

	Allocation and/or Program	Funding (in thousands)	# of Employees	# of Alaskans Served	% Cost through Fees	Rating of Importance to Mission	Rating of Effectiveness	Constitution Requirement	Federally Required	Required by Statute
58	Public Health (502)	\$117,372.1: \$43,015.3 UGF \$25,804.7 DGF \$41,436.3 Fed \$7,115.8 Other	425							
59	Health Planning and Systems Development (2765)	** In FY2018 this component will be combined with Emergency Programs.								18.05, Administration of Public Health and Related Laws 18.15.010 - 900, Disease Control and Threats to Public Health 18.25.010 - 120, Assistance to Hospitals and Health Facilities 18.28.010 - 100, State Assistance for Community Health Aide Programs 18.29, Health Care Professional Loan Repayment and Incentive Program 44.29.020, Duties of the Department of Health and Social Services
60	Nursing (288)	\$29,727.0: \$22,834.0 UGF \$1,379.1 DGF \$4,949.5 Fed \$564.4 Other	160	All Alaskans	7.96%	Critical	2	Yes	No	18.05, Administration of Public Health and Related Laws 18.15, Disease Control and Threats to Public Health/Public Health Authority and Powers 44.29.020, Duties of the Department of Health and Social Services 47.05.010 - 050, Federal classifications for disease and Federal rates, ability to set policy for records, cooperation with Feds
61	Women, Children and Family Health (2788)	\$13,573.3: \$2,465.6 UGF \$1,272.0 DGF \$9,077.4 Fed \$758.3 Other	45	All Alaskans	10.02%	Critical	1	Yes	No	14.30.065, 127, Physical Examinations and Screening Examinations 18.05.010, Administration of Public Health and Related Laws 18.05.032, Information Relating to Pregnancy and Pregnancy Alternatives 18.15.200, Screening for Metabolic Disorders 44.29.020, Duties of the Department of Health and Social Services 47.05.010, Administration of Welfare, Social Services, and Institutions 47.18.010, Development of Statewide Plan for Programs and Services Related to Adolescents 47.20.300, Newborn and Infant Hearing Screening, Tracking and Intervention Program
62	Public Health Administrative Services (292)	\$1,896.0: \$1,024.9 UGF \$586.1 Fed \$285.0 Other	12	All Alaskans	0.00%	Critical	1	No	No	18.05.010, Administration of Public Health and Related Laws 44.29.020, Duties of the Department of Health and Social Services
63	Emergency Programs (2877)	\$12,928.8: \$2,297.5 UGF \$746.8 DGF \$8,353.5 Fed \$1,531.0 Other	23	All Alaskans	5.87%	Critical	1	Yes	No	18.05.010, Administration of Public Health and Related Laws 18.08, Emergency Medical Services and Trauma Care Fund 18.28.010, Community Health Aide Grants 18.29, Health Care Professions Loan Repayment and Incentive Program 44.29.020, Duties of the Department of Health and Social Services
64	Chronic Disease Prevention and Health Promotion (2818)	\$17,836.1: \$1,959.6 UGF \$8,434.0 DGF \$6,956.0 Fed \$486.5 Other	41	All Alaskans	1.15%	Critical	1	Yes	No	18.05.010, Administration of Public Health and Related Laws 44.29.020, Duties of the Department of Health and Social Services
65	Epidemiology (296)	\$24,169.1: \$1,751.6 UGF \$11,000.0 DGF \$9,332.5 Fed \$2,085.0 Other	59	All Alaskans	40.33%	Critical	1	Yes	No	18.05.010, Administration of Public Health and Related Laws 18.15.160, Test for Syphilis 18.15.200, Screening for Metabolic Disorders 18.15.250, Vaccination Program for Volunteer Emergency Personnel 18.15.270, Testing Procedures for Gonorrhea and Chlamydia 18.15.370, Reportable Disease List 44.29.020, Duties of the Department of Health and Social Services
66	Bureau of Vital Statistics (961)	\$3,500.7: \$143.4 UGF \$2,227.8 DGF \$644.6 Fed \$484.9 Other	27	All Alaskans	74.93%	Critical	1	Yes	No	09.55.050-.060, Presumptive Death Certificates 17.37.010-.070, Registry of Patients Relating to Medical Marijuana 18.05.010, Administration of Public Health and Related Laws 18.15.010, Infectious and Contagious Diseases 18.50, Vital Statistics Act 25.05.071-.391, Marriage Licenses 25.20.050-.055, Legitimation of Children and the Paternity Program 25.23.150-.170, Adoption Proceedings
67	Emergency Medical Services Grants (2309)	\$3,033.7: \$3,033.7 UGF	-	All Alaskans	0.00%	Critical	1	Yes	No	18.05.010, Administration of Public Health and Related Laws 18.08, Emergency Medical Services and Trauma Care Fund

