

**DEPARTMENT OF PUBLIC HEALTH
FISCAL YEAR 2019 BUDGET TESTIMONY
APRIL 18, 2018**

INTRODUCTION

Good afternoon, President Clarke and Members of City Council. I am Dr. Thomas Farley, Health Commissioner. Joining me today are Jane Baker, Chief of Staff, and Sami Jarrah, Chief Operating Officer. I am pleased to provide testimony on the Department of Public Health's Fiscal Year 2019 Operating Budget.

DEPARTMENT MISSION & PLANS

Mission: The Department of Public Health (DPH) promotes and protects the health of every Philadelphian and provides a safety net for the most vulnerable.

Plans for Fiscal Year 2019: In Fiscal Year 2019, the department plans to undertake the following work to improve the health of all Philadelphians:

- **Administration and Support** will implement an electronic timesheet system and improve recruitment strategies.
- **AIDS Activities Coordinating Office** will strengthen its efforts around HIV/AIDS prevention for men who have sex with men, and will expand access to pre-exposure prophylaxis. It will also implement strategies to reduce syphilis in the community.
- **Air Management Services** will strengthen local air pollution monitoring efforts by measuring pollutant levels in 50+ sites across the city. The program will also work with state partners to help the City to access Volkswagen settlement grant resources to improve Philadelphia's air quality.
- **Ambulatory Health Services** will complete implementation of the Patient-Centered Medical Home (PCMH) improvements and achieve PCMH certification. Implementing this team-based care delivery model will increase the department's eligibility for grants and financial incentives. The program is also exploring expanding services in Northeast Philadelphia where patient demand remains high.
- **Chronic Disease Prevention** will continue its implementation of tobacco regulations. This program will maintain partnerships with community organizations and will strengthen programs that address the city's leading causes of preventable deaths.
- **Disease Control** will implement electronic health records in its STD clinic and will initiate a program to improve Hepatitis C treatment and prevention.
- **Environmental Health Services** will maintain improvements in the number of food establishment inspections and corresponding revenue.
- **Health Analysis, Information and Strategy** will continue to prevent deaths from the opioid epidemic Philadelphia faces. This department will also seek opportunities to maximize Medicaid revenue opportunities to benefit the City and Philadelphians, and implement software improvements throughout the department.
- **Health Systems** operates the Philadelphia Nursing Home and Riverview, both of which provide services for vulnerable Philadelphians. This program will implement facility improvements to improve resident experiences.

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- **Lead and Healthy Homes** will expand efforts to prevent childhood lead poisoning through improved enforcement, education, and outreach, along with remediation of properties that have lead contamination.
- **Maternal, Child and Family Health** will continue to provide important services to support women, children and families in Philadelphia. The program will develop a centralized intake system for home visiting of high-risk infants.
- **Medical Examiner's Office** will continue to provide death investigation services and will provide actionable data on the impact of the opioid epidemic on Philadelphians.
- **Public Health Laboratory** will continue to provide core, state-of-the-art laboratory functions to test for disease outbreaks, illnesses, and other threats to public health. The program will complete its implementation of a lab information services system to process lab results.

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BUDGET SUMMARY & OTHER BUDGET DRIVERS

| Staff Demographics Summary (as of December 2017) | | | | |
|---|-----------|-----------|-----------|-----------|
| | Total | Minority | White | Female |
| Number of Full-Time Staff | 872 | 664 | 208 | 619 |
| Number of -Exempt Staff | 23 | 13 | 10 | 14 |
| Number of Executive Staff (deputy level and above) | 5 | 2 | 3 | 2 |
| Average Salary, Full-Time Staff | \$57,375 | \$54,966 | \$65,065 | \$56,693 |
| Average Salary, Exempt Staff | \$62,494 | \$66,331 | \$61,598 | \$65,542 |
| Average Salary, Executive Staff | \$149,742 | \$133,750 | \$160,404 | \$163,106 |
| Median Salary, Full-Time Staff | \$45,851 | \$43,447 | \$51,902 | \$44,663 |
| Median Salary, Exempt Staff | \$40,000 | \$55,166 | \$40,000 | \$55,166 |
| Median Salary, Executive Staff | \$149,742 | \$133,750 | \$165,000 | \$163,106 |

