ambassador utilization, growth in membership of the CBO collaborative, focused analysis of emerging health trends, collective and coordinated prevention messaging across entities, outreach to most impacted neighborhoods using GIS data, linkage to services/links to resources/links to case activities	

Briefly describe progress to date and challenges that might affect your ability to complete this objective in the expected timeframe. <i>For Quarter 1, please provide progress updates related to staffing and hiring, if applicable to this objective. Otherwise, indicate "Not Applicable."</i>	

YR1/Q3 Progress Update (July 1 - September 30, 2022)	
Progress Status: (Select from drop down)	
Briefly describe progress to date and challenges that might affect your ability to complete this objective in the expected timeframe. <i>For Quarter 1, please provide progress updates related to staffing and hiring, if applicable to this objective. Otherwise, indicate "Not Applicable."</i>	

YR1/Q2 Progress Update (October 1, 2022 - December 31, 2022)	
Progress Status: (Select from drop down)	
Briefly describe progress to date and challenges that might affect your ability to complete this objective in the expected timeframe. <i>For Quarter 1, please provide progress updates related to staffing and hiring, if applicable to this objective. Otherwise, indicate "Not Applicable."</i>	

YR1/Q3 Progress Update (July 1 - September 30, 2022)	
Progress Status: (Select from drop down)	
Briefly describe progress to date and challenges that might affect your ability to complete this objective in the expected timeframe. <i>For Quarter 1, please provide progress updates related to staffing and hiring, if applicable to this objective. Otherwise, indicate "Not Applicable."</i>	

Briefly describe progress to date and challenges that might affect your ability to complete this objective in the expected timeframe. <i>For Quarter 1, please provide progress updates related to staffing and hiring, if applicable to this objective. Otherwise, indicate "Not Applicable."</i>	

YR1/Q2 Progress Update (October 1, 2022 - December 31, 2022)	
Progress Status: (Select from drop down)	
Briefly describe progress to date and challenges that might affect your ability to complete this objective in the expected timeframe. <i>For Quarter 1, please provide progress updates related to staffing and hiring, if applicable to this objective. Otherwise, indicate "Not Applicable."</i>	

YR1/Q2 Progress Update (October 1, 2022 - December 31, 2022)	
Progress Status: (Select from drop down)	
Briefly describe progress to date and challenges that might affect your ability to complete this objective in the expected timeframe. <i>For Quarter 1, please provide progress updates related to staffing and hiring, if applicable to this objective. Otherwise, indicate "Not Applicable."</i>	

YR1/Q2 Progress Update (October 1, 2022 - December 31, 2022)	
Progress Status: (Select from drop down)	
Briefly describe progress to date and challenges that might affect your ability to complete this objective in the expected timeframe. <i>For Quarter 1, please provide progress updates related to staffing and hiring, if applicable to this objective. Otherwise, indicate "Not Applicable."</i>	

Briefly describe progress to date and challenges that might affect your ability to complete this objective in the expected timeframe. <i>For Quarter 1, please provide progress updates related to staffing and hiring, if applicable to this objective. Otherwise, indicate "Not Applicable."</i>	

YR1/Q3 Progress Update (January 1 - March 31, 2023)	
Progress Status: (Select from drop down)	
Briefly describe progress to date and challenges that might affect your ability to complete this objective in the expected timeframe. <i>For Quarter 1, please provide progress updates related to staffing and hiring, if applicable to this objective. Otherwise, indicate "Not Applicable."</i>	

YR1/Q3 Progress Update (January 1 - March 31, 2023)	
Progress Status: (Select from drop down)	
Briefly describe progress to date and challenges that might affect your ability to complete this objective in the expected timeframe. <i>For Quarter 1, please provide progress updates related to staffing and hiring, if applicable to this objective. Otherwise, indicate "Not Applicable."</i>	

YR1/Q3 Progress Update (January 1 - March 31, 2023)	
Progress Status: (Select from drop down)	
Briefly describe progress to date and challenges that might affect your ability to complete this objective in the expected timeframe. <i>For Quarter 1, please provide progress updates related to staffing and hiring, if applicable to this objective. Otherwise, indicate "Not Applicable."</i>	

Briefly describe progress to date and challenges that might affect your ability to complete this objective in the expected timeframe. <i>For Quarter 1, please provide progress updates related to staffing and hiring, if applicable to this objective. Otherwise, indicate "Not Applicable."</i>	

YR1/Q4 Progress Update (April 1 - June 30, 2023)	
Progress Status: (Select from drop down)	
Briefly describe progress to date and challenges that might affect your ability to complete this objective in the expected timeframe. <i>For Quarter 1, please provide progress updates related to staffing and hiring, if applicable to this objective. Otherwise, indicate "Not Applicable."</i>	

YR1/Q4 Progress Update (April 1 - June 30, 2023)	
Progress Status: (Select from drop down)	
Briefly describe progress to date and challenges that might affect your ability to complete this objective in the expected timeframe. <i>For Quarter 1, please provide progress updates related to staffing and hiring, if applicable to this objective. Otherwise, indicate "Not Applicable."</i>	

YR1/Q4 Progress Update (April 1 - June 30, 2023)	
Progress Status: (Select from drop down)	
Briefly describe progress to date and challenges that might affect your ability to complete this objective in the expected timeframe. <i>For Quarter 1, please provide progress updates related to staffing and hiring, if applicable to this objective. Otherwise, indicate "Not Applicable."</i>	

