

Strategic Plan FY 2022 – 2026

Every four years, HHS updates its Strategic Plan, which describes its work to address complex, multifaceted, and evolving health and human services issues. An agency strategic plan is one of three main elements required by the Government Performance and Results Act (GPRA) of 1993 (P.L. 103-62) and the GPRA Modernization Act of 2010 (P.L. 111-352). An agency strategic plan defines its mission, goals, and the means by which it will measure its progress in addressing specific national problems over a four-year period.

For the period FY 2022 - 2026, HHS is publishing its Strategic Plan as a Web document, which will be updated periodically to reflect the Department’s strategies, actions, and progress toward its goals. The Web version of the Strategic Plan, rather than focusing on a static set of performance measures, provides priorities, accomplishments, and next steps that are tracked and updated frequently, reinforcing the Strategic Plan’s function as a living, vital document that serves a genuine management purpose.

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U.S. Department of Health and Human Services (HHS)

Stakeholder(s):

Xavier Becerra :

Secretary, Health and Human Services

Underserved Communities :

In the context of HHS, this Strategic Plan adopts the definition of underserved communities listed in Executive Order 13985: Advancing Racial Equity and Support for Underserved Communities through the Federal Government to refer to “populations sharing a particular characteristic, as well as geographic communities, who have been systematically denied a full opportunity to participate in aspects of economic, social, and civic life”; this definition includes individuals who belong

to underserved communities that have been denied such treatment, such as Black, Latino, and Indigenous and Native American persons, Asian Americans and Pacific Islanders and other persons of color; members of religious minorities; lesbian, gay, bisexual, transgender, and queer (LGBTQ+) persons; persons with disabilities; persons who live in rural areas; and persons otherwise adversely affected by persistent poverty or inequality. Individuals may belong to more than one underserved community and face intersecting barriers. This definition applies to the terms underserved communities and underserved populations throughout this Strategic Plan.

Mission

To enhance the health and well-being of all Americans, by providing for effective health and human services and by fostering sound, sustained advances in the sciences underlying medicine, public health, and social services

Values

Equity

Engagement

Learning

Transparency

Accountability

Trust

1. Healthcare

Protect and Strengthen Equitable Access to High Quality and Affordable Healthcare

HHS works to protect and strengthen equitable access to high quality and affordable healthcare. Increasing choice, affordability and enrollment in high-quality healthcare coverage is a focus of the Department's efforts in addition to reducing costs, improving quality of healthcare services, and ensuring access to safe medical devices and drugs. HHS also works to expand equitable access to comprehensive, community-based, innovative, and culturally- and linguistically-appropriate healthcare services while addressing social determinants of health. The Department is driving the integration of behavioral health into the healthcare system to strengthen and expand access to mental health and substance use disorder treatment and recovery services for individuals and families. HHS also bolsters the health workforce to ensure delivery of quality services and care.

1.1. Choice, Affordability & Enrollment

Increase choice, affordability, and enrollment in high-quality healthcare coverage

HHS supports strategies to increase choice, affordability, and enrollment in high-quality healthcare coverage. HHS promotes available and affordable healthcare coverage to improve health outcomes in our communities and empowers consumers with high quality healthcare coverage choices. The Department also leverages knowledge and partnerships to increase enrollment in health insurance coverage.

Performance Goals ~ The HHS Annual Performance Plan provides information on the Department's measures of progress towards achieving the goals and objectives described in the HHS Strategic Plan for FY 2022–2026. Below are the related performance measures for this Objective.

Stakeholder(s):

Contributing OpDivs and StaffDivs :

ACL, AHRQ, ASPE, CMS, HRSA, and OASH work to achieve this objective. HHS OpDivs and StaffDivs engage and work with a broad range of partners and stakeholders to implement the strategies and achieve this Objective.

ACL

AHRQ

ASPE

CMS

HRSA

OASH

Performance Indicators

Performance Measure 1.1.1 Health Insurance Coverage

Description	Type	Status	Start Date	End Date
Improve availability and accessibility of health insurance coverage by increasing enrollment of eligible children in CHIP and Medicaid	Target	Available & Accessible		
	Actual			

Performance Measure 1.1.2 MEPS Tables

Description	Type	Status	Start Date	End Date	Number
Increase the number of tables per year added to the MEPS table series	Target	Increased			
	Actual				

Performance Measure 1.1.3 Patients Served

Description	Type	Start Date	End Date	Number
Number of patients served by health centers	Target			
	Actual			

Performance Measure 1.1.3 Patients below Threshold

Description	Type	Start Date	End Date	Percentage
Percentage of Health Center patients who are at or below 200 percent of poverty	Target			
	Actual			

Strategy 1.1.1. Outcomes

Promote available and affordable healthcare coverage to improve health outcomes in all communities, particularly those that are underserved

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Task 1.1.1.1. Outreach

Enhance and support outreach efforts to inform eligible individuals, of available affordable healthcare insurance options and related cost-saving opportunities, including premium and cost-sharing assistance programs.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Task 1.1.1.2. Coverage

Improve continuation of coverage and process for coverage transitions across Medicaid, the Children’s Health Insurance Program (CHIP), Medicare, and Marketplace plans.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Task 1.1.1.3. Territories

Provide support and assistance to the five U.S. Territories—American Samoa, the Commonwealth of the Northern Mariana Islands, Guam, Puerto Rico, and the U.S. Virgin Islands—to comply with federal requirements of the Affordable Care Act and Medicaid to meet the healthcare needs of their populations.

Stakeholder(s):

American Samoa

Guam

Commonwealth of the Northern Mariana Islands

Puerto Rico

U.S. Virgin Islands

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Strategy 1.1.2. Choices

Empower consumers with choices for high quality healthcare coverage

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.1.2.1. Transparency

Improve transparency of choice and access to available health coverage options, including Medicare, Medicaid, and Marketplace plans, for all consumers seeking or exploring coverage options.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.1.2.2. Partnerships & Collaborations

Promote partnerships and collaborations with states to provide and monitor equitable and timely access to Medicaid and CHIP providers and services.

Stakeholder(s):

States

CHIP Providers

Medicaid Providers

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.1.2.3. Eligibility, Screening & Literacy

Facilitate enhanced understanding of eligibility, improved screening, and health insurance literacy to bolster enrollment and coverage of underserved populations.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Strategy 1.1.3. Enrollment

Leverage knowledge and partnerships to increase health coverage enrollment

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.1.3.1. Technical Assistance

Support states, tribes, territories, grantees, faith-based organizations, and other federal award recipients through technical assistance and capacity building to expand pathways to high-quality healthcare coverage for all populations.

Stakeholder(s):

States

Grantees

Tribes

Faith-Based Organizations

Territories

Federal Award Recipients

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.1.3.2. Capacity

Build the capacity of organizations to navigate the changing healthcare landscape to better support their clients to access and use their health coverage to improve health outcomes.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.1.3.3. Monitoring

Monitor enrollment and retention of eligible individuals in Medicaid, CHIP, Qualified Health Plans through the Marketplace, and the individual and small group market broadly to improve enrollment in high-quality comprehensive coverage and reduce health disparities.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.1.3.4. Research

Support research, including the application of findings and lessons learned, related to the cost effectiveness and affordability of insurance coverage for diverse populations.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

1.2. Services, Devices & Drugs

Reduce costs, improve quality of healthcare services, and ensure access to safe medical devices and drugs

HHS supports strategies to reduce costs, improve quality of healthcare services, and ensure access to safe medical devices and drugs for everyone. HHS develops and implements payment models in partnership with healthcare providers and establishes other incentives to improve quality care while reducing healthcare spending. HHS implements and assesses approaches to improve healthcare quality, and address disparities in healthcare quality, treatment, and outcomes. The Department also improves patient safety, strengthens access to safe and effective medical products and devices, and expands approaches to safely exchange information among patients, providers, and payers.

Performance Goals ~ The HHS Annual Performance Plan provides information on the Department’s measures of progress towards achieving the goals and objectives described in the HHS Strategic Plan for FY 2022–2026. Below are the related performance measures for this Objective.

Stakeholder(s):

Contributing OpDivs and StaffDivs :

AHRQ, ASPE, CDC, CMS, FDA, HRSA, IHS, NIH, OASH, ONC, and SAMHSA work to achieve this objective. HHS OpDivs and StaffDivs engage and work with a broad range of partners and stakeholders to implement the strategies and achieve this Objective. They include: the Accelerating Medicines Partnership (AMP), Advisory Commission on Childhood Vaccines, Advisory Committee on Immunization Practices (ACIP), American Indian/Alaska Native Center, Bespoke Gene Therapy Consortium, FDA CDER Professional Affairs and Stakeholder Engagement, Materials Genome Initiative, Medicaid and CHIP (MAC) Learning Collaboratives, Mutual Recognition Initiative, National Advisory Council (NAC), National Vaccine Advisory Committee (NVAC), Regenerative Medicine Innovation Project (RMIP), and World Health Organization Member State Mechanism.

- AHRQ**
- ASPE**
- CDC**
- CMS**
- FDA**
- HRSA**
- IHS**
- NIH**
- OASH**
- ONC**
- SAMHSA**

Performance Indicators

Performance Measure 1.2.1 Drug Costs

Description	Type	Status	Start Date	End Date
Reduce the average out-of-pocket share of prescription drug costs while in the Medicare Part D Prescription Drug Benefit coverage gap for non-Low Income Subsidy (LIS) Medicare beneficiaries who reach the gap and have no supplemental coverage in the gap	Target	Reduced		
	Actual			

Performance Measure 1.2.2 APM Dollars

Description	Type	Status	Start Date	End Date	Percentage
Increase the percentage of Medicare healthcare dollars tied to Alternate Payment Models (APMs) incorporating downside risk	Target	Increased			
	Actual				

Performance Measure 1.2.3 ANDA Actions

Description	Type	Status	Start Date	End Date	Percentage
Review and act on 90 percent of standard original Abbreviated New Drug Application (ANDA) submissions within 10 months of receipt	Target				90
	Actual				

Performance Measure 1.2.4 Resources & Tools

Description	Type	Start Date	End Date	Number
Increase the cumulative number of evidence-based resources and tools available to improve the quality of healthcare and reduce the risk of patient harm	Target			Increased
	Actual			

Performance Measure 1.2.5 Healthcare Centers

Description	Type	Start Date	End Date	Percentage
Percentage of health centers with at least one site recognized as a patient centered medical home	Target			
	Actual			

Performance Measure 1.2.6 Communities

Description	Type	Status	Start Date	End Date	Number
Increase the number of communities that have access to tele-behavioral health services where access did not exist in the community prior to Telehealth Network Grant Program grant	Target	Increased			
	Actual				

Performance Measure 1.2.7 Service Sites

Description	Type	Status	Start Date	End Date	Number
For the Title X program, number of service sites that participate in the program	Target				
	Actual				

Strategy 1.2.1. Payments & Incentives

Partner with providers to develop payment models and other incentives to expand options for quality care at lower costs

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.2.1.1. Recruitment

Collaborate with states, community-based organizations, and other stakeholders to design innovative, targeted, value-based payment models to increase recruitment of providers that care for predominantly underserved populations and provide them with support to improve their awareness of the benefits of alternative payment models that aim to decrease health inequities.

Stakeholder(s):

States

Community-Based Organizations

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.2.1.2. Delivery

Partner with private payers, states, and other regional healthcare organizations to move primary care providers away from fee-for-service and into payment models that support the delivery of effective, comprehensive, patient-centered care for their patients through the testing of models that reward providers for delivering high-quality care, improve health outcomes, and advance health equity.

Stakeholder(s):

Private Payers

Regional Healthcare Organizations

States

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.2.1.3. Value

Support states' efforts to shift toward more value-based payments in their Medicaid and Children's Health Insurance Program (CHIP) Programs.

Stakeholder(s):

States

Children's Health Insurance Program (CHIP) Programs

Medicaid Programs

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.2.1.4. Metrics

Partner with states and external quality measure development experts to define and encourage use of a core set of metrics to measure provider effectiveness in Medicaid, CHIP, and pay-for-performance programs, including reliable metrics of access to care, gaps in care, disparities, health equity, and achieving positive outcomes for all populations.

Stakeholder(s):

States

Quality Measure Development Experts

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Strategy 1.2.2. Quality & Disparities

Implement and assess approaches to improve healthcare quality, and address disparities in healthcare quality, treatment, services, and outcomes

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.2.2.1. Culture & Linguistics

Promote and support implementation of the National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care by health professionals, health systems and organizations and in HHS programs to improve the quality of care and reduce health disparities by ensuring the provision of services that are respectful of and responsive to individuals’ health needs, preferences, culture, and preferred language.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.2.2.2. Metrics

Improve healthcare quality by defining and tracking progress on core clinical measures that target high-priority health conditions and services, such as cancer, chronic disease, prenatal care, HIV screening, antimicrobial resistance, and immunizations.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.2.2.3. Clinical Decisions

Better understand the barriers and obstacles to using clinical decision support tools that improve health outcomes in healthcare settings.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.2.2.4. Equity

Implement equity impact strategies to support data-driven quality improvement approaches to identify and address health disparities in access to, use of, and outcomes from programs and policies among underserved populations.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.2.2.5. Disparities & Barriers

Assess treatment and service utilization to identify disparities in and barriers to access to effective, appropriate, and quality treatment and services for underserved populations, and implement policies to address identified disparities while assessing progress made toward narrowing the gap.

Stakeholder(s):

Underserved Populations

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.2.2.6. Telehealth & Telemedicine

Support research and evaluation of expanded use and availability of telehealth and telemedicine, including effects on quality, access, costs, reimbursement, and care outcomes and harms, to inform the long-term approach to using telehealth and to improve access to care for underserved populations.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.2.2.7. Quality

Engage stakeholders from underserved populations to provide opportunities for input to inform program and policy efforts to improve healthcare quality.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.2.2.8. Consultation

Engage in Tribal and Urban Indian Organization consultation and confer on what improving quality healthcare services mean.

Stakeholder(s):

Tribes

Urban Indian Organizations

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Strategy 1.2.3. Safety

Strengthen patient safety improvements and access to affordable medications and medical products to reduce spending for consumers and throughout the healthcare system

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.2.3.1. Risks, Hazards & Harm

Collaborate with partners and stakeholders to identify, design, implement, evaluate, and sustain patient safety improvements that address patient risks, hazards, and harm.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.2.3.2. Research

Support patient safety research to prevent threats to patient safety including healthcare-associated infections.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.2.3.3. Drugs, Biologics & Devices

Improve access to safe and effective prescription drugs, biologics, and medical devices, and lower costs by promoting generic and biosimilar competition, developing over-the-counter medical products, and providing discounts on medicines to safety-net hospitals and clinics.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.2.3.4. Products

Ensure equitable, adequate, and continued access to safe and effective medical products by developing novel approaches to increase domestic manufacturing capacity, agility, and efficiency, including through partnerships.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.2.3.5. Supply Chains

Ensure continued access to safe medical devices and drugs by assessing the role of foreign and U.S. supply chains in addressing shortages of drugs, medical devices, or required ingredients and components, and providing options for strengthening and improving coordination of global supply chain systems.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.2.3.6. Innovation

Foster innovation by supporting public-private research and prioritizing payment and service delivery models that test ways to reduce program and beneficiary spending on prescription drugs, support increased utilization of biosimilars and generic drugs, and lower overall spending while improving quality and beneficiary health.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Strategy 1.2.4. Information Exchange

Expand approaches to safely and securely exchange health information between patients, providers, and payers

Tactic 1.2.4.1 Enable individuals to access their health information by ensuring they can view and interact with their data via secure mobile apps, patient portals, and other technologies. Promote interoperability and data sharing through consensus-based standards to ensure health information, including social determinants of health information, is available for care across settings, public health, research, and emergency and disaster preparedness, response, and recovery.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

1.3. Access

Expand equitable access to comprehensive, community-based, innovative, and culturally-competent healthcare services while addressing social determinants of health

HHS invests in strategies to expand equitable access to comprehensive, community-based, innovative, and culturally- and linguistically-appropriate healthcare services while addressing social determinants of health. HHS supports community-based healthcare services to meet the diverse healthcare needs of underserved populations while removing barriers to access to advance health equity and reduce disparities. The Department also works to understand how to best address social determinants of health in its programs.

Performance Goals The HHS Annual Performance Plan provides information on the Department's measures of progress towards achieving the goals and objectives described in the HHS Strategic Plan for FY 2022–2026. Below are the related performance measures for this Objective.

Stakeholder(s):

Contributing OpDivs and StaffDivs :
ACL, AHRQ, ASPE, CDC, CMS, HRSA, IHS, NIH, SAMHSA, OASH, and OCR work to achieve this objective.

ACL

AHRQ

ASPE

CDC

CMS

HRSA

IHS

NIH

SAMHSA

OASH

OCR

HHS Partners :

HHS OpDivs and StaffDivs engage and work with a broad range of partners and stakeholders to implement the strategies and achieve this Objective. They include:

Advisory Committee on HIV, Viral Hepatitis and STD Prevention and Treatment

Advisory Committee on Heritable Disorders in Newborns and Children

Advisory Committee on Infant Mortality

Advisory Committee on Minority Health

Advisory Committee on Organ Transplantation

Advisory Council on Blood Stem Cell Transplantation

Cross Federal Workgroup on Telehealth

— continued next page

Stakeholders (continued)

Federal Partners Workgroup to Improve Maternal Health

Federal Sudden Infant Death Syndrome/ Sudden Unexpected/Unexplained Infant Death Workgroup

HHS Language Access Steering Committee

Interdepartmental Health Equity Collaborative

National Advisory Committee on Rural Health and Human Services

National Advisory Council on Migrant Health

National Advisory Council on the National Health Service Corps

National Committee on Heroin, Opioids, and Pain Efforts

Presidential Advisory Commission on Asian Americans, Native Hawaiians, and Pacific Islanders

White House Initiative on Asian Americans

Native Hawaiians, and Pacific Islanders

U.S. Department of Veterans Affairs

Performance Indicators

Performance Measure 1.3.1 Health Activities

Description	Type	Status	Start Date	End Date	Number
Total number of IHS public health activities captured by the Public Health Nursing (PHN) data system; emphasis on primary, secondary, and tertiary prevention activities to individuals, families, and community groups	Target				
	Actual				

Performance Measure 1.3.2 Underserved Population

Description	Type	Status	Start Date	End Date	Percentage
Percentage of underserved population accessing mental health and substance use services	Target				
	Actual				

Performance Measure 1.3.3 Vulnerable People at Home

Description	Type	Status	Start Date	End Date	Likelihood
Increase the likelihood that the most vulnerable people receiving Older Americans Act Home and Community-based and Caregiver Support Services will continue to live in their homes and communities	Target	Increased			
	Actual				

Performance Measure 1.3.4 Prenatal Care Patients

Description	Type	Status	Start Date	End Date	Percentage
Percentage of pregnant health center patients beginning prenatal care in the first trimester	Target				
	Actual				

Performance Measure 1.3.5 Compliance Reviews

Description	Type	Status	Start Date	End Date
In collaboration with FEMA and DHS, OCR (Agencies) will conduct compliance reviews of select state COVID-19 vaccine provider programs to determine whether their services are being provided free of discrimination on the basis of race or national origin (including limited English proficient (LEP) persons and communities)	Target	Conducted		
	Actual			

Strategy 1.3.1. Healthcare

Support community-based services to meet the diverse healthcare needs of underserved populations

Stakeholder(s):

Underserved Populations

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.3.1.1. Primary Healthcare

Deliver safe, equitable, affordable, accessible, quality, value-based primary healthcare to underserved populations through health centers and other community providers.

