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Strategic Planning

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Health Services

Overview of Health Services Resources:

- FY16 Expenditures: \$341,654,752 (68% of total)
 - Federal: \$175,854,685
 - Other: \$104,026,752
 - Restricted: \$6,612,215
 - State: \$55,161,101
- Approximate FTEs: 1,818

Strategic Plan and Performance Measures:

Goal 1 — Improve and protect the health and quality of life for all.

- Strategy 1.1 Promote the health of the community by providing health care services and programs, linking community services, and facilitating systems of care for women, children, and infants.
 - Objective 1.1.1— Provide funding for services and treatment for children with special health care needs, oversee the Newborn Bloodspot Screening, Newborn Hearing Screening, and Lead Screening Follow-up Programs, and ensure optimal systems of care are in place for South Carolina's children and their families.
 - Performance Measure #1 Meet or exceed the American Academy of Pediatrics (AAP) benchmark of 95% infants screened for hearing loss by one month old.
 - Performance Measure #2 Percentage of Medicaid-eligible children 2 years of age who had one or more capillary or venous blood testing for lead poisoning
 - Objective 1.1.2—Promote and protect the health of women, men and adolescents through the provision of evidence-based preventive, clinical and supportive services and education and administer the state funds earmarked for SC's 15 Sexual Assault Centers.
 - Performance Measure #3 The 15 Rape Crisis Centers, in conjunction with its external partners, will inform and educate over 50,000 people in the state about sexual violence issues and prevention methodologies.

- Performance Measure #4 By the end of FY 2017, increase the total number of clients served by 4%, ensuring that low-income clients comprise at least 97% of total clients served.
- Performance Measure #5 By the end of FY 2017, make available a broad range of contraception and increase the contraceptive reliability rate from 79% to 82%.
- Objective 1.1.3 Provide supplemental foods and nutrition education through health assessment and referral, nutrition and breastfeeding education in the WIC program.
 - Performance Measure #6 Increase the number of exclusive breastfeeding infants by 5% from 7,712 breastfeeding infants.
 - Performance Measure #7 Improve the PCE (Participant Centered Education) skills utilized by the CPA (Competent Professional Authorityincludes physicians, registered dietitians, registered nurses and nutritionists) during the certification and nutrition education process.
- Objective 1.1.4— Collect and analyze population-based maternal and child health data, using appropriate scientific methods, to inform and evaluate activities, programs, and policies that impact maternal and child health populations.
 - Performance Measure #8 Number of policies, programs, or organizations that Bureau of Maternal and Child Health staff contribute data analysis or evaluation results to inform.
- Objective 1.1.5—Increase appropriate oral health services for women, infants, children and high risk populations including those with special health care needs.
 - Performance Measure #9 By August 2017, increase the number of school aged children receiving at least one dental sealant on permanent molars to 9,784.
- Strategy 1.2 Facilitate community-oriented prevention services and work with the Centers for Disease Control, local health departments, and stakeholders to prevent disease and injury and promote healthy lifestyles.

- Objective 1.2.1— Facilitate a coordinated and comprehensive approach to improving chronic diseases through the implementation of policy, systems, environmental change, and quality improvement initiatives among health care systems as well as the implementation of evidence based lifestyle intervention programs.
 - Performance Measure #10 The number of people participating in National Diabetes Prevention Programs.
 - Performance Measure #11 Number of partner organizations with 3 or more Healthy Aging implementation sites (across all interventions).
 - Performance Measure #12 Number of children and adults participating in Supplemental Nutrition Education Programs.
- Objective 1.2.2 Reduce fatal and nonfatal injuries by efficiently implementing the Child Passenger Restraint (CPS) Program, and effectively utilizing injuryrelated morbidity and mortality data to create primary prevention messages which enhance knowledge and awareness and strengthen prevention strategies.
 - Performance Measure #11 Number of partner organizations with 3 or more Healthy Aging implementation sites (across all interventions).
 - **Performance Measure #13** The number of high quality Child Passenger Safety (CPS) educational presentations provided.
 - Performance Measure #14 Number of National Highway, Transportation and Safety Administration (NHTSA) Certified Child Passenger Safety (CPS) Technician Classes conducted.
 - **Performance Measure #23** Percent of violent death records obtained for data abstraction purposes from SC Coroner Offices for incidents meeting ICD-10 Coding Standards; expectation.
 - Performance Measure #24 Percent of violent death records obtained for data abstraction purposes from SC Law Enforcement Offices for incidents meeting ICD-10 Coding Standards; expectation.
- Objective 1.2.3 Strengthen cancer prevention and control efforts by collaborating with key stakeholders and increasing screening for breast and cervical cancer for eligible Best Chance Network and WISEWOMAN participants.

- Performance Measure #15 Proportion of women at least 50 years old or older who have received mammograms through the Best Chance Network.
- Performance Measure #16 Percent of WISEWOMAN patients who participate in evidence-based cardiovascular health coaching and lifestyle services. (WISEWOMAN - Well-Integrated Screening and Evaluation for Women Across the Nation)
- **Objective 1.2.4** Track chronic diseases and their associated risk factors and share information with internal and external stakeholders for appropriate program planning, implementation and monitoring.
 - Performance Measure #17 At least 95% of annual newly diagnosed cancer cases in SC collected and reported to CDC and NAACCR by deadline Dec. 1.
 - Performance Measure #18 South Carolina Behavioral Risk Factor Surveillance System (BRFSS) number of survey completions
- Objective 1.2.5 Reduce tobacco use in S.C. by implementing programs to prevent youth from starting, support quitting among current tobacco users, eliminate exposure to secondhand smoke and eliminate tobacco-related health disparities.
 - Performance Measure #19 The proportion of school districts implementing model tobacco-free policies.
 - Performance Measure #20 The number of residents living in multi-unit housing facilities that are protected from secondhand smoke in living areas, common areas, and lobbies.
- Objective 1.2.6 Provide technical assistance and consultation to internal and external partners to improve the health and well-being of minority and underserved populations through implementation of national standards and policies and evidence based/promising practices for reducing health disparities and achieving health equity.
 - Performance Measure #21 Number of DHEC staff qualified as bilingual workers, interpreters or readers.
 - Performance Measure #22 Proportion of women screened in the Best Chance Network (BCN) Program who are minorities

- Strategy 1.3 Implement strategies to aid in prevention and control of communicable diseases and illnesses in South Carolina.
 - **Objective 1.3.1** Detect and control communicable diseases and other events of public health importance.
 - Performance Measure #25 Make summary data available with regards to reports by healthcare providers of diseases and conditions on the DHEC List of Reportable Conditions.
 - **Objective 1.3.2** Prevent the occurrence and spread of HIV, AIDS, STDs and Viral Hepatitis.
 - Performance Measure #26 Prevent the occurrence and spread of HIV, AIDS, STDs and Viral Hepatitis.
 - **Objective 1.3.3** Reduce vaccine preventable diseases and increase immunization rates.
 - Performance Measure #27 All immunization providers will be mandated to report administered immunization into the Immunization Registry by January 1, 2017.
 - Objective 1.3.4 Collect, analyze, and disseminate HIV and STD data to complement prevention activities by driving Partner Services and Linkage to Care efforts, identifying spatial, temporal, and demographic trends, and facilitating research.
 - Performance Measure #28 Identify and report persons with HIV. At least 85% of the expected number of cases diagnosed will be reported to the HIV/AIDS Surveillance program within twelve months of diagnosis year.
- Strategy 1.4 Provide select public health services equitably across the state.
 - **Objective 1.4.1** Provide certification, nutrition education, breastfeeding peer counseling and Registered Dietician services for WIC clients.
 - Performance Measure #7 Improve the PCE (Participant Centered Education) skills utilized by the CPA (Competent Professional Authorityincludes physicians, registered dietitians, registered nurses and nutritionists) during the certification and nutrition education process.

- **Objective 1.4.2** Provide family planning information, pregnancy testing, counseling and birth control services.
 - Performance Measure #4 By the end of FY 2017, increase the total number of clients served by 4%, ensuring that low-income clients comprise at least 97% of total clients served.
 - Performance Measure #5 By the end of FY 2017, make available a broad range of contraception and increase the contraceptive reliability rate from 79% to 82%.
- **Objective 1.4.3** Conduct STD and HIV testing, treatment and partner service investigations.
 - Performance Measure #29 Conduct STD and HIV testing, treatment and partner service investigations.
- **Objective 1.4.4** Coordinate with local communities to promote positive public health policies and environmental changes to help prevent heart disease, stroke, cancer, diabetes and obesity.
 - Performance Measure #10 The number of people participating in National Diabetes Prevention Programs.
 - Performance Measure #30 Number of SC Health + Planning Toolkit trainings offered.
- **Objective 1.4.5** Conduct investigations of reportable illnesses to prevent outbreaks of contagious disease.
 - Performance Measure #31 Percent of salmonellosis cases with exposure history.
- **Objective 1.4.6** Perform contact investigation, treatment and case management for tuberculosis clients.
 - Performance Measure #32 For TB patients with positive AFB sputumsmear results, increase the proportion who have contacts elicited.
- **Objective 1.4.7** Provide child and adult vaccines through health departments and community-based clinics.