	Allocation and/or Program	Funding (in thousands)	# of Employees	# of Alaskans Served	% Cost through Fees	Rating of Importance to Mission	Rating of Effectiveness	Constitution Requirement	Federally Required	Required by Statute
68	State Medical Examiner (293)	\$3,217.6: \$3,112.6 UGF \$20.0 DGF \$10.0 Fed \$75.0 Other	19	All Alaskans	0.62%	Critical	1	Yes	No	12.65, Death Investigations and Medical Examiners 18.05.010, Administration of Public Health and Related Laws
69	Public Health Laboratories (2252)	\$7,239.8: \$4,142.4 UGF \$725.0 DGF \$1,526.7 Fed \$845.7 Other	39	All Alaskans	23.43%	Critical	1	Yes	No	18.05.010, Administration of Public Health and Related Laws 18.15.160, Test for Syphilis 18.60.475 - 545, Radiation Protection 44.29.020, Duties of the Department of Health and Social Services
70	Community Health Grants (2308)	\$250.0: \$250.0 UGF	-	All Alaskans	0.00%	Critical	1	No	No	18.05.010, Administration of Public Health and Related Laws 18.28.010 - 100, State Assistance for Community Health Aide Programs

ALASKA DIVISION OF PUBLIC HEALTH STRATEGIC PLAN 2016–2020



Our Mission

To protect and promote the health of Alaskans

Our Vision

Healthy Alaskans today and tomorrow

Our Values

- SERVICE:** Demonstrate commitment to public health through compassionate action and stewardship of time, resources, and talent
- HEALTH EQUITY:** Ensure all Alaskans have full and equal access to opportunities to lead healthy lives
- INTEGRITY:** Exemplify uncompromising ethical conduct and the highest standards of responsibility and accountability
- EXCELLENCE:** Use the best available knowledge, expertise, and data to inform public health policies and practice
- LEADERSHIP:** Provide public health vision, purpose, and strategies to improve the health of Alaskans
- DEDICATION:** Continuously and enthusiastically work to achieve the best health for Alaskans and their communities

Our Goals

STRATEGIES	<p>Serve as Alaska's chief strategists for existing and emerging public health issues</p> <ul style="list-style-type: none"> Collaborate to achieve health equity for Alaskans Engage communities to set and implement public health strategies and policies Foster a culture of health for individuals, families, and communities Translate data into policies and actions affecting population health Communicate and promote wellness and the value of public health Support quality improvement initiatives
SERVICES	<p>Protect life, health, and safety through core public health functions</p> <ul style="list-style-type: none"> Monitor health status Respond to outbreaks and disasters Prevent or limit illness, injury, and premature death Ensure health services for vulnerable populations
SCIENCE	<p>Serve as the trusted source of health information</p> <ul style="list-style-type: none"> Collect and analyze public health data Share timely public health information important to stakeholders Communicate effective health messages
SYSTEMS	<p>Strengthen essential public health infrastructure, services, and partnerships</p> <ul style="list-style-type: none"> Develop policies to improve the health of Alaskans Support an adequate and competent health workforce Leverage resources and collaborate with health partners Integrate technology, informatics, and cross-sector partnerships into practice

Alaska's Winnable Battles

DECREASE TOBACCO AND NICOTINE USE

- Decrease use of smoking, chewing, and vaping tobacco products

DECREASE COLORECTAL AND CERVICAL CANCER

- Increase colorectal screening among people aged 50 and over
- Increase on-time human papillomavirus vaccinations
- Increase appropriate cervical cancer screening

