CONTENTS

Letter from the Director ................................................................. 2
Background and Introduction .......................................................... 3
Strategic Planning Process ............................................................... 5
Vision and Mission ...................................................................... 7
Strategies, Goals and Objectives ...................................................... 8
Strategy 1: Strengthen and Enhance Communicable Disease Surveillance, Epidemiological ........................................... 9
Strategy 2: Enhance Communication, Education and Outreach ................................................................. 11
Strategy 3: Promote and Support Effective Public Health Policy, Legislation and Regulation .................................. 13
Strategy 4: Research and Advance New Insights and Innovative Solutions to Public Health Problems ............. 14
Strategy 5: Strengthen Public Health Preparedness and Response ........................................................................... 14
Strategy 6: Advance Workforce Development and Training to Strengthen Public Health Practice .................. 15
Strategy 7: Promote Strong Long-term Planning and Quality Improvement among CDCP Programs .......... 16
Acknowledgments ....................................................................... 17
LETTER FROM THE DIRECTOR

Dear Colleagues,

It gives me great pleasure to present the first Communicable Disease Control and Prevention (CDCP) Division Strategic Plan for 2016-2020.

This Strategic Plan builds upon the Strategic Plans of the CDCP Programs (Acute Communicable Disease Control, Immunization, Tuberculosis Control, the Public Health Laboratories, Veterinary Public Health, and Viral Hepatitis Prevention) as well as the Strategic Plans and priorities of the Los Angeles County (LAC) Department of Public Health (DPH) and the County of Los Angeles.

The Strategic Plan outlines the major activities of the CDCP Division and the strategic priorities for the next five years, including:

- strengthen and enhance communicable disease surveillance, epidemiological investigation, and laboratory detection;
- enhance communication, education and outreach;
- promote and support effective public health policy, legislation and regulation;
- research and advance new insights and innovative solutions to public health problems;
- strengthen public health preparedness and response;
- advance workforce development and training to strengthen public health practice; and
- promote strong long-term planning and quality improvement among CDCP Programs.

This Strategic Plan is a dynamic, evolving document and will be revised, as needed, to accommodate changing priorities to meet the demands and challenges of communicable disease control due to such factors as emerging infectious diseases (e.g., Ebola preparedness and the response to Zika virus), the rise of multi-drug resistant bacteria (e.g., multi-drug resistant and extremely drug resistant tuberculosis), and outbreaks (e.g., the recent measles outbreak).

There are two companion documents currently in preparation that will supplement the Strategic Plan; namely, the performance measures for the progress towards achieving the goals and objectives in the Plan, as well as an annual, prioritized workplan that indicates the specific activities of focus in the current year.

The CDCP Division and its Programs value our partnerships with other DPH Divisions/Programs, other County Departments, State and Federal partners, and our stakeholders in the Community. The goals of the Strategic Plan can only be fully achieved through such collaborative partnerships.

I welcome any feedback or suggestions on the Strategic Plan and appreciate your partnership with our Division.

With best regards,

Robert J. Kim-Farley, M.D., M.P.H.
Director, Communicable Disease Control and Prevention
BACKGROUND

The great achievements in Public Health in the 20th century are, in large part, due to the gains in communicable disease prevention and control in such areas as sanitation, food safety, vaccines, antibiotics and improved nutrition. The health protections provided by communicable disease prevention and control shifts the mortality burden from communicable diseases in the young to chronic diseases in the old. Therefore, by the end of the 20th century, the three leading causes of death were chronic diseases (coronary heart disease, stroke and lung cancer). These early successes of communicable disease control actions made it possible to imagine that communicable disease would be a thing of the past.

However, this optimism led to complacency towards communicable disease threats and, during the 1980s, as national, state and local support for communicable disease surveillance and control declined, new diseases such as HIV emerged; and there was a reemergence of tuberculosis (including multidrug resistant strains), which spread through U.S. cities. A 1992 report issued by the Institutes of Medicine (IOM), Emerging Infections: Microbial Threats to Health in the United States, described the major factors that contribute to disease emergence, including societal changes and the ability of microbes to evolve and concluded that emerging communicable diseases are a major threat to U.S. health.