- Performance Measure #27 All immunization providers will be mandated to report administered immunization into the Immunization Registry by January 1, 2017.
- Strategy 1.5 Obtain and maintain vital statistics.
 - **Objective 1.5.1** Provide registration of vital event records (birth, death, fetal death, abortion, marriage and divorce) to ensure timely, high quality data.
 - Performance Measure #33 Meet Vital Statistics Cooperative Program (VSCP) deliverables for closeout of statistical files for birth records.
 - Performance Measure #34 Meet VSCP deliverables for closeout of statistical files for death records.
 - **Objective 1.5.2** Issue birth, death, marriage and divorce records to the public in a timely manner.
 - Performance Measure #35 100% of applications for certified copies of vital events that are received through the mail are receipted within 5 business days.
 - **Objective 1.5.3** Collect, maintain, analyze and disseminate data on cancer incidence.
 - Performance Measure #17 At least 95% of annual newly diagnosed cancer cases in SC collected and reported to CDC and NAACCR by deadline Dec. 1.
 - Performance Measure #36 Less than 3% of new cancer cases are identified only through death certificates (standard from National Program of Cancer Registries (NPCR)).
 - **Objective 1.5.4** Coordinate collection, analysis and dissemination of public health surveillance data as part of federally funded surveillance programs
 - Performance Measure #18 South Carolina Behavioral Risk Factor Surveillance System (BRFSS) number of survey completions
 - Performance Measure #37 South Carolina Pregnancy Risk Assessment Monitoring System (PRAMS) survey response rate

- Performance Measure #38 Publish the Annual report on Reportable Conditions by October 31 of each year.
- **Objective 1.5.5** Make public health statistics available on the Agency's interactive web data query tool, SC Community Assessment Network (SCAN) and to appropriate region, state and federal agencies/programs in a timely manner.
 - Performance Measure #39 Publish 2016 interim report for HAI by October 15, 2016; and publish HAI Annual report by April 15, 2017.
- **Objective 1.5.6** Provide high quality public health statistics and data to academic researchers.
 - Performance Measure #17 At least 95% of annual newly diagnosed cancer cases in SC collected and reported to CDC and NAACCR by deadline Dec. 1.
 - Performance Measure #18 South Carolina Behavioral Risk Factor Surveillance System (BRFSS) number of survey completions
 - Performance Measure #36 Less than 3% of new cancer cases are identified only through death certificates (standard from National Program of Cancer Registries (NPCR)).
 - Performance Measure #37 South Carolina Pregnancy Risk Assessment Monitoring System (PRAMS) survey response rate
- Objective 1.5.7 Chair and coordinate the activities of the agency Institutional Review Board (IRB), to ensure the protection of human subjects in any research project sponsored by DHEC.
 - Performance Measure #40 Review of IRB requests are completed within 30 days of submission
- Strategy 1.6—Facilitate a coordinated, comprehensive public health preparedness and response system for natural or man-made disaster or terrorist event.
 - Objective 1.6.1 Establish and maintain relationships with planning partners at all levels (local, State, Federal, private, and non-governmental organizations) regarding public health preparedness, emergency planning, and response issues.
 - Performance Measure #41 Increase health care coalition membership by 10% in each Public Health Region

- Performance Measure #42 Facilitate discussions between DHEC, the American Red Cross, and local facilities to identify potential SMNS locations in three counties currently without any SMN shelter.
- Objective 1.6.2 Apply for and administer Public Health Emergency Preparedness, Hospital Preparedness Plan, Ebola and other grants; monitor compliance and ensure compliance guidelines are met.
 - Performance Measure #43 Submit all required grant reports on time
- Objective 1.6.3 Maintain DHEC's parts of state-level plans, DHEC's agency emergency operations plan and all applicable Standard Operating Procedures; train and exercise staff.
 - Performance Measure #42 Facilitate discussions between DHEC, the American Red Cross, and local facilities to identify potential SMNS locations in three counties currently without any SMN shelter.
 - Performance Measure #44 Increase number of Closed Points of Distribution (POD) by 25%
 - Performance Measure #45 Ensure all coalition members are afforded opportunity to participate in at least one exercise annually.
- **Objective 1.6.4** Coordinate agency participation in responses to emergency events and in state and regional training exercises.
 - Performance Measure #45 Ensure all coalition members are afforded opportunity to participate in at least one exercise annually.

Health Services

Key State Governmental Partners:

S.C. Department of Education (SCDE)

- DHEC conducts summer feeding inspections under contract for SCDE. (Objective 2.2.2)
- DHEC investigates foodborne illness outbreaks associated with SCDE facilities. (Objective 2.2.2)
- DOH provides school nurse oral health orientation, training on the basic screening survey process and linkage with the school-based dental prevention providers that work under a Memoranda of Agreement with DHEC. Collaborates to plan and conduct a statewide Oral Health Needs Assessment every 5 years to meet CDC grant deliverable. Provides technical expertise for inclusion of standards based oral health education. (Objective 1.1.5)
- The Agency collaborates with SCDE to implement the Youth Risk Behavior Survey and Youth Tobacco Survey in selected schools across the state. (Objective 1.2.5)
- DHEC collaborates with the SCDE to assist schools and school districts with development and implementation of wellness policies, to implement the S.C. FitnessGram system, to implement the S.C. Farm to School Program, and to provide quality physical education and daily physical activity for students. (Objective 1.4.4)
- Collaborates with the S.C. Cancer Division Comprehensive Cancer Program to identify ways to increase access to comprehensive high quality care. (Objective 1.4.4)
- DHEC and SCDE provide joint funding for the State School Nurse Consultant position in DHEC to provide nursing leadership, consultation, and technical assistance for school health services statewide. (Objective 1.1.1)

S.C. Emergency Management Division (EMD)

- DHEC has responsibilities under state emergency operations plans for ESF-8 health and medical, ESF-10 hazardous materials, ESF-6 sheltering, ESF-3 public works, and ESF-17 Agriculture. DHEC participates in plan writing, plan review, exercises, and emergency responses, and assigns staff to represent the agency at the SEOC. (Objective 1.6.1)
- DHEC maintains the Mass Casualty Annex to the State Emergency Operations Plan and participates in review and revision of a number of other sections and supporting plans which involve DHEC. DHEC also maintains the Agency emergency plan and supporting standard operating procedures. (Objective 1.6.3)
- DHEC responds to emergencies which require activation of the SEOC, and to public health outbreak investigations and responses. DHEC staff train for and participate regularly in State and regional exercises. (Objective 1.6.4)
- EMD coordinates emergency operations by the state with local resources. (Objective 2.2.3)

• DHEC works with SC EMD to identify opportunities for pre-hazard mitigation strategy development and disaster recovery planning and implementation. (Objectives 2.5.1, 2.5.2, 2.5.4)

S.C. Department of Health and Human Services (SCDHHS)

- Collaborates with DHEC on enhancing birth outcomes for the Medicaid population. (Objective 1.1.4)
- Provides funding for to support a portion of the contracts between DHEC and the Regional Perinatal Center hospitals. (Objective 1.1.4)
- Collaborated with DOH to develop a training and toolkit for pediatric offices to integrate oral health activities into medical homes, and that certifies medical practices to bill Medicaid for applying fluoride varnish for children. Advisory Council member. (Objective 1.1.5)
- Provides funding for newborn hearing screening and follow up services for Medicaid covered infants. (Objective 1.1.1)
- Provides funding for hemophilia factor, orthodontia and hearing services. (Objective 1.1.1)
- Provides funding for reproductive health and follow up services for Medicaid eligible clients. (Objective 1.4.2)
- Partnership to provide navigation of BCN patients with positive cancer findings to obtain coverage under the Breast and Cervical Treatment Act through SCDHHS-Medicaid. (Objective 1.2.3)
- SCDHHS collaborates with DHEC on a shared action plan to strengthen cessation service provision and use of available resources to support quitting among the Medicaid population. (Objective 1.2.5)
- The Quitline manager is a member of the joint-agency SBIRT project team working to implement an evidenced-based approach to the screening, identification, intervention and treatment of substance abuse (drug and alcohol), domestic violence, depression and smoking for pregnant women. The Quitline manager provides guidance and technical assistance on the SBIRT component to address tobacco cessation intervention. (Objective 1.2.5)
- DHEC Vital Statistics shares data on deaths occurring in the state to allow SCDHHS to mark individuals receiving Medicaid benefits as deceased and to support SCDHHS estate recovery program. (Objective 1.5.5)

S.C. Department of Mental Health (DMH)

- DHEC and DMH work together to incorporate mental health into ESF-8 Health and Medical needs during emergency planning and emergency response. (Objectives 1.6.1, 1.6.4)
- Collaborates with DHEC Division of Children's Health to increase availability of trained therapists to work with young children and their families. (Objective 1.1.1)

• DHEC provides accurate, timely, and useful health information and resources to support the implementation of tobacco-free worksites among the DMH. (Objective 1.2.5)

S.C. Department of Social Services (DSS)