Stakeholder(s):

Underserved Populations

Community Providers

Health Centers

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.3.1.2. COVID-19

Address COVID-19 related health disparities and advance health equity by expanding state, tribal, local, territorial, and freely associated state health department capacity and services to improve and increase testing, vaccination, contact tracing and treatment to prevent and control COVID-19 infection or transmission.

Stakeholder(s):**State Health Departments****Territorial Health Departments****Tribal Health Departments****Freely Associated State Health Departments****Local Health Departments****Performance Indicators**

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.3.1.3. Women

Ensure the provision of safe, culturally- and linguistically-appropriate care and services for women, with dedicated focus on African American/Black and American Indian/Alaska Native women and people with lower incomes, during maternal, prenatal, perinatal, and postpartum periods of life, including raised awareness of pregnancy-related risk factors and available benefits.

Stakeholder(s):**Women****American Indian/Alaska Native Women****African American/Black Native Women****People with Lower Incomes****Performance Indicators**

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.3.1.4. Pre- & Post-Natal Care

Work with tribal nations and Urban Indian Health programs to expand and improve pre- and post-natal care on Indian reservations and Urban Indian centers to reduce disparities in maternal and infant mortality and morbidity.

Stakeholder(s):**Tribal Nations****Indian Reservations****Urban Indian Health Programs****Urban Indian Centers****Performance Indicators**

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.3.1.5. Care & Treatment

Promote partnerships to implement programs and outreach that focus on raising awareness and rapidly linking affected individuals to relevant care and treatment services, including persons harmed by substance use disorders, and persons with HIV.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.3.1.6. Pregnancy

Promote linkages to treatment and interventions aimed at reducing exposure and excessive use of alcohol and other substances to achieve healthier outcomes, including optimal pregnancy outcomes.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.3.1.7. Oral Healthcare

Expand access to oral healthcare, including diagnostic, preventive, and restorative services, and healthcare settings that provide oral healthcare, and promote collaborative practices to integrate oral health and primary care to improve health outcomes.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.3.1.8. Sexual & Reproductive Health

Continue to expand equitable access to quality sexual and reproductive health services, including family planning services.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.3.1.9. Rural Areas

Continue to promote and support programs that invest in rural collaborations and encourage efforts designed to improve rural healthcare system capacity and infrastructure to facilitate delivery of equitable healthcare services that can comprehensively address the health, social, and economic needs of a wide range of population groups.

Stakeholder(s):
Rural Areas

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.3.1.10. Transplants

Extend and enhance the lives of individuals in all communities through improving equitable access to safe organ transplantation, bone marrow transplants, and cord blood transplants.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.3.1.11. Telehealth

Improve access to community-based care by supporting appropriate retention of telehealth flexibilities implemented for the COVID-19 pandemic, increasing access to broadband, and providing technical assistance, training and information for patients and providers on the use of telehealth technologies.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.3.1.12. Technology

Facilitate the delivery of technology-based interventions and innovations, including the development and dissemination of electronic health record standards, to enable interoperable data exchange across health and community service providers and emerging artificial intelligence solutions to improve care management.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Strategy 1.3.2. Equity & Disparities

Remove barriers to healthcare access to advance health equity and reduce disparities

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.3.2.1. Culture & Linguistics

Build capacity of resource centers, healthcare organizations and the health workforce to reduce health and healthcare disparities, including cultural competence capacity to provide culturally and linguistically appropriate services (CLAS).

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.3.2.2. CLAS Standards

Promote adoption of national CLAS standards to enable providers to demonstrate cultural humility through self-awareness and communicate in ways that consider the cultural, health literacy, and language access services needs of their patients.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.3.2.3. Patient Safety

In collaboration with private and non-profit organizations, develop patient safety bundles and decision aids like protocols and checklists for health conditions that disproportionately affect underserved populations and work with national accreditation organizations to promote their use in clinics across the nation.

Stakeholder(s):

Patients

Private Organizations

Underserved Populations

Non-Profit Organizations

National Accreditation Organizations

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.3.2.4. Causes & Risks

Collect, use, and monitor data on the prevalence, causes, and risks of social, environmental, and biological conditions, and establish partnerships between healthcare providers and community-based social service organizations to address social determinants of health.

Stakeholder(s):

Healthcare Providers

Community-Based Social Service Organizations

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.3.2.5. Action Plans

Support state, local, tribal, and territorial jurisdictions to develop multi-sector action plans to address social determinants of health, in sectors such as housing, transportation, and social services, and accelerate actions that lead to improved chronic disease outcomes among persons experiencing health disparities and inequities in communities with the poorest health outcomes.

Stakeholder(s):

State Jurisdictions

Tribal Jurisdictions

Local Jurisdictions

Territorial Jurisdictions

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.3.2.6. Individuals with Disabilities

Collaborate with providers, health plans, patient advocates for people with disabilities, and other healthcare stakeholders to identify and remove barriers that individuals with disabilities face in accessing current and new services, procedures, and coverage.

Stakeholder(s):

Individuals with Disabilities

Health Plans

Providers

Patient Advocates

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.3.2.7. Housing

Increase access to affordable, accessible housing, and other services that address unmet social needs that contribute to poor health outcomes and reduce unnecessary healthcare expenditures through the HHS and U.S. Department of Housing and Urban Development housing partnership and other partnerships.

Stakeholder(s):

U.S. Department of Housing and Urban Development

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.3.2.8. Planning & Implementation

Engage community members to provide input to plan and implement services and programs and conduct participatory research to ensure that activities are tailored and responsive to community needs.

Stakeholder(s):

Community Members

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Strategy 1.3.3. Social Determinants

Understand barriers to access and the impacts of social determinants of health to develop evidence-based community-based healthcare service delivery models

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.3.3.1. Data

Expand efforts to collect data that improves understanding of the social determinants of health and their implications for delivering equitable and effective health, public health, and human service programs.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.3.3.2. Delivery Models

Partner with healthcare organizations, healthcare providers, social service organizations, and other organizations to identify, develop and implement evidence-based community-based healthcare service delivery models to support whole person integrated and coordinated care to improve physical health and behavioral health outcomes

Stakeholder(s):

Communities

Healthcare Providers

Healthcare Organizations

Social Service Organizations

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.3.3.3. Community-Based Service

Support community-based participatory research, and other research approaches, to examine and improve the effectiveness of community-based service delivery models, in improving health outcomes across populations, including collecting and stratifying data based on race, ethnicity, national origin (including primary language), sex, sexual orientation, gender identity, and pregnancy, age, disability status, and other population variables.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.3.3.4. Telehealth

Support research on telehealth to answer questions related to how it affects access, equity, quality, and costs of care, including for underserved populations.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

1.4. Behavioral Health

Drive the integration of behavioral health into the healthcare system to strengthen and expand access to mental health and substance use disorder treatment and recovery services for individuals and families

HHS supports strategies to drive the integration of behavioral health into the healthcare system to strengthen and expand access to mental health and substance use disorder treatment and recovery services for individuals and families across all settings. HHS is enhancing the ability to serve those in need of behavioral health services by exchanging data, information, and resources while expanding evidence-based integrated systems of behavioral and physical healthcare to improve equitable access to quality care. HHS is also engaging and educating healthcare providers, healthcare professionals, paraprofessionals, other health workforce professionals, and students in these professions to build their practice competence and capacity to address the behavioral and physical health needs of individuals, families, caregivers, and communities.

Performance Goals ~ The HHS Annual Performance Plan provides information on the Department’s measures of progress towards achieving the goals and objectives described in the HHS Strategic Plan for FY 2022–2026. Below are the related performance measures for this Objective.

Stakeholder(s):

Contributing OpDivs and StaffDivs :
ACL, ASPE, AHRQ, CDC, CMS, FDA, HRSA, IHS, NIH, OASH, OCR, OGA, and SAMHSA work to achieve this objective.

- ACL**
- ASPE**
- AHRQ**
- CDC**
- CMS**
- FDA**
- HRSA**
- IHS**
- NIH**
- OASH**
- OCR**
- OGA**

SAMHSA

HHS Partners :
HHS OpDivs and StaffDivs engage and work with a broad range of partners and stakeholders to implement the strategies and achieve this Objective. They include:

- Duke Margolis Center for Health Policy**
- National Drug Control Strategy Recovery Chapter**
- Opioid Rapid Response Program (ORRP) Interagency Collaboration**
- Reagan-Udall Foundation**
- Substance Abuse and Mental Health Service Administration Technical Advisory Committee**

Performance Indicators

Performance Measure 1.4.1 People Trained

Description	Type	Status	Start Date	End Date	Number
Number of people trained for the support of the recovery community organizations and peer support networks	Target				
	Actual				

Performance Measure 1.4.2 Data Available

Description	Type	Status	Start Date	End Date	Amount
Increase the cumulative amount of publicly available data on 1) Opioid-Related Hospital Use, 2) 900 Neonatal Abstinence Syndrome (NAS), and 3) outpatient use of opioids	Target	Increased			
	Actual				

Performance Measure 1.4.3 Providers

Description	Type	Status	Start Date	End Date	Number
Number of providers who have provided Medication-Assisted Treatment	Target				
	Actual				

Performance Measure 1.4.4 Events

Description	Type	Status	Start Date	End Date	Number
Number of outreach events to provide training and technical assistance to healthcare providers, healthcare professionals, and paraprofessionals on providing healthcare services free of disability discrimination against persons receiving medication assisted treatment (MAT) for substance abuse disorder and on protecting the confidentiality and care coordination of behavioral health through HIPAA	Target				
	Actual				

Strategy 1.4.1. Cost & Quality

Strengthen a fragmented behavioral and physical health system to reduce costs, enhance quality care and patient and consumer experience, and improve mental health and substance use disorder outcomes for individuals, families, and caregivers

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.4.1.1. Policy Levers

Use existing policy levers to encourage clinically-effective integrated care models (e.g., financial incentives to support multidisciplinary team care or co-location of services.)

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.4.1.2. Access

Increase equitable access to care, including bi-directional integration, where physical and behavioral health providers coordinate and deliver care, wrap-around services, and expand telehealth options.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.4.1.3. Science, Data & Evidence

Examine how science, data, and evidence support and inform programs and policies across HHS that prioritize behavioral and physical health integration.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Strategy 1.4.2. Integrated Systems

Expand evidence-based integrated systems of behavioral and physical healthcare to improve equitable access to quality care

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.4.2.1. Crisis Services

Assist states and communities with the development and implementation of effective 365/24/7 crisis services and systems, including quick, easy, and reliable access to emotional support and crisis counselling, community-based mobile crisis intervention services, and community-based crisis stabilization services outside of emergency care settings.

Stakeholder(s):

States

Communities

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.4.2.2. Payment Models

Expand payment models to support integration of behavioral health and physical healthcare to include other qualified provider types and modalities, including telehealth, across HHS healthcare programs and public payers.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.4.2.3. Care Models

Support states, tribal, local, territorial, and rural communities to access and develop resources and processes to facilitate wider use of effective evidence-based integrated care models.

Stakeholder(s):

States

Territorial Communities

Tribal Communities

Rural Communities

Local Communities

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.4.2.4. Educational Resources

Promote the development of effective educational resources and dissemination approaches to improve public understanding of mental and substance use disorders and when to seek treatment, with a focus on efforts to effectively address overdose death, death by suicide, and non-fatal self-harm.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Strategy 1.4.3. Integrated Health

Connect physical health and behavioral health communities to enhance the ability to serve those in need of integrated health services by exchanging data, information, and resources

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.4.3.1. Performance Measures

Facilitate collaborations with health officials, behavioral health authorities, and national provider networks to develop sustainable activities and pathways to integration with common performance measures that help to achieve standards of excellence in integrated care.

Stakeholder(s):

Health Officials

National Provider Networks

Behavioral Health Authorities

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.4.3.2. E-Health Records

Identify opportunities to expand linkage and use of electronic health records and other related data to identify unmet needs and help improve access, equity, quality, and value.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.4.3.3. Evidence & Best Practices

Promote research to build the evidence base and inform best practices, including implementation science research to support the scaling up of effective models to identify and treat behavioral and physical health issues of individuals in all healthcare settings, including primary care.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.4.3.4. Diversity & Equity

Strengthen health equity research to highlight the diversity of populations, communities and researchers and to ensure that evidence-based treatments are available across race, ethnicity, national origin (including primary language), sex, sexual orientation, gender identity, pregnancy, geographic location, and other demographics

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Strategy 1.4.4. Competence & Capacity

Engage and educate healthcare providers, healthcare professionals, paraprofessionals, other health workforce professionals, and students in these professions to build their practice competence and capacity to address the mental health and substance use disorder needs of individuals, families, and communities

Stakeholder(s):

Healthcare Providers

Health Workforce Professionals

Healthcare Professionals

Students

Healthcare Paraprofessionals

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.4.4.1. Interdisciplinary Care

Support a health workforce including community health workers and peer support specialists knowledgeable in behavioral and physical health interdisciplinary care.

Stakeholder(s):

Health Workforce

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.4.4.2. Physical Health

Enhance the capacity of physical health providers to assess, screen, and treat behavioral health conditions by increasing access to treatments for substance use disorders and other disorders and assisting behavioral health providers to coordinate with individuals, families, caregivers, and communities on physical health needs.

Stakeholder(s):

Physical Health Providers

Families

Behavioral Health Providers

Caregivers

Individuals

Communities

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

1.5. Workforce

Bolster the health workforce to ensure delivery of quality services and care

HHS supports strategies to bolster the health workforce to ensure delivery of quality services and care. HHS is committed to facilitating coordinated efforts to address long-standing barriers to strengthening the health workforce. HHS efforts focus on developing professional development opportunities to learn and use new skills to improve the delivery of quality services and care. HHS is also strengthening the integration of culturally- and linguistically-appropriate and effective care into the services delivered by the health workforce.

Performance Goals ~ The HHS Annual Performance Plan provides information on the Department’s measures of progress towards achieving the goals and objectives described in the HHS Strategic Plan for FY 2022–2026. Below are the related performance measures for this Objective.

Stakeholder(s):

Health Workforce

Contributing OpDivs and StaffDivs :
AHRQ, ASPE, CDC, CMS, FDA, HRSA, IHS, OASH, OGA, and SAMHSA work to achieve this objective.

- AHRQ**
- ASPE**
- CDC**
- CMS**
- FDA**
- HRSA**
- IHS**
- OASH**
- OGA**

SAMHSA

HHS Partners :
HHS OpDivs and StaffDivs engage and work with a broad range of partners and stakeholders to implement the strategies and achieve this Objective. They include:

- Advisory Committee on Interdisciplinary Community Based Linkages**
- Advisory Committee on Training in Primary Care Medicine and Dentistry**
- Council on Graduate Medical Education**
- National Advisory Council on the National Health Service Corps**
- National Advisory Council on Nursing Education and Practice**

Performance Indicators

Performance Measure 1.5.1 Training Sites

Description	Type	Status	Start Date	End Date	Percentage
Percent of clinical training sites that provide interprofessional training to individuals enrolled in a primary care training program	Target				
	Actual				

Performance Measure 1.5.2 Individuals Supported

Description	Type	Status	Start Date	End Date	Percentage
Percent of individuals supported by the Bureau of Health Workforce who completed a primary care training program and are currently employed in underserved areas	Target				
	Actual				

Performance Measure 1.5.3 Officer Growth

Description	Type	Status	Start Date	End Date	Percentage
Percent growth of USPHS Ready Reserve Officers Year-over-Year (or total officers)	Target				
	Actual				

Strategy 1.5.1. Health Workforce

Facilitate coordinated efforts to address long-standing barriers to strengthening the health workforce

Stakeholder(s):

Health Workforce

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.5.1. Health Workforce Strategic Plan

Fully implement the HHS Health Workforce Strategic Plan to expand the health workforce supply to meet evolving community needs, while strengthening and diversifying the health workforce, improve the distribution of the health workforce to reduce shortages, enhance healthcare quality through professional development, collaboration, and evidence-informed practice, and promote evidence-based healthcare practice.

This plan, defines the health workforce as follows: the occupations include all healthcare providers with direct patient care and support responsibilities, such as: physicians (including primary care physicians, preventive

medicine physicians, and specialty physicians), nurses, nurse practitioners, optometrists, physician assistants, pharmacists, dentists, dental hygienists, and other oral healthcare professionals, allied health professionals, doctors of chiropractic, community health workers, healthcare paraprofessionals, direct support professionals, psychologists and other behavioral and mental health professionals (including substance abuse prevention and treatment providers), social workers, physical and occupational therapists, certified nurse midwives, podiatrists, the EMS workforce (including professional and volunteer ambulance personnel and firefighters who perform emergency medical services), licensed complementary and alternative medicine providers, integrative health practitioners, public health professionals, and any other health professional that the Comptroller General of the United States determines appropriate.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Strategy 1.5.2. Learning & Training

Develop and promote opportunities to learn and use new skills to improve the delivery of quality services and care

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.5.2.1. Global Efforts

Engage multilaterally and bilaterally, including through policy leadership and technical expertise, to advance global efforts to protect and invest in the health workforce.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.5.2.2. Medicaid & CHIP

Partner with states to develop an access strategy to ensure ample high-quality providers to serve Medicaid and the Children’s Health Insurance Program (CHIP) beneficiaries.

Stakeholder(s):

States

Children’s Health Insurance Program (CHIP)

Medicaid

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.5.2.3. Access, Quality & Outcomes

Strengthen the capacity of community health workers (CHWs), community health aid programs (CHAPs), community health representatives (CHRs) to promote access to services, improve the quality and cultural competence of service delivery, and improve health outcomes by establishing partnerships with other federal departments to encourage use of CHWs in community response.

Stakeholder(s):

Federal Departments

Community Health Aid Programs (CHAPs)

Communities

Community Health Representatives (CHRs)

Community Health Workers (CHWs)

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.5.2.4. People with Disabilities

Partner with healthcare organizations, community partners, and other stakeholders to strengthen training to ensure the healthcare workforce can proactively deliver accessible tailored care to people with disabilities.