	Evaluation Plan: How will LHI measure and track this objective?	Minutes and agendas of CBO collaborative meetings; sign in sheets as applicable; tracking sheet to document outreach encounters; track materials distributed; track social media posts and other messaging sources; track by health initiative.	
	Issue Area (select from drop down)	Issue Area 1	Prevention and Health Promotion
		Issue Area 2	
		Issue Area 3	
		Issue Area 4	
		Issue Area 5	
		Specify if "other" Selected	
	Strategy Area (select from drop down)	Strategy Area 1	Communicate effectively to inform and educate people about health, factors that influence it, and how to improve it
		Strategy Area 2	Strengthen, support and mobilize communities and partnerships to improve health
		Strategy Area 3	
		Strategy Area 4	
		Strategy Area 5	
		Specify additional Strategy Area	
	Expected Achieve By Date (select from drop down)	December 2023	

	Local Objective #6		
	Objective (SMART Objective)	Department will create a field-based mobile outreach STD services team that will support outreach, treatment, education, and linkage to care for the most vulnerable populations in San Bernardino County, including homeless and sex workers.	
	Implementation Plan (Bulleted items or brief sentences)	Identify best practices and lessons learned from existing field-based outreach teams. Build networks with community agencies serving at-risk populations, including advocacy groups, local CDCs, homeless outreach agencies, and faith-based organizations. Develop referral and resource management system for tracking and evaluation. Leverage existing infrastructure including mobile van to conduct mobile visits.	
	Evaluation Plan: How will LHI measure and track this objective?	Activities will be tracked through a routine survey to be completed by staff daily. Service areas will be recorded through this survey, including number of patients engaged, number of assessments provided, and number of linkages made. Education activities will be tracked and evaluated weekly.	
	Issue Area (select from drop down)	Issue Area 1	Equitable Outcomes
		Issue Area 2	Access, Availability and Utilization of Health Services
		Issue Area 3	
		Issue Area 4	
		Issue Area 5	
		Specify if "other" Selected	
	Strategy Area (select from drop down)	Strategy Area 1	Strengthen, support and mobilize communities and partnerships to improve health
		Strategy Area 2	Assure an effective system that enables equitable access to the individual services and care needed to be healthy
		Strategy Area 3	
		Strategy Area 4	
		Strategy Area 5	
		Specify additional Strategy Area	
	Expected Achieve By Date (select from drop down)	January 2023	

	Local Objective #7		
	Objective (SMART Objective)	Implement standard screening questions for social determinants of health (SDOH) across Community & Family Health Services (CHFS) programs, link residents to services for identified needs.	
	Implementation Plan (Bulleted items or brief sentences)	Meet with CHFS programs to evaluate current data collected, SDOH-related questions. Identify gaps with current Social Risk Factor screening tool utilized by County clinics. Develop standard tool which meets needs of program and population health objectives. Provide staff training on data collection. Embed Community Health Workers in public-serving programs to facilitate resource access and referral tracking. Evaluate scores of intervention.	
	Evaluation Plan: How will LHI measure and track this objective?	Evaluation will include tracking the implementation progress in a workplan, including: 1. Knowledge change from staff training 2. Developing an description & workflow, testing, understanding, training CHHS 3. Track % clients screened, % positive screens referred to services, outcome of referrals monthly 4. Collect qualitative feedback from clients	
	Issue Area (select from drop down)	Issue Area 1	Access, Availability and Utilization of Health Services
		Issue Area 2	Equitable Outcomes
		Issue Area 3	High Quality, Patient-Centered Care
		Issue Area 4	Prevention and Health Promotion

YR1/Q1 Progress Update (July 1 - September 30, 2022)	
Progress Status: (Select from drop down)	
Briefly describe progress to date and challenges that might affect your ability to complete this objective in the expected timeframe. For Quarter 1, please provide progress updates related to staffing and hiring, if applicable to this objective. Otherwise, indicate "Not Applicable."	

YR1/Q2 Progress Update (October 1, 2022 - December 31, 2022)	
Progress Status: (Select from drop down)	
Briefly describe progress to date and challenges that might affect your ability to complete this objective in the expected timeframe.	

YR1/Q3 Progress Update (January 1 - March 31, 2023)	
Progress Status: (Select from drop down)	
Briefly describe progress to date and challenges that might affect your ability to complete this objective in the expected timeframe.	

YR1/Q4 Progress Update (April 1 - June 30, 2023)	
Progress Status: (Select from drop down)	
Briefly describe progress to date and challenges that might affect your ability to complete this objective in the expected timeframe.	

YR1/Q1 Progress Update (July 1 - September 30, 2022)	
Progress Status: (Select from drop down)	
Briefly describe progress to date and challenges that might affect your ability to complete this objective in the expected timeframe.	

YR1/Q2 Progress Update (October 1, 2022 - December 31, 2022)	
Progress Status: (Select from drop down)	
Briefly describe progress to date and challenges that might affect your ability to complete this objective in the expected timeframe.	

YR1/Q3 Progress Update (January 1 - March 31, 2023)	
Progress Status: (Select from drop down)	
Briefly describe progress to date and challenges that might affect your ability to complete this objective in the expected timeframe.	

YR1/Q4 Progress Update (April 1 - June 30, 2023)	
Progress Status: (Select from drop down)	
Briefly describe progress to date and challenges that might affect your ability to complete this objective in the expected timeframe.	