INCREASE ACCESS TO HEALTH CARE

- Increase proportion of Alaskans with an appropriate medical home

IMPROVE CHILD AND ADOLESCENT HEALTH

- Increase the proportion of children who are at a healthy weight
- Reduce the proportion of children who die before their first birthday
- Increase the percent of children with on-time immunizations
- Reduce the rate of teen pregnancy

DECREASE INFECTIOUS DISEASE

- Reduce the rate of sexually transmitted infections
- Decrease the rate of hepatitis C infection among injection drug users

PREVENT POISONING AND OVERDOSE

- Decrease opioid overdose
- Decrease childhood poisonings

TALKING POINTS ALASKA'S WINNABLE BATTLES



ALASKA'S SIX WINNABLE BATTLES

- Six specific areas where we can achieve our mission of promoting and protecting the health of Alaskans by 2020
Be part of the conversation – view Dr. Butler's *Alaska's Winnable Battles* video at <https://vimeo.com/139411144>
- Critical component of the DPH Strategic Plan 2016-2020: [Insert hyperlink to DPH Strategic Plan]

DECREASE TOBACCO USE AND NICOTINE DEPENDENCE

- Despite public health success in reducing rates of smoking, there are still disparities across Alaska.
We are still learning if E-cigarettes provide a safer alternative or a new path to older forms of tobacco.
E-cigarettes: Not Harmless. Not Healthy at <http://dhss.alaska.gov/dph/Chronic/Pages/Tobacco/TobaccoFreeAlaska/ecigs.aspx>
- Work with partners and access to cessation services remains critical

DECREASE COLORECTAL AND CERVICAL CANCER

- Colorectal and cervical cancers, “cancers below the belt,” are among the most common in Alaska.
- Both are among the most preventable through screening, treatment of pre-cancerous lesions, and early diagnosis.
- The HPV vaccine is safe and effective to prevent HPV infections that cause most cervical and certain other cancers.
<http://www.epi.hss.state.ak.us/id/iz/hpv/default.htm>

IMPROVE CHILD AND ADOLESCENT HEALTH

- A safe infant sleep environment reduces infant mortality.
- On-time vaccinations protect our children and prevent return of diseases not been seen in Alaska for decades.
- We need to continue progress in the battle against obesity and encourage healthy eating and physical activity.
- Promoting healthy relationships, improving overall health and well-being, and delaying sexual activity helps prevent unintended pregnancies and associated poor social and health outcomes.

DECREASE INFECTIOUS DISEASE

- Despite unprecedented increases in life expectancy and improvement in health quality, challenges remain
- With one of the highest rates of chlamydia and gonorrhea in the country, Alaskans can reverse these trends through primary prevention: safer sexual practices, such as the delay of sexual activity and fewer, ideally one, sexual partner.
- Screening and treatment of both sexually transmitted infections and blood borne pathogens, whether acquired in health care settings or by self-injecting drug users, can prevent the spread of these infectious diseases.

PREVENT POISONING AND OPIOID OVERDOSE

- Alaska is part of the epidemic of deaths due to prescription opioid pain reliever and heroin overdoses. We can:
 - Reduce addiction by screening and providing access to treatment for addictions;
 - Reverse the effects of opioid overdose through increasing availability of naloxone;
 - Prevent opioid pain reliever dependence by effective pain management and best-practices prescription monitoring.

INCREASE ACCESS TO HEALTH CARE

- Increasing access to care includes increased access to preventive care; Medicaid expansion is just one part.
- Access includes an adequate supply of providers to ensure the appropriate care at the right time, in the right setting.
- Access to health care means more Alaskans will have a medical home to call their own.



1 - 2 - 3 PROTECT ALASKA'S KIDS
HPV CANCER PREVENTION





HEALTHY ALASKANS 2020

A JOINT PROJECT OF THE STATE OF ALASKA DEPARTMENT OF HEALTH AND SOCIAL SERVICES & THE ALASKA NATIVE TRIBAL HEALTH CONSORTIUM