Stakeholder(s):

People with Disabilities

Healthcare Organizations

Healthcare Workforce

Community Partners

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.5.2.5. Emergency Medical Services

Provide support and training at the local level for increased use and availability of community emergency medical services workforce to reduce the use of 911 for routine care, reduce the strain on emergency rooms, and mitigate the spread of the Coronavirus Disease 2019 (COVID-19) and other infections.

Stakeholder(s):

Emergency Medical Services Workforce

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.5.2.6. Best Practices

Develop and disseminate resources and support convenings to help the health workforce increase its understanding of and access to evidence-informed best practices that improve quality of care and outcomes.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.5.2.7. Standards

Support national standards for state, tribal, and local health departments.

Stakeholder(s):

State Health Departments

Local Health Departments

Tribal Health Departments

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.5.2.8. Occupational Health & Safety

Support academic degree programs and research training opportunities in occupational health nursing, occupational medicine, and related areas to provide qualified personnel to work in industry, labor, academia, and government to improve occupational health and safety for the U.S. workforce.

Stakeholder(s):

U.S. Workforce

Academia

Industry

Government

Labor

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Strategy 1.5.3. Culture & Linguistics

Strengthen the integration of culturally- and linguistically-appropriate and effective care into the services delivered by the health workforce

Stakeholder(s):

Health Workforce

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.5.3.1. Training

Partner with states, Federally Qualified Health Centers (FQHC), clinics, colleges, universities, and schools, other community based organizations and the private sector to ensure the health workforce is appropriately and adequately trained with culturally-appropriate, evidence-based strategies and education modules for addressing systemic bias and racism, ableism, ageism, and transphobia to reduce health disparities in the communities they serve.

Stakeholder(s):

Health Workforce

Universities

States

Schools

Federally Qualified Health Centers (FQHC)

Community-Based Organizations

Clinics

Private Sector

Colleges

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.5.3.2. Training, Assistance & CLAS

Coordinate with grant recipients and other funded partners to support training, technical assistance, and use of the National Standards for Culturally and Linguistically Appropriate Services (CLAS) in health and healthcare and cultural humility as foundations for effective and equitable provision of healthcare.

Stakeholder(s):

Grant Recipients

Funded Partners

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 1.5.3.3. Equity & Inclusion

Promote equity and inclusion, including as it relates to race, ethnicity, disability, gender, gender identity, and sexual orientation, in global commitments, resolutions, and strategies affecting the global health workforce.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

2. Health Conditions & Outcomes

Safeguard and Improve National and Global Health Conditions and Outcomes

HHS is dedicated to safeguarding and improving health conditions and health outcomes for everyone. The Department improves capabilities to predict, prevent, prepare for, respond to, and recover from disasters, public health and medical emergencies, and threats, domestically and abroad. The Department protects individuals, families, and communities from infectious disease and prevent non-communicable disease through the development and equitable delivery of effective, innovative, readily available, treatments, therapeutics, medical devices, and vaccines. HHS enhances the promotion of healthy behaviors to reduce occurrence and disparities in preventable injury, illness, and death. The Department also mitigates the impacts of environmental factors, including climate change, on health outcomes.

2.1. Disasters, Emergencies & Threats

Improve capabilities to predict, prevent, prepare for, respond to, and recover from disasters, public health and medical emergencies, and threats across the nation and globe

HHS invests in strategies to predict, prevent, prepare for, respond to, and recover from emergencies, disasters, and threats. HHS leverages opportunities to improve collaboration and coordination, to build capacity and foster readiness for effective emergency and disaster response. HHS advances comprehensive planning for mitigation and response. HHS also applies knowledge gained from the effective and efficient use and application of technology, data, and research to improve preparedness and health and human services outcomes during emergencies and disasters.

Performance Goals ~ The HHS Annual Performance Plan provides information on the Department's measures of progress towards achieving the goals and objectives described in the HHS Strategic Plan for FY 2022–2026. Below are the related performance measures for this Objective.

Stakeholder(s):

Contributing OpDivs and StaffDivs :

ACF, ACL, ASPE, ASPR, ATSDR, CDC, CMS, FDA, HRSA, IHS, NIH, OASH, OCR, OGA, and ONC work to achieve this objective.

ACF

ACL

ASPE

ASPR

ATSDR

CDC

CMS

FDA

HRSA

IHS

NIH

OASH

OCR

OGA

ONC

HHS Partners :

HHS OpDivs and StaffDivs engage and work with a broad range of partners and stakeholders to implement the strategies and achieve this Objective. They include

Centers of Excellence in Regulatory Science and Innovation (CERSI) :

Cooperative Agreement Grant Program

Combating Antibiotic-Resistant Bacteria Biopharmaceutical Accelerator (CARB-X) :

Joint Oversight Committee

Domestic Mutual Reliance

European Medicines Agency (EMA) :

COVID-19

Expert Committee on Biological Standardization

Department of Defense (DoD) :

[MOU 225-19-001]

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Stakeholders (continued)

HHS Public Health Emergency Medical Countermeasures Enterprise

(PHEMCE) :

[MOU 225-13-0028]

FDA :

[MOU 225-19-001] [MOU 225-13-0028] [MOU 225-21-006]

National Institute of Standards and Technology :

[MOU 225-21-006]

Food Emergency Response Network (FERN)

Forum on Medical and Public Health Preparedness for Disasters and Emergencies

Global Polio Eradication Initiative

Global Regulatory Harmonization and Convergence

Interagency Board for Emergency Preparedness and Response

International Coalition of Medicines Regulatory Authorities (ICMRA)

Measles & Rubella Initiative (M&RI)

National Integrated Food Safety System (IFSS)

One Health

Pediatric Cluster

Rapid Response Teams

US-Canada Regulatory Cooperation Council (RCC)

WHO Collaborating Centres for Biological Standardization

Performance Indicators

Performance Measure 2.1.1 Countermeasures

Description	Type	Status	Start Date	End Date	Number
Increase the number of new licensed medical countermeasures across BARDA programs	Target	Increased			
	Actual				

Performance Measure 2.1.2 FETP Graduates

Description	Type	Status	Start Date	End Date	Number
Number of cumulative Field Epidemiology Training Program (FETP) - Frontline graduates	Target				
	Actual				

Performance Measure 2.1.3 Funding Pathway

Description	Type	Status	Start Date	End Date
By 2026, establish a formalized funding pathway for the development, validation, and regulatory review of diagnostic technologies to enhance surveillance and pandemic preparedness	Target	Established		
	Actual			

Performance Measure 2.1.4 Antivirals

Description	Type	Status	Start Date	End Date	Number
By 2026, advance the preclinical or clinical development of 10 antivirals for current or future infectious disease threats	Target	Advanced			10
	Actual				

Strategy 2.1.1. Collaboration & Coordination

Leverage opportunities for improved collaboration and coordination to strengthen capacity for effective emergency and disaster readiness, response, and recovery

Expand and build HHS support and assistance to state, tribal, local, and territorial partners, and communities to strengthen the capacity and resilience of public health departments and laboratory operations and facilities to meet needs and demand during response and recovery efforts. Strengthen the coordination between domestic and international stakeholders and modernization of programs, policies, guidance, and funding mechanisms to support robust emergency and disaster response planning, infrastructure, and capabilities, including disaster human services capabilities. Foster collaboration between key partners and stakeholders at the federal, state, tribal, local, and territorial levels, including partner organizations like the Federal Emergency Management Agency, private sector organizations, and global partners like the World Health Organization to increase awareness of opportunities to develop integrated guidance and plans as well as fill gaps in service and critical functions necessary to better anticipate, identify, and promptly respond to threats, emergencies, and disasters.

Address health disparities and promote trust, and community resilience, especially for underserved communities disproportionately affected by emergencies, by improving engagement and collaboration across federal, state, tribal, local, and territorial stakeholders and community organizations, and with relevant international partners, ensuring response efforts are informed by health and human services equity principles. Focus resources on developing the capacity of the HHS emergency response workforce through effective training and technical assistance to improve the Department's readiness to meet the needs and demands of all communities they support during emergency response and recovery efforts.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Strategy 2.1.2. Mitigation & Response

Plan for mitigation and response, including the communication and dissemination of information, the development and availability of medical countermeasures, and the use of regulatory flexibilities

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 2.1.2.1. Countermeasures

Advance the development and availability of safe effective medical countermeasures to support preparedness and response efforts, and maximize their effective use by providing comprehensive and accessible guidance and public health communications to critical partners, including distribution and response networks, academic partners, hospital systems, clinical organizations, and the public.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 2.1.2.2. Supply Chain

Build a diverse, agile U.S. public health supply chain while sustaining long-term domestic manufacturing capability for medical countermeasures and medical products to reduce and prevent shortages and ensure continuous supply during times of need.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 2.1.2.3. Waivers & Systems

Ensure that HHS is prepared to make effective use of available waiver options and systems in place to expand and maximize flexibilities when a public health emergency is declared, ensuring response efforts can scale to readily support communities.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 2.1.2.4. Flexibilities

Facilitate communication and coordination with public and private partners to leverage existing flexibilities and make new flexibilities available for the benefit of response efforts during a public health emergencies and disasters.

Stakeholder(s):

Public Partners

Private Partners

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 2.1.2.5. Partnerships

Leverage and expand partnerships with state, tribal, local, and territorial partners and community-based, faith-based, and non-profit organizations as well as international partners to generate and disseminate risk communication and outreach materials that are evidence-based and culturally appropriate to improve awareness, knowledge, and uptake of mitigation measures during emergencies and disasters.

Stakeholder(s):

State Partners

Community-Based Organizations

Tribal Partners

Faith-Based Organizations

Local Partners

Non-Profit Organizations

Territorial Partners

International Partners

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 2.1.2.6. Communications

Disseminate consistent and plain language communications to ensure affected individuals and communities, including those living or working in high-risk areas, are notified in a timely, culturally-tailored manner to minimize risk and ensure their safety.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 2.1.2.7. PHIB

Ensure the resilience of the public health industrial base (PHIB) supply chain with improvements in the robustness, visibility and agility of the supply chain in coordination with interagency and private sector partners; wherein robustness includes broadening domestic manufacturing capacity and diversification of sources, visibility includes increased transparency and mapping of PHIB supply chains, and agility is an improved flexibility and responsiveness of actors in the system.

Stakeholder(s):

Public Health Industrial Base (PHIB)

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Strategy 2.1.3. Technology, Data & Research

Apply lessons learned from the use and application of technology, data, and research to improve preparedness and health and human services outcomes during emergencies and disasters

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 2.1.3.1. Data

Enhance research, analytic, and learning capabilities through more efficient, accurate, and trusted collection, application, and integration of data from new and existing data streams across a series of disciplines, including demographic, environmental, genetic or genomic, biomedical, economic, geospatial, and ecological data, to better understand health impacts of emergencies and disasters.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 2.1.3.2. Surveillance & Monitoring

Improve coordination and collaboration efforts with federal, state, tribal, local, territorial, and international partners to enhance integrated surveillance and monitoring capacity to ensure equity in emergency response planning, coordination, and delivery and sustaining global health security.

Stakeholder(s):

Federal Partners

Local Partners

State Partners

Territorial Partners

Tribal Partners

International Partners

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 2.1.3.3. IT

Invest in modernizing information technology infrastructure to foster data sharing and interoperability across systems in coordination with partners to ensure data insights are representative, actionable, and readily available to decisionmakers and researchers before, during, and after an emergency or disaster to inform preparedness, response, and forecasting.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 2.1.3.4. Countermeasures & Equipment

Leverage data collection, monitoring, and reporting systems, including critical demographic data, to improve the production, availability, and equitable supply of necessary countermeasures and medical equipment, including Personal Protective Equipment (PPE), when they are needed during emergencies and disasters.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 2.1.3.5. Health Impacts

Provide training, education, and technical assistance to foster a multidisciplinary cadre of culturally-appropriate public health and research professionals to conduct studies to better understand the human health impacts, including mental health, of public health emergencies and disasters, especially among especially among groups that are disproportionately affected.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 2.1.3.6. Medical Countermeasures

Support innovative research and development for medical countermeasures, including clinical trials, and data integration capabilities to better prepare for and support safe and healthy outcomes during emergencies and disasters.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

2.2. Diseases

Protect individuals, families, and communities from infectious disease and non-communicable disease through equitable access to effective, innovative, readily available diagnostics, treatments, therapeutics, medical devices, and vaccines

HHS is working on strategies to protect the public from known and emerging infectious diseases and prevent non-communicable diseases, including cardiovascular diseases, cancer, diabetes, and other chronic conditions. HHS advances the development and delivery of safe and effective, and innovative diagnostics, treatments, therapeutics, medical devices, and vaccines. HHS invests in innovative technology and development to ensure the supply and availability of diagnostics, treatments, therapeutics, medical devices, and vaccines while leveraging resources and collaborations to support and apply research, evaluation, and data insights about non-communicable and infectious disease.

Performance Goals ~ The HHS Annual Performance Plan provides information on the Department's measures of progress towards achieving the goals and objectives described in the HHS Strategic Plan for FY 2022–2026. Below are the related performance measures for this Objective.

Stakeholder(s):

Individuals

Families

Communities

Contributing OpDivs and StaffDivs :
AHRQ, ASPR, CDC, CMS, FDA, HRSA, IHS, NIH, OASH, and OGA work to achieve this objective.

AHRQ

ASPR

CDC

CMS

FDA

HRSA

IHS

NIH

OASH

OGA

HHS Partners :

HHS OpDivs and StaffDivs engage and work with a broad range of partners and stakeholders to im-

plement the strategies and achieve this Objective. They include:

Antimicrobial Resistance/National Antimicrobial Resistance Monitoring System (NARMS)

Board of Scientific Counselors

Deputy Director for Infectious Diseases

Healthcare Infection Control Practices Advisory Committee (HICPAC)

Partnership for Food Protection (PFP)

Public Health Emergency Medical Countermeasures Enterprise (PHEMCE)

Retail Food Flexible Funding Model Cooperative Agreement Program (CAP)

Retail Food Safety Regulatory Association Collaborative

State Produce Implementation Cooperative Agreement Program (CAP)

Performance Indicators

Performance Measure 2.2.1 Vaccinated Adults

Description	Type	Status	Start Date	End Date	Percentage
Increase the percentage of adults aged 18 years and older who are vaccinated annually against seasonal influenza	Target	Increased			
	Actual				

Performance Measure 2.2.2 HIV/AIDS Program Clients

Description	Type	Status	Start Date	End Date	Percentage
Percentage of Ryan White HIV/AIDS Program clients receiving HIV medical care and at least one viral load test who are virally suppressed	Target				
	Actual				

Performance Measure 2.2.3 Influenza R&D

Description	Type	Status	Start Date	End Date
Continue advanced research and development initiatives for more effective influenza vaccines and the development of safe and broad-spectrum therapeutics for use in seriously ill and/or hospitalized patients, including pediatric patients	Target	Continued		
	Actual			

Performance Measure 2.2.4 Vaccination Rates

Description	Type	Status	Start Date	End Date
Influenza vaccination rates among adult American Indian and Alaska Native patients 18 years and older	Target			
	Actual			

Strategy 2.2.1. Safety & Effectiveness

Develop and deliver evidenced-based safe and effective, testing, treatments, therapeutics, medical devices, vaccines, and prevention strategies

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 2.2.1.1. Diagnostics & Prevention

Mobilize resources and collaborations, including domestic, international, and public-private partnerships to support the research, development, testing, manufacture, and equitable distribution of safe and effective prevention strategies, diagnostics, vaccines, therapeutics, and medical devices for non-communicable and infectious disease.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 2.2.1.2. Vaccinations

Increase collaboration with domestic and international partners, including community-based organizations, to improve confidence in vaccines and vaccination uptake rates, especially among disproportionately affected populations.

Stakeholder(s):

Domestic Partners

Community-Based Organizations

International Partners

Disproportionately Affected Populations

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 2.2.1.3. Immunization

Build and support sustainable immunization programs, and capacity at local, national, regional, and global levels to better prevent and respond to disease-specific challenges and meet disease eradication, elimination, and control targets.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 2.2.1.4. Interventions, Treatments & Therapeutics

Support evidence-based healthcare delivery models and engage stakeholders across public health and healthcare systems to increase the use of safe and effective interventions, treatments, and therapeutics through education, outreach, diagnostic and antibiotic stewardship, and other approaches in diverse patient populations, including tribal and territorial communities.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 2.2.1.5. Antimicrobials

Leverage partnerships and communication networks throughout state, tribal, local, and territorial communities to promote appropriate use of antimicrobials and antimicrobial stewardship across all healthcare and veterinary settings.

Stakeholder(s):

Healthcare Industry

Veterinarians

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 2.2.1.6. Foods

Foster and leverage partnerships with key stakeholders throughout the food production, manufacturing, storage, and distribution enterprise, as well as tribal and Urban Indian Organization partners, to promote and implement science-based preventive control standards for contamination of domestic and imported foods.

Stakeholder(s):

Food Producers

Distribution Enterprises

Manufacturers

Tribes

Storage Enterprises

Urban Indian Organizations

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Strategy 2.2.2. Technology

Invest in innovative technology and development to ensure supply and availability of safe and effective diagnostics, treatments, therapeutics, medical products and devices, and vaccines

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 2.2.2.1. Products

Support the development of new, safe, and effective medical products with improved delivery characteristics, such as easier storage conditions, longer shelf-life, and reduced dosing, for the treatment, prevention, and diagnosis of non-communicable and infectious diseases.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 2.2.2.2. Technologies

Support the application and use of innovative technologies, including mobilizing industry to advance manufacturing (including flexible on demand and point-of-care manufacturing) and artificial intelligence to accelerate research and manufacturing, to improve quality, address shortages, and speed time-to-market for new diagnostics, treatments, therapeutics, medical products, and vaccines.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 2.2.2.3. Diseases

Advance the research and development of accessible, point of care diagnostic testing to detect non-communicable and infectious diseases to ensure that timely, safe, and effective treatments and therapeutics can be delivered equitably to all communities when needed, including underserved communities, tribes, and territories.

Stakeholder(s):

Communities

Tribes

Underserved Communities

Territories

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Strategy 2.2.3. Research, Evaluation & Data

Leverage resources and collaborations to support and apply research, evaluation, and data insights about non-communicable and infectious disease

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 2.2.3.1. Chronic Conditions

Engage in research to better understand the overall disease burden and effective strategies for intervention and improved quality of life associated with chronic conditions.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 2.2.3.2. Partnerships

Build and maintain partnerships, including federal, non-federal, academic and industry partnerships, to promote the development, implementation, evaluation, and availability of vaccines and other treatments to combat antimicrobial resistance and microbial threats.