- DHEC investigates foodborne illness outbreaks. (Objective 2.2.2)
- DHEC works with DSS regarding outbreaks involving child care facilities. (Objective 1.3.1)
- DHEC supports DSS during shelter operations; as such, DHEC works regularly with DSS to identify and establish shelters, develop procedures, train staff, and operate shelters during emergencies. (Objectives 1.6.1, 1.6.4)
- Seniors Farmers' Market Program DHEC WIC, DSS and Department of Agriculture work simultaneously with each other in providing this seasonal Farmers' Market Nutrition Program "FMNP." The program increases fruit and vegetable intake, provides direct income to local farmers, and promotes community-based farmers markets. Local farmers are reimbursed for the face value of the checks, which enhances their earnings and supports their participation in farmers' markets. (Objective 1.1.3)
- State Child Fatality Review Committee DHEC provides technical support to the State Child Fatality Review Committee, under contract with DSS, and generates the Committee annual report, which guides prevention efforts across the state that address child fatalities (non-motor vehicle related). (Objective 1.2.7)
- DHEC's Division of Injury and Violence Prevention (DIVP) and its Child Passenger Safety (CPS) Program collaborates with DSS to trainings child protective workers and foster parents in the proper use of child safety restraints. (Objective 1.2.2)
- DHEC's Division of Injury and Violence Prevention (DIVP) and its Child Passenger Safety (CPS) Program patterns with DOT to provide school transportation safety assessment in coordination with Safe Routes to School. (Objective 1.2.2).
- Data Sharing Agreement Agreement with DHEC/WIC and DSS to exchange information regarding potential clients. (Objective 1.1.4)
- DSS contracts with DHEC/Office of Professional and Community Nutrition Services to provide SNAP Nutrition Education Programs in eighteen (18) counties. (Objective 1.2.1)
- Division of Early Care and Education DHEC provides funding to DSS to provide data on the implementation of nutrition and physical activity standards for child care centers and to expand nutrition and physical activity standards to other types of child care provider groups (i.e. family and group child care home providers). DHEC works with DSS to assure the standards meet national best practice standards and to provide training and technical assistance to child care providers on nutrition and physical activity to help them comply with the standards. DHEC also collaborates with DSS in the state's efforts to implement outdoor learning environments and Farm to Preschool in the early care and education setting. (Objective 1.4.4)
- SNAP DHEC collaborates with the SDSS to expand and promote acceptance of SNAP/EBT, healthy bucks, and senior nutrition benefits vouchers at farmers' markets across the state. (Objective 1.4.4)

- DHEC Vital Statistics shares data on deaths occurring in the state to allow DSS to mark individuals receiving SNAP benefits as deceased. (Objective 1.5.5)
- DHEC Vital Statistics provides birth data to support investigation of child support obligations and certified copies of birth certificates for paternity determination, child support obligations and adoptions. (Objectives 1.5.2, 1.5.5)

Environmental Affairs

Overview of Environmental Affairs Resources:

- FY16 Expenditures: \$120,167,552 (24% of total)
 - Federal: \$23,577,231
 - Other: \$27,631,734
 - Restricted: \$31,147,574
 - State: \$37,811,014
- Approximate FTEs: 1,027

Strategic Plan and Performance Measures:

Goal 2 - Protect, enhance, and sustain environmental and coastal resources.

- Strategy 2.1 Implement and enforce strategies to protect and promote air quality.
 - **Objective 2.1.1** Review air permit applications and issue construction and operating permits to regulated entities.
 - Performance Measure #46 Maintain or decrease average number of permit process days.
 - Performance Measure #47 Meet ozone standard at 100% of ozone monitoring sites and maintain ozone standard by 2018.
 - Objective 2.1.2 Conduct compliance assistance and assurance through routine monitoring, review of operational and emissions reports, periodic inspections, and enforcement for air programs.
 - Performance Measure #47 Meet ozone standard at 100% of ozone monitoring sites and maintain ozone standard by 2018.
 - Objective 2.1.3 Ensure that the state is meeting the National Ambient Air Quality Standards (NAAQS) through the development of a State Implementation Plan (SIP), regulations, and compliance strategy.
 - Performance Measure #47 Meet ozone standard at 100% of ozone monitoring sites and maintain ozone standard by 2018.

- **Objective 2.1.4** Collect and analyze air samples, evaluate ambient air quality, and issue daily ozone forecasts.
 - Performance Measure #47 Meet ozone standard at 100% of ozone monitoring sites and maintain ozone standard by 2018.
- **Objective 2.1.5** Provide for licensure and performance standards related to asbestos.
 - Performance Measure #48 On an annual basis, inspect at least 15% of all asbestos abatement projects that have been issued an asbestos permit by the Department and are subject to the National Emissions Standards for Hazardous Air Pollutants (NESHAP)
- Strategy 2.2 Implement and enforce strategies to protect individuals from potential environmental and foodborne hazards.
 - **Objective 2.2.1** Review permit applications and issue retail food, septic tank, and small water system permits. Certify laboratories who report data to the agency.
 - Performance Measure #46 Maintain or decrease average number of permit process days.
 - Performance Measure #49 Improve compliance with R.61-25 Retail Food Establishments by the use of Downgrading and Civil Penalties.
 - **Objective 2.2.2** Conduct compliance assistance and assurance through routine monitoring, inspections, and enforcement.
 - Performance Measure #49 Improve compliance with R.61-25 Retail Food Establishments by the use of Downgrading and Civil Penalties.
 - Objective 2.2.3 Respond to citizen concerns, sanitation issues, chemical and oil spills, vector-borne diseases, foodborne outbreaks, rabies investigations, fish kills, and environmental radiological emergencies.
 - Performance Measure #49 Improve compliance with R.61-25 Retail Food Establishments by the use of Downgrading and Civil Penalties.
 - Objective 2.2.4 Collect samples for particulate matter, ambient water, wastewater, drinking water, shellfish, and beach monitoring, as well as sample analysis for water-quality related parameters.

- Performance Measure #54 Percent of surface waters meeting numeric standards (fishable, swimmable)
- Performance Measure #47 Meet ozone standard at 100% of ozone monitoring sites and maintain ozone standard by 2018.
- Strategy 2.3 Implement and enforce strategies to protect against hazards associated with waste-related activities and mining.
 - Objective 2.3.1 Review permit applications and issue permits for solid waste, hazardous waste, infectious waste, radiological waste, underground storage tank, and mining activities.
 - Performance Measure #46 Maintain or decrease average number of permit process days.
 - **Objective 2.3.2** Conduct compliance assistance and assurance through routine monitoring, inspections, and enforcement for land and waste programs.
 - Performance Measure #50 The number of compliance monitoring activities (CMAs) at hazardous waste facilities and the number of hazardous waste facilities on the Government Performance and Results Act (GPRA) Baseline that have: (1) control of unacceptable human exposures from site contamination; (2) control of migration of contaminated groundwater; and (3) selection and construction of remedies to clean up contaminated sites.
 - Objective 2.3.3 Promote waste reduction and recycling through technical assistance and education/awareness programs to local governments, schools, businesses, and the public.
 - Performance Measure #51 The number of teachers educated annually on environmental and recycling curriculum; and amount of municipal solid waste recycled annually.
 - Objective 2.3.4 Oversee the investigation, remediation, and clean-up of contamination from Superfund, dry-cleaning, above-ground storage tanks, underground storage tanks, and brownfield sites.
 - Performance Measure #52 Underground Storage Tank (UST) Release Cleanup Progress (release closures per federal fiscal year or FFY)

- Performance Measure #53 Number of acres made "ready for Brownfields reuse"
- Strategy 2.4— Implement and enforce strategies to protect and promote water quality.
 - Objective 2.4.1 Review permit applications and issue permits for water-related activities including wastewater discharges from industrial and domestic sources, stormwater, drinking water, water quantity, and wetlands.
 - Performance Measure #46 Maintain or decrease average number of permit process days.
 - Performance Measure #54 Percent of surface waters meeting numeric standards (fishable, swimmable)
 - Performance Measure #55 Percent of population served by community public water systems that are in compliance with all health based standards
 - **Objective 2.4.2** Conduct compliance assistance and assurance through routine monitoring and inspections and enforcement for water programs.
 - Performance Measure #54 Percent of surface waters meeting numeric standards (fishable, swimmable)
 - Performance Measure #55 Percent of population served by community public water systems that are in compliance with all health based standards
 - **Objective 2.4.3** Develop state water quality standards, issue the bi-annual list of the state's impaired waters, develop corrective action plans for those waters, and control nonpoint sources of pollution
 - Performance Measure #54 Percent of surface waters meeting numeric standards (fishable, swimmable)
 - **Objective 2.4.4** Provide input and assistance on regulatory and compliance issues to owners and operators of more than 2,300 dams statewide.
 - Performance Measure #55 Percent of high hazard and significant hazard regulated dams receiving appropriate inspection

- **Objective 2.4.5** Collect and evaluate ambient water and beach quality.
 - Performance Measure #54 Percent of surface waters meeting numeric standards (fishable, swimmable)
- Strategy 2.5 Implement and enforce strategies to preserve sensitive and fragile areas while promoting responsible development in the eight S.C. coastal counties.
 - Objective 2.5.1 Implement the Coastal Zone Management Program to manage wetland alterations, certify all federal and state permits for Coastal Zone Consistency, and protect tidally influenced critical area lands, waters, and beaches.
 - Performance Measure #46 Maintain or decrease average number of permit process days.
 - Objective 2.5.2 Preserve sensitive natural, historic, and cultural resources
 through regulatory oversight and planning assistance.
 - Performance Measure #57 Reduce the amount of marine debris in coastal waters and within the beach/dune system by increasing participation in the Adopt a Beach program
 - **Objective 2.5.3** Provide technical, planning, and financial assistance to local governments to resolve complex natural resource management issues.
 - Performance Measure #58 Strengthen interactions with local governments through improved technical assistance and beachfront management planning to reduce community vulnerability to coastal hazards
 - Objective 2.5.4 Develop tools and informational products to enhance coordination among state coastal resource managers, municipal officials and coastal stakeholders.
 - Performance Measure #58 Strengthen interactions with local governments through improved technical assistance and beachfront management planning to reduce community vulnerability to coastal hazards