| Employment Levels (as of December 2017) | | |
|--|----------|----------|
| | Budgeted | Filled |
| Number of Full-Time Positions | 1,045 | 872 |
| Number of Part-Time Positions | N/A | 62 |
| Number of Exempt Positions | 30 | 23 |
| Number of Executive Positions (deputy level and above) | 5 | 5 |
| Average Salary of All Full-Time Positions | \$56,012 | \$57,375 |
| Median Salary of All Full-Time Positions | \$52,003 | \$45,851 |

Staff Demographics and Employment Levels tables show All Funds.

| General Fund Financial Summary by Class | | | | | | |
|---|------------------------------|-------------------------|------------------------------|----------------------------|------------------------------|-----------------------|
| | FY17 Original Appropriations | FY17 Actual Obligations | FY18 Original Appropriations | FY18 Estimated Obligations | FY19 Proposed Appropriations | Difference: FY19-FY18 |
| Class 100 - Employee Compensation | \$50,960,468 | \$51,023,872 | \$54,454,436 | \$54,417,831 | \$54,853,461 | \$435,630 |
| Class 200 - Purchase of Services | \$66,892,802 | \$70,720,672 | \$73,897,713 | \$73,897,713 | \$92,882,896 | \$18,985,183 |
| Class 300/400 - Materials, Supplies & Equipment | \$5,490,768 | \$5,445,403 | \$7,509,918 | \$7,509,918 | \$8,397,518 | \$887,600 |
| Class 500 - Contributions | \$0 | \$270,408 | \$0 | \$0 | \$0 | \$0 |
| Class 800 - Payment to Other Funds | \$500,000 | \$5,500,000 | \$500,000 | \$500,000 | \$500,000 | \$0 |
| | \$123,844,038 | \$132,960,355 | \$136,362,067 | \$136,325,462 | \$156,633,875 | \$20,308,413 |

| Contracts Summary (Professional Services only) | | | | | | |
|---|-------------|-------------|-------------|-------------|-------------|--------------------|
| | FY13 | FY14 | FY15 | FY16 | FY17 | FY18 YTD (Q1 & Q2) |
| Total amount of contracts | \$6,258,257 | \$6,098,748 | \$7,009,296 | \$5,452,741 | \$5,460,537 | \$3,136,880 |
| Total amount to M/W/DSBE | \$1,334,834 | \$2,392,181 | \$2,259,576 | \$2,405,001 | \$3,948,193 | \$1,512,426 |
| Participation Rate | 21% | 39% | 32% | 44% | 72% | 48% |

| Total M/W/DSBE Contract Participation Goal (Public Works; Services, Supplies & Equipment; and Professional Services combined) | | | |
|--|------|------|------|
| | FY17 | FY18 | FY19 |
| M/W/DSBE Contract Participation Goal | 30% | 30% | 40% |

PROPOSED BUDGET OVERVIEW

Proposed Funding Request:

The proposed Fiscal Year 2019 General Fund budget totals \$156,633,875, an increase of \$20,308,413 over Fiscal Year 2018 estimated obligation levels. This increase is primarily due to an \$18 million intergovernmental transfer with the Commonwealth of Pennsylvania's Department of Human Services. This transfer is fully offset by revenue, thus having no net impact on the General Fund. Other increases in obligation levels are for opioid epidemic program costs, including increased naloxone distribution in the community, and move costs related to vacating the 500 South Broad Street facility.