In the 21st century, communicable diseases continue to be a serious threat as new diseases emerge and known diseases re-emerge in epidemic proportions. Adding to this is the continuing increase in antimicrobial resistance, globalization, the threat of bioterrorism and the decreasing capacity to recognize and respond to microbial threats. To deal with these threats requires a stronger, more flexible public health system that is well-prepared to respond to known disease problems, as well as to address the unexpected, whether it be an Ebola outbreak, a disease caused by an unknown organism, or a bioterrorist attack.

INTRODUCTION

The LAC DPH Communicable Disease Control and Prevention (CDCP) Division’s Strategic Plan for 2016-2020 provides a roadmap for the work necessary during the next 5 years to realize our vision of “all persons and animals in LAC free from suffering, disability and death due to communicable diseases.”

Today’s communicable disease challenges are broad and complex due to microbes evolving and adapting to changing populations and environments. The emergence of new viruses, such as H1N1 influenza, the re-emergence of tuberculosis (TB), record-high levels of pertussis, and the resurgence of diseases like measles, demonstrate the continuing threat to health and the ability to prevent and control disease. To address these challenges, CDCP must maintain and strengthen surveillance, outbreak response, and preparedness capabilities while pursuing public health policy, bolstering collaborative partnerships, delivering education and technical assistance to providers and the public, and developing and maintaining a highly skilled workforce.

The CDCP Division is comprised of five major programs: Acute Communicable Disease Control Program, Immunization Program, Public Health Laboratories, Tuberculosis Control Program, and Veterinary Public Health. It is also home to the Adult Viral Hepatitis Coordinator, the Meaningful Use Coordinator, the
Performance Improvement Coordinator, and the Coordinator for Communicable Diseases in Correctional/Detention Facilities. The collective mission of all CDCP programs and coordinators is to reduce the risk factors and disease burdens of preventable communicable diseases for all persons and animals in LAC through surveillance, early detection and screening, disease investigation, implementation of prevention and control measures, and state of the art laboratory services. CDCP also provides education, training, and technical assistance; develops and advances policies; and addresses public health emergency preparedness as it relates to communicable diseases. CDCP is responsible for the prevention and control of a wide range of communicable diseases, including TB, foodborne, vector-borne, blood-borne, and vaccine preventable diseases as well as communicable animal diseases. Excluded from CDCP oversight are sexually transmitted diseases that are not vaccine preventable, including HIV/AIDS.
STRATEGIC PLANNING PROCESS

The strategic planning process included a review of the current LAC/DPH Strategic Plan, the Strategic Plans for all five of the programs in CDCP and the LAC Adult Viral Hepatitis Prevention Plan. A CDC Framework for Preventing Infectious Diseases and the National Center for Emerging and Zoonotic Infectious Disease Strategic Plan 2012-2017 also helped inform the Plan. Strategies, goals and objectives from each of the five CDCP Program Strategic Plans and the DPH Strategic Plan were grouped into common themes and the CDCP Division Strategic Plan was drafted based on these common themes. A draft of the CDCP Division Strategic Plan was circulated to all five CDCP Program Directors and comments and suggestions were solicited as a major topic during a CDCP Leadership Group meeting. Comments and suggestions from the CDCP Program Directors were adapted into the final plan.

CDCP’s Strategic Plan is organized into seven strategies. Each strategy includes goals and objectives.

- **Strategy 1: Strengthen and Enhance Communicable Disease Surveillance, Epidemiological Investigation and Laboratory Detection** aims to maintain and integrate surveillance systems in CDCP, support further enhancements of surveillance systems, enhance the use of health information technology, improve communicable disease investigations, and enhance public health laboratory services.