YR1/Q1 Progress Update (July 1 - September 30, 2022)	
Progress Status: (Select from drop down)	
Briefly describe progress to date and challenges that might affect your ability to complete this objective in the expected timeframe.	

YR1/Q2 Progress Update (October 1, 2022 - December 31, 2022)	
Progress Status: (Select from drop down)	
Briefly describe progress to date and challenges that might affect your ability to complete this objective in the expected timeframe.	

YR1/Q3 Progress Update (January 1 - March 31, 2023)	
Progress Status: (Select from drop down)	
Briefly describe progress to date and challenges that might affect your ability to complete this objective in the expected timeframe.	

YR1/Q4 Progress Update (April 1 - June 30, 2023)	
Progress Status: (Select from drop down)	
Briefly describe progress to date and challenges that might affect your ability to complete this objective in the expected timeframe.	

	Strategy Area (select from drop down)	Issue Area 5	
		Specify if "other" Selected	
		Strategy Area 1	Assess and monitor population health status, factors that influence health, and community needs and assets
		Strategy Area 2	Communicate effectively to inform and educate people about health, factors that influence it, and how to improve it
		Strategy Area 3	Build and support a diverse and skilled public health workforce
		Strategy Area 4	Assure an effective system that enables equitable access to the individual services and care needed to be healthy
		Strategy Area 5	
	Specify additional Strategy Area		
Expected Achieve By Date (select from drop down)			July 2023

	Local Objective #8		
	Objective (SMART Objective)	Plan, implement, and complete a comprehensive organizational assessment using the evidence-based BARHI framework for health equity.	
	Implementation Plan (Bulleted items or brief sentences)	1. Identify members of an Implementation Committee. 2. Complete staff survey, staff focus groups, community partner survey, internal document review, and management interviews. 3. Analyze, summarize results to inform workforce development plan, succession planning, targets for quality improvement, etc.	
	Evaluation Plan: How will LHI measure and track this objective?	Progress will be tracked in a detailed workplan containing timelines and responsible parties. Final report will contain analysis and recommendations.	
	Issue Area (select from drop down)	Issue Area 1	Equitable Outcomes
		Issue Area 2	Other Core LHI Infrastructure
		Issue Area 3	
		Issue Area 4	
		Issue Area 5	
		Specify if "other" Selected	
	Strategy Area (select from drop down)	Strategy Area 1	Communicate effectively to inform and educate people about health, factors that influence it, and how to improve it
		Strategy Area 2	Assure an effective system that enables equitable access to the individual services and care needed to be healthy
		Strategy Area 3	Build and support a diverse and skilled public health workforce
		Strategy Area 4	Build and maintain a strong organizational infrastructure for public health
		Strategy Area 5	Improve and innovate public health functions through ongoing evaluation, research, and continuous quality improvement
	Specify additional Strategy Area		
Expected Achieve By Date (select from drop down)			June 2023

	Local Objective #9		
	Objective (SMART Objective)	Research Assessment & Planning. Community Vital Signs teams to create the data infrastructure plan for a public-facing ArcGIS dashboard and/or dashboard that DPH programs and community partners can use to inform the community health improvement plan (CHIP) and address health inequities.	
	Implementation Plan (Bulleted items or brief sentences)	1)Conduct data gap analysis using proposal from DPH consultants, current Health Status Assessment, and other available data sources. 2)Leverage HE Statistical Analyst, E GIS Specialist, and RHP staffing resources to create the internal dashboard hub. 3)Integrate Tableau visualizations of data produced by DPH consultants. 4)Integrate data on social determinants of health for DPH patients/clients, if possible. 5)Create new positions and classifications. along with internal online dashboard to ensure case investigation timeliness. 6)Create public online dashboard to display infectious disease data by year in order to strengthen data sharing	
	Evaluation Plan: How will LHI measure and track this objective?	DPH will track progress using a work plan with projected timelines to keep the project on target. Completion status of each component of the work plan will be assessed at biweekly meetings. Measures of success are as follows: disease investigation policy and case timeline complete, degree to which positions are created, request to fill completed and interviews in process; production of internal and external dashboards. Conducting an organizational assessment will allow DPH to establish a baseline of how prepared we are to address health equity issues. The BARHI is an evidence-based framework designed specifically for public health departments. The results of the assessment will allow DPH to identify gaps and strategies by which to address them. This may include various aspects of workforce development, building community partnerships, and using data to identify health inequities. Ultimately, as DPH is better equipped to address health equity issues, we will better serve the residents of San Bernardino County by addressing upstream drivers of health and thereby improving health outcomes	
	Issue Area (select from drop down)	Issue Area 1	Equitable Outcomes
		Issue Area 2	Other Core LHI Infrastructure
		Issue Area 3	
		Issue Area 4	
		Issue Area 5	
		Specify if "other" Selected	
	Strategy Area (select from drop down)	Strategy Area 1	Assess and monitor population health status, factors that influence health, and community needs and assets
		Strategy Area 2	Investigate, diagnose, and address health problems and hazards affecting the population

YR1/Q1 Progress Update (July 1 - September 30, 2022)	
Progress Status: (Select from drop down)	
Briefly describe progress to date and challenges that might affect your ability to complete this objective in the expected timeframe. For Quarter 1, please provide progress updates related to staffing and hiring, if applicable to this objective. Otherwise, indicate "Not Applicable. "	

YR1/Q2 Progress Update (October 1, 2022 - December 31, 2022)	
Progress Status: (Select from drop down)	
Briefly describe progress to date and challenges that might affect your ability to complete this objective in the expected timeframe.	