Environmental Affairs

Key State Governmental Partners:

S.C. Department of Natural Resources (DNR)

- DNR provides boats and personnel to clear lakes/water bodies following a chemical/oil release. (Objective 2.2.3)
- DNR provides law enforcement personnel to support field operations. (Objective 2.2.3)
- DNR provides wildlife and fisheries technical expertise in determining environmental impact of a chemical/oil release. (Objective 2.2.3)
- DHEC and DNR work together on surface water quantity modeling. DNR has a role in providing technical comments for several DHEC water programs. (Objectives 2.4.1 and 2.4.3)
- DHEC works with DNR on programmatic initiatives including living shorelines monitoring and assessment, regional sediment management planning and abandoned and derelict vessel identification and removal. DHEC works with DNR to ensure the wise management of natural resources in the coastal zone. (Objectives 2.5.1, 2.5.2, 2.5.3, 2.5.4)
- DHEC partners with DNR regarding surface water impact of mining and solid waste activities to flora and fauna. (Objective 2.3.1)
- DHEC Vital Statistics provide a matching service to DNR for individuals with hunting/fishing licenses to remove deceased individuals from their mailing list. (Objective 1.5.5)

S.C. Department of Transportation (DOT)

- DOT provides technical support and information to DHEC on safe roads to travel during an emergency. (Objective 2.2.3)
- DOT provides highway barricades and support to close highways/roads during an emergency and cleanup operations. (Objective 2.2.3)
- The DHEC Dam Safety Program works with DOT when roads are located on or downstream of dams in two categories. When the dam is regulated, DHEC oversees permitting and construction of any dam repair. When the dam is not regulated by DHEC, DHEC staff work to advise DOT and the dam owner as requested. (Objective 2.4.4)
- DHEC works with SC DOT to ensure transportation projects are consistent with the Coastal Tidelands and Wetlands Act. (Objectives 2.5.1, 2.5.2, 2.5.4)

Health Regulations

Overview of Health Regulations Resources:

- FY16 Expenditures: \$18,806,235 (4% of total)
 - Federal: \$4,423,177
 - Other: \$5,422,659
 - Restricted: \$0
 - State: \$8,960,399
- Approximate FTEs: 202

Strategic Plan and Performance Measures:

Goal 3 – Improve the quality, safety, and administration of health care, treatment, and services in South Carolina.

- Strategy 3.1 Implement and enforce standards for licensure, maintenance, and operation of health facilities and services to ensure the safe and adequate treatment of persons served in this State.
 - **Objective 3.1.1** Review license and permit applications and issue licenses and permits for health facilities and services.
 - Performance Measure #59 Issue all health facilities and services licenses and permits within 15 calendar days of receipt of completed licensing packet.
 - **Objective 3.1.2** Conduct inspections to verify compliance of health facilities and services.
 - Performance Measure #60 Conduct all routine inspections of health facilities and services within the timeframe prescribed by law or regulation.
 - **Objective 3.1.3** Conduct investigations of health facilities and services for alleged violations and noncompliance.
 - Performance Measure #61 Conduct all initial investigations of health facilities and services within the appropriate timeframe corresponding to the severity of the complaint, *i.e.*, 24-48 hours, 30 days, 60 days, or 90 days.

- **Objective 3.1.4** Review facility designs and conduct construction inspections of health care facilities.
 - Performance Measure #62 Perform and document design reviews and construction inspections of health facilities within 15 calendar days of the date requested.
- Strategy 3.2 Certify that providers and suppliers meet minimum federal health and safety requirements and Clinical Laboratory Improvement Amendments (CLIA) regulatory standards.
 - Objective 3.2.1 Conduct federal Medicare certification process to ensure minimum health and safety requirements and CLIA regulatory standards are met by providers and suppliers participating in the Medicare and Medicaid programs.
 - Performance Measure #63 Meet the performance standards for the frequency, quality, and enforcement for nursing homes and other health care facilities.
 - Performance Measure #64 Meet the performance standards for the frequency, quality, and enforcement for CLIA laboratories.
- Strategy 3.3 Implement and enforce standards for emergency medical services (EMS).
 - Objective 3.3.1 Review license, permit, and certification applications, issue licenses and permits to EMS agencies and educational institutions, and issue certifications to EMS personnel and athletic trainers.
 - Performance Measure #65 Process and approve 95% of all complete emergency medical technician (EMT) and athletic trainer credential applications within 10 days of receipt.
 - **Objective 3.3.2** Train and educate EMS providers, first responders, law enforcement, and the public with respect to their role in provision of emergency medical care.
 - Performance Measure #66 Increase the number of emergency service providers trained and certified in this State by in-state training institutions by 5% for EMT level and 10% for paramedic level within the next 12 months.

- Objective 3.3.3 Promote access to trauma care for all residents of the State through the creation, establishment, and maintenance of the State Trauma Care System.
 - Performance Measure #67 Guidelines and transport protocols for trauma patients reviewed and published for public comment by March 1, 2017.
- **Objective 3.3.4** Implement a statewide system of stroke care by facilitating health care provider data collection, reporting, sharing, and analysis to improve stroke care in geographic areas of the State.
 - Performance Measure #68 Establish a statewide stroke registry by July 1, 2018 and ensure that 85% of stroke-certified hospitals are reporting data within 6 months of implementing the registry.
- **Objective 3.3.5** Implement the EMS for Children Pediatric Facility Recognition Program to improve access to quality care for children.
 - Performance Measure #69 Implement the Pediatric Facility Recognition Program by September 2018 and ensure that at least 30% of acute care hospitals receive pediatric facility recognition by 2020.
- Strategy 3.4 Ensure new and modified health care facilities and services throughout the State reflect the needs of the public.
 - Objective 3.4.1 Facilitate the establishment of health care facilities and services, which will best serve public needs, through routine review and revision of the State Health Plan.
 - Performance Measure #70 Revise the State Health Plan every 2 years.
 - Objective 3.4.2 Promote cost containment and prevent unnecessary duplication of health care facilities and services through the timely review of Certificate of Need applications, Certificate of Public Advantage applications, and other requests.
 - Performance Measure #71 Improve the turnaround time for all Certificate of Need (CON) decisions by 10% each year.
- Strategy 3.5 Protect the public by ensuring accountability of controlled substances.

- **Objective 3.5.1** Annually review completed registration applications and issue registrations to authorized practitioners and health care entities.
 - Performance Measure #72 Issue registrations within 10 business days of receiving completed applications.
- Objective 3.5.2 Conduct inspections and audits to ensure accountability of controlled substances.
 - Performance Measure #73 Increase the number of practitioners and registrants inspected by 10% each year.
- Objective 3.5.3 Decrease potential for drug diversion through administration of the State's prescription drug monitoring program, administrative actions, and criminal investigations.
 - Performance Measure #74 Increase the usage and participation in SCRIPTS by 5% each year.
- Strategy 3.6 Protect the public from unnecessary exposure from radiation.
 - **Objective 3.6.1** Issue registrations and licenses for facilities that use x-ray equipment, radioactive materials, and tanning beds.
 - Performance Measure #75 Issue registration and licensing actions for facilities that use x-ray equipment, radioactive materials, and tanning beds within 30 calendar days of reviewing complete applications.
 - Objective 3.6.2 Conduct inspections to verify compliance, protect public health, and provide safety from unnecessary exposure from ionizing and nonionizing radiation.
 - Performance Measure #76 Conduct all inspections of facilities that use x-ray equipment, radioactive materials, and tanning beds within the timeframe prescribed by law or regulation.
 - **Objective 3.6.3** Conduct investigations of facilities for alleged violations and non-compliance.
 - Performance Measure #77 Conduct all investigations of incidents and allegations related to facilities that use x-ray equipment, radioactive materials, and tanning beds within the appropriate timeframe corresponding to the severity of the complaint.

Health Regulations

Key State Governmental Partners:

S.C. Department of Health and Human Services (SCDHHS)

- Worked collaboratively with the Prescription Monitoring Program to improve the state's ability to identify and stop diversion of prescription drugs. (Objective 3.5.3)
- Coordinate sharing information on the licensure status of health facilities and services. (Objective 3.1.1)
- Coordinate sharing information if any concerns arise from inspections and investigations. (Objectives 3.1.2, 3.1.3)

S.C. Department of Labor, Licensing and Regulation (LLR)

- LLR- Panel for Dietetics licenses dietitians in S.C. assuring consumers receive credible nutrition information and counseling from appropriately licensed professionals. (Objective 1.2.1)
- DHEC Vital Statistics provides training for funeral directors regarding death registration for license certification and collaborates with the Funeral Service Board on the suspension and license revocations for funeral homes and funeral directors related to violations of law/regulation on death registration. (Objective 1.5.1)
- S.C. EPHT program has an agreement with SC Occupational Safety and Health Administration within LLR to share information on adults with elevated blood lead levels to assist with monitoring worksite lead exposure. (Objectives 1.5.4, 1.5.5)
- DHEC consults with the health professional licensing boards regarding health care volunteers, standards of practice, and health care delivery during emergencies. (Objective 1.6.1)
- DHEC assists LLR with a contact summary for all state licensed veterinarians for rabies. (Objective 2.2.2)
- DHEC works with LLR on workplace complaints. (Objective 2.2.2)
- Coordinates sharing information if any concerns arise from inspections and investigations. (Objectives 3.1.2, 3.1.3)
- Assists DHEC's Bureau of Drug Control in verifying professional licensure, which supports Drug Control in issuing controlled substance registrations to authorized practitioners and health care entities. (Objective 3.5.1)
- Works collaboratively with DHEC's Bureau of Drug Control to enforce the S.C. Controlled Substances Act and decrease the diversion of controlled substances. (Objective 3.5.3)

Operations

Overview of Operations Resources:

- FY16 Expenditures: \$23,762,435 (4% of total)
- Approximate FTEs: 239

Strategic Plan and Performance Measures:

Goal 4 – Develop our people, strengthen our processes, and invest in our technology to support a high performance organization and a culture of continuous improvement.