- **Strategy 2: Enhance Communication, Education and Outreach** seeks to strengthen internal and external partnerships; strengthen communication with internal and external stakeholders; and provide training and education to health care providers, veterinarians, laboratorians and the public.

- **Strategy 3: Promote and Support Effective Public Health Policy, Legislation and Regulation** focuses on developing and advancing public health policies, legislation and regulation as well as exercising Health Officer Authority.

- **Strategy 4: Research and Advance New Insights and Innovative Solutions to Public Health Problems** supports the pursuit of research opportunities, the communication of research findings and the translation of research findings into evidence-based public health practice.

- **Strategy 5: Strengthening Public Health Preparedness and Response** supports improving preparedness activities to prevent and respond to urgent/emerging communicable diseases, including outbreaks, bioterrorism and other public health emergencies.

- **Strategy 6: Advance Workforce Development and Training to Strengthen Public Health Practice** aims to attract and recruit a knowledgeable, diverse workforce and provide training and professional development to the CDCP workforce.

- **Strategy 7: Promote Long-term Planning and Quality Improvement among CDCP Programs** focuses on development of CDCP Program Strategic Plans and participation in the development of the LAC/DPH Strategic Plan as well as continuously improving program processes and interventions.

To assess how well the Goals and Objectives of the CDCP Strategic Plan are being met, CDCP Administration in collaboration with the CDCP Leadership Group is developing performance measures to track and evaluate yearly progress. In addition, a crosswalk will be conducted to match CDCP Program
performance measures to Goals and Objectives in the CDCP Strategic Plan. CDCP Programs are encouraged to add or modify performance measures to improve alignment between their performance measures and the CDCP Strategic Plan. To implement their Program Strategic Plans, CDCP Programs develop an annual prioritized Operational Plan identifying activities and events which address Goals and Objectives in their Program Strategic Plans.
VISION

All persons and animals in Los Angeles County free from suffering, disability and death due to communicable diseases.

MISSION

To reduce the risk factors and disease burdens of preventable communicable diseases for all persons and animals in Los Angeles County, in partnership with others, through providing the best possible health promotion, surveillance, investigative, laboratory, and disease prevention and control services.

DETAILED MISSION STATEMENT

To reduce the risk factors for contracting or transmitting communicable diseases and communicable disease burdens, when preventable, for all persons and animals in LAC, in partnership with other programs within and outside LAC/DPH, including LAC Department of Health Services (DHS), other LAC and City agencies, residents, organizations, communities and health care providers through:

• Promotion of healthy behaviors;
• Surveillance of diseases and risk factors to guide public health action;
• Early detection and screening for communicable diseases;
• Investigation of communicable disease reports and coordination of control measures to prevent disease;
• Offering state-of-the-art laboratory services;
• Promotion of effective preventative public health, personal health, and animal health services in partnership with the health care community;
• Working with health care providers, hospitals, long-term care facilities, and treatment centers to implement evidence-based procedures and guidelines for the prevention and treatment of communicable diseases;
• A strong and appropriate workforce with proper job classifications.
## STRATEGIES AND GOALS

### STRATEGY 1: Strengthen and enhance communicable disease surveillance, epidemiological investigation, and laboratory detection
- Goal 1.1: Strengthen communicable disease surveillance
- Goal 1.2: Efficiently conduct communicable disease investigations, manage cases effectively and implement control measures rapidly
- Goal 1.3: Enhance use of health information technology and meaningful use regulations for public health purposes
- Goal 1.4: Expand and upgrade laboratory services to ensure high-priority, state-of-art testing capabilities including Electronic Laboratory Reporting and notifiable disease reporting

### STRATEGY 2: Enhance communication, education and outreach
- Goal 2.1: Enhance and strengthen internal and external partnerships
- Goal 2.2: Strengthen communication with internal and external stakeholders
- Goal 2.3: Provide training and education to healthcare providers, veterinarians, laboratorians and the community regarding communicable disease
- Goal 2.4: Strengthen health communication