Healthy Alaskans 2020 Scorecard

	HA2020 Leading Health Indicator	2010* Baseline	HA2020 Target	Current Data	Progress to Date
1	Reduce the cancer mortality rate per 100,000 population	176.0	162.0	159.1 (2014)	★
2	Increase the percentage of adolescents (high school students in grades 9-12) who have not smoked cigarettes or cigars or used chewing tobacco, snuff, or dip on one or more of the past 30 days	74.8% ^a	80%	81.6% (2015)	★
3	Increase the percentage of adults (age 18 years and older) who currently do not smoke cigarettes	77.8%	83%	79.7% (2014)	▲
4.a	Reduce the percentage of adults (age 18 years and older) who meet criteria for overweight (body mass index of ≥ 25 and < 30 kg/m ²)	38.3%	36%	36.5% (2014)	▲
4.b	Reduce the percentage of adults (age 18 years and older) who meet criteria for obesity (body mass index of ≥ 30 kg/m ²)	29.2%	27%	29.7% (2014)	●
5.a.i	Reduce the percentage of adolescents (high school students in grades 9-12) who meet criteria for overweight (age- and sex-specific body mass index of ≥ 85 th and < 95 th percentile)	14.4% ^a	12%	16.7% (2015)	●
5.a.ii	Reduce the percentage of adolescents (high school students in grades 9-12) who meet criteria for obesity (age- and sex-specific body mass index of ≥ 95 th percentile)	11.8% ^a	10%	14.0% (2015)	●
5.b.i	Reduce the percentage of children (students in grades K-8) who meet criteria for overweight (age- and sex-specific body mass index of ≥ 85 th and < 95 th percentile)	16.7% ^{b,c}	15%	16.7% (2014-2015)	●
5.b.ii	Reduce the percentage of children (students in grades K-8) who meet criteria for obesity (age- and sex-specific body mass index of ≥ 95 th percentile)	16.6% ^{b,c}	15% ^c	17.3% (2014-2015)	●
6.a	Increase the percentage of adults (age 18 years and older) who report 150 or more total minutes per week of moderate or vigorous exercise where each minute of vigorous exercise contributes 2 minutes to the total	57.5% ^d	61%	55.0% (2013)	●
6.b	Increase the percentage of adolescents (high school students in grades 9-12) who do at least 60 minutes of physical activity a day, every day of the week	20.2% ^a	23%	20.9% (2015)	▲
7.a	Reduce the suicide mortality rate per 100,000 population, among the population aged 15-24 years	46.0	43.2	37.9 (2014)	★
7.b	Reduce the suicide mortality rate per 100,000 population, among the population aged 25 years and older	25.0	23.5	27.0 (2014)	●
8	Reduce the percentage of adolescents (high school students in grades 9-12) who felt so sad or hopeless every day for 2 weeks or more in a row that they stopped doing some usual activities during the past 12 months	25.2% ^a	23%	33.6% (2015)	●
9	Reduce the mean number of days in the past 30 days adults (age 18 and older) report being mentally unhealthy	3.2	2.9	3.1 (2014)	▲
10	Increase the percentage of adolescents (high school students in grades 9-12) with three or more adults (besides their parents) from whom they feel comfortable seeking help	44.6% ^a	47%	46.0% (2015)	▲

Notes: *2010 unless otherwise noted; ^a 2009; ^b 2009-2010 school year, ASD and Mat-Su School Districts only; ^c Modified due to change in data collection methodology; ^d 2011; ^e 2013; ^f 2009-2011

★ Target Met ▲ On Track to Reach Target ● Not on Track to Reach Target

For more detailed trend data on any individual indicator, go to <http://ibis.dhss.alaska.gov>.

Updated 07/18/2016



HEALTHY ALASKANS 2020

A JOINT PROJECT OF THE STATE OF ALASKA DEPARTMENT OF HEALTH AND SOCIAL SERVICES & THE ALASKA NATIVE TRIBAL HEALTH CONSORTIUM