The proposed budget includes:

- \$54,853,461 in Class 100, a \$435,630 increase over FY18. This funding will enable the department to maintain its existing staff and to provide negotiated salary increases DC33 for employees.
- \$92,882,896 in Class 200, an \$18,985,183 increase over FY18. This funding is fully offset by revenue and will enable the department to pursue increased Medicaid revenue strategies in partnership with the Commonwealth of Pennsylvania. Additionally, it will enable increased tobacco prevention strategies, improved compliance with the City of Philadelphia's language access service requirements, and will provide for pharmaceutical and other health care service cost increases required to operate eight City health centers that serve 70,000+ patients each year.
- \$8,397,518 in Class 300/400, an \$887,600 increase over FY18. This funding will enable purchasing of naloxone, the opioid overdose reversal drug, for distribution to Philadelphians at risk of death. It will also purchase furniture to enable the City to vacate the 500 South Broad Street facility, and enable health centers to continue distributing vaccines to patients.
- \$500,000 in Class 800, the same as in FY18. This funding will support capital expenditures at the Philadelphia Nursing Home.

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STAFFING LEVELS

The department is requesting 834 General Fund budgeted positions for FY19, an increase of 8 positions over FY18.

This increase is attributed to an additional nurse and outreach worker in the Disease Control program, additional positions focused on reducing air pollution and protecting children from lead in homes, and a new software development position to improve the department’s efficiency and use of technology.

NEW HIRES

| New Hires (from 7/1/2017 to December 2017) | | | | | | | | | |
|--|---------------------------|---------|-----------|--------|----------|-----------|--------|----------|--------|
| | Total Number of New Hires | Spanish | Malayalam | French | Mandarin | Cantonese | Arabic | Albanian | Yoruba |
| Black or African American | 20 | - | - | - | - | - | - | - | 1 |
| Asian | 7 | 1 | 3 | - | 2 | 2 | - | - | - |
| Hispanic or Latino | 3 | 3 | - | 1 | - | - | - | - | - |
| White | 22 | - | - | 2 | - | - | 2 | 2 | - |
| Total | 52 | 4 | 3 | 3 | 2 | 2 | 2 | 2 | 1 |

PERFORMANCE, CHALLENGES, AND INITIATIVES

Administration and Support:

| FY19 Strategic Goals | | | | |
|--|-------------|--------------------|-------------|-------------|
| <ul style="list-style-type: none"> Assess and adjust program fees, fines, and other revenue sources to support the work required to implement public health programs. | | | | |
| FY19 Performance Measures | | | | |
| Measure | FY17 Actual | FY18 YTD (Q1 + Q2) | FY18 Target | FY19 Target |
| Percent of fleet vehicles compliant with preventive maintenance schedule ¹ | 95.5% | 97.5% | 85.0% | 85.0% |
| Median number of days to conform department draft contract | 63 | 46 | 70 | 65 |

¹ DPH expects to increase vehicle numbers for increased lead poisoning prevention outreach and restaurant inspections. This may result in a slight decrease in compliance.

AIDS Activities Coordinating Office (AACO):

| FY19 Strategic Goals | | | | |
|--|-------------|--------------------|-------------|-------------|
| <ul style="list-style-type: none"> Implement a condom use campaign, using lessons learned from prior campaigns, to reduce new cases of HIV and other sexually transmitted diseases among high-risk populations. Increase the rate of HIV viral suppression among Philadelphians diagnosed and living with HIV, improving on the 52% viral suppression rate achieved in 2015. | | | | |
| FY19 Performance Measures | | | | |
| Measure | FY17 Actual | FY18 YTD (Q1 + Q2) | FY18 Target | FY19 Target |
| Number of new HIV diagnoses ¹ | 480 | 269 | 550 | 550 |
| Number of clients served by department-funded Ryan White outpatient ambulatory health system in Philadelphia ² | 11,518 | 11,619 | 11,850 | 11,850 |

¹ Being below the target is the Department's goal. Lower numbers mean less HIV in Philadelphia communities.

² This is a cumulative measure.