- Strategy 4.1 Modernize the Agency's IT infrastructure and allow for the automation of many Agency functions
 - **Objective 4.1.1** Streamline and modernize the Agency's software application portfolio to continue to strengthen coordination and performance across Agency programs.
 - Performance Measure #78 By June 30, 2019, transition all outdated mainframe applications to modern platforms.
 - **Objective 4.1.2** Improve customer and partner experience through enhanced online services, including ePermitting.
 - Performance Measure #79 Fully implement ePermitting solution by June 30, 2020.
 - **Objective 4.1.3** Implement electronic medical records to increase accessibility and timeliness of information to both internal and external customers.
 - Performance Measure #80 Deploy statewide Electronic Health Record system by June 30, 2018.
 - **Objective 4.1.4** Expand the capacity and increase the reliability of our IT infrastructure.
 - Performance Measure #81 Relocate DHEC data center to DTO facility.

- Strategy 4.2 Become the premier employer in South Carolina by recruiting, developing, and retaining high quality employees.
 - Objective 4.2.1 Maximize the job satisfaction of current teams, identify and develop potential successors for key positions in the Agency, and provide an efficient and welcoming recruitment and onboarding process for new and future team members.
 - Performance Measure #82 Maximize the job satisfaction of current teams, identify and develop potential successors for key positions in the Agency, and provide an efficient and welcoming recruitment and onboarding process for new and future team members.
 - Objective 4.2.2 Ensure workspaces for our teams across the state are functional, safe, clean, cost-effective, and environmentally friendly; pursuing new Agency facilities as necessary.
 - Performance Measure #83 Establish a safety office and determine policies and procedures for this office by June 30, 2017
 - **Objective 4.2.3** Provide new internal and external continuing education opportunities for our teammates to develop and learn new skills and enhance their contributions to the Agency.
 - Performance Measure #84 Provide new internal and external continuing education opportunities for our teammates to develop and learn new skills and enhance their contributions to the Agency.
- Strategy 4.3 Foster a culture of continuous improvement and operational excellence.
 - Objective 4.3.1 Promote continuous improvement and innovation goals for improving customer service delivery, policies, and practices.
 - Performance Measure #85 Establish the Office of Strategy and Continuous Improvement with standardized and fully implemented policies and procedures by June 30, 2017.
 - Objective 4.3.2 Promote operational excellence by utilizing the Project Management Office to ensure the timely and comprehensive execution of projects that remain within budgetary parameters.
 - Performance Measure #86 Establish a Project Management Office with standardized and fully implemented policies, procedures, and artifacts by June 30, 2017.

Operations

Key State Governmental Partner:

S.C. Department of Administration

- DHEC works with the Division of State Human Resources to implement an electronic Talent Management System to improve its capabilities for performance management and succession planning. (4.1.1, 4.2.1, 4.3.1)
- DHEC works the Division of State Human Resources to administer HR functions (4.2.1, 4.2.3)
- DHEC partners with Department of Administration's SC Enterprise Information System SCEIS for financial transactions and to implement an electronic Talent Management System to improve its capabilities for performance management and succession planning. (4.1.1, 4.2.1, 4.3.1)
- DHEC partners with Department of Administration's Division of Technology Operations to migrate its data center and to implement electronic permitting. (4.1.2, 4.1.4)
- DHEC works with the State Property Services to assist in acquiring appropriate state property (4.2.2)

Agency Name:	Department of He	ealth and Environmental Co	ntrol					Fiscal Year 20 Accountability R
Agency Code:	J040	Section	034				Portornan	æ Measurement Ten
Item	Performance Measure	Target Value	Actual Value	Future Target Value	Time Applicable	Data Source and Availability	Calculation Method	Associated Objectiv
	Meet or exceed the American Academy of Pediatrics (AAP) benchmark of 95% infants screened for hearing loss by one month old,	95.00%	97.10%	95%	January - December (Calendar Year)	National benchmark established by the AAP and the Joint Commission on Infant Hearing (JCIH) collected annually be the CDC.	Percentage of infants screened for hearing loss by one month old. Calculated annually	1,1,1
2	% of Medicaid-eligible children 2 years of age who had one or more capillary or venous blood testing for lead poisoning	NA	NA	60%	January - December (Calendar Year)	Healthy People 2020 Benchmark Medicaid Data	Of all Medicaid-eligible children 2 years of age, % that has had one or more blood lead tests	1,1.1
3	The 15 Rape Crisis Centers, in conjunction with its external partners, will inform and educate over 50,000 people in the state about sexual violence issues and prevention methodologies.	50,000	NA	50,000	February-January (Grant Year)	Data submitted by the 15 Rape Crisis Centers to the DHEC Sexual Violence Services Program	Calculated Annually from data submitted by the 15 Rape Crisis Centers	1,1.2
4	By the end of FY 2017, increase the total number of clients served by 4%, ensuring that low-income clients comprise at least 97% of total clients served.	Total Clients served: 90,745 Total Low Income Clients: 88,093	Baseline: 87255 Total Clients Served	First report will be available in August 2017	July - June (Fiscal Year)	Family Planning records	Calculated annually from data submitted by DHEC Clinics	1.1.2, 1.4.2
5	By the end of FY 2017, make available a broad range of contraception and increase the contraceptive reliability rate from 79% to 82%.	79%	Baseline 76%	First report will be available in August 2017	July - June (Fiscal Year)	Family Planning records	Calculated annually from data submitted by DHEC Clinics	1,1,2, 1,4.2
6	Increase the number of exclusive breastfeeding infants by 5% from 7,712 breastfeeding infants.	7,712	7,314	7,712	Oct-Sep (Federal Fiscal Year)	WIC Caseload Data	Percent of WIC infants that are exclusively breastfeeding.	1,1,3
7	Improve the PCE (Participant Centered Education) skills utilized by the CPA (Competent Professional Authority-includes physicians, registered dietitians, registered nurses and nutritionists) during the certification and nutrition education process	130,646	105,840	130,646	Oct-Sep (Federal Fiscal Year)	WIC Management Evaluations	Average score of WIC Certification Observations	1.1.3, 1.4.1
8	Number of policies, programs, or organizations that Bureau of Maternal and Child Health staff contribute data analysis or evaluation results to inform. By August 2017, increase the number of	NA	NA	7	July - June (Fiscal Year)	MCH Program Records	# of programs, policies, or organizations that were informed by MCH staff data analyses	1,1,4
9	By August 2017, increase the number of school aged children receiving at least one dental sealant on permanent molars to 9.784	9593	NA	9784	September-August	Revenue and Fiscal Affairs	NA	1.1.5
10	The number of people participating in National Diabetes Prevention Programs.	450	409	530	September 29 - September 30 and July 1 - June 30	Centers for Disease Control and Prevention - Diabetes Prevention Recognition Program and internal records	Addi∷ion of 4 classes per year at 20 participants per class	1.2.1, 1.4.4
11	Number of partner organizations with 3 or more Healthy Aging implementation sites (across all interventions).	26	NA	29	July - June (Fiscal Year) Calculated Quarterly	SC DHEC Healthy Aging Tracking System	Number of partner organizations offering programs in 3 or more sites	1=2.1 , 1=2=2