YR1/Q3 Progress Update (January 1 - March 31, 2023)	
Progress Status: (Select from drop down)	
Briefly describe progress to date and challenges that might affect your ability to complete this objective in the expected timeframe.	

YR1/Q4 Progress Update (April 1 - June 30, 2023)	
Progress Status: (Select from drop down)	
Briefly describe progress to date and challenges that might affect your ability to complete this objective in the expected timeframe.	

YR1/Q1 Progress Update (July 1 - September 30, 2022)	
Progress Status: (Select from drop down)	
Briefly describe progress to date and challenges that might affect your ability to complete this objective in the expected timeframe. For Quarter 1, please provide progress updates related to staffing and hiring, if applicable to this objective. Otherwise, indicate "Not Applicable. "	

YR1/Q2 Progress Update (October 1, 2022 - December 31, 2022)	
Progress Status: (Select from drop down)	
Briefly describe progress to date and challenges that might affect your ability to complete this objective in the expected timeframe.	

YR1/Q3 Progress Update (January 1 - March 31, 2023)	
Progress Status: (Select from drop down)	
Briefly describe progress to date and challenges that might affect your ability to complete this objective in the expected timeframe.	

YR1/Q4 Progress Update (April 1 - June 30, 2023)	
Progress Status: (Select from drop down)	
Briefly describe progress to date and challenges that might affect your ability to complete this objective in the expected timeframe.	

YR1/Q1 Progress Update (July 1 - September 30, 2022)	
Progress Status: (Select from drop down)	
Briefly describe progress to date and challenges that might affect your ability to complete this objective in the expected timeframe. For Quarter 1, please provide progress updates related to staffing and hiring, if applicable to this objective. Otherwise, indicate "Not Applicable. "	

YR1/Q2 Progress Update (October 1, 2022 - December 31, 2022)	
Progress Status: (Select from drop down)	
Briefly describe progress to date and challenges that might affect your ability to complete this objective in the expected timeframe.	

YR1/Q3 Progress Update (January 1 - March 31, 2023)	
Progress Status: (Select from drop down)	
Briefly describe progress to date and challenges that might affect your ability to complete this objective in the expected timeframe.	

YR1/Q4 Progress Update (April 1 - June 30, 2023)	
Progress Status: (Select from drop down)	
Briefly describe progress to date and challenges that might affect your ability to complete this objective in the expected timeframe.	

		Strategy Area 3	Build and maintain a strong organizational infrastructure for public health
		Strategy Area 4	Assess and monitor population health status, factors that influence health, and community needs and assets
		Strategy Area 5	Investigate, diagnose, and address health problems and hazards affecting the population
		Specify additional Strategy Area	
	Expected Achieve By Date <i>(select from drop down)</i>		June 2023

Local Objective #10		
Objective (SMART Objective)		
Implementation Plan <i>(bulleted items or brief sentences)</i>		
Evaluation Plan: how will LHI measure and track this objective?		
Issue Area <i>(select from drop down)</i>	Issue Area 1	
	Issue Area 2	
	Issue Area 3	
	Issue Area 4	
	Issue Area 5	
	Specify if "other" Selected	
Strategy Area <i>(select from drop down)</i>	Strategy Area 1	
	Strategy Area 2	
	Strategy Area 3	
	Strategy Area 4	
	Strategy Area 5	
	Specify additional Strategy Area	
Expected Achieve By Date <i>(select from drop down)</i>		

Local Objective #11		
Objective (SMART Objective)		
Implementation Plan <i>(bulleted items or brief sentences)</i>		
Evaluation Plan: how will LHI measure and track this objective?		
Issue Area <i>(select from drop down)</i>	Issue Area 1	
	Issue Area 2	
	Issue Area 3	
	Issue Area 4	
	Issue Area 5	
	Specify if "other" Selected	
Strategy Area <i>(select from drop down)</i>	Strategy Area 1	
	Strategy Area 2	
	Strategy Area 3	
	Strategy Area 4	
	Strategy Area 5	
	Specify additional Strategy Area	
Expected Achieve By Date <i>(select from drop down)</i>		

Local Objective #12		
Objective (SMART Objective)		

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YR1/Q1 Progress Update (July 1 - September 30, 2022)	
Progress Status: <i>(Select from drop down)</i>	
Briefly describe progress to date and challenges that might affect your ability to complete this objective in the expected timeframe. For Quarter 1, please provide progress updates related to staffing and hiring, if applicable to this objective. Otherwise, indicate "Not Applicable."	

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YR1/Q1 Progress Update (July 1 - September 30, 2022)	
Progress Status: <i>(Select from drop down)</i>	
Briefly describe progress to date and challenges that might affect your ability to complete this objective in the expected timeframe. For Quarter 1, please provide progress updates related to staffing and hiring, if applicable to this objective. Otherwise, indicate "Not Applicable."	

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YR1/Q1 Progress Update (July 1 - September 30, 2022)	
Progress Status: <i>(Select from drop down)</i>	

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YR1/Q2 Progress Update (October 1, 2022 - December 31, 2022)	
Progress Status: <i>(Select from drop down)</i>	
Briefly describe progress to date and challenges that might affect your ability to complete this objective in the expected timeframe.	

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YR1/Q2 Progress Update (October 1, 2022 - December 31, 2022)	
Progress Status: <i>(Select from drop down)</i>	
Briefly describe progress to date and challenges that might affect your ability to complete this objective in the expected timeframe.	