Stakeholder(s):**Federal Partners****Academic Partners****Non-Federal Partners****Industry Partners****Performance Indicators**

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 2.2.3.3. Data

Invest in data analysis, research, and evaluation efforts, including opportunities for data sharing and linkages, to better understand the burden of disease in a variety of industry and occupation settings and further the development and implementation of vaccines for high-burden diseases and diseases with epidemic or pandemic potential.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 2.2.3.4. Prevention & Mitigation

Support the availability and evaluate the effectiveness of prevention and mitigation measures—including engineering controls, administrative controls, and personal protective equipment—in workplaces across all industry sectors, including those with social, economic, and/or environmental disadvantages that elevate risk and exposure.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 2.2.3.5. Vaccines

Conduct vaccine safety monitoring and clinical research to keep vaccines safe and provide compensation to people who have been injured by specific vaccines.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 2.2.3.6. Supply Chains

Improve the ability to monitor supply chain shortages and proactively prevent them by improved transparency and data sharing among state, local, tribal, and territorial governments, industry, and federal partners—ensuring supplies are distributed on a priority basis.

Stakeholder(s):

State Governments

Territorial Governments

Local Governments

Industry

Tribal Governments

Federal Partners

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

2.3. Behaviors

Enhance promotion of healthy behaviors to reduce occurrence of and disparities in preventable injury, illness, and death

HHS supports strategies to promote healthy behaviors to reduce the occurrence of and disparities in preventable injury, illness, and death. The Department develops, communicates, and disseminates information to improve health literacy about the benefits of healthy behaviors. HHS leverages resources, partnerships, and collabor-

ations to support healthy behaviors that improve health conditions and reduce disparities in health outcomes. HHS also advances and applies research and data insights to inform evidence-based prevention, intervention, and policy approaches to address disparities in preventable injury, illness, and death.

Performance Goals The HHS Annual Performance Plan provides information on the Department's measures of progress towards achieving the goals and objectives described in the HHS Strategic Plan for FY 2022–2026. Below are the related performance measures for this Objective.

Stakeholder(s):

Contributing OpDivs and StaffDivs :

AHRQ, ACF, ACL, ASFR, CDC, CMS, FDA, HRSA, IHS, NIH, OASH, and SAMHSA work to achieve this objective.

AHRQ

ACF

ACL

ASFR

CDC

CMS

FDA

HRSA

IHS

NIH

OASH

SAMHSA

HHS Partners :

HHS OpDivs and StaffDivs engage and work with a broad range of partners and stakeholders to implement the strategies and achieve this Objective. They include: the

Disease, Disability, and Injury Prevention and Control Special Emphasis Panel

Injury Prevention in AI/AN Communities

Interagency Committee on Smoking and Health

National Center for Injury Prevention and Control Board of Scientific Counselors

National Organizations of State and Local Officials Cooperative Agreement

National Youth Tobacco Survey (NYTS)

Native American Research Centers for Health (NARCH)

Population Assessment of Tobacco and Health (PATH)

Tobacco Regulatory Science Program (TRSP)

Performance Indicators

Performance Measure 2.3.1 Tobacco Consumption

Description	Type	Status	Start Date	End Date
Reduce the annual adult per-capita combustible tobacco consumption in the United States	Target	Reduced		
	Actual			

Performance Measure 2.3.2 Exercising Adults

Description	Type	Status	Start Date	End Date	Percentage
Increase the proportion of adults (age 18 and older) that engage in leisure-time physical activity	Target	Increased			
	Actual				

Performance Measure 2.3.3 Blood Pressure Patients

Description	Type	Status	Start Date	End Date	Percentage
Percentage of adult health center patients with diagnosed hypertension whose blood pressure is under adequate control	Target				
	Actual				

Performance Measure 2.3.4 Diabetes Patients

Description	Type	Status	Start Date	End Date	Percentage
Percentage of adult health center patients with type 1 or 2 diabetes with most recent hemoglobin A1c (HbA1c) under control (less than or equal to nine percent)	Target				
	Actual				

Strategy 2.3.1. Health Literacy

Develop, communicate, and disseminate information to improve health literacy about the benefits of healthy behaviors

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 2.3.1.1. Mothers, Infants & Children

Enhance maternal, infant, and child health through promotion of healthy dietary and physical activity patterns and guidelines while reducing exposure to contaminants and environmental risks, including foodborne pathogens and toxic elements in foods, during pregnancy and in early childhood, particularly in underserved populations.

Stakeholder(s):**Mothers****Children****Infants****Performance Indicators**

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 2.3.1.2. Alcohol & Tobacco

Continue to develop targeted public awareness and education for youth and adults about the risks and dangers posed by tobacco products, including e-cigarettes and other electronic nicotine delivery systems, and alcohol, to discourage use, while promoting the availability of cessation programs and supports to minimize harm.

Stakeholder(s):**Youth****Adults****Performance Indicators**

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 2.3.1.3. Mental & Behavioral Health

Expand public awareness and education of mental and behavioral health services including the availability of services for prevention of, treatment of, and recovery support for substance use disorders.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 2.3.1.4. Information & Interventions

Support and improve the dissemination and accessibility of information and interventions related to physical activity, healthy eating, food deserts, food insecurity, nutrition, and nutrition labeling to reduce the incidence of related health conditions and chronic diseases.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 2.3.1.5. Injuries

Educate the public on best practices and approaches for mitigating and reducing preventable injury in sports and other physical activities, such as concussions and related injuries, including preventable injury in children and youth sports.

Stakeholder(s):

Children

Youth

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 2.3.1.6. Information & Understanding

Ensure the public is informed and understands the prevalence, causes, consequences, and risk of social, environmental, behavioral and biological conditions, including related impacts on healthcare costs among underserved populations.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Strategy 2.3.2. Behaviors

Leverage resources, partnerships, and collaborations to support healthy behaviors that improve health conditions and reduce disparities in health outcomes

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 2.3.2.1. Opioids

Maximize partnerships with states, community-based organizations, and healthcare organizations to improve safe opioid prescribing and reduce harm by leveraging naloxone distribution, syringe services programs, and integrated service delivery for co-occurring conditions.

Stakeholder(s):

States

Healthcare Organizations

Community-Based Organizations

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 2.3.2.2. Substance Use

Collaborate with states, tribes, and community-based organizations to develop and implement tailored prevention and intervention efforts aimed at addressing substance use challenges faced by adults and youth through evidence-based education and programs.

Stakeholder(s):

Adults

Tribes

Youth

Community-Based Organizations

States

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 2.3.2.3. Mental Health & Substance Abuse

Enhance collaborative efforts with states and community and faith-based organizations to raise awareness of mental health and substance use disorders and reduce barriers and increase access to effective prevention programs and treatments, including telemedicine, healthcare integration, and community- and school-based care.

Stakeholder(s):

States

Faith-Based Organizations

Community Organizations

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 2.3.2.4. Interpersonal & Emotional Skills

Support partnerships and collaborations to enhance the promotion of interpersonal and emotional skills among children, youth, and adolescents and to prevent adverse childhood experiences, suicide, substance use, and youth violence in communities by supporting the implementation and evaluation of evidence-based programs, including interventions related to health promotion, socioemotional learning, and teen pregnancy.

Stakeholder(s):

Children

Adolescents

Youth

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 2.3.2.5. Health Disparities

Partner with states, tribes, local, and territorial communities, including private and non-profit organizations, to expand tailored prevention education and interventions to reduce health disparities, focusing efforts in addressing disparities in injury, substance use and misuse, illness, morbidity, and mortality rates in underserved populations.

Stakeholder(s):

Underserved Populations

Territorial Communities

States

Private Organizations

Tribes Communities

Non-Profit Organizations

Local Communities

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 2.3.2.6. Culture & Education

Engage state level, regional, tribal, territorial, and local providers, programs, and organizations—including medical practitioners, Breastfeeding Coalitions, the Supplemental Nutritional Assistance Program (SNAP), and the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)—to develop cultural competence training and education materials for healthcare providers who provide services to maternal, perinatal, and postpartum populations, and groups that have been economically and socially marginalized.

Stakeholder(s):

States

Local Providers

Regional Providers

Medical Practitioners

Tribal Providers

Breastfeeding Coalitions

Territorial Providers

— continued next page

Stakeholders (continued)

Supplemental Nutritional Assistance Program (SNAP)

Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 2.3.2.7. Nutrition

Coordinate federal interagency efforts and target resources aimed at increasing the utilization of the Dietary Guidelines for Americans to inform federal nutrition programs and initiatives, including the development of science-based nutrition education initiatives, with a particular focus on efforts that address disparities in health and food access.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Strategy 2.3.3. Prevention

Apply research and data insights to inform evidence-based prevention, intervention, and policy approaches to address disparities in preventable injury, illness, and death

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 2.3.3.1. Trends & Disparities

Support, enhance, and coordinate research and surveillance efforts to improve identification of key trends and disparities in preventable injury, illness, and death at the national and sub-national levels to inform evidence-based interventions aimed at reducing health disparities.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 2.3.3.2. Equity

Advance health equity through regulatory efforts, where appropriate, and research efforts that utilize implementation science concepts and methods to better integrate effective, evidence-based interventions and actions to reduce substance use, tobacco use, obesity, and promote nutrition, blood pressure control, and physical activity across all populations.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 2.3.3.3. Social Determinants & Behaviors

Support interdisciplinary and innovative research to enhance our understanding of how social, built, and natural environments affect the social determinants of health and inform culturally appropriate evidence-based treatments and supports to improve healthy behaviors in community settings for populations with health disparities.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 2.3.3.4. Prevention & Intervention

Leverage and promote partnerships and collaborations, including public-private partnerships, to support implementation science and research application in the development and implementation of prevention and intervention approaches.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 2.3.3.5. Eating Choices

Promote research to effectively characterize and understand the interactions among the demographic, behavioral, lifestyle, social, cultural, economic, occupational, and environmental factors that influence healthy eating choices in diverse population groups.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

2.4. Environmental Factors

Mitigate the impacts of environmental factors, including climate change, on health outcomes

HHS invests in strategies to mitigate the impacts of environmental factors, including climate change, on health outcomes. HHS detects, investigates, forecasts, monitors, responds to, prevents, and aids in recovery from environmental and hazardous public health threats and their health effects. HHS promotes cross-disciplinary and multi-stakeholder coordination to improve the outcomes of climate change and environmental exposures on workers, communities, and domestic and international systems. Additionally, HHS expands awareness and increases knowledge of environmental hazards and actions that individuals and communities can take to reduce negative health outcomes.

Performance Goals ~ The HHS Annual Performance Plan provides information on the Department’s measures of progress towards achieving the goals and objectives described in the HHS Strategic Plan for FY 2022–2026. Below are the related performance measures for this Objective.

Stakeholder(s):

Contributing OpDivs and StaffDivs :
ASPR, ATSDR, CDC, CMS, FDA, HRSA, IHS, NIH, OASH, OCR, and OGA work to achieve this objective.

- ASPR**
- ATSDR**
- CDC**
- CMS**
- FDA**
- HRSA**
- IHS**
- NIH**
- OASH**

OCR
OGA

HHS Partners :
HHS OpDivs and StaffDivs engage and work with a broad range of partners and stakeholders to implement the strategies and achieve this Objective. They include:

- Food Waste Reduction**
- President's Task Force on Environmental Health Risks and Safety Risks to Children**
- U.S. Global Change Research Program**
- White House Environmental Justice Interagency Council**

Performance Indicators

Performance Measure 2.4.1 Health Actions

Description	Type	Status	Start Date	End Date	Number
Number of public health actions undertaken (using Environmental Health Tracking data) that prevent or control potential adverse health effects from environmental exposures	Target				
	Actual				

Performance Measure 2.4.2 Training & Resources

Description	Type	Status	Start Date	End Date
Increase training and resources to address the access and functional needs of electricity and healthcare service-dependent at-risk individuals who live independently and are impacted by incidents, emergencies, and disasters	Target	Increased		
	Actual			

Performance Measure 2.4.3 Compliance Review & Resolution

Description	Type	Status	Start Date	End Date
By FY 2026, OCR will conduct a Title VI Environmental Justice/Public Health compliance review and undertake any needed steps for resolution	Target	Steps Taken		
	Actual			

Strategy 2.4.1. Changes & Threats

Expand ability to predict, monitor, prevent, respond to, and recover from health impacts of environmental changes and threats, including utilizing a One Health approach

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 2.4.1.1. Preparation, Mitigation & Adaptation

Develop, use, and evaluate analytical, prevention and control tools and models to accurately forecast, prepare for, mitigate, and adapt to environmental and occupational hazards or climate change impacts, including those related to the agricultural ecosystem that have public health implications, including the effects of wind, rainfall, drought, and fire and the impacts on animal populations, the microbial make-up of soil and water, and land use.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 2.4.1.2. Changes

Expand disease surveillance systems, environmental health data collection, and predictive modeling capabilities, and integrate such environmental health data with data from other scientific disciplines (e.g., geoscience, agricultural, land use, animal sciences, and behavioral and social science) to detect changes in risk, incidence, and distribution over time, including environmental impacts on workers and industries, and underserved communities.

Stakeholder(s):

Workers

Underserved Communities

Industries

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 2.4.1.3. Health Outcomes

Conduct and support research on the impacts of current and emerging environmental exposures, risk factors, environmental and hazardous public health threats, and climate change to increase understanding of health outcomes on individuals and communities at the national and international level.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 2.4.1.4. Policies & Strategies

Translate research findings into the adoption of health policies and evidence-based strategies to prevent environmental and climate change exposures, address health inequities, prepare for and adapt to health risks, and improve health outcomes.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 2.4.1.5. Issues

Enhance collaborations with federal partners and international agriculture, environmental and other sector entities to better address recurring and anticipated issues associated with food production, safety, and availability, food-related disease and mortality, including under-nutrition, infectious and non-communicable diseases, and diarrheal- and vector borne diseases and maternal and child health.

Stakeholder(s):

Federal Partners

International Environmental Sector Entities

International Agriculture Sector Entities

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Strategy 2.4.2. Health Threats

Promote coordination among sectors and levels of government and multi-disciplinary and multi-stakeholder approaches to protect people from health threats arising from climate change and environmental and occupational exposures

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 2.4.2.1. Resilience & Sustainability

Facilitate research, collaboration, and implementation efforts between public and private healthcare system stakeholders to make healthcare delivery more environmentally sustainable and more resilient to the threats of natural disasters, including extreme weather events, thereby reducing costs and risks from disruption of healthcare operations.

Stakeholder(s):

Public Healthcare System Stakeholders

Private Healthcare System Stakeholders

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 2.4.2.2. Understanding & Interventions

Support multidisciplinary teams, prioritizing engagement of community stakeholders in affected communities at all stages of environmental and climate change health research and program implementation, to develop intervention strategies and gain understanding of the factors that make those strategies successful and replicable.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 2.4.2.3. Research, Capacity & Programming

Establish partnerships with federal agencies, state, local, territorial health departments, tribal nations, academic institutions, and community- and faith-based organizations, leveraging environmental health expertise and local capabilities, to conduct environmental, occupational, and climate change health research, build the capacity of impacted communities, and implement programming to reduce the health risks of environmental hazards.

Stakeholder(s):

Federal Agencies

Tribal Nations

State Health Departments

Academic Institutions

Local Health Departments

Community-Based Organizations

Territorial Health Departments

Faith-Based Organizations

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Strategy 2.4.3. Environmental & Occupational Hazards

Expand awareness and knowledge of environmental and occupational hazards to inform actions individuals and communities can take to reduce negative health outcomes

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 2.4.3.1. Networks & Tools

Build networks and develop tools to educate health providers, employers, workers, and communities about the environmental hazards, including climate change, that impact their local health outcomes and actions to mitigate and manage those impacts.

Stakeholder(s):

Health Providers

Workers

Employers

Communities

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 2.4.3.2. Collaborations

Develop and sustain formal and informal collaborations within and across HHS Divisions, other federal agencies, global health entities, and a wide range of partners to address environmental threats and climate change.

Stakeholder(s):

HHS Divisions

Global Health Entities

Federal Agencies

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

3. Well-being, Equity & Resilience

Strengthen Social Well-being, Equity, and Economic Resilience

HHS works to strengthen the economic and social well-being of Americans across the lifespan. HHS provides effective and innovative pathways leading to equitable economic success for all individuals and families. The Department strengthens early childhood development and expands opportunities to help children and youth thrive equitably within their families and communities. HHS expands access to high-quality services and resources for older adults and people with disabilities, and their caregivers to support increased independence and quality of life. HHS also increases safeguards to empower families and communities to prevent and respond to neglect, abuse, and violence, while supporting those who have experienced trauma or violence.

3.1. Economic Success

Provide effective and innovative pathways leading to equitable economic success for all individuals and families

HHS invests in strategies to provide effective and innovative pathways that lead to equitable economic success for all individuals and families. HHS facilitates system enhancements and partnerships across the federal government to coordinate resources and technical assistance to individuals and families hoping to achieve and sustain economic independence.

Performance Goals ~ The HHS Annual Performance Plan provides information on the Department's measures of progress towards achieving the goals and objectives described in the HHS Strategic Plan for FY 2022–2026. Below are the related performance measures for this Objective.

Stakeholder(s):

Individuals

Families

:
Contributing OpDivs and StaffDivs ACF, ACL, ASPE, CDC, CMS, HRSA, IHS, OASH, and OCR work to achieve this objective.

ACF

ACL

ASPE

CDC

CMS

HRSA

IHS

OASH

OCR

HHS Partners :

HHS OpDivs and StaffDivs engage and work with a broad range of partners and stakeholders to implement the strategies and achieve this Objective. They include:

Interagency Council on Economic Mobility and Investing with Families Initiative

Department of Labor :

collaborating on the Workforce Innovation and Opportunity Act

Departments of Education :

collaborating on the Workforce Innovation and Opportunity Act

Performance Indicators

Performance Measure 3.1.1 Energy Burden Reduction

Description	Type	Status	Start Date	End Date	Score
Increase energy burden reduction index score for high burden households	Target	Increased			
	Actual				

Performance Measure 3.1.2 Assistance Terminations

Description	Type	Status	Start Date	End Date	Percentage
Increase the percent of cash assistance terminations due to earned income from employment for those clients receiving cash assistance at employment entry	Target	Increased			
	Actual				

Performance Measure 3.1.3 Self-Sufficient Refugees

Description	Type	Status	Start Date	End Date	Percentage
Increase the percentage of refugees who are self-sufficient (not dependent on any cash assistance) within the first six months (180 days) of the service period	Target	Increased			
	Actual				

Performance Measure 3.1.4 Child Support Orders

Description	Type	Status	Start Date	End Date	Percentage
Increase the percentage of IV-D (child support) cases having support orders	Target	Increased			
	Actual				

Performance Measure 3.1.5 MOE Funds

Description	Type	Status	Start Date	End Date	Percentage
Increase the median state share of federal TANF and state maintenance-of-effort (MOE) funds used for work, education, and training activities	Target	Increased			
	Actual				

Strategy 3.1.1. Resources & Technical Assistance

Facilitate system enhancements and partnerships across the federal government to coordinate resources and technical assistance to individuals and families hoping to achieve and sustain economic independence

Stakeholder(s):

Individuals

Families

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.1.1.1. Safety Net

Build state, tribe, and territorial capacity to expand safety net program coverage, enforce Section 504 of the Rehabilitation Act, streamline eligibility determination, and improve enrollment in order to provide effective assistance to address the economic conditions of underserved populations.