Air Management Services (AMS):

| FY19 Strategic Goals | | | | |
|--|-------------|--------------------|-------------|-------------|
| <ul style="list-style-type: none"> Establish Philadelphia Air Quality Survey, a system to measure air pollution at the neighborhood level in each season. Continue to coordinate City's response for Volkswagen settlement funding for air pollution programs. | | | | |
| FY19 Performance Measures | | | | |
| Measure | FY17 Actual | FY18 YTD (Q1 + Q2) | FY18 Target | FY19 Target |
| Number of calendar days with air quality index (AQI) rating of 100 or below ¹ | 354 | 179 | 349 | 350 |

¹ AQI is influenced negatively by high temperatures, and the Department is not able to predict with certainty if higher temperatures will be sustained in FY18. An AQI of 100 or below constitutes "good" or "moderate" air quality conditions. Estimates are based on air quality engineers' approximations.

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Ambulatory Health Services (AHS):

| FY19 Strategic Goals | | | | |
|--|-------------|--------------------|-------------|-------------|
| <ul style="list-style-type: none"> Complete certification of all eight City health centers as Patient-Centered Medical Homes. | | | | |
| FY19 Performance Measures | | | | |
| Measure | FY17 Actual | FY18 YTD (Q1 + Q2) | FY18 Target | FY19 Target |
| Percentage of visits uninsured ¹ | 40.9% | 40.7% | 41.5% | 41.0% |
| Number of patient visits at department-run ambulatory health centers ² | 336,445 | 168,107 | 310,000 | 320,000 |
| Percent of patients ages 18-84 with a diagnosis of hypertension who have controlled blood pressure ³ | 65.2% | 66.9% | 60.0% | 70.0% |

¹ Philadelphia's rate of uninsured visits continues to decrease as the Affordable Care Act (ACA) continues to support Medicaid.

² This is a cumulative measure.

³ The City's health centers continue to exceed the FY18 target, reflecting the results of care providers case managing at-risk patients compliant with care plans.

Chronic Disease Prevention:

| FY19 Strategic Goals | | | | |
|---|-------------|--------------------|-------------|-------------|
| <ul style="list-style-type: none"> Increase inspection of tobacco retailers to ensure they are not selling tobacco products illegally. Conduct a public education campaign to increase smoking cessation. | | | | |
| FY19 Performance Measures | | | | |
| Measure | FY17 Actual | FY18 YTD (Q1 + Q2) | FY18 Target | FY19 Target |
| Youth tobacco sales compliance | 77.0% | 79.7% | 77.5% | 78.5% |

Disease Control:

| FY19 Strategic Goals | | | | |
|---|-------------|--------------------|-------------|-------------|
| <ul style="list-style-type: none"> Decrease influenza transmission in Philadelphia by working with Vaccines for Children providers to increase annual influenza immunization coverage rates for children ages 6 months to 18 years of age. Increase the proportion of reported individuals with chronic hepatitis C virus infection who are successfully treated. | | | | |
| FY19 Performance Measures | | | | |
| Measure | FY17 Actual | FY18 YTD (Q1 + Q2) | FY18 Target | FY19 Target |
| Children 19-35 months with complete immunizations 4:3:1:3:3:1 | 80.8% | 80.8% | 78.5% | 78.5% |
| Number of patient visits to department-run STD clinics ¹ | 24,559 | 11,350 | 25,000 | 21,000 |
| Number of high school students who are tested for a sexually transmitted disease through the school screening program | 10,820 | 3,973 | 10,000 | 10,000 |

¹ Health Center 1, the City's STD clinic, will move in FY18 - FY19 and expects a downturn in patient visits during the move.

