# DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES

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### FISCAL YEAR 2018 CITIZEN CENTRIC REPORT

# **ABOUT US**

**Our Mission** is "To assist the people of Guam in achieving and maintaining their highest levels of independence and self-sufficiency in health and social welfare."

The Department of Public Health and Social Services (DPHSS) is responsible for providing public health and social services programs for the residents of Guam.

DPHSS is organized into five divisions:

- Division of General Administration (DGA)
- Division of Public Health (DPH)
- Division of Environmental Health (DEH)
- Division of Senior Citizens (DSC)
- Division of Public Welfare (DPW)

In addition, DPHSS has oversight over the Guam Community Health Centers (Northern and Southern Region Community Health Center). DPHSS accomplishes its mission by ensuring the health and safety of the community through education, prevention, promotion and awareness. The Department oversees programs and services designed to improve the lives of citizens, seniors and visitors by:

- Encouraging healthy lifestyles;
- Preventing the transmission of communicable diseases;
- Promoting immunizations aimed at preventing and reducing the risk and incidence of vaccine-preventable diseases;
- Providing public assistance benefits through the Supplemental Nutrition Assistance Program, Medicaid and the Medically Indigent Program;
- Enforcing food safety at health-regulated establishments, and
- Administering elderly programs for our Manåmko'

#### **Number of DPHSS Employees: 429**



DGA - 19 DPH - 229 DEH - 25 DSC - 13 DPW - 143

#### DPHSS LEADERSHIP

Linda Unpingco DeNorcey, MPH *Director* 

Laurent F. Duenas, MPH, BSN, RN Deputy Director

Tommy Taitague Administrative Services Officer

M. Thomas Nadeau Chief Environmental Public Health Officer	1
Dr. Suzanne Kaneshiro <i>Chief Public Health Officer</i>	2

Ma. Theresa Arcangel Human Services Program Administrator

Arthur U. San Agustin, MHR Senior Citizens Administrator

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# **Our Progress**

#### DIVISION OF PUBLIC WELFARE

The total number of unduplicated clients served by the **Division of Public Welfare** for FY 2018 is **63,181.** This is 0.07 % lower than FY 2017 (**63,676**), and is 40% of the population of Guam based on FY 2010 actual Census of 159,358. This could be attributed to the increase in minimum wage and the decrease on the unemployment rate from 13% to 4%. Below is the total number of caseloads and eligibles under each program for FY 2018.

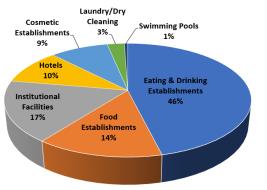
Program	Number of Caseloads	Number of Eligibles
Supplemental Nutrition Assistance Program (SNAP)	18,543	54,067
Cash Assistance Program (CAP)	3166	4,784
Medicaid	18,175	43,758
Medically Indigent Program (MIP)	5,907	11,039
Childcare Development Fund (CCDF)	1,008	2,174
Foster Care		225

#### **DIVISION OF ENVIRONMENTAL HEALTH**

The Processing Center Section of the **Division of Environmental Health** (DEH) issued the following:

- 3,247 Sanitary Permits;
- 28,918 Health Certificates;
- 570 Guam Controlled Substances Registration
- Certificates; and
- 21 Disinterment and 8 Disinterment-Reinterment Requests.

#### **DISTRIBUTION OF SANITATION INSPECTIONS IN FY 2018**



#### **DIVISION OF SENIOR CITIZENS**

Program Accomplishments (Clients Served)	FY 2018
Adult Day Care Services	137
Case Management Services	2,369
In-Home Services	414
Legal Assistance Services	179
Senior Center Operations	1,485
Transportation Services	757
Elderly Nutrition Congregate	1,125
Elderly Nutrition Home-Delivered	1,700
National Family Caregiver Support Program	254

#### **DIVISION OF PUBLIC HEALTH**

The Northern Region Community Health Center was recognized as a level 3 Patient Centered Medical Home on February 8, 2018 by the National Committee on Quality Assurance, the first and only local clinic in Guam to receive this recognition.

The Guam Comprehensive Cancer Control Program, through a grant from the Association of State and Territorial Health Officials, established the Guam Hypertension Prevention and Control Program (HPCP).