Stakeholder(s):

State

Territories

Tribes

Underserved Populations

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.1.1.2. Persons with Disabilities

Expand access to persons with disabilities to HHS funded and administered programs through effective communications and accommodations as required by Section 504 of the Rehabilitation Act of 1973 and Title II of the Americans with Disabilities Act.

Stakeholder(s):

Persons with Disabilities

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.1.1.3. Collaboration

Encourage states to collaborate with tribes and across programs and systems so that individuals and families hoping to achieve economic security have access to income and housing support, safe and nutritious foods, health insurance, education, and training as well as work supports, such as child care and transportation.

Stakeholder(s):

States

Tribes

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.1.1.4. Social Determinants

Apply knowledge and best practices to help grantees and partners provide services that focus on social determinants of health and factors that affect economic mobility.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.1.1.5. Immigration & Naturalization

Support naturalization among refugees and inclusion efforts, as called for in the Executive Order 14012: Restoring Faith in Our Legal Immigration Systems and Strengthening Integration and Inclusion Efforts for New Americans, by reducing barriers to the legal immigration system.

Stakeholder(s):

Refugees

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.1.1.6. Data & Research

Enable research use of data collected through federal funded programs to accelerate the production of evidence on factors affecting refugees' resettlement outcomes, including refugee youth outcomes.

Stakeholder(s):

Young Refugees

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.1.1.7. Self-Sufficiency

Invest in low-income, tribal, and communities of color through funding opportunities to promote social and economic self-sufficiency to lessen economic inequalities.

Stakeholder(s):

Low-Income Communities

Communities of Color

Tribal Communities

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.1.1.8. Services

Expand access to culturally- and linguistically-appropriate employability, economic development, education, and support services for vulnerable refugee populations, through specialized programming and collaboration with federal partners.

Stakeholder(s):

Vulnerable Refugee Populations

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.1.1.9. Economic Inequalities

Expand the development of resources for communities disproportionately affected by economic inequalities including Native American and Indigenous populations, refugees, and asylees, and facilitate the translation of materials for the public to the most commonly spoken languages in the United States.

Stakeholder(s):

Native Americans

Refugees

Indigenous Populations

Asylees

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.1.1.10. Language

Expand awareness and ensure provision of language assistance services for people with limited English proficiency and auxiliary aids and services for people with disabilities in all communities, including communities disproportionately affected by economic and historic inequalities, regarding eligibility for and access to HHS programs, services, and activities.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

3.2. Children & Youth

Strengthen early childhood development and expand opportunities to help children and youth thrive equitably within their families and communities

HHS invests in strategies to strengthen early childhood development opportunities to help children and youth thrive equitably within their families and communities. HHS fosters the physical, emotional, intellectual, language, and behavioral development of children and youth while supporting their families and caregivers. HHS implements interventions and multidisciplinary programs to enhance and support early childhood development and learning. HHS also focuses its efforts to improve early childhood development programs, systems, and linkages through the application of data, evidence, and lessons learned.

Performance Goals ~ The HHS Annual Performance Plan provides information on the Department’s measures of progress towards achieving the goals and objectives described in the HHS Strategic Plan for FY 2022–2026. Below are the related performance measures for this Objective.

Stakeholder(s):

Children

Youth

Families

Communities

Contributing OpDivs and StaffDivs :

ACF, ACL, ASPE, CDC, CMS, FDA, HRSA, IHS, OASH, NIH, OGA, and SAMHSA work to achieve this objective.

ACF

— continued next page

Stakeholders (continued)

ACL

ASPE

CDC

CMS

FDA

HRSA

IHS

OASH

NIH

OGA

SAMHSA

HHS Partners :

HHS OpDivs and StaffDivs engage and work with a broad range of partners and stakeholders to implement the strategies and achieve this Objective. They include:

Adolescent Brain Cognitive Development (ABCD) Project

United States Interagency Council on Homelessness

Interagency Autism Coordinating Committee (IACC)

Interagency Working Group on Youth Programs

Performance Indicators

Performance Measure 3.2.1 Head Start Grantees

Description	Type	Status	Start Date	End Date	Percentage
Reduce the proportion of Head Start grantees receiving a score in the low range on the basis of the Classroom Assessment Scoring System (CLASS: Pre-K)	Target	Reduced			
	Actual				

Performance Measure 3.2.2 Preschool Teachers

Description	Type	Status	Start Date	End Date	Percentage
Increase the percentage of Head Start preschool teachers with an AA, BA, or Advanced degree in early childhood education or a related field	Target	Increased			
	Actual				

Performance Measure 3.2.3 TLP Youth

Description	Type	Status	Start Date	End Date	Percentage
Maintain the proportion of youth living in safe and appropriate settings after exiting ACF-funded Transitional Living Program (TLP) services	Target	Maintained			
	Actual				

Performance Measure 3.2.4 Children Screened

Description	Type	Status	Start Date	End Date	Number
Number of 0–8-year-old children screened for mental health or related interventions	Target				
	Actual				

Performance Measure 3.2.5 Home Visit Participants

Description	Type	Status	Start Date	End Date	Number
Number of participants served by the Maternal, Infant, and Early Childhood Home Visiting Program	Target				
	Actual				

Strategy 3.2.1. Children & Youth

Foster the physical, emotional, intellectual, language, and behavioral development of children and youth while supporting their families and caregivers

Stakeholder(s):

Children

Families

Youth

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.2.1.1. Services

Support state and local government agencies, tribes, non-governmental organizations, and other community partners in promoting comprehensive, culturally competent, two-generation, community-based, developmentally appropriate, trauma-informed services that strengthen economic security, promote protective factors, advance learning, and reduce stress on families, fostering environments that support children, youth, pregnant and expectant persons, and parents.

Stakeholder(s):

Families

State Government Agencies

Youth

Local Government Agencies

Pregnant Persons

Tribes

Expectant Persons

Non-Governmental Organizations

Parents

Community Partners

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.2.1.2. Barriers

Identify and address barriers to maximizing children’s physical, emotional, cognitive, language, and behavioral development, while ensuring knowledge of and access to comprehensive behavioral health services for children, parents, and families.

Stakeholder(s):

Children

Families

Parents

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.2.1.3. Partnerships

Promote programs and leverage strategic family, early learning, school, healthcare, and community-based partnerships to improve early identification of children with developmental delays and disabilities, including mental, behavioral, and developmental disorders, and facilitate linkages to appropriate treatment and services, including IDEA Part C early intervention services for children (aged birth to 36 months) and IDEA Part B services for school-aged children (aged three through 21 years of age).

Stakeholder(s):

Children with Developmental Delays

Children with Developmental Disabilities

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.2.1.4. Protection & Programs

Advance strengths-based approaches and models to promote protective factors, positive youth development approaches, and evidence-informed programs focusing on improving the physical, social, emotional, cognitive, language, and behavioral health of adolescents, including engaging parents and caregivers, ensuring access to teen-friendly services, and coordinating adolescent- and family-centered services.

Stakeholder(s):

Adolescents

Parents

Teens

Caregivers

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.2.1.5. Growth & Development

Improve growth and development prospects of children, including enhanced dietary quality and reduction in risk factors for preventable non-communicable disease, through the promotion of healthy eating and dietary guidelines, nutrition education and standards, physical activity, oral health and hygiene, and other feeding and nutrition programs or collaborations aimed at supporting children and families, especially in rural, low-income, and other high-risk areas.

Stakeholder(s):

Children

Low-Income Areas

Families

High-Risk Areas

Rural Areas

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.2.1.6. Environmental Factors

Coordinate federal interagency efforts and target resources aimed at improving environmental health and healthy development in children by reducing exposure to environmental health risk factors—including food contaminants, foodborne pathogens, lead, mold, toxic chemicals, and potent allergens—and their effects, such as asthma, poisoning, and other health conditions.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.2.1.7. Early Childhood

Provide interagency leadership to effectively implement the Administration’s early childhood agenda, including overseeing the implementation of existing and proposed new investments in early childhood and facilitating interagency early childhood working groups and public-private partnerships for cross-program collaboration.

Stakeholder(s):

Young Children

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.2.1.8. Sexuality Education

Expand access to comprehensive and inclusive sexuality education for young people to ensure accurate and complete information about sexual and reproductive health and rights, and to support child protection.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.2.1.9. Adverse Experiences

Collaborate and coordinate with state, tribal, local, territorial, and other key partners to increase awareness of adverse childhood experiences, build capacity to implement prevention and response policies, programs, and practices based on the best available evidence, provide targeted, culturally appropriate trainings and technical assistance, and use data to inform program planning, implementation, and evaluation of adverse childhood experiences prevention and response strategies.

Stakeholder(s):

Children

Local Partners

State Partners

Territorial Partners

Tribal Partners

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Strategy 3.2.2. Homeless Youth

Support services and programs to improve the social well-being of unaccompanied homeless youth, children and youth who cannot remain in their homes, and refugee children and youth

Stakeholder(s):

Homeless Youth

Refugee Children

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.2.2.1. Outreach, Shelters & Services

Provide street outreach, emergency shelters and longer-term transitional living and maternity group home services and programs to serve and protect runaway and homeless youth.

Stakeholder(s):**Runaway Youth****Homeless Youth****Performance Indicators**

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.2.2.2. Migrants & Foster Care

Bridge child welfare experience with expertise in refugee resettlement to improve outcomes for minors who have undergone forced migration and traumatic experiences with foster care placement and services and support the caregivers and community members involved in nurturing their physical and emotional well-being.

Stakeholder(s):**Minor Refugees****Caregivers****Performance Indicators**

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.2.2.3. Integration, Schooling & Goals

Provide services to facilitate the school performance, psychosocial adjustment, integration, and goal-setting of refugee children and youth, and extend complementary supports to their family members, to strengthen overall family well-being.

Stakeholder(s):**Refugee Children****Refugee Youth****Performance Indicators**

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Strategy 3.2.3. Early Childhood

Implement interventions and multidisciplinary programs that enhance and support early childhood development and learning

Stakeholder(s):

Young Childred

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.2.3.1. Assessment & Intervention

Promote systems and practices of assessment and intervention, anchored in primary healthcare, that support holistic early childhood development and learning, and child and youth well-being, inclusive of physical, socio-emotional, behavioral, intellectual, cognitive, and language development.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.2.3.2. Eligibility & Requirements

Align eligibility and program requirements across family-serving health and human service systems, and provide family navigation supports, to reduce burden and gaps in services.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.2.3.3. Care & Education

Improve access to stable and affordable high-quality early care and education settings and participation in early childhood programs of underserved communities and populations and the replication and application of lessons learned from successful programs focused on inclusion practices.

Stakeholder(s):

Underserved Communities

Underserved Populations

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.2.3.4. Training & Assistance

Develop effective and culturally-informed training and technical assistance informed by evidence and best practices to improve the quality of early childhood and prenatal care services and education programs, including those offered by tribes and faith-based and community initiatives.

Stakeholder(s):

Early Childhood Care Services

Faith-Based Programs

Prenatal Care Services

Community Programs

Tribes

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.2.3.5. Staff & Workforce

Invest in early childhood development, learning, and care by building the capacity and increasing the compensation of the staff and workforce supporting the programs and services provided to children and families in these sectors, including programs serving low-income communities and populations.

Stakeholder(s):

Children

Low-Income Communities

Families

Low-Income Populations

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.2.3.6. Early Care & Education Sector

Stabilize the early care and education sector to address decreased revenues and increased costs resulting from the COVID-19 pandemic and build back a high-quality supply of programs and providers, particularly in low-income communities, and equitably deliver services across a variety of program settings that meet the needs of families.

Stakeholder(s):

Early Care & Education Sector

Low-Income Communities

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.2.3.7. Workforce

Develop short- and long-term interagency strategies to address the early childhood education workforce shortages by urging states, communities, and local programs to invest ARP funds, other sources of COVID-19 relief funding, and existing funding to address the current ECE workforce shortage and provide support to child care and early childhood education providers.

Stakeholder(s):

Early Childhood Education Workforce

Local Programs

States

Child Care Providers

Communities

Early Childhood Education Providers

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.2.3.8. Native American Families

Develop interagency partnerships and cross-program initiatives with programs for Native American families to leverage existing federal resources to prioritize early childhood and help implement their tribe’s vision for a stronger system of high-quality early care and education at the tribal community level.

Stakeholder(s):

Native American Families

Tribes

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Strategy 3.2.4. Data, Evidence & Lessons

Improve early childhood development programs, systems, and linkages through the application of data, evidence, and lessons learned

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.2.4.1. Partnerships & Collaboration

Facilitate and foster cross-sector partnerships and collaboration across HHS and non-HHS agencies at federal, state, tribal, territorial, and local levels to better integrate planning, programs, policies, financing, and data systems aimed at addressing social determinants of health, integrating family services, reducing disparities, and supporting strong families and communities in equitable ways.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.2.4.2. Planning, Implementation & Assessment

Empower children, youth, and families with opportunities to engage and have their voices heard in the planning, implementation, and assessment of programs and systems they rely on for care, learning, and other health and well-being supports.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.2.4.3. Evidence & Best Practices

Promote evidence-based community engagement, dissemination, and implementation of healthcare and human services best practices among underserved populations to leverage reach and reduce gaps in services.

Stakeholder(s):

Underserved Populations

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.2.4.4. Policies & Programs

Leverage research opportunities and access to data, evaluations, and evidence to better inform the development and execution of policies and programs that affect the health, well-being, and livelihoods of children, youth, adolescents, and their families and communities.

Stakeholder(s):

Children

Families

Youth

Communities

Adolescents

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.2.4.5. Learning & Development

Invest in providing technical assistance to states, tribes, and localities to support the implementation of policy, programs, and approaches, and enhance their capacity to identify, monitor, and address children’s learning and developmental needs, including supports for mental health.

Stakeholder(s):

Children

Tribes

States

Localities

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.2.4.6. Education, Apprenticeships & Careers

Foster the dissemination and utilization of user-friendly tools to strengthen the enrollment and participation of vulnerable youth in postsecondary education, apprenticeship, and career technical assistance opportunities.

Stakeholder(s):

Vulnerable Youth

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.2.4.7. Environmental Factors & Hazards

Utilize an integrated approach to understand the environmental factors and hazards that present a barrier for maximizing program improvement for the benefit of improved health outcomes, safety and resilience, and healthy learning environments for children.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.2.4.8. Adverse Experiences

Conduct and support innovative research, evaluation, and surveillance of adverse childhood experiences to build the evidence base and guide prevention, identification, and response efforts.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

3.3. Services & Resources

Expand access to high-quality services and resources for older adults and people with disabilities, and their caregivers to support increased independence and quality of life

HHS is investing in several strategies to expand access to high-quality services and resources for older adults, people with disabilities, and their caregivers. HHS enhances system capacity to develop processes, policies, and supports that are person centered and provide quality care for older adults and individuals with disabilities across settings, including home and community-based settings. HHS ensures the availability and equitable access and delivery of evidence-based interventions that focus on research, prevention, treatment, and care to older adults and individuals with disabilities. HHS also supports development and implementation activities to better understand and address the needs of all caregivers across the age and disability spectrum.

Performance Goals ~ The HHS Annual Performance Plan provides information on the Department's measures of progress towards achieving the goals and objectives described in the HHS Strategic Plan for FY 2022–2026. Below are the related performance measures for this Objective.

Stakeholder(s):

Older Adults

IHS

People with Disabilities

NIH

Caregivers

OASH

Contributing OpDivs and StaffDivs :

OGA

ACF, ACL, AHRQ, ASPE, CDC, CMS, HRSA, IHS, NIH, OASH, and OGA work to achieve this objective.

HHS Partners :

HHS OpDivs and StaffDivs engage and work with a broad range of partners and stakeholders to implement the strategies and achieve this Objective. They include:

ACF

American Academy of Pediatrics

ACL

Association of University Centers on Disabilities Public Health Practice

AHRQ

ASPE

United States Preventive Services Task Force (USPSTF)

CDC

CMS

HRSA

Performance Indicators

Performance Measure 3.3.1 Caregiver Service Difficulties

Description	Type	Status	Start Date	End Date	Percentage
Reduce the percentage of caregivers participating in the National Family Caregiver Support Program who report difficulty in obtaining services	Target	Reduced			
	Actual				

Performance Measure 3.3.2 Disabilities Rights

Description	Type	Status	Start Date	End Date	Percentage
Increase the percentage of individuals with developmental disabilities whose rights were enforced, retained, restored, or expanded	Target	Increased			
	Actual				

Performance Measure 3.3.3 Counseled Adults

Description	Type	Status	Start Date	End Date	Percentage
Increase the age-adjusted percentage of adults (age 18+) diagnosed with arthritis who were counseled by a doctor or other health professional to be physically active or exercise to help arthritis or joint symptoms, in states funded by the CDC Arthritis Program	Target	Increased			
	Actual				

Performance Measure 3.3.4 Hemophilia Treatment Inhibitors

Description	Type	Status	Start Date	End Date	Percentage
Decrease the prevalence of hemophilia treatment inhibitors among Community Counts - Health Outcomes Monitoring System for People with Bleeding Disorders at HTC	Target	Decreased			
	Actual				

Performance Measure 3.3.5 Older Adults

Description	Type	Status	Start Date	End Date	Percentage
Increase the percentage of older adults who receive appropriate clinical preventive services	Target	Increased			
	Actual				

Strategy 3.3.1. Systems, Determinants & Policies

Enhance system capacity to address the health, health-related outcomes, and social determinants of health for older adults and individuals with disabilities of all ages by developing processes, policies, and supports that are person centered and provide quality care across settings, including home and community-based settings

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.3.1.1. Self-Determination & Care

Deploy approaches to care, including primary care, that promote health and equitable, goal-directed care and self-determination for older adults, persons with disabilities, and caregivers.

Stakeholder(s):

Older Adults

Caregivers

Persons with Disabilities

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.3.1.2. Service Quality

Enhance states' ability to implement Medicaid Home and Community Based Services (HCBS) and incorporate standardized quality measures to assess and track the adequacy of the HCBS community integration on access, availability, quality, experience of care, health outcomes, and the workforce.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.3.1.3. Lived Experiences

Engage with individuals with lived experience and their families and caregivers to ensure processes, policies, and supports meet their needs.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.3.1.4. Infrastructure, Coordination & Communication

Support healthcare partners, states, tribes and tribal organizations, community, profit, and non-profit organizations to expand infrastructure and improve coordination and communication of resources and services such as in-home services, transportation, digital equipment, broadband access and healthcare to meet the day-to-day and long-term needs of older adults, persons with disabilities, and caregivers.

Stakeholder(s):

Older Adults

Caregivers

Persons with Disabilities

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.3.1.5. Benefits & Services

Create pathways for older adults and persons with disabilities from vulnerable immigrant communities, such as refugees and asylees, to access relevant benefits and services, by strengthening the capacity of states, agencies, and providers to deliver culturally appropriate services and supply resources that address the needs of these immigrant populations.