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item	Performance Measure	Target Value	Actual Value	Future ⊺arget Value	Time Applicable	Data Source and Availability	Calculation Method	Associated Objective(s)
12	Number of children and adults participating in Supplemental Nutrition Education Programs,	29,000	NA	19,C00	October - September	Self-reported participant surveys Data housed in program (EARS - Education and Administrative Reporting System - USDA)	Basec on the counties and priorities established by the Department of Social Services	1,2.1
13	The number of high quality Child Passenger Safety (CPS) educational presentations provided,	50	To date (67); grant year ends Sept. 30th	50	October - September	CPS Program documents delivery of presentations in response from individual community requests for education and awareness on child passenger safety; data maintained in the program's annual work file.	The Department of Public Safety (SCDPS) provides guidance on expected number of annual presentations needing to be completed, and the CPS program documents each presentation upon completion.	1.2,2
14	Number of National Highway, Transportation and Safety Administration (NHTSA) Certified Child Passenger Safety (CPS) Technician Classes conducted.	18	To date (17); grant year ends Sept. 30th	18	October - September	CPS Program documents delivery of Certified CPS Technician Classes in response to community and individuals requested for either initial training or recertification training of local technicians; data maintained in the program's annual work file.	The Department of Public Safety (SCDPS) provides guidance on expected number of annual Certified CPS Technician Classes needing to be completed, and the CPS program documents each presentation upon completion.	1.2,2
15	Proportion of women at least 50 years old or older who have received mammograms through the Best Chance Network.	75%	NA	75%	July-June (Fiscal year) calculated semi- annually	Med-it	Proportion of women at least 50 years old cr older who have received mammograms through the Best Chance Network.	1.2,3
16	Percent of WISEWOMAN patients who participate in evidence-based cardiovascular health coaching and lifestyle services, (WISEWOMAN - Well-Integrated Screening and Evaluation for Women Across the Nation)	80%	69%	80%	July-June (Fiscal year) calculated monthly	Med-It	Network. Percert of WISEWOMAN patients who participate in evidence-based cardiovascular health coaching and lifestyle services. (WISEWOMAN - Well- Integrated Screening and Evaluation for Women Across the Nation)	1.2.3
17	At least 95% of annual newly diagnosed cancer cases in SC collected and reported to CDC and NAACCR by deadline Dec. 1.	95%	97.20%	95%	January - December ′ (Calendar Year)	SC Central Cancer Registry	CDC and NAACCR determine % of expected new cancer cases reported by SCCCR for each annual cancer data file submission in December through calculation of statistical algorithm using latest L.S. cancer incidence-to-mortality ratio applied to state mortality rates	1.2.4, 1.5.3, 1.5.6
18	South Carolina Behavioral Risk Factor Surveillance System (BRFSS) number of survey completions	2500	11699	NA	January - December (Calendar Year)	Division of Surveillance, PHSIS	Total number of respondents to SC BRFSS survey identified as a partial complete or complete based on CDC analysis and weighting of data set	1.2.4, 1.5.4, 1.5.6
19	The proportion of school districts implementing model tobacco-free policies.	77%	77%	81%	April-March	Data collected from SC School Boards Association's Policies Online web portal on an ongoing basis	number of public school districts in the state	1.2.5
20	The number of residents living in multi-unit housing facilities that are protected from secondhand smoke in living areas, common areas, and lobbies.	19,428	18,428	Increase by 1,000	April-March	Resident data collected from the property manager of the multiunit housing facility	Number of new residents protected under smoke-free policies in their multiunit housing facility added to the current number	1.2.5
21	Number of DHEC staff qualified as bilingual workers, interpreters or readers.	NA	NA	10% increase	January - December (Calendar Year)	Internal records and tracking files, IQP testing results and reading/language proficiency testing results.	Baseline number multiplied by .10 = number needed to satisfy target value	1.2.6

ltem	Performance Measure	Target Value	Actual Value	Future Target Value	Time Applicable	Data Source and Availability	Calculation Method	Associated Objective(s)
22	Proportion of women screened in the Best Chance Network (BCN) Program who are minorities	60%	NA	60%	July-June (Fiscal year) calculated semi- annually	Med-It	Percent of minority women who are screened through the Best Chance Network	1,2,6
23	Percent of violent death records obtained for data abstraction purposes from SC Coroner Offices for incidents meeting ICD- 10 Coding Standards; expectation.	75% (CY2014 Data Year)	88.13%	75% (CY2015 Data Year)	January - December (Calendar Year)	PHSIS and Coroners provide data for the surveillance of violent deaths on an ongoing basis.	The total number of violent death provided from PHSIS indicates the number of homicides and suicides that occur annually,	1.2,7
24	Percent of violent death records obtained for data abstraction purposes from SC Law Enforcement Offices for incidents meeting ICD-10 Coding Standards; expectation ,	70% (CY2014 Data Year)	75.71%	70% (CY2015 Data Year)	January - December (Calendar Year)	Law enforcement municipalities provide data for the surveillance of violent deaths on an ongoing basis,	The total number of violent death provided from PHSIS indicates the number of homicides and suicides that occur annually.	1.2.7
25	Make summary data available with regards to reports by healthcare providers of diseases and conditions on the DHEC List of Reportable Conditions.	Publish 2016 Annual Report on Reportable Conditions by October 31, 2017.	In progress	Publish 2017 Annual Report on Reportable Conditions by October 31, 2018.	October 31	SCION - The electronic database for reportable communicable diseases	counts of confirmed reportable conditions	1.3,1
26	Prevent the occurrence and spread of HIV, AIDS, STDs and Viral Hepatitis	80%	NA	80%	January - December (Calendar Year)	eHARS for HIV; STD MIS for STDs; SCION for viral hepatitis; EvalWeb	counts of confirmed reportable conditions	1,3,2
27	All immunization providers will be mandated to report administered immunization into the Immunization Registry by January 1, 2017.	100%	NĂ	100%	3-year phase in period ends Dec. 2016. Required for all providers 1/1/17	The Immunization Information Registry	Periodic data checks beginning 1/1/2017 to ensure all providers are consistently reporting administer immunizations.	1.3.3, 1.4.7
28	Identify and report persons with HIV. At least 85% of the expected number of cases diagnosed will be reported to the HIV/AIDS Surveillance program within twelve months of diagnosis year.	85%	99%	85%	January - December (Calendar Year)	Data is available in eHARS (Enhance HIV/AIDS Reporting System)	At least 85% of the expected number of cases diagnosed will be reported to the HIV/AIDS Surveillance program within twelve months of diagnosis year.	1,3.4
29	Conduct STD and HIV testing, treatment and partner service investigations.	80%	NA	80%	January - December (Calendar Year)	STD MIS Partner Services Program	NA	1.4.3
30	Number of SC Health + Planning Toolkit trainings offered.	6	8	NA	July 1 - June 30	SC Health + Planning Advisory Committee Quarterly Reports, Division of Nutrition, Physical Activity & Obesity.	Number of SC Health + Planning Toolkit trainings offered,	1.4.4
31	Percent of salmonellosis cases with exposure history;	74%	85% (1291/1521)	85%	Grant year-August through July	SCION	Percent of laboratory identified Salmonella cases that have an exposure history completed	1.4,5
32	For TB patients with positive AFB sputum- smear results, increase the proportion who have contacts elicited.	100%	NĂ	100%	Calendar Year	National Tuberculosis Indicators Project (NTIP); two year lag for finalized numbers, e.g. 2014 available in 2016	Percent of those with positive AFB sputum-smear results with contacts elicited during investigation divided by total number in cohort.	1.4.6
33	Meet Vital Statistics Cooperative Program (VSCP) deliverables for closeout of statistical files for birth records.	2016 data due March 1, 2017	NA	2017 data due March 1, 2018	March 1	Vital Statistics	All bi-th records submitted by VSCP specified deadline.	1,5.1
34	Meet Vital Statistics Cooperative Program (VSCP) deliverables for closeout of statistical files for death records.	2016 data due May 1, 2017	NA	2017 data due May 1, 2018	May 1	Vital Statistics	All death records submitted by VSCP specified deadline.	1,5.1
35	100% of applications for certified copies of vital events that are received through the mail are receipted within 5 business days	100%	99.90%	100%	Each Fiscal Year	Vital Statistics	Percent of applications for certified copies of vital events that are received through the ma I are receipted within 5 business days	1.5.2

ltem	Performance Measure	Target Value	Actual Value	Future Target Value	Time Applicable	Data Source and Availability	Calculation Method	Associated Objective(s)
36	Less than 3% of new cancer cases are identified only through death certificates (standard from National Program of Cancer Registries (NPCR)).	<3%	2.30%	<3%	January - December (Calendar Year)	SC Central Cancer Registry and Vital Statistics	After follow-back to clinical source is completed on all annual non-matched cancer deaths (to cancer cases in the SCCCR database), calculate the % of deaths remaining that have no other source identified except death certificate	1,5,3, 1.5.6
37	South Carolina Pregnancy Risk Assessment Monitoring System (PRAMS) survey response rate	60%	NA	60%	January - December (Calendar Year)	Division of Surveillance, PHSIS	Percent of respondents completing the survey based on sample of mothers drawn from SC births.	1,5.4, 1.5,6
38	Publish the Annual report on Reportable Conditions by October 31 of each year.	Publish 2016 Annual Reportable Conditions by October 31, 2017	NA	Publish 2017 Annual Report on Reportable Conditions by October 31, 2018.		SCION	counts of confirmed reportable conditions	1.5.4
39	Publish 2016 interim report for HAI by October 15, 2016; and publish HAI Annual report by April 15, 2017.	Publish 2016 interim report for HAI by October 15, 2016; and publish HAI Annual report by April 15, 2017	NA	Publish 2017 Annual Report on HAIs by April 15, 2018.	April 15	Reports of required Healthcare Associated Infections from healthcare facilities into NHSN	Counts of confirmed reportable conditions	1,5.5
40	Review of IRB requests are completed within 30 days of submission	100.00%	72.00%	100%	Each Calendar year	DHEC IRB Request Log	Percent of review of IRB requests that are completed within 30 days of submission	1.5.7
41	Increase health care coalition membership by 10% in each Public Health Region	10%	NA	10% increase	September-30	HPP Grant	Ave-age of coalition members at beginning of fiscal year versus at end if fiscal year.	1.6.1
42	Facilitate discussions between DHEC, the American Red Cross, and local facilities to identify potential SMNS locations in three counties currently without any SMN shelter.	3	NA	discussions in 3 counties	September-30	HPP Grant	Memorandum of Agreement with new facilities	1.6.1, 1.6.3
43	Submit all required grant reports on time	100%	NA	100%	September-30	HPP and PHEP Grants	Percent of all required grant reports submitted on time	1.6.2
44	Increase number of Closed Points of Distribution (POD) by 25%	25% Statewide	NA	14 new PODs	September-30	HPP Grant	Memo-andum of Agreement with new facilities	1.6.3
45	Ensure all coalition members are afforded opportunity to participate in at least one exercise annually.	100%	NA	1 exercise per Region	September-30	HPP Grant	Exercise AAR's and sign in sheets	1.6.3, 1.6.4
46	Maintain or decrease average number of permit process days.	139	100	139	Federal Fiscal Year 2015 - Federal Fiscal Year 2016	Environmental Facility Information System (EFIS)	Average number of days that most permits were issued for most common environmental permits	2,1,1,2,1,5,2.2,1,2,3.1, 2,4.1,2,5,1
47	Meet ozone standard at 100% of ozone monitoring sites and maintain ozone standard by 2018.	100%	100%	100%	October 31	EPA Air Quality System Database (AQS)	Annual fourth-highest daily maximum 8- hour concentration, averaged over 3 years	2.1_1, 2.1.2, 2.1_3, 2_1_4, 2_2.4
48	On an annual basis, inspect at least 15% of all asbestos abatement projects that have been issued an asbestos permit by the Department and are subject to the National Emissions Standards for Hazardous Air Pollutants (NESHAP)	15%	15%	15%	September 30	EFIS Database	On an annual basis, inspect at least 15% of all asbestos abatement projects that have been issued an asbestos permit by the Department and are subject to the National Emissions Standards for Hazardous Air Pollutants (NESHAP)	2.1.5
49	Improve compliance with R.61-25 Retail Food Establishments by the use of Downgrading and Civil Penalties.	This measure was not in place for this time period	This measure was not in place for this time period	5% reduction in total downgrades of Retail Food Establishments in 2015- 2016	January - December (Calendar Year)	Steton/ePermitting	Percent of downgrades of Retail Food Establ shments compared to previous years	2.2,1, 2.2.2,2,2,3