### STRATEGY 3: Promote and support effective public health policy, legislation and regulation
- Goal 3.1: Develop and advance public health policies, legislation and regulations to prevent, detect and control communicable disease
- Goal 3.2: Exercise Health Officer Authority to enforce local orders and ordinances, California Department of Public Health (CDPH) orders and rules and statutes that pertain to public health

### STRATEGY 4: Research and advance new insights and innovative solutions to public health problems
- Goal 4.1: Ensure that CDCP Programs initiate and expand research in the practice of public health

### STRATEGY 5: Strengthen public health preparedness and response
- Goal 5.1: Enhance the ability to prepare for, prevent, and respond to urgent/emerging communicable diseases, including outbreaks, bioterrorism, and other public health emergencies

### STRATEGY 6: Advance workforce development and training to strengthen public health practice
- Goal 6.1: Attract, recruit and retain a knowledgeable, diverse, and sustainable workforce
- Goal 6.2: Provide training, professional development and career enhancement opportunities to the entire CDCP workforce

### STRATEGY 7: Promote strong long-term planning and quality improvement among CDCP programs
- Goal 7.1: Develop and implement a functional, useful CDCP Division Strategic Plan and CDCP Programmatic Strategic Plans
- Goal 7.2: Actively participate in the development and implementation of the LAC DPH strategic plan and the Disease Control Bureau strategic plan
- Goal 7.3: Continuously improve program processes and interventions
- Goal 7.4: CDCP Administration actively seeks to provide support to the CDCP programs as needed
STRATEGY 1

Strengthen and Enhance Communicable Disease Surveillance, Epidemiological Investigation, and Laboratory Detection

Goal 1.1: Strengthen communicable disease surveillance.

Objective 1.1a: In collaboration with LAC/DPH Information Technology (DPH IT), enhance and maintain LAC/DPH internal disease surveillance systems, such as eHARS TRIMS, VCMR, Casewatch, CMAP, and animal bite and animal disease reporting databases.

Objective 1.1b: In collaboration with LAC/DPH Information Technology (DPH IT), integrate LAC/DPH internal disease surveillance systems including systems such as eHARS, TRIMS, VCMR, Casewatch, CMAP, and animal bite and animal disease reporting databases.

Objective 1.1c: In collaboration with LAC/DPH Information Technology (DPH IT), seamlessly interface LAC/DPH internal disease surveillance systems with external electronic systems at the local, state, and federal level including integration of electronic systems of local hospitals, LAC/DHS hospitals, California Department of Public Health (CDPH) such as Cal-READI and the Centers for Disease Control’s National Healthcare Safety Network (NHSN).

Objective 1.1d: Enhance vaccine-preventable disease surveillance and measurement of vaccine coverage.

Goal 1.2: Efficiently conduct communicable disease investigations, manage cases effectively, and implement control measures rapidly.

Objective 1.2a: Standardize disease investigation processes internally and in partnership with Community Health Services (CHS) to ensure timely, efficient and high-quality investigations.

Objective 1.2b: Ensure timely and effective communicable disease case management both internally and in partnership with CHS.

Objective 1.2c: Strengthen contact investigation and contact management processes both internally and in partnership with CHS.

Goal 1.3: Enhance use of health information technology and meaningful use regulations for public health purposes.

Objective 1.3a: Maintain the syndromic surveillance system to assess the magnitude of existing outbreaks or health conditions in humans and explore innovative use of syndromic surveillance in other areas including animal health.
Objective 1.3b: Increase the number of providers who are reporting vaccines administered into CAIR (California Immunization Registry).

Objective 1.3c: Promote electronic reporting of notifiable communicable disease by healthcare providers and veterinarians.

Objective 1.3d: Promote Electronic Laboratory Reporting (ELR) for all laboratories reporting human and animal communicable disease results in LAC.

Objective 1.3e: Explore using Electronic Health Records (EHRs) for the detection and reporting of notifiable communicable diseases starting with outreach to LAC DHS or other external partners to determine the feasibility of developing an EHR-based automated surveillance system for notifiable communicable diseases.