Stakeholder(s):

Older Adults

Asylees

Persons with Disabilities

States

Vulnerable Immigrant Communities

Agencies

Refugees

Providers

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Strategy 3.3.2. Interventions

Ensure availability and equitable access and delivery of evidence-based interventions that focus on research, prevention, services, and treatment of health and behavioral conditions that impact older adults and individuals with disabilities

Stakeholder(s):

Older Adults

Individuals with Disabilities

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.3.2.1. Communication, Partnerships & Alliances

Establish supportive policies, strengthen communication and partnership initiatives for intervention dissemination and clinical treatment and care gaps, and build strategic alliances for improved disease management.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.3.2.2. Coordination & Collaboration

Coordinate across federal agencies and collaborate with state, local, tribal, private, and non-profit partners to ensure availability and equitable distribution and access to evidence-based interventions that prevent the onset of symptoms, improve care management, and reduce health disparities for people diagnosed with multiple health conditions.

Stakeholder(s):

People with Multiple Health Conditions

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.3.2.3. Referrals & Self-Management

Promote culturally and linguistically-tailored self-management programs and expand referral and delivery systems to improve health and behavioral health outcomes among older adults and individuals with disabilities.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Strategy 3.3.3. Caregiver Needs

Support the development and implementation activities to better understand and address the needs of all caregivers across the age and disability spectrum

Stakeholder(s):

Caregivers

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.3.3.1. Caregiving Strategy

Develop and disseminate a National Family Caregiving Strategy as required by the Recognize, Assist, Include, Support and Engage (RAISE) Family Caregivers Act of 2017

Stakeholder(s):

Caregivers

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.3.3.2. Assistance & Resources

Leverage technical assistance and resources to address the needs of older adult, kinship families, non-kinship, and minor caregivers at the federal, state, territorial, tribal and community levels.

Stakeholder(s):

- | | |
|-------------------------------|--------------------|
| Older Adults | States |
| Kinship Families | Territories |
| Non-Kinship Caregivers | Tribes |
| Minor Caregivers | Communities |

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

3.4. Neglect, Abuse & Violence

Increase safeguards to empower families and communities to prevent and respond to neglect, abuse, and violence, while supporting those who have experienced trauma or violence

HHS increases safeguards to empower families and communities to prevent and respond to neglect, abuse, and violence, while supporting those who have experienced trauma or violence. The Department continues its efforts to promote coordination across the government to address the full range and multiple forms of neglect, violence, trauma, and abuse across the life span. HHS is building a resource infrastructure to ensure equitable delivery of high-quality services to support affected individuals, families, and communities. HHS also leverages data to inform the development of effective and innovative prevention and intervention models to address neglect, abuse, and violence.

Performance Goals ~ The HHS Annual Performance Plan provides information on the Department's measures of progress towards achieving the goals and objectives described in the HHS Strategic Plan for FY 2022–2026. Below are the related performance measures for this Objective.

Stakeholder(s):

Families

Communities

Contributing OpDivs and StaffDivs :
ACF, ACL, ASPE, CDC, HRSA, IHS, NIH, OASH,
and SAMHSA work to achieve this objective.

ACF

ACL

ASPE

CDC

HRSA

IHS

NIH

OASH

SAMHSA

HHS Partners :

HHS OpDivs and StaffDivs engage and work with a broad range of partners and stakeholders to implement the strategies and achieve this Objective. They include:

Elder Justice Coordinating Council

Interagency Task Force on Trauma-Informed Care

Interagency Task Force to Monitor and Combat Human Trafficking in Persons

National Center on Elder Abuse

Performance Indicators

Performance Measure 3.4.1 Violence Hotline Capacity

Description	Type	Status	Start Date	End Date	Call Volume
Increase the capacity of the National Domestic Violence Hotline to respond to increased call volume (as measured by percentage of total annual calls to which the Hotline responds)	Target	Increased			
	Actual				

Performance Measure 3.4.2 Maltreated Children

Description	Type	Status	Start Date	End Date	Percentage
Decrease the percentage of children with substantiated or indicated reports of maltreatment that have a repeated substantiated or indicated report of maltreatment within six months	Target	Decreased			
	Actual				

Performance Measure 3.4.3 Trafficking Victims Identified

Description	Type	Status	Start Date	End Date	Number
Increase the number of potential trafficking victims identified by the National Human Trafficking Hotline	Target	Inceased			
	Actual				

Performance Measure 3.4.4 UC Placements

Description	Type	Status	Start Date	End Date	Percentage
Increase the percentage of placement designation of referrals of Unaccompanied Children (UC) from Department of Homeland Security within 24 hours of referral	Target	Increased			
	Actual				

Performance Measure 3.4.5 Domestic Violence Screening

Description	Type	Status	Start Date	End Date
Increase Intimate Partner (Domestic) Violence screening among American Indian and Alaska Native (AI/AN) Females	Target	Increased		
	Actual			

Performance Measure 3.4.6 Prevention & Response Strategies

Description	Type	Status	Start Date	End Date	Number
Increase the number of prevention and response strategies from CDC’s resource Preventing Adverse Childhood Experiences: Leveraging the Best Available Evidence being implemented by state and local health departments funded through the multistate ACEs cooperative agreement	Target	Increased			
	Actual				

Performance Measure 3.4.7 Resources

Description	Type	Status	Start Date	End Date
Expand the number of evidence-based resources on best practices and core components of trauma-informed care for clinical practice that are available on the National Center for Injury Prevention and Control website	Target	Expanded		
	Actual			

Strategy 3.4.1. Coordination

Promote coordination across the federal government to address the full range and multiple forms of neglect, violence, trauma, and abuse across the life span, including gender-based violence

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.4.1.1. Integration

Increase coordination within HHS OpDivs and StaffDivs and partner with other federal departments on violence prevention and trauma initiatives that create opportunities for an integrated federal response.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.4.1.2. Outreach & Interventions

Engage community health workers to expand outreach and access to interventions for those impacted by neglect, violence, trauma, and abuse.

Stakeholder(s):

Community Health Workers

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.4.1.3. Awareness & Prevention

Develop national awareness and prevention initiatives focused on violence, trauma, neglect, and abuse as public health issues.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.4.1.4. Education & Empowerment

Educate and empower families and communities, including tribes and territories, to recognize and respond to signs of violence and trauma and understand the importance of and need for a comprehensive public health approach.

Stakeholder(s):

Families

Tribes

Communities

Territories

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.4.1.5. Historical Trauma

Support broad awareness of the historical trauma experienced in American Indian and Alaska Native communities and implement evidence-based approaches to healthcare delivery that takes into account past and on-going violence and trauma across tribes.

Stakeholder(s):

American Indian Communities

Alaska Native Communities

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.4.1.6. Human Trafficking

Bolster early intervention, prevention, public awareness, and comprehensive access to services for individuals who have experienced human trafficking.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Strategy 3.4.2. Resources & Services

Build resource infrastructure to ensure equitable delivery of high-quality services to support affected individuals, families, and communities

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.4.2.1. Prevention & Recovery

Strengthen networks and increase resources—including resources to ensure adequate staffing—for state, local, tribal, territorial, community- and faith-based organizations focused on the prevention of and recovery from violence, trauma, neglect, and abuse as they make investments in programmatic advancement, cross-system coordination, equipment, and culturally- and linguistically-appropriate shelter and other services and service delivery.

Stakeholder(s):

State Agencies

Territorial Organizations

Local Organizations

Community-Based Organizations

Tribal Organizations

Faith-Based Organizations

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.4.2.2. Survivors

Facilitate and support access to healthcare and behavioral health services for anyone who is surviving domestic violence, dating violence, family violence, and sexual violence, including 24-hour confidential hotline, shelters and programs, and a network of state coalitions and national technical assistance providers.

Stakeholder(s):

Survivors

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.4.2.3. Hotlines

Enhance resources for hotlines that provide referrals and service connections to those impacted by violence, including the National Domestic Violence Hotline, the StrongHearts Native Help Line, and the National Human Trafficking Hotline.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.4.2.4. Training & Assistance

Design innovative skills-based training and technical assistance to the networks, grantees, and programs that serve individuals, families, and communities impacted by neglect, violence, trauma, and abuse.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.4.2.5. Assessments & Engagement

Create assessment tools and engage stakeholders to identify gaps in prevention, holistic treatment, and integrative care for underserved communities, including tribes and territories.

Stakeholder(s):

Underserved Communities

Territories

Tribes

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Strategy 3.4.3. Data

Leverage data to inform the development of effective and innovative prevention and intervention models to address neglect, violence, trauma, and violence

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.4.3.1. Surveillance

Strengthen surveillance systems to gather prevalence data across all HHS programs and appropriately identify resources for public health and human services solutions.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.4.3.2. Strategies

Disseminate evidence-based strategies to promote safe, stable, and nurturing relationships and environments for adults, children, families, older adults, and persons with disabilities, including the communities in which they live.

Stakeholder(s):

Adults

Older Adults

Children

Persons with Disabilities

Families

Communities

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.4.3.3. Public Health Data

Advance the development, access, and use of standards, guidelines, regulations, and electronic reporting to improve the quality and timeliness of public health data collection.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.4.3.4. Decision Making

Establish policy and guidelines that emphasize evidence-based decision making for assisting those who have experienced trauma or violence.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.4.3.5. Research

Support a coordinated program of research focused on refining, testing, and implementing evidence-based practices for primary and trauma-related services, including screening, prevention, and treatment across relevant settings that serve youth and adults.

Stakeholder(s):

Youth

Adults

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 3.4.3.6. Intimate Partner Violence

Address gaps in knowledge about intimate partner violence prevention programs for American Indian and Alaska Native communities, for racial and ethnic specific communities, and for underserved communities.

Stakeholder(s):

American Indian Communities

Ethnic Communities

Alaska Native Communities

Underserved Communities

Racial Communities

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

4. Science & Research

Restore Trust and Accelerate Advancements in Science and Research for All

HHS is dedicated to restoring trust and accelerating advancements in science and research. The Department is prioritizing science, evidence, and inclusion to improve the design, delivery, and outcomes of HHS programs. It is investing in the research enterprise and the scientific workforce to maintain leadership in the development of innovations that broaden our understanding of disease, healthcare, public health, and human services resulting in more effective interventions, treatments, and programs. Strengthening surveillance, epidemiology, and laboratory capacity is another major focus to better understand and equitably address diseases and conditions. HHS is also increasing evidence-based knowledge through improved data collection, use, and evaluation efforts to achieve better health outcomes, reduced health disparities, and improved social well-being, equity, and economic resilience.

4.1. Programs

Improve the design, delivery, and outcomes of HHS programs by prioritizing science, evidence, and inclusion

HHS works on strategies to improve the design, delivery, and outcomes of HHS programs by prioritizing science, evidence, and inclusion. The Department leverages stakeholder engagement, communication, and collaboration to build and implement evidence-based interventions and approaches for stronger health, public health, and human services outcomes.

Performance Goals ~ The HHS Annual Performance Plan provides information on the Department's measures of progress towards achieving the goals and objectives described in the HHS Strategic Plan for FY 2022–2026. Below are the related performance measures for this Objective.

Communities

Contributing OpDivs and StaffDivs :

All OpDivs and StaffDivs contribute to achievement of this objective.

HHS Partners :

HHS OpDivs and StaffDivs engage and work with a broad range of partners and stakeholders to implement the strategies and achieve this Objective. They include:

Animal Cell Culture, Clinical Trials Transformation Initiative (CTTI)

CURE ID App

FNIH Biomarkers Consortium (FNIH)

Models of Infectious Disease Agent Study (MIDAS)

Reagan-Udall Foundation

US-Canada Regulatory Cooperation Council (RCC)

Performance Indicators

Performance Measure 4.1.1 Health IT

Description	Type	Understanding	Start Date	End Date
By 2026, enhance understanding of how five health information technologies can be applied effectively to improve minority health or to reduce health disparities	Target	Enhanced		
	Actual			

Performance Measure 4.1.2 CBCAP Funding

Description	Type	Status	Start Date	End Date	Percentage
Increase the percentage of Community-Based Child Abuse Prevention (CBCAP) total funding that supports evidence-based and evidence-informed child abuse prevention programs and practices	Target	Increased			
	Actual				

Strategy 4.1.1. Interventions

Leverage stakeholder engagement, communication, and collaboration to build and implement evidence-based interventions for stronger healthcare, public health, and human services outcomes

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 4.1.1.1. Evidence & Equity

Promote an evidence-based and equity-focused approach to the design, redesign, implementation, and quality of HHS programs, to inform decision making, improve oversight, and strengthen data integrity and program fidelity.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 4.1.1.2. Communication & Collaboration

Improve communication and collaboration across HHS and across other federal agencies to bring together research and evaluation to better inform the translation of evidence throughout the Department.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 4.1.1.3. Lessons Learned

Promote sharing of lessons learned between grantees, from grantees to HHS staff, and where applicable, to the broader community.

Stakeholder(s):

Grantees

HHS Staff

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 4.1.1.4. Participation & Engagement

Build participation into research agendas by engaging stakeholders, including those with lived experience and citizen scientists, in the design and revision of evaluation and data collection systems and advancing equity amongst researchers and those communities targeted or underrepresented by research efforts.

Stakeholder(s):

Citizen Scientists

Underrepresented Communities

Researchers

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 4.1.1.5. Research Institutions

Ensure research institutions have the capacity, technology, and infrastructure, including access to tools, technologies, and training, needed to conduct cutting edge-research.

Stakeholder(s):

Research Institutions

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 4.1.1.6. Information & Education

Improve communication and access to community members to facilitate transparent flow of information and education regarding HHS programs.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

4.2. Investment

Invest in the research enterprise and the scientific workforce to maintain leadership in the development of innovations that broaden our understanding of disease, healthcare, public health, and human services resulting in more effective interventions, treatments, and programs

HHS is investing in strategies to support the research enterprise and the scientific workforce. HHS works to build public trust by upholding scientific integrity and quality. HHS is also working to recruit, retain, and develop a diverse and inclusive scientific workforce to conduct basic and applied research in disease, healthcare, public health, and human services. HHS supports innovation in how research is supported, conducted, and translated into interventions that improve health and well-being.

Performance Goals ~ The HHS Annual Performance Plan provides information on the Department’s measures of progress towards achieving the goals and objectives described in the HHS Strategic Plan for FY 2022–2026. Below are the related performance measures for this Objective.

Stakeholder(s):

Scientific Workforce

Contributing OpDivs and StaffDivs :
AHRQ, ASPE, ASPR, CDC, FDA, HRSA, NIH, OASH, OCR, and OGA work to achieve this objective.

- AHRQ**
- ASPE**
- ASPR**
- CDC**

- FDA**
- HRSA**
- NIH**
- OASH**
- OCR**
- OGA**

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Stakeholders (continued)

HHS Partners :

HHS OpDivs and StaffDivs engage and work with a broad range of partners and stakeholders to implement the strategies and achieve this Objective. They include:

Accelerating COVID-19 Therapeutic Interventions and Vaccines (ACTIV)

Allergenic Products Advisory Committee

Blood Products Advisory Committee

Brain Research through Advancing Innovative Neurotechnologies® (BRAIN)

Cellular, Tissue, and Gene Therapies Advisory Committee

Toxicology in the 21st Century (Tox21)

Vaccines and Related Biological Products Advisory Committee

Performance Indicators

Performance Measure 4.2.1 SUD Interventions

Description	Type	Status	Start Date	End Date
By 2025, develop or evaluate the efficacy or effectiveness of new or adapted prevention interventions for substance use disorders (SUD)	Target	Developed or Evaluated		
	Actual			

Performance Measure 4.2.2 Research Training

Description	Type	Status	Start Date	End Date
Provide research training for predoctoral trainees and fellows that promotes greater retention and long-term success in research careers	Target	Provided		
	Actual			

Performance Measure 4.2.3 Trainee Experiences

Description	Type	Status	Start Date	End Date	Number
Increase the total number of mentored research career development experiences for trainees from diverse backgrounds, including groups underrepresented in biomedical research, to promote individual development and to prepare them for a range of research-related careers	Target	Increased			
	Actual				

Performance Measure 4.2.4 Mentored Experiences

Description	Type	Status	Start Date	End Date	Number
Maintain the yearly number of undergraduate students with mentored research experiences through the IDeA (Institutional Development Award) Networks of Biomedical Research Excellence (INBRE) program in order to sustain a pipeline of undergraduate students who will pursue health research careers	Target	Maintained			
	Actual				

Performance Measure 4.2.5 Scientists Retained

Description	Type	Status	Start Date	End Date	Percentage
Percentage of scientists retained at FDA after completing Fellowship or Traineeship programs	Target				
	Actual				

Performance Measure 4.2.6 Research Reports

Description	Type	Status	Start Date	End Date
Conduct and disseminate policy relevant research reports on rural health issues	Target	Disseminated		
	Actual			

Strategy 4.2.1. Integrity, Quality & Trust

Uphold scientific integrity to promote public trust in the quality of the research enterprise, ensuring sensitivity to the culture of the researched and promotion of their participation and ownership of the research process

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 4.2.1.1. Education & Training

Ensure the quality and integrity of research and research findings through education and training of the scientific workforce.

**Stakeholder(s):
Scientific Workforce**

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 4.2.1.2. Regulation

Strengthen regulatory and compliance capacity to account for the rapid increase in research technology and data capabilities, including investing in HHS offices with oversight of research integrity, human research protections, and animal care and use.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 4.2.1.3. Integrity & Quality

Develop and implement approaches, including developing and disseminating guidelines, standards, policies, or regulations, that enhance the integrity and quality of HHS-funded research by promoting a climate that incentivizes research conducted responsibly, with rigor and integrity in accordance with these expectations and those of the relevant scientific discipline.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 4.2.1.4. Transparency & Awareness

Promote transparency and awareness by informing the public on efforts across the Department to ensure the scientific integrity in all research and evidence-building activities.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Strategy 4.2.2. Workforce

Recruit, retain, and develop a diverse and inclusive scientific workforce to conduct basic and applied research in disease, healthcare, public health, and human services

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 4.2.2.1. Training, Mentorships & Fellowships

Expand and deploy evidence-based training, mentorship interventions, fellowships, and other workforce development initiatives that support scientists, especially underrepresented scientists, through critical points of transition in their career trajectories.

Stakeholder(s):

Scientists

Underrepresented Scientists

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 4.2.2.2. Diversity

Increase research and practice opportunities for a diverse range of investigators to address social determinants of health and advance health equity in populations with health disparities.

Stakeholder(s):

Investigators

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 4.2.2.3. Talent Management Plan

Attract, develop, and retain the scientific workforce by establishing a talent management strategic plan with input from government, industry, and academic stakeholders.

