2006 report of major accomplishments

"The President of the United States has given me a very clear mission: to help Americans live longer, healthier, and better lives, and to do it in a way that protects our economic competiveness as a Nation."
—Mike Leavitt, Secretary
U.S. Department of Health and Human Services

Message from the Secretary

Dear Colleagues,

As we look to the ambitious year ahead, it's important that we pause to reflect on the rich range of accomplishments we will be building on. The accomplishments highlighted in this report are only some of the Department's myriad of actions that improve the quality of life here at home, and around the world.

From laboratory research at our Institutes in Bethesda, Maryland, to field work in Kubu Simbelang village in North Sumatra, we have manned the front lines of human health, pushing the limits of knowledge, and pioneering health-care models for the 21st Century.

Some accomplishments this year have been stunning in their scope. More than 38 million people now have prescription drug coverage; our nation has been mobilized to plan and prepare for potential pandemic flu; standards are being put in place to make health information technology interoperable; and we are bringing cost and quality transparency to the American health-care system.

Our shared goal is to improve, protect, and prolong the quality of human life and I am reminded daily that every decision we make and action we take directly touches people's lives.

Our accomplishments flow from the strategic architecture drafted last year in our 500-Day Plan. That plan affirmed six broad visions and, as you will read, we have made clear and significant progress towards each.

As you know, our 500-Day Plan is dynamic. We review and update it every 250 days and the second update will be published in January 2007. The pace will pick up.

The foundation of accomplishments outlined here will let us reach higher, to strive for even greater accomplishment in the coming year.

I recognize that behind each of these accomplishments there lies substantial individual achievement, testament to the personal commitment that so infuses HHS. I thank each of you for your dedication. I hope your holidays are safe and filled with joy.

Michael O. Leavitt
Secretary
Health and Human Services

Accomplishments

Vision 1:	Transform the Health Care System
Vision 2:	Modernize Medicare and Medicaid
Vision 3:	Advance Medical Research
Vision 4:	Secure the Homeland
Vision 5:	Protect Life, Family, and Human Dignity
Vision 6:	Improve the Human Condition throughout the World

Vision 1: Transform the Health Care System

We are entering the era of patient-centered health care—an era where we approach prevention and staying healthy with the same rigor as treatment after we are sick. HHS is advancing the adoption of a health-care system based on transparency, where people have full access to cost and quality information. We are refocusing heath care at the community level, and we are harnessing health information technology to connect our care systems and give people ownership of their health records and choices they make.

Value-Driven Health Care: Better Care, Lower Cost

More than 100 companies already have committed to incorporate the four cornerstones of value-driven health care in their health insurance procurement practices. Armed with cost and quality information and provided with health-care incentives, Americans will be better able to make health-care choices based on cost and quality. To explain and gain the support for a value-driven health-care system, HHS officials held meetings all across the country with CEOs, medical societies, and state and local government officials. A six-site pilot project is studying ways information can be collected, quality measured, and that information shared across communities.
www.hhs.gov/transparency

Health Information Technology

There have been numerous advances in harnessing information technologies to improve patient safety and convenience, while reducing the cost of providing care. Some of the numerous benefits of health IT initiatives include: a reduction in medical errors, avoidance of costly duplicate testing, and elimination of unnecessary hospitalizations.
www.hhs.gov/healthit

American Health Information Community (AHIC):

To further the President's goal of making electronic health records available to most Americans within 10 years, AHIC added two new Workgroups this year. The Confidentiality, Privacy & Security Workgroup was created to make recommendations regarding the protection of personal health information, and the Quality Workgroup was created to specify how to capture, aggregate, and report quality-of-care data for a core set of ambulatory and inpatient measures.
www.hhs.gov/healthit/ahic/workgroups.html

Electronic Health Records:

This year, the certification of the first 35 ambulatory electronic health record products took place to enable physicians to adopt new technologies with minimal risk.
www.hhs.gov/healthit

Advances in Electronic Health Technology Adoption:

E-prescribing standards were published. In addition, the Centers for Medicare & Medicaid Services published a regulation providing incentives for hospitals to donate electronic health technology to physicians and other health care practitioners for the first time.
www.cms.hhs.gov/EPrescribing

The Indian Health Service Clinical Reporting System:

The IHS Clinical Reporting System, serving more than 560 federally recognized tribes in 35 states, was singled out for a Nicholas E. Davies Public Health Award as an example of excellence in public health technology. This system collects, reports, and evaluates results quarterly and annually. Additionally, sixty-seven locations within the Indian Health Service are

using electronic health records to better serve their patients.
www.ihs.gov/cio/crs

National Resource Center for Health Information Technology:

This online center links to more than 5,000 health IT information resources, an evaluation toolkit to help those implementing health IT projects, and a collection of lessons learned from the field. www.healthit.ahrq.gov

State Alliance for e-Health:

HHS and the National Governors Association's Center for Best Practices established the State Alliance for e-Health to facilitate collaboration among decision makers on implementation of state-level interoperable health information exchanges.
www.nga.org/center/ehealth

Health Center Expansion

The expansion of community-based health centers over the past year is unprecedented. One hundred and twenty-two health-care centers were developed, bringing the total number of new sites to nearly 900 since 2001. These centers deliver preventive and primary care to patients who are from medically underserved populations. Since 2001, an additional 4.5 million patients have been treated by health centers, bringing the total number of people served by the health-center system to approximately 14.8 million.
www.bphc.hrsa.gov/chc

Expansion of Care for People with HIV/AIDS

More than 530,000 people living with HIV/AIDS receive services through the Ryan White CARE Act programs. For two years, we have been working with Congress on a bipartisan basis to ensure access to this critical program. We are pleased that this essential legislation was reauthorized this December. More than $2 billion in funding were distributed to states, metropolitan areas, and community-based organizations for prevention and treatment. Centers for DiseaseControl and Prevention published recommendations designed to make voluntary HIV screening a routine part of medical care for all patients aged 13 to 64. www.hab.hrsa.gov/history.htm and www.AIDS.gov

Federal Mental Health Action Agenda

HHS is transforming the nation's mental health service delivery system by implementing the 70 steps outlined in the Federal Mental Health Action Agenda. Over the course of five years, $114 million in new Mental Health Transformation State Incentive grants have been awarded to help convert the complex mix of mental health services, treatment, and support into a seamless delivery system.
www.samhsa.gov/Federalactionagenda/NFC_TOC.aspx

National Breast and Cervical Cancer Early Detection Program

To date, more than 6.5 million screening examinations have been conducted as part of the National Breast and Cervical Cancer Early Detection Program. This gives women in underserved communities access to preventive services that make early diagnosis possible, enhancing their chances for survival. Overall, the program has helped to diagnose almost 27,000 cases of breast cancer, more than 88,000 cases of mild-to-severe cervical precancerous lesions, and more than 1,700 cases of invasive cervical cancers.
www.cdc.gov/cancer/nbccedp

Vision 2: Modernize Medicare and Medicaid

The heart of our Medicare and Medicaid modernization is to design a financially sustainable program providing high-quality health care to our seniors, the disabled, and those of low income—the most vulnerable populations. We want to design a Medicaid program that is flexible so that benefits are tailored to needs, allowing millions more to obtain insurance.

Medicare Prescription Drug Coverage (Part D)

In its first year, more than 38 million Medicare beneficiaries have prescription drug coverage. Program satisfaction rate is more than 80 percent. Over 3 million prescriptions are filled each day at an average savings of $1,200 a year for each beneficiary. Monthly plan premiums, averaging less than $24, are nearly 40 percent lower than original estimates and did not increase in 2007. Program costs are 25 percent less than predicted.
www.medicare.gov/pdphome.asp

During the first year of enrollment more than 40,000 partners mobilized to hold more than 50,000 events across the country. Beneficiaries were given assistance online, in person, or on the phone.
www.mymedicare.gov