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YR1/Q2 Progress Update (October 1, 2022 - December 31, 2022)	
Progress Status: <i>(Select from drop down)</i>	

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YR1/Q3 Progress Update (January 1 - March 31, 2023)	
Progress Status: <i>(Select from drop down)</i>	
Briefly describe progress to date and challenges that might affect your ability to complete this objective in the expected timeframe.	

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YR1/Q3 Progress Update (January 1 - March 31, 2023)	
Progress Status: <i>(Select from drop down)</i>	
Briefly describe progress to date and challenges that might affect your ability to complete this objective in the expected timeframe.	

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YR1/Q3 Progress Update (January 1 - March 31, 2023)	
Progress Status: <i>(Select from drop down)</i>	

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YR1/Q4 Progress Update (April 1 - June 30, 2023)	
Progress Status: <i>(Select from drop down)</i>	
Briefly describe progress to date and challenges that might affect your ability to complete this objective in the expected timeframe.	

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YR1/Q4 Progress Update (April 1 - June 30, 2023)	
Progress Status: <i>(Select from drop down)</i>	
Briefly describe progress to date and challenges that might affect your ability to complete this objective in the expected timeframe.	

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YR1/Q4 Progress Update (April 1 - June 30, 2023)	
Progress Status: <i>(Select from drop down)</i>	

	Issue Area <small>(select from drop down)</small>	Issue Area 1	
		Issue Area 2	
		Issue Area 3	
		Issue Area 4	
		Issue Area 5	
		Specify if "other" Selected	
	Strategy Area <small>(select from drop down)</small>	Strategy Area 1	
		Strategy Area 2	
		Strategy Area 3	
		Strategy Area 4	
		Strategy Area 5	
		Specify additional Strategy Area	
	Expected Achieve By Date <small>(select from drop down)</small>		

	Local Objective #15		
	Objective (SMART Objective)		
	Implementation Plan <small>(Bulleted items or brief sentences)</small>		
	Evaluation Plan: How will LHI measure and track this objective?		
	Issue Area <small>(select from drop down)</small>	Issue Area 1	
		Issue Area 2	
		Issue Area 3	
		Issue Area 4	
		Issue Area 5	
		Specify if "other" Selected	
Strategy Area <small>(select from drop down)</small>	Strategy Area 1		
	Strategy Area 2		
	Strategy Area 3		
	Strategy Area 4		
	Strategy Area 5		
	Specify additional Strategy Area		
Expected Achieve By Date <small>(select from drop down)</small>			

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YR1/Q1 Progress Update (July 1 - September 30, 2022)	
Progress Status: <small>(Select from drop down)</small>	
Briefly describe progress to date and challenges that might affect your ability to complete this objective in the expected timeframe. For Quarter 1, please provide progress updates related to staffing and hiring. If applicable to this objective. Otherwise, indicate "Not Applicable."	

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YR1/Q2 Progress Update (October 1, 2022 - December 31, 2022)	
Progress Status: <small>(Select from drop down)</small>	
Briefly describe progress to date and challenges that might affect your ability to complete this objective in the expected timeframe.	

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YR1/Q3 Progress Update (January 1 - March 31, 2023)	
Progress Status: <small>(Select from drop down)</small>	
Briefly describe progress to date and challenges that might affect your ability to complete this objective in the expected timeframe.	

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YR1/Q4 Progress Update (April 1 - June 30, 2023)	
Progress Status: <small>(Select from drop down)</small>	
Briefly describe progress to date and challenges that might affect your ability to complete this objective in the expected timeframe.	

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July 2022	0%	Assess and monitor population health status, factors that influence health, and community needs and assets	Access, Availability and Utilization of Health Services
August 2022	1% - 25%	Investigate, diagnose, and address health problems and hazards affecting the population	Accessible Built Environment
September 2022	26% - 50%	Communicate effectively to inform and educate people about health, factors that influence it, and how to improve it	Early Childhood Development and Resiliency
October 2022	51% - 75%	Strengthen, support and mobilize communities and partnerships to improve health	End of Life
November 2022	76% - 99%	Create, champion and implement policies, plans and laws that impact health	Environmental Quality and Climate Change
December 2022	100%	Utilize legal and regulatory actions designed to improve and protect the public's health	Equitable Outcomes
January 2023		Assure an effective system that enables equitable access to the individual services and care needed to be healthy	Healthcare Coverage and Affordability
February 2023		Build and support a diverse and skilled public health workforce	Healthy Aging
March 2023		Improve and innovate public health functions through ongoing evaluation, research, and continuous quality improvement	High Quality, Patient-Centered Care
April 2023		Build and maintain a strong organizational infrastructure for public health	Housing and Homelessness
May 2023			Inclusive Economic Prosperity
June 2023			Maternal and Infant Health
July 2023			Mental and Behavioral Health
August 2023			Mental and Behavioral Health: Substance Use and Addiction
September 2023			Mental and Behavioral Health: Suicide
October 2023			Mental and Behavioral Health Focus: Other
November 2023			Neighborhood Safety and Collective Efficacy
December 2023			Other Core LHJ Infrastructure
			Prevention and Health Promotion
			Prevention and Health Promotion: COVID-19
			Prevention and Health Promotion: Obesity / Healthy Eating / Active Living
			Prevention and Health Promotion: STD
			Prevention and Health Promotion: Tobacco Use
			Prevention and Health Promotion Focus: Other