Objective 1.3f: Explore using EHRs for public health purposes including extraction of data (e.g. immunization records) and electronic prompts to call attention to risk factors (e.g. pop up alerts for diabetes testing for patients diagnosed with tuberculosis, prompts to offer vaccines).

Goal 1.4: Expand and upgrade laboratory services to ensure high-priority, state of art testing capabilities including Electronic Laboratory Reporting and notifiable disease reporting.*

Objective 1.4a: Evaluate/assess the viability of all existing laboratory services including those provided by the Environmental Toxicology Laboratory.

Objective 1.4b: Expand laboratory services based on client needs, anticipated testing volumes, methods available, projected turnaround times and cost-effectiveness.

Objective 1.4c: Search for new laboratory service areas that can respond to emerging public health needs and are cost effective.

Objective 1.4d: Expand automated electronic ordering and reporting capabilities for reportable diseases to improve information flow between the Public Health Laboratories and DPH Programs.

Objective 1.4e: Evaluate opportunities to provide contracted services to other local health departments and to the California Department of Public Health.

*See Strategy 5, Objective 5.1a for Emergency Preparedness laboratory goal.
STRATEGY 2

Enhance Communication, Education and Outreach

Goal 2.1: Enhance and strengthen internal and external partnerships.

Objective 2.1a: Collaborate with DPH Office of Communications and Public Affairs (OCPA) and local stakeholders, partners, and communities as well as other allies to promote prevention, reduce risk factors and decrease the disease burdens of communicable disease in LAC.

Objective 2.1b: Partner with the LAC/DPH School Liaison to effectively interact with schools, school districts, private school organizations, school health centers, PTAs, and other school related groups such as the Los Angeles County Office of Education (LACOE).

Objective 2.1c: Maintain active participation in intra and inter-divisional work-groups and meetings, including presenting at the Public Health Commission on an annual basis and Ad Hoc presentations to Health Deputies on timely and important topics.

Objective 2.1d: Each CDCP Program will assess internal and external customer satisfaction through yearly surveys.

Goal 2.2: Strengthen communication with internal and external stakeholders.

Objective 2.2a: Disseminate useable, timely surveillance data, public health research and evidence based resources through multiple communication channels such as journal publications, Departmental and other publications, CDCP Program and Division websites, scientific meetings, grand rounds, and stakeholder meetings.

Objective 2.2b: Provide expertise to local, state and national advisory communicable disease committees and policy-making organizations either as an Ad Hoc or formal member.

Objective 2.2c: Strengthen communication and coordination between CDCP programs and other divisions and programs in DPH such as Environmental Health (EH), and especially within the Bureau of the Medical Director/Disease Control including Community Health Services (CHS), and Division of HIV and STD Programs (DHSP), to facilitate collaborative efforts for rapid response to communicable disease investigations and outbreaks.

Objective 2.2d: Expand and improve accessibility and functionality of CDCP Programs’ internal (PHD employee portal) and external (LAC/DPH) websites (publichealth.lacounty.gov).
Goal 2.3: Provide training and education to healthcare providers, veterinarians, laboratorians and the community regarding communicable disease.

Objective 2.3a: Provide evidence-based training, technical assistance, education (including CEUs) and expert consultation to internal and external healthcare providers, veterinarians and laboratorians to improve prevention and control of communicable disease, including vaccination, screening, detection, reporting and treatment of communicable disease.

Objective 2.3b: In collaboration with DPH Community Health Services (CHS), OCPA, and other partners, provide education to the community to promote prevention and control of communicable diseases.

Objective 2.3c: Identify, develop and disseminate culturally appropriate patient educational materials to medical providers, community-based organizations and individuals.

Goal 2.4: Strengthen health communication.

Objective 2.4a: In collaboration with OCPA, maximize the use of traditional mass media and social media to provide health information to consumers and stakeholders.