Modernizing the Fee-For-Service Medicare Program

The Centers for Medicare & Medicaid Services is also moderinizing traditional Medicare. Adminstrative contractor reforms, introducing competitive bidding in some areas of the program, rationalizing payment systems, and moving to pay-for-reporting methods of reimbursement will help move traditional Medicare into the 21st century.
www.cms.hhs.gov/MedicareContractingReform

Transforming Medicaid

We are begining to transform the Medicaid program as well. The unprecedented decline of $200 billion projected Medicaid spending over the next 10 years is attributable to three factores: restoring the proper State-federal financing collaboration; lower prescription drug spending because of Medicare Part D (which reduced Medicaid spending on prescription drugs); and adoption of innovative State waivers that have slowed Medicaid spending in States that have adopted them.

Earlier this year, HHS approved three “benchmark” Medicaid plans in West Virginia Kentucky, and Idaho. These plans were made possible by legislation signed by President Bush in February and will enable these States to offer a simplified benefit design to State residents. Other States, including Florida, Arkansas, and Massachusetts, have designed innovative programs that have relied on private sector options to make health insurance available to more low-income residents.
www.cms.hhs.gov/DeficitReductionAct

Vision 3: Advance Medical Research

Our complimentary goals are to focus research on identified health-care needs, and to speed the process by which viable research results benefit people in need. We are striving to have medications that are safer and more effective because they are chosen based on the personal characteristics of the patient. We are focusing on breakthroughs that protect Americans from a broad range of threats.

Next Generation Influenza Vaccine

HHS is helping pave the way for the next generation of influenza vaccines. In 2006, the Department awarded more than $1 billion to accelerate the development and production of cell-based influenza vaccine production methods. This investment will make possible a more flexible alternative to traditional egg-based production methods,

which will ultimately help modernize and strengthen vaccine production.
www.pandemicflu.gov/vaccine/vproductioncells.html

DNA Vaccine

Scientists at the Centers for Disease Control and Prevention, in collaboration with Fort Dodge animal biologics and pharmaceutical company have developed the world's first licensed DNA vaccine. DNA vaccines can be developed more quickly than traditional vaccines during epidemic emergencies, are less vulnerable to changes in temperature, and can be adapted relatively easily to combat similar organisms. This scientific breakthrough could serve as the basis for the future development of human vaccines, and it represents promising progress for preparedness efforts and vaccination assistance in the developing world.
www.cdc.gov/od/oc/media/pressrel/r050718.htm

The Human Papillomavirus (HPV) Vaccine

A two decade scientific quest by researchers at the National Cancer Institute and elsewhere culminated in Food and Drug Administration's recent approval of the HPV vaccine Gardasil. This is the first vaccine ever approved for use against cancer. It protects against infection from the two types of HPV that cause the majority of cervical cancers worldwide.
www.fda.gov/womens/getthefacts/hpv.html

Advancing HIV/AIDS Treatment and Vaccine Development

The Food and Drug Administration granted some form of approval to 18 different marketing applications for antiretroviral products, including easy-to-take dosage forms that have proven useful in the treatment of children with HIV/AIDS. In addition, the Center for HIV/AIDS Vaccine Immunology, a vaccine consortium established in 2005, is working to address key immunological roadblocks to HIV development and to design, develop, and test novel HIV vaccine candidates.
www.aids.gov and www.fda.gov/oashi/aids/hiv.htm

Research on Influenza

Through participation in the Influenza Genome Sequencing Project supported by the National Institutes of Health, scientists discovered that the spread of influenza is more closely related to the movement of people to and from work than from geographical distance and air travel. Computer models have been developed to predict how a pandemic flu would spread and the most effective ways to contain it. The genome project's goal is to map complete genetic sequences of influenza virus isolates. As of October 2006, more than 1,644 isolates have been sequenced and released to GenBank.
www.niaid.nih.gov/dmid/genomes/mscs/influenza.htm
and
www.nigms.nih.gov/News/Results/FluModel040306