Healthy Alaskans 2020 Scorecard

	HA2020 Leading Health Indicator	2010* Baseline	HA2020 Target	Current Data	Progress to Date
11	Reduce the rate of unique substantiated child maltreatment victims per 1,000 children (age 0-17 years)	15.3	14.4	13.3 (2014)	★
12	Reduce the rate of rape per 100,000 population	125.4 ^{c,e}	113.0 ^c	104.7 (2014)	★
13	Reduce the percentage of adolescents (high school students in grades 9-12) who were ever hit, slapped, or physically hurt on purpose by their boyfriend or girlfriend during the past 12 months	9.1% ^{c,e}	8% ^c	9.5% (2015)	●
14	Reduce the alcohol-induced mortality rate per 100,000 population	16.3	15.3	17.8 (2014)	●
15.a	Reduce the percentage of adults (age 18 years and older) who report binge drinking in the past 30 days based on the following criteria: 5 or more alcoholic drinks for men; 4 or more alcoholic drinks for women on one occasion	21.8%	20%	20.2% (2014)	▲
15.b	Reduce the percentage of adolescents (high school students in grades 9-12) who report binge drinking in the past 30 days based on the following criteria: 5 or more alcoholic drinks in a row within a couple of hours, at least once in the past 30 days	21.7% ^a	17%	12.5% (2015)	★
16	Reduce the unintentional injury mortality rate per 100,000 population	58.3	54.8	54.6 (2014)	★
17	Increase the percentage of children age 19-35 months who do receive the ACIP (Advisory Committee on Immunization Practices) recommended vaccination series (2013 ACIP recommendation: 4 DTap, 3 Polio, 1 MMR, 3 Hib, 3 Hepatitis B, 1 Varicella, 4 PCV)	65.0%	75%	67.3% (2014)	▲
18	Reduce the incidence rate of Chlamydia trachomatis per 100,000 population	849.6	705.2	766.4 (2015)	▲
19	Increase the percentage of rural community housing units with water and sewer services	78.0%	87%	85.0% (2014)	▲
20	Increase the percentage of the population served by community water systems with optimally fluoridated water	54.8%	58%	43.5% (2014)	●
21	Reduce the percentage of women delivering live births who have not received prenatal care beginning in the first trimester of pregnancy	21.3%	19%	21.7% (2014)	●
22	Reduce the rate of preventable hospitalizations per 1,000 adults (hospitalizations that could have been prevented with high quality primary and preventive care) based on the Agency for Healthcare Research and Quality (AHRQ) definition	7.1	6.7	7.3 (2011)	●
23	Reduce the percentage of adults (age 18 years and older) reporting that they could not afford to see a doctor in the last 12 months	14.7%	14%	13.6% (2014)	★
24	Increase the percentage of the population living above the federal poverty level (as defined for AK)	84.5% ^f	90%	83.3% (2014)	●
25	Increase the percentage of 18-24 year olds with a high school diploma or equivalency	81.2%	86%	86.5% (2014)	★

Notes: *2010 unless otherwise noted; ^a 2009; ^b 2009-2010 school year, ASD and Mat-Su School Districts only; ^c Modified due to change in data collection methodology; ^e 2011; ^f 2013; ^g 2009-2011

★ Target Met ▲ On Track to Reach Target ● Not on Track to Reach Target

For more detailed trend data on any individual indicator, go to <http://ibis.dhss.alaska.gov>.

