



**PHAB Annual Report
Section I
Release Date: January 8, 2014
For Health Departments Accredited Under Version 1.0**

Accredited health departments are required to submit an annual report to PHAB. The health department will gain access to the Annual Report module in e-PHAB at the beginning of the quarter in which the Annual Report is due. The annual report is due at the end of the quarter in which the health department was accredited.

The Annual Report is comprised of two sections. Section I of the annual report is an opportunity for the health department to report on one or more of the following categories, as appropriate:

1. Circumstances that would potentially jeopardize continued conformity with the standards and measures under which accreditation was initially awarded;
2. Specific measures the Accreditation Committee requested that the health department address in its Annual Report; and
3. Adverse findings or communications related to oversight or control from federal or state funding agencies that indicate the health department is at risk for loss or reduction in those funds. For more information about the meaning of this category, see the definition of high risk grantee in the PHAB Glossary.

After Section I has been completed, the health department should upload it to e-PHAB to be reviewed by PHAB staff. The health department will receive notification that it has access to Section II of the Annual Report or may be requested to provide additional information. On Section II, the health department will provide information related to improvement activities; continuing processes; and emerging public health issues and innovations.

Instructions for Section I: If the health department has nothing to report for any one of those categories, place an X in the box to indicate that there is nothing to report and then skip the rest of the questions associated with that category.

Health Department Name
Maine Center for Disease Control and Prevention

Category 1: Circumstances that would potentially jeopardize continued conformity with the standards and measures under which the accreditation was initially awarded. (This would include updated health department profile information that includes leadership changes and any other changes, such as budget, personnel, governance, or program changes that potentially jeopardize the health department's ability to be in conformity with the standards and measures.)	
Does the health department have anything to report on Category 1? <i>(Place an X in the column to the left of the answer.)</i>	
<input checked="" type="checkbox"/> Yes (Answer the questions below)	<input type="checkbox"/> No (Skip this section)

Circumstance	Description of the change
Leadership (e.g., changes in the Health Department Director) – Please provide name and job title	Sheryl Peavey Chief Operating Officer

Budget	\$134,500,000
Number of FTE	486
Number of employees	483
Governance	No change
Structure (e.g., mergers, transition from stand-alone agency to superagency or vice versa)	The DHHS Division of Licensing and Regulatory Services merged with the Maine CDC. Maine CDC no longer has a separate Office of Health Equity. Other Divisions have changed names, and some programs have been moved from one division to another.
Programs or services that the health department provided at the time accreditation was conferred that it does not provide now	none
Other circumstances	none

Please describe how the circumstances listed above might affect the health department's continued conformity with the standards and measures.
None of the above circumstances should affect the health department's continued conformity with the standards and measures. The majority of the work of the Division of Licensing and Regulatory Services is outside of the purview of PHAB. However, the staff in this unit are being integrated in applicable accreditation activities. The functions of the Office of Health Equity have been absorbed by other divisions, and health equity continues to be integrated in all program work. Maine CDC budget has decreased from the amount reported on our application for SFY 2014. While the budget reflects some reductions in program activities in some areas, meeting PHAB standards is continually prioritized and savings are focused on achieving efficiencies via process improvement. Budget reductions have not affected our ability to conform to PHAB standards to date. Other organizational changes did not change the broad scope of work being done.

Category 2: Specific measures the Accreditation Committee requested that the health department address in its Annual Report			
Did the Accreditation Committee request that the health department address a specific measure?			
<i>(Place an X in the column to the left of the answer.)</i>			
<input checked="" type="checkbox"/>	Yes (Answer the questions below)	Yes, but the health department has already reported in a previous annual report that it has fully addressed the measure (Skip this section)	No (Skip this section)