Facilitating Increased Influenza Vaccine

The Food and Drug Administration has provided guidance development and additional scientific work to enable manufacturers to improve the science of developing vaccines. A record number of influenza vaccine doses will be manufactured this year, and distribution continues throughout the season. HHS estimates that a total of 110-115 million doses will be available this year and anyone who wishes to protect themselves and their families should be able to get vaccinated.
http://www.fda.gov/oc/opacom/hottopics/flu.html

Oncology Biomarker Qualification Initiative

HHS agencies are working together for the first time to find biologic markers that could help improve cancer treatments. The Food and Drug Administration and Centers for Medicare and Medicaid Services are collaborating with the National Cancer Institute, part of the National Institutes for Health, to create a framework for qualifying cancer biomarkers that can be useful in research, the development of diagnostic tests, medical product quality assessment, and evidence-based decision-making.
www.fda.gov/fdac/features/2006/306_cancer.html

Research on the Safe Use of Medications

The Agency for Healthcare Research and Quality is developing new evidence-based information on the safe use of medications. The agency is also developing important information about new medical procedures, the safety of certain medications for pregnant women and infants, and gaps in our understanding of certain medical conditions.

www.ahrq.gov/clinic/certsovr.htm

Advancing Treatment of Chronic Diseases

The Indian Health Service is managing a chronic care disease collaborative pilot program to develop care processes that can be applied across multiple chronic disease conditions. The five pilots are approaching chronic diseases in a coordinated manner rather than managing each disease separately. Ultimately, this five-year initiative will help identify and develop new ways to improve health care for American Indians and Alaskan Natives.

www.ihs.gov/nonmedicalprograms/dirinitiatives

The Health Consequences of Involuntary Exposure to Tobacco Smoke

On June 27, 2006, the Surgeon General released the twenty-ninth report devoted to tobacco and health. This groundbreaking report proves, beyond any doubt, that secondhand smoke causes premature death and disease in children and non-smoking adults. Since the report's release, a number of initiatives designed to protect Americans from secondhand smoke have been instituted and there has been an increase in international efforts to prevent involuntary exposure to tobacco smoke.

www.surgeongeneral.gov/library/secondhandsmoke

The Genetic Association Information Network

A public-private partnership was formed to help identify the genetic pathways that increase the likelihood of developing complex diseases and to facilitate new avenues for prevention, diagnosis, and treatment. A robust research database will enable the rapid and broad distribution of genotype and phenotype data .

www.genome.gov/19518664

Vision 4: Secure the Homeland

Our goal is to seamlessly and rapidly provide resources and public health personnel when needed anywhere in the United States. Our outreach activities focus on bolstering state and local ability to help themselves and others in the event of a biological attack, pandemic influenza, or other major health emergency.

Pandemic Influenza Preparedness

A little over a year ago, the President called upon the nation to prepare for an influenza pandemic. The response has been unprecedented and the progress considerable. The Implementation Plan for the National Strategy for Influenza was completed, and in November, we released the Department's third Pandemic Planning Update.

PandemicFlu.gov:

HHS developed a major cross-government Web site providing planning and preparation check-lists and documents for government, business and industry, education, health, communities, and individuals and families. Information on the spread of H5N1, efforts to control it, research and development and history is also available. The entire site is available in Spanish, and key information is also available in more than a dozen languages.

www.PandemicFlu.gov

Pandemic Summits:

HHS organized and convened 56 state and local pandemic planning and preparation summits. These summits generated more than 50 agreements with governors and state officials and another 400 state and local summits developed locally-specific pandemic plans.
www.pandemicflu.gov/plan/states/convening.html

Influenza Antivirals:

By the end of 2006, HHS expects to take delivery on added orders that will increase the Strategic National Stockpile of antiviral drugs to 26 million courses. These drugs can be distributed to the states should an influenza pandemic be imminent. In addition, 31 million courses were made available for state purchase with HHS providing a 25 percent subsidy to all 50 states, the District of Columbia, the five U.S. territories, and the three Freely Associated States of the Pacific.
www.pandemicflu.gov/vaccine/index.html#medications