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ltem	Performatice Measure	Target Value	Actual Value	Future Target Value	Time Applicable	Data Source and Availability	Calculation Method	Associated Objective(s)
50	Activities (CMAs) at hazardous waste facilities and the number of hazardous waste facilities on the Government Performance and Results Act (GPRA) Baseline that have: (1) control of unacceptable human exposures from site contamination; (2) control of migration of contaminated groundwater; and (3) selection and construction of remedies to clean un contaminated eter	Meet or exceed Benchmark of National GPRA Goals for control of human exposure, contaminated groundwater migration, and remedy selection. No target for CMAs.	400 CMAs; 53/53 facilities with human exposure under control; 52/53 facilities with contaminated groundwater migration under control; 35/53 facilities with site-wide remedies constructed.	49/53 facilities with human exposure under control; 43/53 facilities with contaminated groundwater migration under control; 34/53 facilities with site- wide remedies constructed. No benchmark for CMAs.	Federal fiscal year	RCRA Info which is the federal Hazardous Waste Management database	The percentage of the facilities on the GPRA list that achieve those milestones	2,3.2
51	The number of teachers educated annually on environmental and recycling curriculum; and amount of municipal solid waste recycled annually.	Not applicable, Goal was set to be met by 2020.	1,101,190 tons of MSW recycled. Number of teacher trained: 1,004. Number of students reached: 44,163 = Total 45,167	In 2011, the state set a goal to recycle 40 percent of its municipal solid waste by 2020.	Recycling data is based on the fiscal year; number of teachers educated is compiled annually	Recycling information comes from counties and businesses and is stored in RETRAC, a waste and recycling data management system.	Recyc ing data is tracked in tons and compared to the total amount of waste disposed.	2,3.3
52	Underground Storage Tank (UST) Release Cleanup Progress (release closures per federal fiscal year or FFY)	150 releases proposed to be closed during the FFY	To be calculated 9/30/2016	125 releases proposed to be closed during the FFY	Federal Fiscal Year	Internal - EFIS database	Cumulative total number of release closures	2.3.4
53	Number of acres made "ready for Brownfields reuse"	There are no targets driving this measure. This is a measure demonstrating effective use of federal Brownfields funding	To be calculated 9/30/2016	There are no targets driving this measure. This is a measure demonstrating effective use of federal Brownfields funding.	Federal Fiscal Year	Internal - EFIS database	Cumulative total number of acres ready for reuse based on certificates of completion issued during the federal fiscal year.	2,3,4
54	Percent of surface waters meeting numeric standards (fishable, swimmable)	75%	61,80%	75%	Bi-Annual - Calculated every 5 vears	Monitoring Data	Utilizing impaired monitoring stations	2.4.1, 2.4.2, 2.4.3, 2.4.5, 2.2.4
55	Percent of population served by community public water systems that are in compliance with all health based standards	95%	95%	95%	Calendar Year	National Database SCDWIS	Compliance/Total Systems	2,4.1, 2,4,2
56	Percent of high hazard and significant hazard regulated dams receiving appropriate inspection	High Hazard once every 2 years and Significant Hazard once every 3 years	100% All High and Significant dams were inspected after the flooding in October 2015	High Hazard once every 2 years and Significant Hazard once every 3 years	Calendar Year	Inspections	Number Inspections/Total Dams in that category	2.4.4
57	Reduce the amount of marine debris in coastal waters and within the beach/dune system by increasing participation in the Adopt a Beach program	Maintain 700-1000 volunteer hours	1,148 volunteer hours; 2,029 pounds of debris removed	Maintain 1000+ volunteer hours	July - June (Fiscal Year)	Online and hard copy forms submitted by volunteers - various (per event/monthly/annually)	# of volunteer hours recorded; amount (lbs) of debris recorded upon removal	2.5.2
58	Strengthen interactions with local governments through improved technical assistance and beachfront management planning to reduce community vulnerability to coastal hazards	Provide technical assistance to at least one beachfront community on LCBMP revision	1 LCBMP revised with technical assistance from OCRM	Provide technical assistance to at least two beachfront communities on LCBMP revision in order to achieve goal of 9 communities over the past 5 years	July - June (Fiscal Year)	Internal records of revised documents submitted - annually	# of LCBMPs revised annually	2.5.3, 2.5,4
59	Issue all health facilities and services licenses and permits within 15 calendar days of receipt of completed licensing packet.	Agency did not use PM during this year	Agency did not use PM during this year	100%	July - June (Fiscal Year)	Electronic Document Management System	Percentage of all licenses and permits issued within 15 calendar days of receipt of completed licensing packet.	3.1,1
60	Conduct all routine inspections of health facilities and services within the timeframe prescribed by law or regulation.	Agency did not use PM during this year	Agency did not use PM during this year	100%	July - June (Fiscal Year)	Electronic Document Management System	Percentage of routine inspections completed within timeframe prescribed by law or regulation.	3.1,2

ltem	Performance Measure	Target Value	Actual Value	Future Target Value	Time Applicable	Data Source and Availability	Calculation Method	Associated Objective(s)
61	Conduct alf initial investigations of health facilities and services within the appropriate timeframe corresponding to the severity of the complaint, i.e., 24-48 hours, 30 days, 60 days, or 90 days.	Agency did not use PM during this year	Agency did not use PM during this year	100%	July - June (Fiscal Year)	Electronic Document Management System	Percentage of initial investigations conducted within the timeframe corresponding for the severity of the complaint.	3.1.3
62	Perform and document design reviews and construction inspections of health facilities within 15 calendar days of the date requested.	Agency did not use PM during this year	Agency did not use PM during this year	100%	July - June (Fiscal Year)	Electronic Document Management System	Percentage of document design reviews and construction inspections conducted within 15 calendar days of the date requested.	3,1.4
63	Meet the performance standards for the frequency, quality, and enforcement for nursing homes and other health care facilities.	100%	15 of 18 standards met.	100%	October - September (Federal Fiscal Year)	CMS Performance Standards System	Percentage of performance standards met for the frequency, quality, and enforcement for nursing homes and other health care facilities.	3.2,1
64	Meet the performance standards for the frequency, quality, and enforcement for CLIA laboratories.	100%	7 of 7 standards met,	100%	October - September (Federal Fiscal Year)	CMS Performance Standards System	Percentage of performance standards met for the frequency, quality, and enforcement for CLIA laboratories.	3.2.1
65	Process and approve 95% of all complete emergency medical technician (EMT) and athletic trainer credential applications within 10 days of receipt.	Agency did not use PM during this year	Agency did not use PM during this year	100%	July - June (Fiscal Year)	Electronic Document Management System	Percentage of EMT and athletic credential applications approved within 10 days of receipt.	3.3,1
66	Increase the number of emergency service providers trained and certified in this State by in-state training institutions by 5% for EMT level and 10% for paramedic level within the next 12 months.	Agency did not use PM during this year	Agency did not use PM during this year	100%	July - June (Fiscal Year)	Electronic Document Management System	Total number of EMT level and paramedic level personnel trained and certified in this State by in-state training institutions,	3.3.2
67	Guidelines and transport protocols for trauma patients reviewed and published for public comment by March 1, 2017.	Agency did not use PM during this year	Agency did not use PM during this year	100%	July - June (Fiscal Year)	American College of Surgeons 2014 Guidelines and CDC Trauma Triage Guidelines	Publication of guidelines and transport protoccls for trauma patients for public comment on or before March 1, 2017.	3,3,3
68	Establish a statewide stroke registry by July 1, 2018 and ensure that 85% of stroke- certified hospitals are reporting data within 6 months of implementing the registry.	Agency did not use PM during this year	Agency did not use PM during this year	100%	July - June (Fiscal Year)	Approved stroke consensus metrics and a nationally recognized data set platform with confidentiality standards	Percentage of completed implementation of a statewide stroke registry.	3,3.4
69	Implement the Pediatric Facility Recognition Program by September 2018 and ensure that at least 30% of acute care hospitals receive pediatric facility recognition by 2020.	Agency did not use PM during this year	Agency did not use PM during this year	100%	July - June (Fiscal Year)	Benchmark set by Health Resources and Services Administration	Percentage of completed implementation of the Pediatric Facility Recognition Program.	3,3,5
70	Revise the State Health Plan every 2 years.	Agency did not use PM during this year	Agency did not use PM during this year	100%	July - June (Fiscal Year)	State Health Planning Committee	Percentage of State Health Plans revised every 2 years.	3.4.1
71	Improve the turnaround time for all Certificate of Need (CON) decisions by 10% each year.	Agency did not use PM during this year	Agency did not use PM during this year	100%	July - June (Fiscal Year)	Electronic Document Management System	Turnaround time on all CON decisions.	3.4.2
72	Issue registrations within 10 business days of receiving completed applications.	Agency did not use PM during this year	Agency did not use PM during this year	100%	July - June (Fiscal Year)	Manual Application Receipt Tracking System	Percentage of registrations issued within 10 days of receiving completed applications.	3.5.1
73	Increase the number of practitioners and registrants inspected by 10% each year.	Agency did not use PM during this year	Agency did not use PM during this year	100%	July - June (Fiscal Year)	Electronic Document Management System	Total number of inspections performed annually.	3,5.2
74	Increase the usage and participation in SCRIPTS by 5% each year.	Agency did not use PM during this year	Agency did not use PM during this year	100%	July - June (Fiscal Year)	SCRIPTS	Total usage and participation in SCRIPTS.	3.5.3