Objective 2.4b: Provide media and presentation training opportunities to CDCP staff including speaking on/off camera, radio interviews, social media, and preparing press statements.
STRATEGY 3

Promote and Support Effective Public Health Policy, Legislation and Regulation

Goal 3.1: Develop and advance public health policies, legislation and regulation to prevent, detect and control communicable disease.

Objective 3.1a: Actively identify, research, analyze, make recommendations on, and monitor public health policy issues being discussed by governing officials, elected officials, professional societies, labor unions, and other entities that set or influence policy and/or practices.

Objective 3.1b: With Departmental approval, engage in advocacy, development and adoption and/or modification of public health policies, including taking positions of advocacy and testifying at legislative hearings for policies that have LAC Board of Supervisors approval.

Objective 3.1c: Inform, educate and collaborate with internal and external stakeholders regarding the potential public health impacts of policies and/or procedures that exist or are being considered.

Objective 3.1.d: Support appropriate implementation and enforcement of new or amended policies/regulations/legislation.

Goal 3.2: Exercise Health Officer Authority to enforce local orders and ordinances, California Department of Public Health (CDPH) orders and rules and statutes that pertain to public health.

Objective 3.2a: All CDCP Programs with Health Officer Mandates derived from the State and/or LAC legislation, regulation and/or codes shall exercise those mandates under the delegated authority of the Health Officer.

Objective 3.2b: Develop Health Officer Orders under Health Officer Authority to meet new challenges in emerging communicable disease (e.g. Ebola), in the absence of existing or planned statewide legislation.
STRATEGY 4
Research and Advance New Insights and Innovative Solutions to Public Health Problems

Goal 4.1: Ensure each CDCP Program initiates and expands research in the practice of public health.

Objective 4.1a: Seek and actively pursue research opportunities to expand scientific knowledge, assess program impact and identify cutting edge solutions to public health problems (e.g. Video Direct Observation Therapy, using Civil Surgeons for tuberculosis screening, new lab testing platforms).

Objective 4.1b: Communicate research findings to stakeholders, partners and the public through presentations at conferences, publication in scientific literature, meetings and the media.

Objective 4.1c: Enhance the translation of public health research into evidence based public health practice.

Objective 4.1d: Ensure each CDCP Program initiates or expands research through a yearly written research agenda approved by the Division Director.

STRATEGY 5
Strengthen Public Health Preparedness and Response

Goal 5.1: Enhance the ability to prepare for, prevent, and respond to urgent/emerging communicable diseases, including outbreaks, bioterrorism, and other public health emergencies.

Objective 5.1a: Enhance laboratory capacity to conduct rapid detection and reporting of biological and chemical agents.

Objective 5.1b: In collaboration with DPH Emergency Preparedness and Response Program (EPRP), develop pre-event protocols for use during outbreaks (e.g., protocols for collecting data on risk factors, disease severity, and other clinical information).

Objective 5.1c: Expand repository of LAC/DPH branded educational materials that can easily be updated or modified in the event of an outbreak or emergency.

Objective 5.1d: Ensure all CDCP staff are prepared to respond to unusual health events via education, training and active participation in drills and exercises. All staff, regardless of job classification, should be encouraged to volunteer for preparedness drills and exercises, such as staffing PODS, when such opportunities arise.

Objective 5.1e: Ensure that all CDCP Programs have a Continuity of Operations Plan (COOP) in place.
STRATEGY 6

Advance Workforce Development and Training to Strengthen Public Health Practice

Goal 6.1: Attract, recruit and retain a knowledgeable, diverse, and sustainable workforce.

Objective 6.1a: Advocate for examination bulletins and class specifications that are designed to optimally recruit candidates with competencies necessary to perform the duties of the position.

Objective 6.1b: Ensure opportunities for recruiting and mentoring of students and fellows (e.g., the Epidemiologic Intelligence Service, Council of State and Territorial Epidemiologist, CDC Public Health Associates, public health and nursing students) in CDCP programs.