Pandemic Influenza Vaccine:

The CDC's Influenza Division has developed several candidate H5N1, H7N7, and H7N2, pre-pandemic vaccines to meet pandemic preparedness goals, and HHS is procuring a stockpile of pre-pandemic vaccines to help protect against the H5N1 virus.
www.pandemicflu.gov/general/index.html#h5n1

H5N1 Laboratory Test:

The United States is better prepared for an influenza pandemic as a result of the deployment of an H5N1 test to public health laboratories nationwide. This test gives local public health laboratories a surveillance tool for rapid detection of human infections with avian influenza viruses.
www.hhs.gov/news/press/2006pres/20060203.html

Preparing Specific Communities with Special Needs:

The Administration for Children and Families is ensuring that all state pandemic plans are responsive to the needs of refugees. HHS is also working with the Department of Homeland Security to ensure emergency management plans and activities at the federal, state, tribal, and community levels address the needs of the disabled and aging populations.
www.aoa.gov/press/preparedness/preparedness_pf.asp

Emergency Response

The September 11th attacks and Hurricanes Katrina, Rita, and Wilma were devastating events. HHS has taken several important steps to ensure our nation can respond to the health and human service needs of Americans in the wake of a natural disaster or terrorist attack.

Commissioned Corps, U.S Public Health Service:

The Corps has established, trained, and equipped specialized teams that can respond quickly and effectively to natural or manmade disasters or other urgent public health needs: the five Rapid Force Deployment Teams of 110 people can deliver primary care services; the four Mental Health Teams of 40 people can provide mental and behavioral health services; and the four Applied Public Health Teams of 45 people can augment many of the services provided by a county or local health department.
www.usphs.gov

The Medical Reserve Corps:

The Medical Reserve Corps (MRC) has established dedicated teams of medical and public health volunteers that assist in local prevention, preparedness, and emergency response activities.

The MRC has grown to over 500 units and coordinates more than 100,000 volunteers. MRC units are located in all 50 states, Washington, DC, Guam, Palau, Puerto Rico, the U.S. Virgin Islands, and Micronesia.
www.medicalreservecorps.gov

Louisiana Health Care System:
Hurricane Katrina incapacitated the Greater New Orleans heath care system, devastated its health care infrastructure, and severely impacted health care in a number of Louisiana parishes. From this adversity came an opportunity. Working together from the ground up, the Louisiana Health Care Redesign Collaborative strives to build an efficient 21st century healthcare system implementing technology, transparency, emergency preparedness and greater personal healthcare choices.
www.hhs.gov/louisianahealth

The Kidney Community Emergency Response Coalition:
HHS joined organizations and health-care providers in forming the kidney coalition, which developed a disaster response plan and can assist state and local officials during a disaster with medical needs for individuals with kidney failure. The National Kidney Foundation hosts a clearing house of Coalition activities
www.kidney.org/help

Satellite Emergency Communications System:
The Indian Health Service deployed the first satellite emergency communications system in HHS. This system will provide communications capabilities during a manmade or natural disaster should normal telephone circuits be unavailable.
www.ihs.gov/publicinfo/publicaffairs/pressreleases

The Laboratory Response Network:
The Centers for Disease Control and Prevention (CDC) are partnering with federal and state public health agencies in a network designed to detect terrorism agents and emerging infectious diseases. The CDC has conducted a series of workshops for state, local, and city public laboratory scientists, which have improved scientists' ability to detect and confirm the identity of biological terror agents, such as anthrax and plague.
www.bt.cdc.gov/lrn

e-Manifest:
The e-Manifest passenger notification system was implemented this year. By receiving, sorting, and distributing passenger contact information from airlines to state health departments in a secure environment, this system greatly increases the speed with which the Centers for Disease Control and Prevention can locate passengers who may have been exposed to a threat during health emergencies. The system was tested in April 2006 when it was used to address and contain an outbreak of mumps.
www.cdc.gov/mmwr/preview/mmwrhtml/mm5514a6.htm