Future of Public Health (FoPH) Spend Plan - Attachment #4
Spend Plan Instructions

Personnel

Position Title	Please include the title of the position within this cell. If you know who the incumbent is, please also include their name. If unknown, please indicate TBD or Vacant.
Annual Salary	The annual salary should be the employee's true annual salary regardless of their FTE percentage and the number of months they will work on the Future of Public Health Funding.
Budgeted Months	Please indicate the number of months the employee is projected to work on the Future of Public Health Funding. The term of the funding is July 1, 2022 to June 30, 2023 which is 12 months.
FTE %	The FTE % will auto-populate based on the number of months the employee is working on the Future of Public Health Funding.
Total Salary	The Total Salary will auto-populate based on the Annual Salary and FTE % the employee is working on the Future of Public Health Funding.
Benefit Rate	Please indicate the percentage Benefit Rate for each position.
Total Benefits	The Total Benefits will auto-populate based on the Total Salary and Benefit Rate % for the employee.

Combined Salary and Benefits	The Combined Salary and Benefits will auto-populate based on the Total Salary + Total Benefits.
Supplies	General office supplies may be shown by an estimated amount per month times the number of months in this budget category. Major supply items (<\$5,000) should be justified and related to specific program objectives and personnel. Provide justification and relate it to specific program objectives.
Travel	Provide details of what the travel is intended to accomplish. (e.g., advisory committees, review panels, etc.). Include details such as airfare, mileage, hotel, per diem, etc. Provide justification for both in-state and out-of-state travel.
Equipment	Useful life of more than one year AND a cost of ≥\$5,000 per unit. Consider maintenance costs in budget. Provide justification which includes the use and relationship to the specific program objectives.
Other	Contains items not included in previous budget categories. Provide justification which includes the use and relationship to the specific program objectives. Give unit cost and quantities when applicable.
Subcontracts:	

Include the Subcontractor name(s) if known or you can put TBD; and you will also need to provide a brief description of the work they will perform. If possible, please tie your Subcontractors to the Activity within your Workplan.

Total Direct Costs

Direct Costs include:

Combined total of Personnel, Supplies, Travel, Equipment, Other, and Subcontracts. Should your Agency require a formula for Modified Direct Costs, please reach out to the Future of Public Health Funding mailbox (FoPHfunding@cdph.ca.gov) for assistance.

Indirect Cost

Please enter your Indirect Cost Rate (ICR) percentage within cell E138. Please enter the amount that your ICR should calculate from; this is normally Total Personnel or Total Direct Costs. Your Agency has an approved rate on file with CDPH. If you don't know your Agency's approved ICR, please reach out to Future of Public Health Funding mailbox (FoPHfunding@cdph.ca.gov) for assistance.

Future of Public Health (FoPH) Spend Plan

Local Health Jurisdiction Name: San Bernardino County Department of Public Health