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Environmental Health Services (EHS):

| FY19 Strategic Goals | | | | |
|---|-------------|--------------------|-------------|-------------|
| <ul style="list-style-type: none"> • Increase inspection of restaurants and food establishments to decrease interval between food safety inspections to 12 months. • Implement changes to City restaurant laws, including reclassification of restaurants as large and small establishments, and modify inspection protocols and train staff. | | | | |
| FY19 Performance Measures | | | | |
| Measure | FY17 Actual | FY18 YTD (Q1 + Q2) | FY18 Target | FY19 Target |
| Number of months between food establishment inspections ¹ | 15.5 | 15.4 | 12.0 | 12.0 |

¹ The program plans to continue to make progress towards improving the interval with more restaurant inspectors in FY18. Five additional inspector positions were filled in FY18 Q1, and 16 inspectors were hired in FY18 Q2, and all are being trained and onboarded. These new hires are expected to continue to help decrease the inspection interval.

Health Analysis, Information and Strategy:

| FY19 Strategic Goals | | | | |
|--|-------------|--------------------|-------------|-------------|
| <ul style="list-style-type: none"> • Distribute 20,000+ Naloxone doses throughout Philadelphia to drug users and community members to reduce overdose deaths. • Maintain Department’s national accreditation through next round of preparations for Public Health Accreditation Board. • Develop an annual report on children’s health in Philadelphia. | | | | |
| FY19 Performance Measures | | | | |
| Measure | FY17 Actual | FY18 YTD (Q1 + Q2) | FY18 Target | FY19 Target |
| Number of department digital media views per month ¹ | 476,551 | 1,382,718 | 520,000 | 1,100,000 |

¹ In coordination with the Mayor’s Office, the department used a new method to more precisely track views beginning in FY18 Q1, thus the FY18 target was increased from 520,000 in FY18 to 1.1M in FY19.

Health Systems:

| FY19 Strategic Goals | | | | |
|---|-------------|--------------------|-------------|-------------|
| <ul style="list-style-type: none"> • Conduct two performance audits to identify areas of improvement for Philadelphia Nursing Home residents. • Release report on primary care access in Philadelphia, including areas for improvement. | | | | |
| FY19 Performance Measures | | | | |
| Measure | FY17 Actual | FY18 YTD (Q1 + Q2) | FY18 Target | FY19 Target |
| Philadelphia nursing home average daily census | 383 | 381 | 380 | 380 |

Lead and Healthy Homes:

| FY19 Strategic Goals | | | | |
|---|-------------|--------------------|-------------|-------------|
| <ul style="list-style-type: none"> Increase lead-safe certificates in order to assure safe housing is available for low-income families in vulnerable neighborhoods. Increase inspection and outreach efforts for families impacted by lead and in need of property remediation services. | | | | |
| FY19 Performance Measures | | | | |
| Measure | FY17 Actual | FY18 YTD (Q1 + Q2) | FY18 Target | FY19 Target |
| Reported number of children under age 6 years with new lead exposure, defined as elevated blood level of 5 micrograms per deciliter (µg/dL) ¹ | 1,570 | 1,034 | 2,500 | 2,500 |

¹ The goal is for fewer children to be exposed to lead. DPH projects higher numbers due to improved screening processes. The program is strengthening its epidemiology and data tracking systems in FY18.

Maternal, Child and Family Health (MCFH):

| FY19 Strategic Goals | | | | |
|--|-------------|--------------------|-------------|-------------|
| <ul style="list-style-type: none"> Implement <i>A Running Start – Health</i>, a community-based, city-wide plan to improve the health of young children, and assess its success through process and outcome measures. | | | | |
| FY19 Performance Measures | | | | |
| Measure | FY17 Actual | FY18 YTD (Q1 + Q2) | FY18 Target | FY19 Target |
| Percent of women initiating breastfeeding ¹ | 80.5% | 81.2% | 80.0% | 81.5% |

¹ This is a rolling average and tracks the percent of women within the City who indicated their child was ever breastfed or fed breast milk prior to hospital discharge. The goal is to maintain or increase the percentage. Unknown and missing values are excluded from calculation.