World Trade Center

The Department has overseen federal screening, monitoring, and treatment efforts for World Trade Center first responders, and recently awarded and allocated $75 million for these efforts, bringing the total HHS funding support for responders and victims to over $750 million. HHS continues to help coordinate the federal, state, and local health response to the World Trade Center attack.
www.hhs.gov/wtc

Biological, Radiological, and Environmental Risks

HHS has made significant progress to help prepare the nation for biological, radiological, and environmental

threats by adding to the Strategic National Stockpile:

- Awarded a contract to develop and acquire 10,000 therapeutic courses of treatment of anthrax immune globulin, for emergency use to prevent and mitigate the disease-causing effects of anthrax;
- Awarded a contract that will facilitate the advanced development and acquisition of 20,000 treatment courses of ABthrax, an anthrax therapeutic treatment that addresses the toxemia of progressive anthrax disease;
- Purchased 200,000 doses of heptavalent botulism antitoxin;
- Awarded a contract for the manufacture and delivery of two licensed medical countermeasures for radiological or nuclear incidents; and
- Purchased 3.1 million pediatric doses of liquid potassium iodide, which can be used in response to an incident involving radioactive iodine.

www.hhs.gov/emergency and www.remm.nlm.gov

Vision 5: Protect Life, Family, and Human Dignity

Our hurricane-related programs have provided a broad range of services to both people and areas of need. HHS programs emphasize dignity and respect for the care of senior citizens and those with disabilities. Our work supports a culture of life and family that encourages prevention and self-reliance.

Response to Hurricanes Katrina, Rita, and Wilma

HHS provided immediate and ongoing response in physical and mental health care and is assisting in the ongoing reconstruction and health service efforts.

www.hhs.gov/katrina and www.hhs.gov/emergency

Immediate Response:

In the immediate aftermath, HHS deployed thousands of first responders to assist victims with their health and human services needs. The Indian Health Service deployed 600 of its 2,000 United States Public Health Service Commissioned Corps with capabilities in health care and environmental health. More than 500 people were mobilized to work in the field on mental health and substance abuse issues and to encourage people to seek mental health services. More than 17,000 counseling sessions provided assistance for those experiencing psychological distress.

The Centers for Medicare and Medicaid Services (CMS) assumed responsibility for managing the reimbursement aspect of the National Disaster Medical System, handling claims administration and payments to hospitals that served Katrina evacuees. By approving numerous waivers and establishing a pharmacy relief model, CMS gave providers the flexibility they needed to deliver services and receive payments, and made it possible for displaced beneficiaries to receive care in their new locations. CMS provided the states with over $2 billion in funding to provide medical care and relief.

On-Going Recovery Efforts:

The Department awarded $550 million in Social Services Block Grants to address the social and health needs of the victims of Hurricanes Katrina, Rita, and Wilma. This funding was given to states to provide health care; deliver mental health and social services; and repair, renovate, and construct health-care facilities. The Administration for Children and Families also helped by providing $90 million to Louisiana and other states to pay for costs associated with damage to Head Start centers and relocation of children to other Head Start programs in areas receiving evacuees.

HHS accelerated the awarding of grants to establish five new health center sites in Louisiana and designated parishes to maximize their eligibility for targeted funding. Additional funds were provided to help develop communications networks for use in natural disasters and other emergencies.