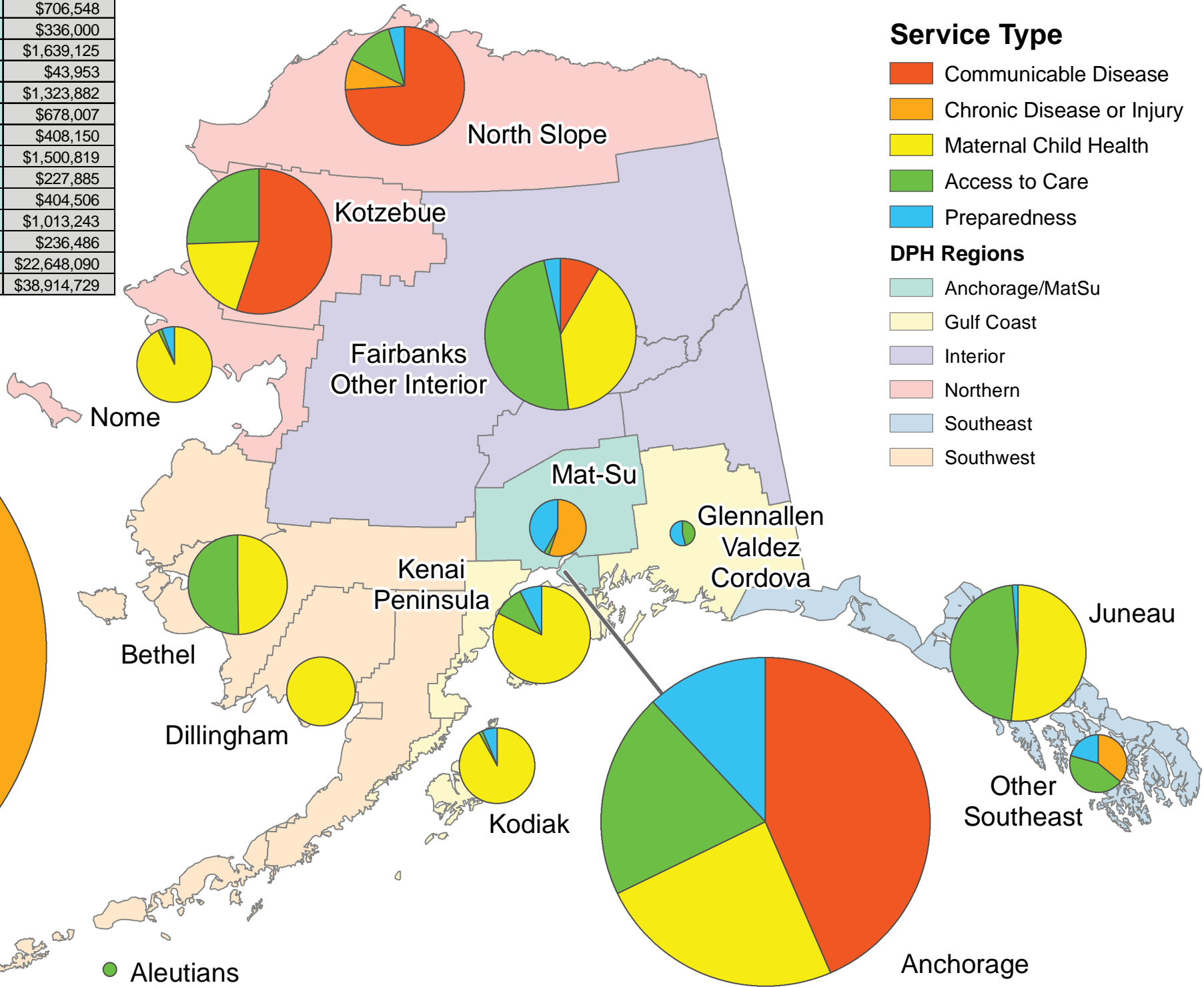
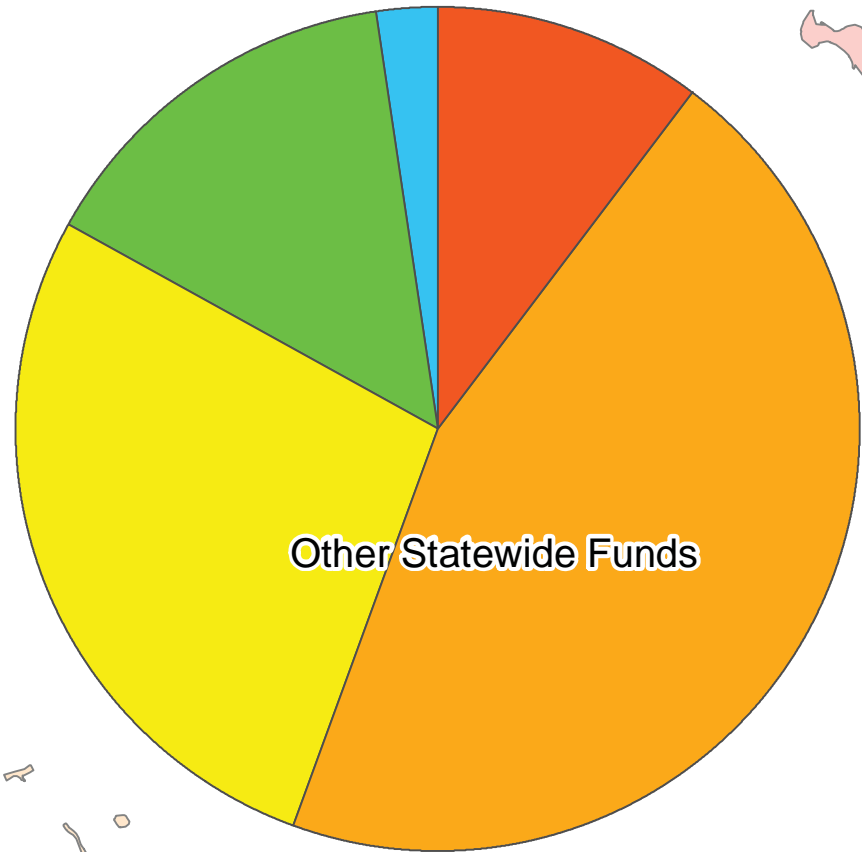
Updated 07/18/2016