Medical Examiner’s Office (MEO):

| FY19 Strategic Goals | | | | |
|--|-------------|--------------------|-------------|-------------|
| <ul style="list-style-type: none"> Implement online payment improvements for Philadelphia residents using MEO services. | | | | |
| FY19 Performance Measures | | | | |
| Measure | FY17 Actual | FY18 YTD (Q1 + Q2) | FY18 Target | FY19 Target |
| Percent of all cases with autopsy reports issued within 90 calendar days ¹ | 94.0% | 97.0% | 90.0% | 90.0% |
| Number of death cases investigated ² | 3,266 | 1,642 | N/A | |

¹ The 90% goal is DPH’s requirement for accreditation.

² This is a workload measure, reflecting required death investigations, over which MEO has no control. Cases investigated by the MEO are determined by statute as cases in which a person has died suddenly and unexpectedly; of trauma or violence; under suspicious circumstances; while not under care of a physician; of a suspected yet unconfirmed public health threat; while held in a public institution such as a prison; or in situations where the body is unidentified or unclaimed by family.

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Public Health Laboratory:

| FY19 Strategic Goals | | | | |
|--|-------------|--------------------|-------------|-------------|
| <ul style="list-style-type: none"> • Develop plan for new point-of-care laboratory testing for patients receiving services in City health centers. • Identify space and timeline for relocation of laboratory services from 500 South Broad Street facility. | | | | |
| FY19 Performance Measures | | | | |
| Measure | FY17 Actual | FY18 YTD (Q1 + Q2) | FY18 Target | FY19 Target |
| Number of diabetes blood sugar tests performed ¹ | 13,934 | 6,931 | 14,000 | 14,000 |

¹ Hemoglobin A1C tests are performed by Philadelphia Public Health Laboratory for both internal and external health care providers.

OTHER BUDGETARY IMPACTS

Federal and State (Where Applicable)

The Department of Public Health receives funding from federal and state governments in several ways:

- directly from the federal government, such as grants from the Centers for Disease Control and Prevention (CDC), the Environmental Protection Agency (EPA), the Health Resources and Services Administration (HRSA), and the Department of Housing and Urban Development (HUD);
- indirectly through the state, such as CDC “pass-through” grants;
- direct funding through the Commonwealth’s Department of Health, Department of Environmental Protection, and other agencies;
- fee-for-service payments through state-federal shared programs, such as Medicaid payments; and
- through other city agencies, such as the Mayor’s Office of Community Empowerment and Opportunity’s Community Services Block Grant funding.

The department cannot speculate what will happen with the federal or state budgets, but we work closely with the Mayor’s office, and relevant public health and health care associations to advocate for continued funding.

Further weakening the Affordable Care Act would impact the department’s revenue projections, specifically for Medicaid services mostly delivered through the City’s eight health centers. We estimate approximate Medicaid revenue of \$22.9 million, an increase of \$2 million from FY18, for services provided at the City’s eight health centers.

Additionally, legislation at the federal or state levels focused on sanctuary cities could impact the department’s assumptions related to state or federal grants or other funding. It is unclear at this time the range of potential impacts.