Health Care Insurance for Children

This year more than 200,000 children were provided new coverage, bringing the total number of children receiving health care through the State Children's Health Insurance Program (SCHIP) to over 6.1 million. SCHIP is administered by the Centers for Medicare and Medicaid Services and assists states in providing SCHIP coverage to the nation's uninsured children.
www.cms.hhs.gov/home/schip.asp

Prevention Legislation to Broaden Medicare Services

Medicare legislation was amended to include additional prevention services such as flu shots and cardiovascular disease and diabetes screenings.
www.cms.hhs.gov/PrevntionGenInfo

Aging and Disability Resource Centers

The Administration on Aging and the Centers for Medicare and Medicaid Services have increased by 89 percent the number of communities providing easier access to care. By modernizing community-based long-term care, many older Americans are able to receive needed care in their homes and communities.
aoa.gov/prof/aging_dis/aging_dis.asp and www.adrc-tae.org

Compassion Capital Fund

HHS awarded more than $58 million to 420 faith-based and community organizations through the Compassion Capital Fund. These funds help grassroots, faith-based, and community organizations promote healthy marriages, and provide aid for the homeless, at-risk youth, and rural communities. In support of the First Lady's Helping America's Youth initiative, the fund was used to launch the Communities Empowering Youth program, through which 100 inaugural three-year grants totaling more than $30 million were awarded.
www.acf.dhhs.gov/programs/ccf

Temporary Assistance for Needy Families (TANF) Welfare Reform Implementation

The TANF program was reauthorized in February and strengthens work requirements and provides assistance families need to move into meaningful careers through opportunities for education and job training. The Administration for Children and Families administers the many elements of this new welfare reform program. The ultimate goal is to improve the well-being of children. The renewed emphasis on work requirements within the States bore fruit with an acceleration of the decline of the number of families receiving cash assistance after several years of static caseloads. In 2006, the number of families receiving cash assistance from TANF fell to 1.77 million, the lowest level of welfare participation recorded since 1969.
www.acf.hhs.gov

Support for Strong Families and Healthy Marriages

One hundred million dollars in funding was dedicated to assist 226 organizations: 126 promote healthy-marriage programs and 100 groups encourage responsible fatherhood programs. HHS also awarded 12 new healthy marriage grants, helping to bring the total number of marriage education courses completed in the last year to over 7,250. The number of Native American healthy marriage grants increased by 80 percent, providing more than $2.9 million in funding.
www.acf.hhs.gov/healthymarriage

President's Award for Management Excellence

The Agency for Children and Families (ACF) created the Grants Center of Excellence using new technologies to improve services, reduce costs, standardize processes, and consolidate systems. ACF each year distributes

more than $46 billion to states and grantees. The center operates at one-tenth of the costs associated with other grant systems.
www.acf.hhs.gov/opa/spotlight/presidential_award.html

Repatriation of American Citizens Returned From the Conflict in Lebanon

The Administration for Children and Families assisted the Department of State in the repatriation of over 12,000 American citizens evacuated from Lebanon during hostilities there in July. Sixty-one flights arriving at four airports were provided with help in making domestic travel arrangements after entering the U.S., and those returning without access to financial resources were given assistance under provisions of Title XI of the Social Security Act. Approximately 5 percent of the returnees required refundable benefits to meet travel or other basic needs as part of this operation, and one percent of the returnees were granted waivers of repayment due to financial hardship.
www.acf.hhs.gov/programs/orr

Vision 6: Improve the Human Condition throughout the World

HHS is intensely involved in international efforts to monitor, plan, and prepare for the potential of a flu pandemic. We are working at reducing HIV/AIDS around the world and expanding our efforts to have an international network of early-warning infectious disease surveillance. The Department is supporting emerging democracies with health diplomacy, care, and compassion.

Health Care and Diplomacy Aboard the USNS Mercy

The U.S. Public Health Service Commissioned Corps participated in medical missions of the USNS Mercy which traveled throughout the Pacific and Indian Oceans in 2006. The Mercy treated patients in Bangladesh, Indonesia, and the Philippines.
www.globalhealth.gov/tsunami_mercy_020205.shtml

Expanding Health Diplomacy through Attachés

Health attachés are stationed in locations throughout the world, including Viet Nam, the People's Republic of China, South Africa, and India. This year the Department also established the position of health attaché to the African Union, which will be posted in Addis Ababa, Ethiopia.
www.globalhealth.gov