The program developed a pilot project that would focus on hypertensive patients by creating a holistic program that would effectively improve their hypertension status.

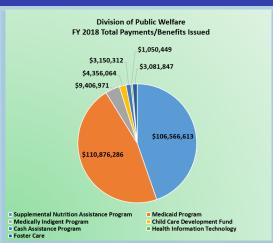
Public Law 34-01 which defined electronic nicotine delivery devices (ENDS, aka electronic-cigarettes) as a tobacco product, and increased the minimum legal age to access any tobacco product including ENDS to 21 years, took effect on January 1, 2018.



# **Our Finances**

Expenditures by Revenue	FY 2017	FY 2018
General Fund	\$46,098,470	\$53,554,866
Special Fund	16,466,073	16,725,009
100% Federal USDA	113,509,270	117,741,635
100% Federal DHHS	103,305,995	108,729,433
TOTAL:	\$279,379,808	\$296,750,943

Division/Bureau/Section	FY 2017 General Fund Expenditures	FY 2018 General Fund Expenditures
Office of the Director	\$770,392	\$908,967
Chief Public Health Office	\$314,578	\$410,715
Nutrition Services	\$50,400	\$213,805
Communicable Disease Control	\$1,695,936	\$991,473
Community Health Services	\$1,020	\$0
Primary Care Services	\$3 <i>,</i> 857	\$640,570
Family Health and Nursing	\$516,224	\$324,744
Physical Activity Action Team	\$23,391	\$8,031
Medically Indigent Program	\$9,319,850	\$9,130,562
Medicaid (Local Match)	\$28,420,939	\$24,654,652
Children's Health Insurance Program (Local Match)	\$2,584,089	\$2,782,065
Enhanced Allotment Plan (Local Match)	\$912,254	\$955,666
Foster Care	\$3,025,280	\$3,426,289
Division of Senior Citizens	\$8,114,447	\$7,378,193
Adult Protective Services	\$644,317	\$759,913
Division of Environmental Health	\$581,511	\$633,322
Financial Management Services	\$215,628	\$222,145
Supply Section	\$117,776	\$100,108
Management Support Services	\$166,779	\$212,700
Facilities and Maintenance	\$1,070,120	\$1,453,768
Systems Group	\$140,547	\$309,447



In FY 2018, the Division of Public Welfare's Program's (SNAP formerly, the Food Stamp Program) generated \$106,566,613; Medicaid generated \$110,876,286; Medically Indigent Program generated \$9,406,971; Child Care **Development Fund** generated \$4,356,064; Cash Assistance Program generated \$3,150,312; Health Information Technology generated \$1,050,449; Foster Care generated \$3,081,847; and the Division of Public Health's Women, Infants, and Children (WIC) Program generated \$9,256,725 into Guam's economy in the form of benefits issued. These programs offers assistance to low income individuals and families and provides economic benefits to communities.



GUAM

DPHSS receives the following funds: **General Funds.** Primary fund from the local government. **Federal Funds.** Grants from the US Department of Agriculture, US Department of Health and Human Services, Centers for Disease Control and Prevention, US Department of Interior and others. **Special Funds.** Consists of various programs that help fund the following: Community Health Centers, Health Professional Licenses, Health and Human Services, Controlled Substance, Environmental Health, and Healthy Futures. **Special Fund revenues are restricted to specific purposes**.

# **Moving Forward**

**Division of Public Health**: In an attempt to reduce the high tuberculosis (TB) case rates, Guam became the first program in the U.S. Affiliated Pacific Islands to adopt the use of asynchronous video Directly Observed Therapy (DOT), and provide scalable and patient-centered care to its population.



#### The PROBLEM

In 2017, the case rates of tuberculosis (TB) in Guam was 50.2 per 100,000 residents, compared to the mainland U.S. rate of 2.8 per 100,000 residents. While in-person directly observed therapy (DOT) has proven highly effective in reducing TB, concerns of both staff and stigma have previously limited success in this region.