LIVING LOCALLY, WORKING GLOBALLY – JULY 2016

Division of Public Health - Grants and Contracts for FY2017

Service Areas	Communicable Disease	Chronic Disease or Injury	Maternal Child Health	Access to Care	Preparedness	Total
Aleutians				\$12,718		\$12,718
Anchorage	\$3,366,800		\$1,879,800	\$1,559,122	\$929,595	\$7,735,317
Bethel			\$351,000	\$355,548		\$706,548
Dillingham			\$336,000			\$336,000
Fairbanks / Other Interior	\$137,205		\$654,000	\$789,532	\$58,388	\$1,639,125
Glennallen / Valdez / Cordova				\$20,112	\$23,841	\$43,953
Juneau			\$683,000	\$622,179	\$18,703	\$1,323,882
Kenai Peninsula			\$559,000	\$68,905	\$50,102	\$678,007
Kodiak			\$375,000	\$6,700	\$26,450	\$408,150
Kotzebue	\$826,300		\$291,000	\$383,519		\$1,500,819
Mat-Su		\$126,000		\$6,235	\$95,650	\$227,885
Nome			\$374,986	\$6,700	\$22,820	\$404,506
North Slope	\$749,900	\$85,000		\$133,352	\$44,991	\$1,013,243
Other Southeast		\$85,000		\$102,937	\$48,549	\$236,486
Statewide	\$2,334,684	\$10,246,431	\$6,227,186	\$3,308,896	\$530,893	\$22,648,090
Total	\$7,414,889	\$10,542,431	\$11,730,972	\$7,376,455	\$1,849,982	\$38,914,729

Communicable Disease
HIV/STD
Immunization
Infectious Disease Control
Nursing
Chronic Disease or Injury
Cancer Prevention
Health Analytics & Evaluation
Health Communication
Heart Disease and Stroke Prevention
Injury Prevention
Obesity Prevention
School Health
Tobacco Use Prevention
Maternal Child Health
Child & Adolescent Health
Family Planning
Health Analytics & Evaluation
HIV/STD
Injury Prevention
Peri-natal Health
School Health
Tobacco Use Prevention
Access to Care
Anchorage Project Access
Cancer Prevention
Child & Adolescent Health
Death Investigation
EMS
Health Analytics & Evaluation
Hospital Improvement
Nursing
Rural Health
Senior Access
Preparedness
Health Emergency Response
Hospital Preparedness Program



Source: Alaska Department of Health and Social Services, Grants and Contracts Section as of February 6, 2017