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CONTRACTING EXPERIENCE

| M/W/DSBE Participation on Large Professional Services Contracts | | | | | | | | | | | |
|---|-------------------------|---------------------------|----------------|---------------------|--------------------|--------------------------------------|------------------------------------|-----------------------------------|--|--|---|
| Top Five Largest Contracts, FY18 | | | | | | | | | | | |
| Vendor Name | Service Provided | Dollar Amount of Contract | RFP Issue Date | Contract Start Date | Ranges in RFP | % of M/W/DSBE Participation Achieved | \$ Value of M/W/DSBE Participation | Total % Participation - All DSBES | Total \$ Value Participation - All DSBES | Local Business (principal place of business located within City limits) [yes / no] | Waiver for Living Wage Compliance? [yes / no] |
| General Healthcare Resources, LLC | Nursing Services | \$621,000 | 4/11/2017 | 7/1/2017 | MBE: Best Efforts | 0% | \$0 | 0% | \$0 | no | no |
| | | | | | WBE: Best Efforts | 0% | \$0 | | | | |
| | | | | | DSBE: Best Efforts | 0% | \$0 | | | | |
| MEE Productions, Inc. | Mass Media Campaigns | \$398,504 | 5/17/2016 | 7/1/2017 | MBE: 30% | 100% | \$398,504 | 100% | \$398,504 | yes | no |
| | | | | | WBE:30% | 0% | \$0 | | | | |
| | | | | | DSBE: Best Efforts | 0% | \$0 | | | | |
| Better World Advertising, Inc. | Condom Campaign | \$331,500 | 11/16/2016 | 7/1/2017 | MBE: 16%-19% | 0% | \$0 | 0% | \$0 | no | no |
| | | | | | WBE: 16%-19% | 0% | \$0 | | | | |
| | | | | | DSBE: Best Efforts | 0% | \$0 | | | | |
| Innovative Customer Solutions, LLC | Physician Detailing | \$291,000 | 5/5/2017 | 7/1/2017 | MBE: Best Efforts | 0% | \$0 | 0% | \$0 | no | no |
| | | | | | WBE: Best Efforts | 0% | \$0 | | | | |
| | | | | | DSBE: Best Efforts | 0% | \$0 | | | | |
| Group 6 Healthcare Consulting | Patient Care Monitoring | \$110,000 | 5/21/2015 | 7/1/2017 | MBE: 1%-3% | 0% | \$0 | 100% | \$110,000 | no | no |
| | | | | | WBE: 1%-3% | 100% | \$110,000 | | | | |
| | | | | | DSBE: Best Efforts | 0% | \$0 | | | | |

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CONTRACTING EXPERIENCE – NON-PROFITS

| Non-Profit Vendor Demographics | | |
|--|-------------------|-----------------|
| Fairmount Long Term Care | Minority % | Female % |
| Workforce | 86.60% | 79.10% |
| Executive | 16.70% | 100.00% |
| Board | 66.70% | 33.30% |
| Health Federation of Philadelphia | Minority % | Female % |
| Workforce | 61.60% | 85.30% |
| Executive | 16.70% | 83.30% |
| Board | 50.00% | 71.40% |
| Public Health Mgmt. Corp. | Minority % | Female % |
| Workforce | 68.00% | 77.00% |
| Executive | 50.80% | 75.90% |
| Board | 50.00% | 35.00% |
| Thomas Jefferson University | Minority % | Female % |
| Workforce | 35.60% | 58.00% |
| Executive | 19.40% | 58.20% |
| Board | 4.40% | 17.80% |
| Philadelphia FIGHT | Minority % | Female % |
| Workforce | 64.20% | 67.20% |
| Executive | 66.70% | 50.00% |
| Board | 64.70% | 23.50% |