	Response from Health Department
First Measure	
Measure Number:	2.1.3
Measure Text:	Demonstrate capacity to conduct investigations of non-infectious health problems, environmental, and/or occupational public health hazards.
Site Visit Report Comment on the Measure:	"The non-infectious disease health problem that was submitted for an Outbreak of respiratory and ocular complaints at an open swim meet at a college pool that occurred December 10-12, 2010 is a preliminary findings report dated 2/16/11 and was not the completed investigation report, as required."
Health Department Actions:	In 2015, the Environmental and Occupational Health Program completed an investigation on arsenic exposure in households using bottled water or point-of-use treatment systems to mitigate well water contamination. Common mitigation strategies to prevent well water arsenic exposure were assessed. It was found that these strategies were less able to prevent exposure when arsenic levels were greater than 40 µg/L. The investigation also found that bathing was not a significant arsenic

	exposure source for children or adults and that untreated water use explained more arsenic exposure in adults than children. Complete compliance with a mitigation strategy is important in reducing exposure. This investigation resulted in an article in the journal <i>Science of the Total Environment</i> .
Second Measure	
Measure Number:	5.2.4
Measure Text:	Monitor progress on implementation of strategies in the community health improvement plan in collaboration with broad participation from stakeholders and partners.
Site Visit Report Comment on the Measure:	RD1: Two annual evaluation reports were not included. However, documents provided show notes that the SHIP did not begin implementation of strategies until late 2014. Quarterly reports via an excel sheet started in October 2014 and are available up to March 2014 (2 quarters). The excel sheet includes a tab for each of the six priorities. Updates are provided for the two quarters and if data is not available, an explanation is included in the outcome or performance measure box. RD2: No updated SHIP was provided. An implementation timeline was provided which notes that implementation of the SHIP did not begin until later 2014 and a full year will not be completed until September 2015. The Health Department states that the SHIP will not be revised until after the first full year of implementation has occurred and evaluation of progress can be conducted.
Health Department Actions:	In September 2015, an implementation plan report of activities over the first year of implementation (July 2014-June 2015) was completed, along with an implementation plan for the second year. In October 2016, an implementation plan report of activities over the second year of implementation (July 2015-June 2016) was completed, along with a summary report of the first two years of implementation and an implementation plan for the third year. Reporting on the third year of implementation (July 2016-June 2017) is still in progress. In addition, a new State Health Improvement Plan for the period 2017-2020 is under development, and expected to be finalized by September 2017.
Third Measure	
Measure Number:	Measure 5.3.3
Measure Text:	Implement the department strategic plan
Site Visit Report Comment on the Measure:	RD1 includes a strategic plan annual report released in 2014. The Strategic plan was initiated in February 2013. The report included a discussion on each of the four priorities and noted accomplishments as of that date. An implementation worksheet was included that is used to monitor the activities, but did not include updates on achieving the stated work. A 2015 report was not included as it had not been completed by the Health Department's document submission date.
Health Department Actions:	2015 and 2016 reports for the strategic plan have been completed. A new strategic plan was developed for state Fiscal Year 2017 (July 2016 – June 2017) and progress on activities in this plan are being reported on a quarterly/monthly basis. This plan was recently updated to add activities for state Fiscal Year 2018 and a three year plan is in development.

Category 3: Adverse findings or communications related to oversight or control from federal or state funding agencies that indicate the health department is at risk for loss or reduction in those funds

Has the health department received an adverse finding or communication related to oversight or control?

(Place an X in the column to the left of the answer.)

Yes (Answer the questions below. If the health department received multiple adverse findings/communications, please complete a separate table for each.)	<input checked="" type="checkbox"/>	No (Skip this section)
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Adverse Finding/Communication #1
What is the name of the funding agency?
Summarize the concerns raised by the funding agency.
Describe the results of this adverse finding/communication. (Did the health department lose funding? What actions, if any, did the health department take in response?)

Adverse Finding/Communication #2
What is the name of the funding agency?
Summarize the concerns raised by the funding agency.
Describe the results of this adverse finding/communication. (Did the health department lose funding? What actions, if any, did the health department take in response?)

Adverse Finding/Communication #3
What is the name of the funding agency?
Summarize the concerns raised by the funding agency.
Describe the results of this adverse finding/communication. (Did the health department lose funding? What actions, if any, did the health department take in response?)