International Coordination

HHS is working with more than 93 countries and 20 international organizations in the International Partnership on Avian and Pandemic Influenza. HHS and Mexico signed an agreement to boost cooperation along the U.S.-Mexico border, participated in the first-ever federal-state binational Border Pandemic Influenza Forum, and convened the first meeting of officials from the border states of each country to discuss and coordinate their efforts.
www.hhs.gov/news/press/2006pres/20060920.html
and www.pandemicflu.gov/global

Global Surveillance

Monitoring and surveillance remains our first line of defense against the emergence of a pandemic influenza virus. The Center for Disease Control and Prevention (CDC) is currently one of four World Health Organization (WHO) Collaborating Centers in the world. As a WHO Collaborating Center for Surveillance, Epidemiology, and Control of Influenza, the CDC is an integral partner in the worldwide effort to conduct surveillance for changes in influenza viruses. The information is used to develop vaccine candidates for worldwide use, identify viruses with pandemic potential, and make biannual

recommendations about which influenza viruses should be included in annual vaccines.
www.phppo.cdc.gov/dphsdr/whoccphp
and www.pandemicflu.gov/global

The CDC developed an Influenza A/H5 Virus Real-Time RT-PCR Primer and Probe Set. Cleared by the FDA this year, this tool will assist surveillance efforts by diagnosing patients who are infected with viruses of A/H5 Asian lineage and providing epidemiological information.
www.cdc.gov/mmwr/preview/mmwrhtml/mm5505a3.htm

The National Institute of Allergy and Infectious Diseases supports Hong Kong-based program to detect the emergence of influenza viruses with pandemic potential in countries throughout Asia, including Vietnam, Thailand, and Indonesia. This program conducts extensive surveillance of influenza viruses in animals, analyzes new influenza viruses when they are found, and helps generate potential vaccines to guard against them. The CDC is also conducting influenza surveillance in refugee camps that house U.S.-bound refugees in Kenya, Tanzania, and Thailand.

The Centers for Disease Control and Prevention's International Emerging Infections Program hosted the first international rapid response training in Bangkok for avian and pandemic influenza. This training drew 14 countries and produced a standard curriculum for rapid response to respiratory pathogens, including avian and pandemic influenza. The Centers for Disease Control and Prevention and World Health Organization are now using this course to share best practices globally.
www.cdc.gov/ncidod/global/ieip/about.htm

President's Emergency Plan for AIDS Relief

The Centers for Disease Control and Prevention is working with the U.S. Department of State, U.S. Agency for International Development, and other federal agencies to support the treatment of HIV-infected people in 15 targeted countries. Activities have supported the antiretroviral treatment of more than 561,000 men, women, and children.
www.cdc.gov/nchstp/od/gap

President's Malaria Initiative

In less than a year, the President's initiative has reached millions of children and pregnant women, those most in need of assistance and intervention. The Centers for Disease Control and Prevention's malaria programs have helped design and implement the President's goal to control and reduce malaria-related deaths by 50 percent in five years. Field staff from the CDC are currently in seven countries, and by the end of 2007, field staff will be present in all 15 targeted countries.
www.cdc.gov/malaria

Human Trafficking

Through its program to rescue and assist victims of human trafficking, the Department certified 230 victims, including 34 minors. HHS also issued 18 grants to support direct, person-to-person contact, information sharing, and counseling. To further the reach of this effort, a unified policy was developed with U.S. Agency for International Development and U.S. Department of State that acknowledges the responsibility of those conducting programs overseas to report suspected cases of trafficking to U.S. Embassies.
www.acf.hhs.gov/trafficking

Ninth Biennial International Congress on Community Inclusion of Children, Youth, and Families with Special Health Care Needs

HHS convened this gathering of more than 450 participants from over 60 countries. Community Access and Resources for Everyone focused on the development of programs and blueprints that combine health, education, recreation, and social services to help children participate in everyday community activities.
www.neweditions.net/congress