Position Title*	Annual Salary	Budgeted Months (1-12) Months)	FTE %	Total Salary	Benefit Rate	Total Benefits	Combined Salary and Benefits
Accountant III	\$71,386.00	12.00	100%	\$ 71,386.00	56.24%	\$ 40,147.49	\$ 111,533.49
Automated Systems Analyst I	\$66,435.00	12.00	100%	\$ 66,435.00	56.24%	\$ 37,363.04	\$ 103,798.04
Automated Systems Analyst II	\$78,728.00	12.00	100%	\$ 78,728.00	56.24%	\$ 44,276.63	\$ 123,004.63
Automated Systems Technician	\$53,373.00	12.00	100%	\$ 53,373.00	56.24%	\$ 30,016.98	\$ 83,389.98
Biostatistician	\$74,942.00	12.00	100%	\$ 74,942.00	56.24%	\$ 42,147.38	\$ 117,089.38
Business Systems Analyst II	\$84,781.00	12.00	100%	\$ 84,781.00	56.24%	\$ 47,680.83	\$ 132,461.83
Business Systems Analyst II	\$84,781.00	12.00	100%	\$ 84,781.00	56.24%	\$ 47,680.83	\$ 132,461.83
Communicable Disease Investigator I	\$50,752.00	12.00	100%	\$ 50,752.00	56.24%	\$ 28,542.92	\$ 79,294.92
Communicable Disease Investigator I	\$50,752.00	12.00	100%	\$ 50,752.00	56.24%	\$ 28,542.92	\$ 79,294.92
Communicable Disease Investigator I	\$50,752.00	12.00	100%	\$ 50,752.00	56.24%	\$ 28,542.92	\$ 79,294.92
Communicable Disease Investigator I	\$50,752.00	12.00	100%	\$ 50,752.00	56.24%	\$ 28,542.92	\$ 79,294.92
Communicable Disease Investigator I	\$50,752.00	12.00	100%	\$ 50,752.00	56.24%	\$ 28,542.92	\$ 79,294.92
Communicable Disease Investigator I	\$50,752.00	12.00	100%	\$ 50,752.00	56.24%	\$ 28,542.92	\$ 79,294.92
Communicable Disease Investigator II	\$54,579.00	12.00	100%	\$ 54,579.00	56.24%	\$ 30,695.23	\$ 85,274.23
Communicable Disease Investigator II	\$54,579.00	12.00	100%	\$ 54,579.00	56.24%	\$ 30,695.23	\$ 85,274.23
Community Health Worker	\$41,330.00	12.00	100%	\$ 41,330.00	56.24%	\$ 23,243.99	\$ 64,573.99
Community Health Worker	\$41,330.00	12.00	100%	\$ 41,330.00	56.24%	\$ 23,243.99	\$ 64,573.99
Ethics and Compliance Coordinator	\$82,160.00	12.00	100%	\$ 82,160.00	56.24%	\$ 46,206.78	\$ 128,366.78
Health Education Specialist II	\$60,216.00	12.00	100%	\$ 60,216.00	56.24%	\$ 33,865.48	\$ 94,081.48
Health Education Specialist II	\$60,216.00	12.00	100%	\$ 60,216.00	56.24%	\$ 33,865.48	\$ 94,081.48
Health Education Specialist II	\$60,216.00	12.00	100%	\$ 60,216.00	56.24%	\$ 33,865.48	\$ 94,081.48
Health Education Specialist II	\$60,216.00	12.00	100%	\$ 60,216.00	56.24%	\$ 33,865.48	\$ 94,081.48
Health Education Specialist II	\$60,216.00	12.00	100%	\$ 60,216.00	56.24%	\$ 33,865.48	\$ 94,081.48
Health Information Management Assistant II	\$39,250.00	12.00	100%	\$ 39,250.00	56.24%	\$ 22,074.20	\$ 61,324.20
Health Information Management Supervisor	\$69,202.00	12.00	100%	\$ 69,202.00	56.24%	\$ 38,919.20	\$ 108,121.20
Help Desk Technician II	\$50,752.00	12.00	100%	\$ 50,752.00	56.24%	\$ 28,542.92	\$ 79,294.92
Information Services Deputy Chief	\$124,738.00	12.00	100%	\$ 124,738.00	56.24%	\$ 70,152.65	\$ 194,890.65
Laboratory Assistant	\$36,982.00	12.00	100%	\$ 36,982.00	56.24%	\$ 20,798.68	\$ 57,780.68
Laboratory Assistant	\$36,982.00	12.00	100%	\$ 36,982.00	56.24%	\$ 20,798.68	\$ 57,780.68
Media Specialist II	\$66,435.00	12.00	100%	\$ 66,435.00	56.24%	\$ 37,363.04	\$ 103,798.04
Nurse Educator	\$100,090.00	12.00	100%	\$ 100,090.00	56.24%	\$ 56,290.62	\$ 156,380.62
Nurse Educator	\$100,090.00	12.00	100%	\$ 100,090.00	56.24%	\$ 56,290.62	\$ 156,380.62
Office Assistant III	\$39,250.00	12.00	100%	\$ 39,250.00	56.24%	\$ 22,074.20	\$ 61,324.20
Office Assistant III	\$39,250.00	12.00	100%	\$ 39,250.00	56.24%	\$ 22,074.20	\$ 61,324.20
Office Assistant III (HAIP)	\$39,250.00	12.00	100%	\$ 39,250.00	56.24%	\$ 22,074.20	\$ 61,324.20
Office Specialist	\$42,786.00	12.00	100%	\$ 42,786.00	56.24%	\$ 24,062.85	\$ 66,848.85
Office Specialist	\$42,786.00	12.00	100%	\$ 42,786.00	56.24%	\$ 24,062.85	\$ 66,848.85