The Web of Risk Factors and Chronic Conditions

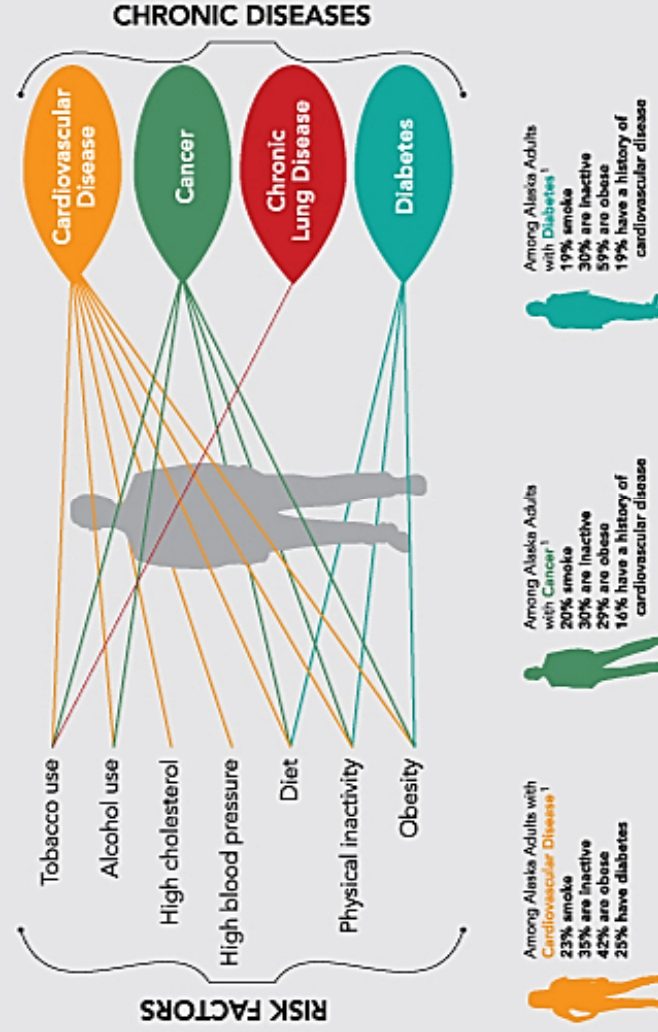
The Problem

More than half of Alaska adults report that they have one or more of the following: obesity, inactivity, smoking, history of diabetes, history of cardiovascular disease, or cancer. But how many are dealing with more than one?¹



People with multiple chronic conditions have poorer health than those with a single chronic condition—including poorer day-to-day functioning.²

The Whole Person: The Web of Chronic Disease¹



The Cost

To the Nation

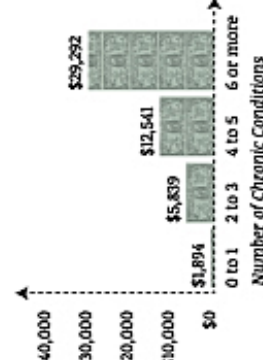


66 cents of each dollar spent on healthcare treats the 25% of Americans with one or more chronic conditions.³

When someone develops a number of chronic conditions, it is much more likely that he or she will spend more time in the hospital, will visit the emergency department more often and will incur significantly more in healthcare costs.⁴

In Alaska

Annual Per Capita Cost, by Number of Chronic Conditions, Alaska Medicare Beneficiaries, 2011 CMS⁵



The Solution: Key Factors for Healthier Alaskans

4 healthy lifestyle choices: never smoking, maintaining a healthy weight, regular physical activity and a healthy diet, reduce the risk of developing the most common and deadly chronic diseases by as much as 80%.⁶

Public health + healthcare professionals + communities must work together to help make healthy choices easy choices.

What Can I Do to Help?



Public Health Professionals: Educate communities about chronic disease and promote positive changes in the environment that help people stay healthy and prevent chronic conditions.



Health Care Providers: Provide patient-centered care from a multi-disciplinary team.



Individuals with Multiple Chronic Conditions: Learn effective strategies for managing your health. Visit Living Well Alaska, www.dhss.alaska.gov/dph/Chronic/Pages/SelfManagement/default.aspx, for more information.

¹ AK BRFSS (2009-2010). ² Anderson G. Chronic Care: Making the Case for Designing Care. Princeton, NJ: Robert Wood Johnson Foundation; 2010. ³ Centers for Medicare and Medicaid Services (CMS). State Level Chronic Condition Reports. <http://www.cms.gov/research-statistics-data-and-systems/statistics-trends-and-reports/chronic-conditions/CStateReports.html>. Accessed 12-11-2012. ⁴ Hargrett-Neale M, Brownson RC, Wagner MA, eds. Chronic Disease Epidemiology and Control, 3rd Ed. Washington DC: American Public Health Association; 2010. ⁵ Ford ES, Benjamin MA, Krueger J, Schenck KA, Wilson C, Boecking H. Healthy living is the best strategy. Findings from the European Prospective Investigation into Cancer and Nutrition Prospective Study. Arch Intern Med 2009; 169(13): 1305-1307.