Objective 6.1c: Maintain adequate skill mix and staffing levels to enable sufficient functional capacity of CDCP Programs.

Goal 6.2: Provide training, professional development and career enhancement opportunities to the entire CDCP workforce.

Objective 6.2a: Encourage all levels of CDCP personnel to pursue career development through trainings and conferences as appropriate to individuals’ roles.

Objective 6.2b: Encourage employee participation in mentoring of students, fellows and new staff.

Objective 6.2c: Actively seek funding opportunities for staff training.
STRATEGY 7

Promote Strong Long-term Planning and Quality Improvement among CDCP Programs

Goal 7.1: Develop and implement a functional, useful CDCP Division Strategic Plan and CDCP Programmatic Strategic Plans.

Objective 7.1a: Ensure that each CDCP Program and the CDCP Division has a current strategic plan that aligns with the LAC/DPH Strategic Plan and Bureau of the Medical Director/Disease Control goals and objectives.

Objective 7.1b: Ensure that each CDCP Program and the CDCP Division develop annual work plans that include strategies, deliverables, activities, and timelines based upon the goals and objectives of their respective Strategic Plan.

Objective 7.1c: Monitor progress towards the achievement of the goals and objectives contained in the CDCP Division and Program Strategic plans.

Goal 7.2: Actively participate in the development and implementation of the LAC/DPH Strategic Plan and the Disease Control Bureau Strategic Plan.

Objective 7.2a: Ensure CDCP representation in the LAC/DPH and DPH Disease Control strategic planning process.

Goal 7.3: Continuously improve program processes and interventions.

Objective 7.3a: Ensure each CDCP Program conducts one quality improvement project per year using the Plan, Do, Study, Act tool to achieve measurable improvements in efficiency, effectiveness, services and processes.

Goal 7.4: CDCP Administration actively seeks to provide support to the CDCP Programs as needed.

Objective 7.4a: Ensure an effective process of completing Board and DPH assignment, including clearly defining the assignment request; tracking assignments; and supporting the drafting, review, and finalizing of the assignment.

Objective 7.4b: Provide Divisional level administrative support for personnel actions, travel and training, supplies and equipment procurement, and needed policy changes when programs are experiencing difficulties with Bureau, DPH, Agency, and/or CEO administration.

Objective 7.4c: Explore opportunities for co-locating CDCP Programs in one location.
ACKNOWLEDGEMENTS

The CDCP office would like to thank the following individuals for their time, support and valuable contributions.

CDCP Office Staff:

Robert Kim-Farley, MD, MPH, Communicable Disease Control and Prevention Division Director
Patricia Araki, MPH
Peter Guan
Susan Hathaway, RN, MPH
Julia Heinzerling, MPH
Bernice Jackson, MD, MPH
Blanca Lapointe
Maureen Quraishi
Tonia Smith, MPA
Jenny Stohner

CDCP Programs Directors:

Alicia Chang, MD, MS
Karen Ehnert, DVM, MPVM, DACVPM
Nicole Green, PhD, D(ABMM)
Laurene Mascola, MD, MPH
Michelle Parra, PhD

Photo Credits Front Page: All photos Public Domain from CDC Public Health Image Library. Photo ID numbers: 5404, 14805, 9257 and 20913.
Photo credits for 5404, 9257-James Gathany
Los Angeles County
Department of Public Health
Communicable Disease Control and Prevention
313 N. Figueroa Street
Room 227
Los Angeles, CA 90012
www.publichealth.lacounty.gov/cdcp

LOS ANGELES COUNTY DEPARTMENT OF PUBLIC HEALTH
Cynthia A. Harding, MPH
Interim Director

Jeffrey D. Gunzenhauser, MD, MPH
Interim Health Officer

DIVISION OF COMMUNICABLE DISEASE CONTROL AND PREVENTION
Robert Kim-Farley, MD, MPH
Director, Communicable Disease Control and Prevention