Office Specialist	\$42,786.00	12.00	100%	\$	42,786.00	56.24%	\$	24,062.85	\$	66,848.85	
PH Program Manager	\$100,630.00	12.00	100%	\$	100,630.00	56.24%	\$	56,594.31	\$	157,224.31	
Program Specialist I	\$66,435.00	12.00	100%	\$	66,435.00	56.24%	\$	37,363.04	\$	103,798.04	
Program Specialist I	\$66,435.00	12.00	100%	\$	66,435.00	56.24%	\$	37,363.04	\$	103,798.04	
Program Specialist I	\$66,435.00	12.00	100%	\$	66,435.00	56.24%	\$	37,363.04	\$	103,798.04	
Program Specialist I	\$66,435.00	12.00	100%	\$	66,435.00	56.24%	\$	37,363.04	\$	103,798.04	
Program Specialist II	\$71,386.00	12.00	100%	\$	71,386.00	56.24%	\$	40,147.49	\$	111,533.49	
Program Specialist II	\$71,386.00	12.00	100%	\$	71,386.00	56.24%	\$	40,147.49	\$	111,533.49	
Programmer Analyst II	\$86,237.00	12.00	100%	\$	86,237.00	56.24%	\$	48,499.69	\$	134,736.69	
Public Health Assistant Director	\$148,242.00	12.00	100%	\$	148,242.00	56.24%	\$	83,371.30	\$	231,613.30	
Public Health Division Chief	\$130,998.00	12.00	100%	\$	130,998.00	56.24%	\$	73,673.28	\$	204,671.28	
Public Health Epidemiologist	\$70,366.00	12.00	100%	\$	70,366.00	56.24%	\$	39,573.84	\$	109,939.84	
Public Health Epidemiologist	\$70,366.00	12.00	100%	\$	70,366.00	56.24%	\$	39,573.84	\$	109,939.84	
Public Health Epidemiologist	\$70,366.00	12.00	100%	\$	70,366.00	56.24%	\$	39,573.84	\$	109,939.84	
Public Health Medical Director	\$199,368.00	12.00	100%	\$	199,368.00	56.24%	\$	112,124.56	\$	311,492.56	
Public Health Microbiologist II	\$66,976.00	12.00	100%	\$	66,976.00	56.24%	\$	37,667.30	\$	104,643.30	
Public Health Microbiologist II	\$66,976.00	12.00	100%	\$	66,976.00	56.24%	\$	37,667.30	\$	104,643.30	
Public Health Nurse II	\$94,411.00	12.00	100%	\$	94,411.00	56.24%	\$	53,096.75	\$	147,507.75	
Public Health Nurse II	\$94,411.00	12.00	100%	\$	94,411.00	56.24%	\$	53,096.75	\$	147,507.75	
Public Hlth Prgm Coordinator	\$84,781.00	12.00	100%	\$	84,781.00	56.24%	\$	47,680.83	\$	132,461.83	
Public Hlth Prgm Coordinator	\$84,781.00	12.00	100%	\$	84,781.00	56.24%	\$	47,680.83	\$	132,461.83	
Public Hlth Prgm Coordinator	\$84,781.00	12.00	100%	\$	84,781.00	56.24%	\$	47,680.83	\$	132,461.83	
Public Health Program Coordinator - STD/HIV/Immz	\$84,781.00	12.00	100%	\$	84,781.00	56.24%	\$	47,680.83	\$	132,461.83	
Public Health Project Coordinator	\$78,728.00	12.00	100%	\$	78,728.00	56.24%	\$	44,276.63	\$	123,004.63	
Public Health Special Projects Analyst II	\$71,386.00	12.00	100%	\$	71,386.00	56.24%	\$	40,147.49	\$	111,533.49	
Statistical Analyst	\$72,696.00	12.00	100%	\$	72,696.00	56.24%	\$	40,884.23	\$	113,580.23	
Statistical Analyst	\$72,696.00	12.00	100%	\$	72,696.00	56.24%	\$	40,884.23	\$	113,580.23	
Strategy & Bus Dev Officer	\$121,742.00	12.00	100%	\$	121,742.00	56.24%	\$	68,467.70	\$	190,209.70	
Supervising Communicable Disease Investigator	\$60,362.00	12.00	100%	\$	60,362.00	56.24%	\$	33,947.59	\$	94,309.59	
Supervising Communicable Disease Investigator	\$60,362.00	12.00	100%	\$	60,362.00	56.24%	\$	33,947.59	\$	94,309.59	
Supervising Health Education Specialist	\$66,435.00	12.00	100%	\$	66,435.00	56.24%	\$	37,363.04	\$	103,798.04	
Supervising Health Education Specialist	\$66,435.00	12.00	100%	\$	66,435.00	56.24%	\$	37,363.04	\$	103,798.04	
Supervising Laboratory Assistant	\$39,770.00	12.00	100%	\$	39,770.00	56.24%	\$	22,366.65	\$	62,136.65	
Supervising Program Specialist	\$76,814.00	12.00	100%	\$	76,814.00	56.24%	\$	43,200.19	\$	120,014.19	
Supvg Public Health Nurse	\$92,830.00	12.00	100%	\$	92,830.00	56.24%	\$	52,207.59	\$	145,037.59	
Training and Development Specialist	\$70,990.00	12.00	100%	\$	70,990.00	56.24%	\$	39,924.78	\$	110,914.78	
Total Personnel					\$	5,162,854.00		\$	2,903,589.09	\$	8,066,443.09
Supplies											
Communications Cost- Cell Phone, Land Lines, E-mails, VPN									\$		100,000.00
									\$		-
									\$		-
									\$		-
									\$		-
									\$		-

[illegible]

					\$	-
					\$	-
					\$	-
					\$	-
Total Other					\$	1,750,000.00
Subcontracts:						
					\$	-
					\$	-
					\$	-
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					\$	-
					\$	-
Total Subcontracts					\$	-
Total Direct Costs					\$	9,921,187.09
Indirect Cost (% of Total Personnel <u>or</u> Total Direct Costs)						
[enter description here]	\$	8,066,443.09	16.9%		\$	1,363,228.88
Total Indirect					\$	1,363,228.88
TOTAL BUDGET					\$	11,284,415.97

**Personnel supported with this funding should not duplicate efforts across grants; exceed 1.0 FTE across all funding sources.*

Local Health Jurisdiction Name:

Combined Strategy	Total Award
	\$ 11,284,416

Budget		Year 1 Quarterly Expenditure Report															
Budget Category	Budgeted Amount	1st Quarter				2nd Quarter				3rd Quarter				4th Quarter			
		July 2022	August 2022	September 2022	Y1.Q1 Total	October 2022	November 2022	December 2022	Y1.Q2 Total	January 2023	February 2023	March 2023	Y1.Q3 Total	April 2023	May 2023	June 2023	Y1.Q4 Total
Salary	\$ 4,904,755				\$ -				\$ -				\$ -				\$ -
Supplies	\$ 100,000				\$ -				\$ -				\$ -				\$ -
In State Travel	\$ 4,744				\$ -				\$ -				\$ -				\$ -
Out of State Travel	\$ -				\$ -				\$ -				\$ -				\$ -
Equipment	\$ -				\$ -				\$ -				\$ -				\$ -
Subcontracts	\$ -				\$ -				\$ -				\$ -				\$ -
Other costs	\$ 1,750,000				\$ -				\$ -				\$ -				\$ -
Total Direct Costs	\$ 6,759,499	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Total Indirect Costs	\$ 1,363,229	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

Budget		Expenditures	Balance
Totals	\$ 8,122,728	\$ -	\$ 8,122,727.71