Stakeholder(s):

Scientific Workforce

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 4.2.2.4. Retention

Retain staff with expertise in scientific and research methods using recognition, training, and retention incentives to ensure that the scientific workforce has the skills and expertise necessary to adopt and implement the most innovative statistical and scientific methods.

Stakeholder(s):

HHS Staff

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 4.2.2.5. Independent Research

Support scientists as they embark on, transition to, and sustain independent research careers to sustain the research enterprise.

Stakeholder(s):

Scientists

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Strategy 4.2.3. Interventions

Support, conduct, and translate research into interventions that improve the health and well-being for all

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 4.2.3.1. Partnerships

Support and promote the development of partnerships between academic research organizations and health department, healthcare providers, community-based health organizations, and community organizations for relevant rapid implementation research and community-based participatory research to engage communities impacted by the research in the development and dissemination of the research.

Stakeholder(s):

Academic Research Organizations

Community-Based Health Organizations

Health Departments

Community Organizations

Healthcare Providers

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 4.2.3.2. Collaboration & Data

Identify and address barriers to collaboration and data sharing within HHS and other federal agencies, academic and public health partners, and private industry to make it easier to conduct cross-cutting, high impact, transdisciplinary, innovative research.

Stakeholder(s):

Federal Agencies

Public Health Partners

Academic Partners

Private Industry

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 4.2.3.3. Tools, Knowledge & Training

Expand the availability and accessibility to tools, technologies, knowledge repositories, and training to ensure the nation's research institutions have the capacity, technology, and infrastructure they need to design and execute impactful research programs that benefit multiple communities to help achieve the HHS mission.

Stakeholder(s):**Research Institutions****Performance Indicators**

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 4.2.3.4. Outreach

Partner with educational institutions that serve underserved populations to implement technical assistance outreach programs to increase awareness of research funding opportunities and increase the competitiveness of submitted research applications.

Stakeholder(s):**Educational Institutions****Underserved Populations****Performance Indicators**

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 4.2.3.5. Promising Technologies

Promote cross-functional and, importantly, cross-division efforts to identify emerging promising technologies and establish frameworks for the ethical development, study, and use of these technologies.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 4.2.3.6. Cutting Edge Technology

Provide research grants for areas that are cutting edge in technology or disease and grow those resources.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 4.2.3.7. Quality

Fund opportunities for research implementing and evaluating community-based and culturally-competent models of healthcare and human services delivery to improve the quality of care received by racial and ethnic minority and sexual minority populations.

Stakeholder(s):

Racial Minority Populations

Sexual Minority Populations

Ethnic Minority Populations

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 4.2.3.8. Community Partners

Establish innovative funding opportunities to identify sources for community partners working on areas of concern who can also provide the health and human services communities with best practices in achieving positive results in interventions, treatments, and programs.

Stakeholder(s):

Community Partners

Communities

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 4.2.3.9. Prevention

Support research and innovation to strengthen implementation of evidence-based recommendations for preventive health services in public health and healthcare settings among people that have been underserved.

Stakeholder(s):

Underserved People

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

4.3. Surveillance, Epidemiology & Labs

Strengthen surveillance, epidemiology, and laboratory capacity to understand and equitably address diseases and conditions

HHS supports strategies to strengthen surveillance, epidemiology, and laboratory capacity to understand and equitably address diseases and health conditions. HHS is focused on expanding capacity to improve laboratory safety and quality, monitor conditions, understanding the needs of various sub-groups of people, and

establishing the pipeline for future professionals. HHS is working to modernize surveillance systems for timeliness, accuracy, and analytic reporting while engaging and learning from partners and stakeholders to inform improvements and innovation.

Performance Goals ~ The HHS Annual Performance Plan provides information on the Department's measures of progress towards achieving the goals and objectives described in the HHS Strategic Plan for FY 2022–2026. Below are the related performance measures for this Objective.

Stakeholder(s):

Contributing OpDivs and StaffDivs :

CDC, FDA, IHS, OASH, NIH, OGA, and SAMHSA work to achieve this objective.

HHS Partners :

HHS OpDivs and StaffDivs engage and work with a broad range of partners and stakeholders to implement the strategies and achieve this Objective. They include:

GenomeTrakr Network

National Residue Program

Partnership for Food Protection (PFP)

Veterinary Laboratory Investigation and Response Network (Vet-LIRN)

LG STEC :

Whole Genome Sequencing alignment (part of LG STEC Action Plan)

Performance Indicators

Performance Measure 4.3.1 Pathogens

Description	Type	Status	Start Date	End Date	Percentage
Percentage of isolates of priority PulseNet pathogens (Salmonella, Shiga toxin-producing E. coli, and Listeria monocytogenes) sequenced and uploaded to the PulseNet National Database	Target	Sequenced & Uploaded			
	Actual				

Performance Measure 4.3.2 Test Results Reported

Description	Type	Status	Start Date	End Date	Percentage
The percentage of laboratory test results reported within the expected turn-around time (two weeks) upon receipt by CDC labs	Target				
	Actual				

Performance Measure 4.3.3 Products Analyzed

Description	Type	Status	Start Date	End Date	Number
Number of medical product analyses conducted through FDA's Sentinel Initiative	Target				
	Actual				

Performance Measure 4.3.4 Trainings & Assistance

Description	Type	Status	Start Date	End Date	Number
Number of Tribal Epidemiology Center-sponsored trainings and technical assistance provided to build tribal public health capacity	Target				
	Actual				

Strategy 4.3.1. Safety, Quality & Threats

Expand capacity to improve laboratory safety and quality, detect and prevent public health threats, monitor health conditions, understand the unique needs of various sub-groups of persons, and establish the pipeline for future professionals

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 4.3.1.1. Standards, Guidelines & Regulations

Advance the development, access, and use of standards, guidelines, and regulations to improve the quality of laboratory testing and public health data collection.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 4.3.1.2. Surveillance

Leverage existing surveillance efforts to better understand the unique and common needs of various sub-groups of persons by race, ethnicity, national origin (including primary language), sex, sexual orientation, gender identity, pregnancy, education status, income, and other population characteristics.

Stakeholder(s):

Sub-Groups

Sexual Orientation Sub-Groups

Racial Sub-Groups

Gender Identity Sub-Groups

Ethnic Sub-Groups

Pregnancy Sub-Groups

National Origin Sub-Groups :
including primary language

Educational Status Sub-Groups

Sex Sub-Groups

Income Sub-Groups

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 4.3.1.3. Methodologies

Improve capacity for advanced laboratory, epidemiologic, and environmental methods across federal and state agencies to enhance the detection of potential violations throughout the full lifecycle of HHS-regulated products to ensure only safe and effective products reach the public.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 4.3.1.4. Adverse Events

Identify and assess adverse events related to the use of regulated human and animal medical products, including the development and more effective use of large nationally representative database systems, electronic health records, common data models, and natural language processing.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 4.3.1.5. Expertise

Build expertise in cutting edge laboratory, surveillance, and epidemiology techniques to address public health threats and disease conditions, including harmful chemical exposures and diseases, foodborne pathogens, antimicrobial resistance pathogens and other emerging pathogens, healthcare-associated infections, chronic diseases that disproportionately affect specific populations (e.g., sickle cell disease), individuals with disabilities, maternal health, and behavioral health.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 4.3.1.6. Professionals

Train and sustain a diverse pipeline of surveillance, epidemiology, laboratory professionals to address current and emerging needs and strengthen connections with clinical workforce development stakeholders.

Stakeholder(s):

Clinical Workforce

Epidemiology Professionals

Surveillance Professionals

Laboratory Professionals

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Strategy 4.3.2. Surveillance

Modernize surveillance systems for timeliness, accuracy, and analytic reporting

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 4.3.2.1. Information, Knowledge & Data

Accelerate the development and implementation of technological solutions, tools, and approaches to optimize information, knowledge, and data management, standardization, and quality, while ensuring the protection of personally identifiable information and other privacy concerns and minimizing threats to information security.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 4.3.2.2. Geographic Information

Develop and introduce data standards for geographic information within the notifiable diseases reporting system to scales that are meaningful for assessment of socio-ecologic factors.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 4.3.2.3. Race & Ethnicity

Promote completeness and accuracy of race and ethnicity variables and other population characteristics—including age, disability status, geographic area, socioeconomic status, national origin (including primary language), and sex, sexual orientation, gender identity, and pregnancy—in laboratory data and data submitted for surveillance purposes in order to better explain the burden of disease and health conditions in diverse populations.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 4.3.2.4. Reports

Partner across HHS agencies to utilize nationally collected data to create customized surveillance reports to address the incidence of infectious disease in underserved populations.

Stakeholder(s):

Underserved Populations

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 4.3.2.5. Evaluations & Interventions

Provide actionable information for public health officials, policy makers, and regulators to establish and evaluate exposure and disease interventions within disproportionately affected communities or populations.

Stakeholder(s):

Public Health Officials

Disproportionately Affected Communities

Policy Makers

Disproportionately Affected Populations

Regulators

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Strategy 4.3.3. Engagement, Learning & Innovation

Engage and learn from partners and stakeholders to inform improvements and innovation

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 4.3.3.1. Partnership Data

Strengthen state, federal, territorial, international, and public health partnership data and information sharing to improve surveillance and laboratory capacity to identify and better control threats to public health.

Stakeholder(s):

State Partners

International Partners

Federal Partners

Public Health Partners

Territorial Partners

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 4.3.3.2. Emergencies & Disasters

Collaborate with domestic and international partners to develop innovative surveillance, epidemiological, and laboratory approaches that improve situational awareness and communication before, during, and after emergencies and disasters, including food and medical emergencies.

Stakeholder(s):

Domestic Partners

International Partners

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 4.3.3.3. Participation

Identify and address barriers to participation of underserved populations in epidemiologic studies and enhance use of community-based participatory research to ensure studies are meaningful and beneficial to participants.

Stakeholder(s):

Underserved Populations

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

4.4. Data & Evidence

Improve data collection, use, and evaluation, to increase evidence-based knowledge that leads to better health outcomes, reduced health disparities, and improved social well-being, equity, and economic resilience

HHS invests in strategies to improve data collection, use, and evaluation, to increase evidence-based knowledge that leads to better health outcomes, reduced health disparities, and improved social well-being, equity, and

economic resilience. HHS leverages different types of data, such as administrative data and research data, to guide its actions. HHS is establishing a Department-wide approach to improve data collection, close data gaps, transform data, and share data for better HHS analysis and evaluation. HHS also fosters collaborations to expand data access and sharing to create more opportunities to use HHS data to increase knowledge of health, public health, and human service outcomes. HHS is improving data collection and conducting evaluations to understand the drivers for inequities in health outcomes, social well-being, and economic resilience while working to increase capacity and the use of evaluations at HHS to inform evidence-based decision making.

Performance Goals ~ The HHS Annual Performance Plan provides information on the Department's measures of progress towards achieving the goals and objectives described in the HHS Strategic Plan for FY 2022–2026. Below are the related performance measures for this Objective.

Stakeholder(s):

Contributing OpDivs and StaffDivs :

ACF, ACL, AHRQ, ASPE, CDC, CMS, FDA, HRSA, IHS, NIH, OASH, OCR, OGA, ONC, and SAMHSA work to achieve this objective.

ACF

ACL

AHRQ

ASPE

CDC

CMS

FDA

HRSA

IHS

NIH

OASH

OCR

OGA

ONC

SAMHSA

HHS Partners :

HHS OpDivs and StaffDivs engage and work with a broad range of partners and stakeholders to implement the strategies and achieve this Objective. They include:

Chief Data Officer Council

Evaluation Officer Council

FDA Office of Trade, Mutual Recognition, and International Arrangements :

Development of agreements on trade, mutual recognition, and information exchange

Global Summit on Regulatory Science

HHS Data Council

HHS Evidence and Evaluation Council

Interagency Coordinating Committee on the Validation of Alternative Toxicological Methods

National Voluntary Accreditation for Public Health Departments

Government of India :

Support Memorandum of Understanding between the FDA and the Government of India

Performance Indicators

Performance Measure 4.4.1 Good or Excellent Ratings

Description	Type	Status	Start Date	End Date	Percentage
Sustain the percentage of Federal Power Users (key federal officials involved in health and healthcare policy or programs) that indicate that data quality is good or excellent	Target	Sustained			
	Actual				

Performance Measure 4.4.2.1 Grantees Meeting Benchmark

Description	Type	Status	Start Date	End Date	Number
Number of Maternal, Infant, and Early Childhood persist Program grantees that meet benchmark area data requirements for demonstrating improvement	Target				
	Actual				

Performance Measure 4.4.2.2 Grantees Meeting Benchmark

Description	Type	Status	Start Date	End Date	Percentage
Percentage of Maternal, Infant, and Early Childhood persist Program grantees that meet benchmark area data requirements for demonstrating improvement	Target				
	Actual				

Strategy 4.4.1. Data

Establish a Department-wide approach to improve data collection, close data gaps, transform data, and share data for better HHS analysis and evaluation

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 4.4.1.1. Social Deteminants

Fully implement Section 4302 of the Affordable Care Act to ensure that all HHS national data collection efforts and surveys collect information germane to social determinants of health, including data on race, ethnicity, primary language, disability status, sex, sexual orientation, gender identity, and pregnancy.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 4.4.1.2. Gaps

Identify and address data gaps, including surveillance systems, surveys, and other data collection methodologies, that limit the ability to fully examine and assess social determinants of health, outcomes, and conditions of populations served by the Department’s health, public health or human services programs or services.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 4.4.1.3. Elements & Taxonomies

Design common data elements and taxonomies across the Department to consistently categorize data and information, improve data integrity, and ensure trust in data.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 4.4.1.4. Sharing

Invest in and promote intra-agency data sharing, including data linkages, interoperability of data, and data harmonization and standardization to leverage data, metrics, and information to improve analysis and evaluation of the Department programs.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 4.4.1.5. AI/ML & Prediction

Broaden the use of artificial intelligence, machine learning, predictive modeling, and other new technologies to harness the power of integrated data that can lead to improved health, public health, and human service outcomes.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 4.4.1.6. AI R&D

Encourage data sharing across the Department to support the research and development of artificial intelligence solutions that can lead to improved public health outcomes.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Strategy 4.4.2. Collaborations

Foster collaborations to broadly expand data access and sharing to create more opportunities to use HHS data to increase knowledge of healthcare, public health, and human services outcomes

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 4.4.2.1. Data Interoperability

Increase data interoperability between federal partners, states, tribes and territorial partners, non-profit organizations, and health information exchange networks to facilitate shared understanding, application, and utility.

Stakeholder(s):

Federal Partners

States

Tribes

Territorial Partners

Non-Profit Organizations

Health Information Exchange Networks

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 4.4.2.2. Data Sharing

Expand data sharing with state and local health departments, healthcare provider groups, clinical and patient care agencies, consortia developing regional health information exchanges, safety net providers, and other community-based organizations.

Stakeholder(s):

State Health Departments

Patient Care Agencies

Local Health Departments

Consortia :

developing regional health information exchanges

Healthcare Provider Groups

Safety Net Providers

Clinical Care Agencies

Community-Based Organizations

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 4.4.2.3. Platforms & Repositories

Facilitate data sharing and access to HHS publicly available data by developing platforms and repositories, and maximizing their value by ensuring they are easy to find, user-friendly, and in machine-readable format.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 4.4.2.4. Data Inventory

Partner with academic research institutes to catalogue and provide access to the Department's data inventory that matches what researchers need to investigate health inequity across communities and the policy impacts on those inequities.

Stakeholder(s):

Academic Research Institutes

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 4.4.2.5. Collaborations

Foster U.S. and international collaborations to broadly expand data access and sharing to create more opportunities to use HHS data to increase knowledge of health, public health, and human service outcomes.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 4.4.2.6. Claims Database

Develop a nationally representative all payer claims database that can be used by providers, consumers, researchers, and policymakers to develop new evidence on the impact of specific types of care on access to care, quality of care and the costs of care for different population subgroups.

Stakeholder(s):

Consumers

Policymakers

Researchers

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 4.4.2.7. Health Data

Collaborate and coordinate across HHS Divisions and with other federal departments, states, tribal health facilities, Urban Indian Organizations, and others to improve American Indian/Alaska Native healthcare and status data collection to identify and share best practices to enhance the quality and quantity of American Indian/Alaska Native federal health information system data, including the expansion of social well-being, equity, economic resilience, and population comparison data.

Stakeholder(s):

American Indians

States

Alaska Natives

Tribal Health Facilities

HHS Divisions

Urban Indian Organizations

Federal Departments

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Strategy 4.4.3. Data & Evaluations

Improve data collection and conduct evaluations to understand the drivers for inequities in health outcomes, social well-being, and economic resilience

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 4.4.3.1. Inclusion & Engagement

Better engage and include community stakeholders and those with lived experience into the policymaking, program improvement, and research processes.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 4.4.3.2. Social Determinants

Integrate social determinants of health data into surveillance systems, electronic health records, clinical decision supports, and other data collection points to improve knowledge and ensure equitable access to quality care and service delivery.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 4.4.3.3. Outcomes

Ensure HHS-funded projects and research studies assess disparities in outcomes in the use of health or human services, including social determinants of health and while protecting personally identifiable information.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 4.4.3.4. Evidence

Support expanded research in various settings and among federal agencies to establish the evidence base for community and system level social determinants of health interventions to achieve health equity for historically underserved communities.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 4.4.3.5. Disparities

Evaluate healthcare utilization, screening, treatment, and survivorship to identify disparities in health outcomes of individuals belonging to multiple underserved groups to inform program improvement and policy development.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Strategy 4.4.4. Decision Making

Strengthen capacity and the use of evaluations at HHS to inform evidence-based decision making

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 4.4.4.1. Evaluation

Engage in a systematic approach towards building capacity for evaluation and related analyses to ensure the Department is supporting programs that effectively improve the health and well-being of those it serves.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 4.4.4.2. Plans

Publish an Evidence Building Plan and Annual Evaluation Plans that focus Departmental evidence-building activities and organizational learning, and promote transparency encouraging external stakeholders to build evidence useful for Agency decision-making.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

5. Management

Advance Strategic Management to Build Trust, Transparency, and Accountability

HHS is dedicated to advancing strategic management across the Department to build trust, transparency, and accountability. A major focus of the Department is promoting effective enterprise governance to ensure programmatic goals are met equitably and transparently across all management practices. HHS sustains strong financial stewardship of resources to foster prudent use of resources, accountability, and public trust. HHS works to uphold effective and innovative human capital resource management resulting in an engaged, diverse workforce with the skills and competencies to accomplish the HHS mission. The Department also ensures the security of HHS facilities, technology, data, and information, while advancing environment-friendly practices.

5.1. Governance

Promote effective enterprise governance to ensure programmatic goals are met equitably and transparently across all management practices

HHS is supporting strategies to promote effective enterprise governance and ensure programmatic goals are achieved. HHS is strengthening governance, enterprise risk management, and strategic decision making across the Department to better pursue opportunities and address risks while creating a culture of change to support continuous improvement in program and mission delivery.