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EMPLOYEE DATA

| Staff Demographics (as of December 2017) | | | | | |
|--|------------------|------------------|-----------------------|------------------|------------------|
| Full-Time Staff | | | Executive Staff | | |
| | Male | Female | | Male | Female |
| | African-American | African-American | | African-American | African-American |
| <i>Total</i> | 116 | 403 | <i>Total</i> | 1 | 1 |
| <i>% of Total</i> | 13% | 46% | <i>% of Total</i> | 20% | 20% |
| <i>Average Salary</i> | \$53,223 | \$52,390 | <i>Average Salary</i> | \$137,500 | \$130,000 |
| <i>Median Salary</i> | \$43,120 | \$43,447 | <i>Median Salary</i> | \$137,500 | \$130,000 |
| | White | White | | White | White |
| <i>Total</i> | 85 | 123 | <i>Total</i> | 2 | 1 |
| <i>% of Total</i> | 10% | 14% | <i>% of Total</i> | 40% | 20% |
| <i>Average Salary</i> | \$63,599 | \$66,113 | <i>Average Salary</i> | \$142,500 | \$196,211 |
| <i>Median Salary</i> | \$54,274 | \$50,466 | <i>Median Salary</i> | \$142,500 | \$196,211 |
| | Hispanic | Hispanic | | Hispanic | Hispanic |
| <i>Total</i> | 10 | 30 | <i>Total</i> | 0 | 0 |
| <i>% of Total</i> | 1% | 3% | <i>% of Total</i> | 0% | 0% |
| <i>Average Salary</i> | \$59,951 | \$50,600 | <i>Average Salary</i> | N/A | N/A |
| <i>Median Salary</i> | \$52,479 | \$43,447 | <i>Median Salary</i> | N/A | N/A |
| | Asian | Asian | | Asian | Asian |
| <i>Total</i> | 38 | 55 | <i>Total</i> | 0 | 0 |
| <i>% of Total</i> | 4% | 6% | <i>% of Total</i> | 0% | 0% |
| <i>Average Salary</i> | \$68,212 | \$69,501 | <i>Average Salary</i> | N/A | N/A |
| <i>Median Salary</i> | \$60,725 | \$68,901 | <i>Median Salary</i> | N/A | N/A |
| | Other | Other | | Other | Other |
| <i>Total</i> | 4 | 8 | <i>Total</i> | 0 | 0 |
| <i>% of Total</i> | 0% | 1% | <i>% of Total</i> | 0% | 0% |
| <i>Average Salary</i> | \$48,335 | \$64,313 | <i>Average Salary</i> | N/A | N/A |
| <i>Median Salary</i> | \$48,335 | \$61,886 | <i>Median Salary</i> | N/A | N/A |
| | Bilingual | Bilingual | | Bilingual | Bilingual |
| <i>Total</i> | 46 | 115 | <i>Total</i> | 0 | 0 |
| <i>% of Total</i> | 5% | 13% | <i>% of Total</i> | 0% | 0% |
| <i>Average Salary</i> | \$69,922 | \$85,247 | <i>Average Salary</i> | N/A | N/A |
| <i>Median Salary</i> | \$65,145 | \$68,901 | <i>Median Salary</i> | N/A | N/A |
| | Male | Female | | Male | Female |
| <i>Total</i> | 253 | 619 | <i>Total</i> | 3 | 2 |
| <i>% of Total</i> | 29% | 71% | <i>% of Total</i> | 60% | 40% |
| <i>Average Salary</i> | \$59,142 | \$56,693 | <i>Average Salary</i> | \$140,833 | \$163,106 |
| <i>Median Salary</i> | \$49,321 | \$44,663 | <i>Median Salary</i> | \$137,500 | \$163,106 |

LANGUAGE ACCESS

- 1) Has your leadership received language access training?

Yes.

- 2) Do you currently have a language access coordinator?

The language access coordinator for Ambulatory Health Services is Vanessa Johnson. Ambulatory Health Services is by far the largest user of language access services for the Health Department. All of the other health divisions also have language access liaisons to provide assistance on language access.

- 3) Has your department written a language access plan and is it posted online?

Yes, and it can be found at: <https://beta.phila.gov/documents/language-access-plans/>.

- 4) Explain what your department has done to improve language access services over the past year.

The Department of Public Health has provided training for all direct service divisions in keeping with Mayor Kenney's executive order for language access services. The department has designated language access liaisons for each division; the liaisons' responsibility is to ensure that clients' and patients' language access service needs are appropriately coordinated to remove barriers in accessing care.

The department provides many direct services including:

- Ambulatory outpatient medical care and dental services;
- Care and prevention services for tuberculosis, sexually transmitted diseases, hepatitis, and HIV/AIDS;
- Care and prevention services focused on maternal, child, and family care;
- Lead home inspections; and
- Restaurant and food establishment inspections.

The department provides in-person and telephonic translation as well as interpretation services for people with LEP (Limited English Proficiency) and ESL (English as Second Language). The department works to assure language access for all patients and clients.