#### The SOLUTION

Patients were enrolled in emocha using a list of comprehensive criteria, ranging from two weeks of previously completed in-person DOT to an understanding of the need for TB treatment. Confirmed doses were calculated based on the number of accepted videos during this period; staff time, gas, and total cumulative amount of driving time saved were additionally calculated.

#### The **RESULTS**

The program fostered a series of successes. The implementation of asynchronous video DOT not only increased staff capacity to perform DOT under constraints while maintaining high medication adherence and patient satisfaction, but also generated significant cost savings. The program has served as a model for other initiatives in the region, and demonstrated how emocha can potentially help with other conditions on the island, such as diabetes.

**Division of Environmental Health**: The Division of Environmental Health (DEH) was awarded a capital improvement project grant in the amount of \$3,077,000 from the U.S. Department of Interior (DOI), Office of Insular Affairs to construct a facility to house a training/lecture hall, processing center, and office space for DEH. The facility will be constructed adjacent to the existing Guam Environmental Public Health Laboratory in Dededo.

**Division of Public Welfare:** The *I Guma Mina'ase,* a \$1.4 million federally funded shelter for foster children is expected to be completed in September 2019. The construction for this project began in June 2017 and when completed, will feature a 6-bedroom, 4-bathroom, fully fenced facility with approximately 8,358 square feet of living area, 1,425 square feet of porch and patio, and 10,049 square meters of land. DPHSS continues to see increases in the number of children coming into the agency's protective custody as a result of abuse and neglect in their homes.

More sibling groups, in addition to larger numbers of siblings, have made placements difficult for many children due to the lack of foster parents on island. In June 2019, there were 270 foster children and there were only 38 licensed family foster homes, and 65 relative homes available for placements. There is one group home available but it can only take in a maximum of 12 children, and is always at full capacity. This new shelter is expected to help alleviate the shortage of foster placements on island by providing temporary 24-hour shelter and support services for Guam's foster children in a caring and nurturing environment.



#### WE WANT TO HEAR FROM YOU!

Do you like this report? Do you believe it should include more information? Please let us know by contacting: Ms. Linda Unpingco DeNorcey, MPH at linda.denorcey@dphss.guam.gov or 735-7102 or Ms. Laurent Duenas, MPH, BSN, RN at laurent.duenas@dphss.guam.gov or 735-7102 or Ms. Bertha Taijeron, Program Coordinator IV at bertha.taijeron@dphss.guam.gov or 735-7125. For additional information about the Department of Public Health and Social Services, please visit: www.dphss.guam.gov



# Fwd: Department of Public Health and Social Services FY 2018 Citizen Centric Report

1 message

Christian Rivera <crivera@guamopa.com> Mon, Aug 5, 2019 at 2:43 PM To: Clariza Roque <croque@guamopa.com>, Jerrick Hernandez <jhernandez@guamopa.com>, Michele Brillante <mbrillante@guamopa.com> Cc: Ira Palero <ipalero@guamopa.com>

Hello Mandates Committee,

Forwarding DPHSS FY 2018 CCR. Thank you!

------ Forwarded message ------From: Bertha A. Taijeron <Bertha.Taijeron@dphss.guam.gov> Date: Mon, Aug 5, 2019 at 2:22 PM Subject: Department of Public Health and Social Services FY 2018 Citizen Centric Report To: speaker@guamlegislature.org <speaker@guamlegislature.org>, admin@guamopa.com <admin@guamopa.com>, mbrillante@guamopa.com <mbrillante@guamopa.com>, clerks@guamlegislature.org <clerks@guamlegislature.org> Cc: Linda U. DeNorcey <Linda.DeNorcey@dphss.guam.gov>, Laurent Duenas <Laurent.Duenas@dphss.guam.gov>

Hafa Adai,

Please see attached the Department of Public Health and Social Services, Citizen Centric Report for Fiscal Year 2018 as mandated by PL 30-127.

If you have any questions or concerns, please feel free to contact me at 735-7125 or via email at bertha.taijeron@dphss.guam.gov

Thank you,

Bertha Taijeron Program Coordinator IV Division of General Administration

Department of Public Health and Social Services 123 Chalan Kareta

Mangilao, Guam 96913-6304 PH: (671) 735-7125 FAX: (671) 734-5910 Christian Rivera Accountability Auditor



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