Performance Goals ~ The HHS Annual Performance Plan provides information on the Department's measures of progress towards achieving the goals and objectives described in the HHS Strategic Plan for FY 2022–2026. Below are the related performance measures for this Objective.

Stakeholder(s):

Contributing OpDivs and StaffDivs :

All OpDivs and StaffDivs contribute to achievement of this Objective.

HHS Partners :

HHS OpDivs and StaffDivs engage and work with a broad range of partners and stakeholders to implement the strategies and achieve this Objective. They include:

Council on Financial Assistance Reform

Financial Assistance Committee on E-government

HHS Data Council

HHS ERM Council

HHS Evidence and Evaluation Council

Office of Federal Procurement Policy

President's Management Council (PMC)

Performance Indicators

Performance Measure 5.1.1 ERM Maturity

Description	Type	Status	Start Date	End Date
To assess progress in implementing its ERM Framework, HHS will annually review and report on its ERM organizational maturity, and formally re-assess its maturity every two to three years using its HHS-internal capability maturity model, which is tailored to HHS's culture and operations.	Target			
	Actual			

Strategy 5.1.1. Governance, Risk & Decision Making

Strengthen governance, enterprise risk management and strategic decision making across HHS to better pursue opportunities and address risks

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 5.1.1.1. Risk Management

Mature, integrate, and apply an Enterprise Risk Management (ERM) Framework across the Department and its Divisions to guide collaborative governance within the federated operating environment, leading to more risk informed strategic decision making.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 5.1.1.2. Planning & Management

Strengthen the strategic management and planning capacity of the Department and its Divisions to accelerate programmatic impact to improve health, public health, and human services outcomes.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Strategy 5.1.2. Learning & Improvement

Continue to create a culture of learning at HHS to support continuous improvement in program and mission delivery

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 5.1.2.1. CoPs

Foster the development and success of “communities of practice” and bodies of knowledge throughout the Department to share information, evidence-informed practices, and create opportunities to cross organizational boundaries to create innovative, responsive solutions.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 5.1.2.2. Collaboration & Coordination

Facilitate collaboration and coordination to increase the use of change management, strategic management, human-centered design tools and techniques, and leverage technological advancements to improve customer experience and program and project management across HHS.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

5.2. Financial Stewardship

Sustain strong financial stewardship of HHS resources to foster prudent use of resources, accountability, and public trust

HHS supports strategies to sustain strong financial stewardship of resources. The Department continues to strengthen the financial management environment to prevent and mitigate deficiencies. HHS is focused on upholding accountability, transparency, and financial stewardship of HHS resources to ensure program integrity, effective internal controls, and payment accuracy. The Department is also building an enhanced financial management workforce that is better able to keep pace with changing contexts.

Performance Goals The HHS Annual Performance Plan provides information on the Department’s measures of progress towards achieving the goals and objectives described in the HHS Strategic Plan for FY 2022–2026. Below are the related performance measures for this Objective.

Stakeholder(s):

Contributing OpDivs and StaffDivs :

All OpDivs and StaffDivs contribute to achievement of this objective.

HHS Partners :

HHS OpDivs and StaffDivs engage and work with a broad range of partners and stakeholders to implement the strategies and achieve this Objective. They include:

Chief Acquisition Officers Council (CAOC)

Chief Financial Officers Council (CFOC)

Healthcare Fraud Prevention Partnership

National Business Office Committee (NBOC)

Shared Services Governance Board (SSGB)

Performance Indicators

Performance Measure 5.2.1 Improper Foster Care Payments

Description	Type	Status	Start Date	End Date	Dollars
Decrease improper payments in the title IV-E foster care program by lowering the national error rate	Target	Decreased			
	Actual				

Performance Measure 5.2.2 Cost-Effectiveness

Description	Type	Status	Start Date	End Date	Percentage
Increase the cost-effectiveness ratio (total dollars collected per \$1 of expenditures)	Target	Increased			
	Actual				

Performance Measure 5.2.3 Improper Medicare Payments

Description	Type	Status	Start Date	End Date	Percentage
Reduce the Percentage of Improper Payments Made under Medicare Part C, the Medicare Advantage	Target	Reduced			
	Actual				

Performance Measure 5.2.4 Improper Drug Payments

Description	Type	Status	Start Date	End Date	Percentage
Reduce the Percentage of Improper Payments Made Under the Part D Prescription Drug Program	Target	Reduced			
	Actual				

Performance Measure 5.2.5 Improper Medicare FFS Payments

Description	Type	Status	Start Date	End Date	Percentage
Reduce the Improper Payment Rate in the Medicare Fee-for-Service (FFS) Program	Target	Reduced			
	Actual				

Performance Measure 5.2.6 Medicaid Improper Payments

Description	Type	Status	Start Date	End Date	Percentage
Reduce the Improper Payment Rate in the Medicaid Program	Target	Reduced			
	Actual				

Performance Measure 5.2.7 Improper CHIP Payments

Description	Type	Status	Start Date	End Date	Percentage
Reduce the Improper Payment Rate in the Children's Health Insurance (CHIP)	Target	Reduced			
	Actual				

Strategy 5.2.1. Financial Management

Continue to strengthen the financial management environment to prevent and mitigate deficiencies

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 5.2.1.1. AI & Robotics

Leverage artificial intelligence and robotic process automation to improve quality and timeliness of key financial management business processes.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 5.2.1.2. Quality

Engage quality improvement principles to review key business processes and identify opportunities to manage risk and improve outcomes in areas such as financial management, grants management, and acquisitions.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 5.2.1.3. Digitization

Build structures to continue transforming financial processes from manual to digital for faster, more accurate workflows at all levels of the organization.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 5.2.1.4. Standards, Specifications & Certification

Facilitate continued collaboration across public and private sectors to adopt and advance nationally supported standards, implementation specifications, and certification criteria.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 5.2.1.5. BI

Support the integrated business intelligence framework to provide complete, accurate, and timely information to stakeholders in real time.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 5.2.1.6. Internal Controls

Promote the application of financial management policies and procedures to include best practices across HHS to ensure sound internal controls.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Strategy 5.2.2. Accountability, Transparency & Stewardship

Uphold accountability, transparency, and financial stewardship of HHS resources to ensure program integrity, effective internal controls, and payment accuracy

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 5.2.2.1. Governance

Implement governance structures to provide accurate and timely financial information that demonstrates HHS accountability to stakeholders and facilitates data-driven operational, budget, and policy decisions that enhance equity for all.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 5.2.2.2. Integrity

Strengthen program integrity methods to better prevent fraud and reduce improper payments by maintaining and improving oversight programs related to early detection and prevention.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 5.2.2.3. Assistance, Capacity & Burden

Invest in technical assistance, capacity-building, and burden reduction to strengthen program outcomes while ensuring program integrity, fiscal discipline, including helping grant recipients improve financial acumen, enterprise risk management, internal controls, and efficient operating policies and procedures to promote equitable access to financial assistance funding, while preventing fraud, waste, and abuse.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 5.2.2.4. Audits

Focus and prioritize audits (such as grantee single audits, Department financial audit, Office of the Inspector General and Government Accountability Office programmatic audits) to increase accountability of HHS programs.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 5.2.2.5. Metrics & Monitoring

Define standards of excellence for the HHS financial community and implement a framework for measuring and monitoring success.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 5.2.2.6. IT

Collaborate across HHS and the private sector to align health information technology investments and advance consensus-based standards, implementation specifications, and health information technology certification criteria to improve interoperability of systems and the access, exchange, and use of electronic health information.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Strategy 5.2.3. Workforce

Build an enhanced financial management workforce able to keep pace with changing contexts

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 5.2.3.1. Infrastructure

Address financial management workforce infrastructure to focus on adaptations to new technologies and skill requirements, recruitment, and retention.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 5.2.3.2. Knowledge, Training & Best Practices

Develop training strategies for financial management that improve the transfer of knowledge and sharing of best practices and process across HHS.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 5.2.3.3. KM

Support financial analysis knowledge management by promoting an accessible repository of financial resources, directives, instructive documents, and standard operating procedures from across HHS.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 5.2.3.4. CoPs

Strengthen communities of practice for the federal financial management workforce to improve capability, recruitment, retention, and succession planning across the enterprise.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

5.3. Human Capital

Uphold effective and innovative human capital resource management resulting in an engaged, diverse workforce with the skills and competencies to accomplish the HHS mission

HHS supports strategies to uphold effective and innovative human capital resource management. HHS is focused on building and sustaining a strong workforce through improved recruitment, hiring, and retention efforts. The Department is leveraging training and professional development opportunities to develop and

manage a high-performing workforce while providing leaders and managers with the insight and tools to effectively carry out change management, organizational learning, and succession planning.

Performance Goals The HHS Annual Performance Plan provides information on the Department’s measures of progress towards achieving the goals and objectives described in the HHS Strategic Plan for FY 2022–2026. Below are the related performance measures for this Objective.

Stakeholder(s):

Contributing OpDivs and StaffDivs :
All OpDivs and StaffDivs contribute to achievement of this objective.

plement the strategies and achieve this Objective. They include:

Chief Human Capital Officers Council
Human Capital Collaborations

HHS Partners :
HHS OpDivs and StaffDivs engage and work with a broad range of partners and stakeholders to im-

Performance Indicators

Performance Measure 5.3.1 Work Experience

Description	Type	Start Date	End Date	Rating
Intrinsic Work Experience (From Federal Employee Viewpoint Survey)	Target			
	Actual			

Performance Measure 5.3.2 Employee Satisfaction

Description	Type	Start Date	End Date	Rating
Employee Satisfaction with Opportunities for Professional Development and Growth (From Federal Employee Viewpoint Survey)	Target			
	Actual			

Performance Measure 5.3.3 Employee Engagement

Description	Type	Start Date	End Date	Rating
Employee Engagement Index (From Federal Employee Viewpoint Survey)	Target			
	Actual			

Strategy 5.3.1. Recruitment, Hiring & Retention

Build and sustain a strong workforce through improved recruitment, hiring, and retention efforts

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 5.3.1.1. DEIA Plan

Develop and implement the HHS Diversity, Equity, Inclusion and Accessibility (DEIA) Strategic Plan to advance diversity, equity, inclusion, and accessibility in the HHS workforce and remove any potential barriers to diversity, equity, inclusion, and accessibility in the workforce, including establishing a framework to address workplace harassment.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 5.3.1.2. Incentives & Flexibilities

Leverage incentives and flexibilities to enhance the Department’s competitiveness in the job market, and develop mechanisms to the recruitment, hiring, and retention of a high-caliber and qualified workforce.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 5.3.1.3. Representation & Promotion

Increase diverse demographic representation and promotion outcomes by partnering with hiring managers and leveraging data to make informed decisions regarding recruitment, promotion, and retention strategies consistent with Merit System Principles.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 5.3.1.4. Engagement & Collaboration

Facilitate regular engagement between hiring managers, human resources professionals, leaders, and other stakeholders, and support collaborations with public, private, and academic sectors to advance opportunities to recruit, support, and train an ethnically, socially, and experientially diverse workforce.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 5.3.1.5. Diversity & Inclusion

Invest in diversity and inclusion efforts, including Employee Resource Groups and interest groups, to increase involvement and participation of the workforce in cultivating a culture of inclusion and equity across the Department.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Strategy 5.3.2. Training & Professional Development

Leverage training and professional development opportunities to develop and manage a high-performing workforce

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 5.3.2.1. Performance & Satisfaction

Ensure better performance and greater job satisfaction by fostering a performance-focused culture aimed at bolstering existing skillsets and competencies while closing the mission-critical skill gap in emerging areas of high value, including both technical and soft skills, that benefit employees in advancing the mission of HHS.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 5.3.2.2. Accountability

Increase leaders' and managers' accountability for delivering results in improving diversity and equity outcomes in their hiring practices and promoting a culture that supports employees in identifying, accessing, and receiving professional development opportunities that are unique to their career needs and aspirations.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 5.3.2.3. Diversity & Inclusion

Increase access to diversity and inclusion training and developmental opportunities for HHS leaders, managers, and staff to foster a culture of inclusion and equity among an increasingly diverse workforce.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Strategy 5.3.3. Insight & Tools

Provide leaders and managers with the insight and tools to effectively carry out change management, organizational learning, and succession planning

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 5.3.3.1. HR Systems

Modernize human resource systems, policies, and processes using data and best practices for effective recruitment, staffing, retention, succession planning, and workforce planning.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 5.3.3.2. Best Practices

Apply best practices in change management to improve how employees are managed and supported in today’s fast-changing workplace environment, contributing to recruitment and retention efforts while promoting transparency, trust, and accountability across the organization.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 5.3.3.3. Engagement, Collaboration & Communication

Facilitate engagement, collaboration, and communication between HHS leaders, managers, and employees in ensuring a work environment that promotes inclusive policies and flexibilities, such as work schedule flexibilities and remote work opportunities, that are responsive to the Department’s evolving needs.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 5.3.3.4. Succession Planning

Promote succession planning for mission-critical occupations to increase organizational resilience and effectiveness by facilitating the regular transfer of institutional knowledge among the workforce.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 5.3.3.5. DEIA

Take a data-driven approach to advancing policies that promote diversity, equity, inclusion, and accessibility within the HHS workforce, while protecting the privacy of employees and safeguarding all personally identifiable information and protected health information.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 5.3.3.6. Leading Practices

Support, coordinate, and encourage HHS efforts to conduct research, evaluation, and other evidence-building activities to identify leading practices, and other promising practices, for broadening participation and opportunities for advancement in HHS employment, and to assess and promote the benefits of diversity, equity, inclusion, and accessibility for federal performance and operations and barriers to achieving these goals.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

5.4. Facilities, Technology & Data

Ensure the security and climate resiliency of HHS facilities, technology, data, and information, while advancing environment-friendly practices

HHS supports strategies to ensure the security of HHS facilities, technology, data, and information, while advancing environment-friendly practices. HHS is focused on shifting the culture of data use across the enterprise to maximize the power of data. The Department is leveraging modernization as a gateway to strengthened cybersecurity and enhanced risk management. HHS also captures and applies lessons learned from real-world experiences to strengthen operational resilience.

Performance Goals ~ The HHS Annual Performance Plan provides information on the Department's measures of progress towards achieving the goals and objectives described in the HHS Strategic Plan for FY 2022–2026. Below are the related performance measures for this Objective.

Stakeholder(s):

Contributing OpDivs and StaffDivs :

All OpDivs and StaffDivs contribute to achievement of this objective.

HHS Partners :

HHS OpDivs and StaffDivs engage and work with a broad range of partners and stakeholders to implement the strategies and achieve this Objective. They include:

Chief Information Officers (CIO) Council

Cyber-ERM Community of Interest/Practice (CyberCOI)

Federal Privacy Council

HHS AI Community of Practice (CoP)

HHS AI Council

Performance Indicators

Performance Measure 5.4.1 Authorized Systems

Description	Type	Status	Start Date	End Date	Percentage
Increase the percentage of systems with an Authority to Operate	Target	Increased			
	Actual				

Performance Measure 5.4.2 Phishing Resistance

Description	Type	Status	Start Date	End Date	Percentage
Improve Phishing Reporting and Resistance Percentages	Target	Increased			
	Actual				

Performance Measure 5.4.3 GHG Emissions

Description	Type	Status	Start Date	End Date	Metric Tons
Reduce HHS GHG emissions (Metric Tons CO2 Equivalent) from Prior FY	Target	Reduced			
	Actual				

Performance Measure 5.4.4 MSW Diversion

Description	Type	Status	Start Date	End Date	Percentage
Increase HHS owned facilities municipal solid waste (MSW) diversion rate	Target	Increased			
	Actual				

Performance Measure 5.4.5 Energy Intensity

Description	Type	Status	Start Date	End Date	MMBtu/kSF
Reduce energy intensity (MMBtu/kSF) from prior FY	Target	Reduced			
	Actual				

Performance Measure 5.4.6 Water Intensity

Description	Type	Status	Start Date	End Date	Gal/kSF
Reduce water intensity (Gal/kSF) from prior FY	Target	Reduced			
	Actual				

Strategy 5.4.1. Data

Strategically shift the culture of data use across the enterprise towards sharing data to maximize the power of data

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 5.4.1.1. Sharing

Evaluate the behaviors, risk-framework, and incentive structure around data sharing and increase the value of data to be an enterprise-level asset for the Department.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 5.4.1.2. Management

Advance effective data management and ethical data use across the Department by addressing essential elements related to data integrity, quality, privacy, and security.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 5.4.1.3. AI/ML

Create and utilize strategic frameworks for the trustworthy and ethical deployment of artificial intelligence and machine learning solutions across the Department.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Strategy 5.4.2. Cybersecurity & Risk

Leverage HHS modernization as a gateway to strengthened cybersecurity and enhanced risk management

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 5.4.2.1. IT & ET

Modernize legacy information technology infrastructure, processes, and systems and deploy emerging technologies, such as artificial intelligence and machine learning, and Zero Trust architecture.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 5.4.2.2. Strategic Alignment

Align information security risk management and information technology modernization efforts with enterprise risk management by sharing opportunities and risks among information security and privacy, information technology, and other management disciplines, which will help HHS to ensure that information security and information technology modernization initiatives directly support mission priorities and HHS stakeholders, and consistently meet mandated requirements.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 5.4.2.3. Risk & Threats

Continually improve staff awareness of HHS risk posture and cybersecurity threats through awareness programs.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Strategy 5.4.3. Resilience & Continuity

Capture and apply lessons learned from real-world experiences to strengthen operational resilience and continuity to deliver the HHS mission

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 5.4.3.1. Assets

Ensure the continuity of government by protecting employees and safeguarding HHS physical and digital assets during natural or man-made events through viable Continuity of Operations and Occupant Emergency Plans. Implement best practice security measures when modernizing and remodeling workspaces.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 5.4.3.2. Workforce

Strategically hire, train, equip and empower the appropriate workforce charged with ensuring the safety and security for all HHS employees, visitors, and assets.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Strategy 5.4.4. Climate

Implement the climate resiliency actions as indicated in the HHS Climate Action and Resilience Plan to bolster resilience of its operations and assets from impacts of climate change

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 5.4.4.1. Carbon Pollution

Mitigate and prevent carbon pollution from HHS operations and procurement activities.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 5.4.4.2. Waste & Recycling

Prevent and reduce waste and pollution by diverting waste to landfill and eliminate the use of single use plastic through promotion and establishment of closed loop recycling processes.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 5.4.4.3. Water

Continually improve energy and water efficiency in facility operations across HHS facilities real estate portfolio.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

Tactic 5.4.4.4. Facilities

Prioritize and implement projects to ensure HHS facilities are resilient against excessive heat, extreme weather, wildfires, drought, and flooding.

Performance Indicators

Description	Type	Start Date	End Date
	Target		
[To be determined]	Actual		

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