ltem	Performance Measure	Target Value	Actual Value	Future Target Value	Time Applicable	Data Source and Availability	Calculation Method	Associated Objective(s)
75	Issue registration and licensing actions for facilities that use x-ray equipment, radioactive materials, and tanning beds within 30 calendar days of reviewing complete applications.	Agency did not use PM during this year	Agency did not use PM during this year	100%	July - June (Fiscal Year)	Electronic Document Management System	Percentage of registrations and licensing actions issued within 30 calendar days of reviewing complete applications.	3.6,1
76	Conduct all inspections of facilities that use x-ray equipment, radioactive materials, and tanning beds within the timeframe prescribed by law or regulation.	Agency did not use PM during this year	Agency did not use PM during this year	100%	July - June (Fiscal Year)	Electronic Document Management System	Percentage of inspections conducted within the timeframe prescribed by law or regulation.	3.6.2
77	Conduct all investigations of incidents and allegations related to facilities that use x-ray equipment, radioactive materials, and tanning beds within the appropriate timeframe corresponding to the severity of the complaint.	Agency did not use PM during this year	Agency did not use PM during this year	100%	July - June (Fiscal Year)	Electronic Document Management System	Percentage of investigations conducted within the timeframe corresponding to the severity of the complaint.	3.6.3
78	By June 30, 2019, transition all outdated mainframe applications to modern platforms.	Agency did not use PM during this year	Agency did not use PM during this year	100%	June 30	Internal inventory report of applications provided as needed	Numper of mainframe applications divided by number transitioned	4.1.1
79	Fully implement ePermitting solution by June 30, 2020	Contract awarded	Contract awarded and gap analysis process began	Core system development complete and user acceptance testing complete	June 30	ePermitting project plan	N/A	4,1,2
80	Deploy statewide Electronic Health Record system by June 30, 2018	Agency did not use PM during this year	Agency did not use PM during this year	Contract awarded and gap analysis complete	June 30	EHR project plan	N/A	4.1.3
81	Relocate DHEC data center to DTO facility.	Agency did not use PM during this year	Agency did not use PM during this year	100%	June 30	Project plan & reporting provided by discovery tools; provided upon completion of each milestone (waves) and as needed	Number of servers moved to DTO divided.	4.1.4

ltem	Performance Measure	Target Value	Actual Value	Future Target Value	Time Applicable	Data Source and Availability	Calculation Method	Associated Objective(s)
82	Maximize the job satisfaction of current teams, identify and develop potential successors for key positions in the Agency, and provide an efficient and welcoming recruitment and onboarding process for new and future team members.	 Conduct an Employee Engagement Survey. Development of a Succession Plan for critical roles. Implementation of a Quarterly Agency New Hire Orientation. Conduct Quarter Agency Leadership Meetings. Implement Agency Enterprise Human Resources software to streamline the employee performance management, succession planning, recruiting, and onboarding processes. Revise the Employee Performance Management Processs. Develop an Agency recruiting strategy. 	 Conducted an Employee Engagement Survey. The Agency has identified critical roles and is in the beginning stages of developing a Succession Plan for those critical roles. The Agency has been conducting quarterly Agency New Hire Orientations. The Agency has been conducting Quarter Agency Leadership Meetings. The Agency is currently evaluating vendors for the Enterprise Human Resources software to streamline the employee performance management, succession planning, recruiting, and onboarding processes, The Employee Performance Management Process has been revised. The Agency is developing a recruiting strategy for critical roles. 	 Conduct an Employee Engagement Survey. Finalize a Succession Plan for critical roles. Continue to conduct quarterly Agency New Hire Orientations. Continue to conduct Quarter Agency Leadership Meetings. Select a vendor and implement the Enterprise Human Resources software. Utilize the HR Enterprise software to conduct the Employee Performance Management Process. Finalize the Agency's recruiting strategy for critical roles. 	June 30	 Employee Engagement Survey. SCEIS data and Information from Succession Planning Committee. SCEIS data and information from hiring authorities. List of Leaders Procurement Authorized State Vendor List. Employee Performance Management Forms. Recruiting Strategy for Critical Roles. 	1. Number of responses to survey. 2, N/A 3. Number of new hires. 4, N/A 5. Presentation of best options. 6. Number of Employee Performance Management Processes completed. 7. N/A	4.2.1
83	Establish a safety office and determine policies and procedures for this office by June 30, 2017	Safety Officer to be onboard August 17, 2016.	Safety Officer onboard August 17, 2016.	Safety Officer working with management to implement policies and procedures for this office.	June 30	Safety policy and procedure manual.	N/A	4.2.2
item	Performance Measure	Target Value	Actual Value	Future Target Value	Time Applicable	Data Source and Availability	Calculation Method	Associated Objective(s)
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84	Provide new internal and external continuing education opportunities for our teammates to develop and learn new skills and enhance their contributions to the Agency.	 Identify eight participants for the CPM program. Identify twenty four participants for the LEAP program. All supervisors/managers in the agency trained. 	 Eight participants identified for and enrolled in the CPM process. Twenty four employees are enrolled in the LEAP program. Training scheduled for supervisors/managers 	All eight Certified Manager Program (CPM) participants moving successfully through the process. All 24 LEAP participants graduated successfully from the program, Training staff will deliver a basic series of courses for new managers on a regular basis, New managers will complete basic supervisory courses with 12 months of assuming supervisory roles, Training staff will deliver an intermediate series of courses for managers with more than 2 years managing experience, Experienced managers will complete at least 6 non- program specific hours of continuing education courses each year. Non-managers will complete at least 3 non-program specific hours of continuing education courses each year,	June 30	1, CPM Graduation Rate - Available Annually 2, LEAP Graduation Rates - Available Annually 3, Percent of managers completing continuing education requirements - Available Annually	 Number of CPM participants who graduate/ total DHEC CPM Participants Number of LEAP participants who graduate/ total LEAP Participants Number of managers completing continuing education requirements/ Number of total managers 	4.2.3
85	Establish the Office of Strategy and Continuous Improvement with standardized and fully implemented policies and procedures by June 30, 2017	Form Office of Strategy and Continuous Improvement and begin strategic analysis of Agency policies and practices.	Office of Strategy and Continuous Improvement formed within DHEC Operations. Developing the procedures for analysis of DHEC policies and practices.	Formal continuous improvement policies and procedures implemented. Standardized DHEC policies and practices evaluation tool developed.	June 30	Continuous Improvement policy/procedure manual and policies and practices evaluation tool.	N/A	4.3.1
86	Establish a Project Management Office with standardized and fully implemented policies, procedures, and artifacts by June 30, 2017	Formalize PMO and expand scope of control to cover strategic projects within all DHEC program areas	PMO formed within DHEC Operations, Team expanded and actively managed approximately 40 strategic and tactical projects spanning all areas of DHEC,	Formal PMO policies and procedures implemented. Standardized project artifacts developed.	June 30	PMO policy/procedure manual and project portfolio.	N/A	4.3,2

Agency Name: Er

Department of Health and Environmental Control

Agency Cod	e J040	Section: 034	
Name of Partner Entity	Type of Partner Entity	Description of Partnership	Associated Objective(s)
319 Grantees	Local Government, Higher Education Institute, Non- Governmental Organization	DHEC contracts with local partners such as watershed organizations, municipalities, non-profits, universities, etc. to implement nonpoint source water quality improvement program using federal 319 grant funds.	2.4.3
40 by 2020 Partnership (Sonoco Recycling, Pratt Industries, SC Department of Commerce, Palmetto Pride, and the SC Beverage Association)	Professional Association	This partnership, in which DHEC participates, is dedicated to sharing resources and working together to help South Carolina meet or exceed in 40 percent recycling goal by 2020.	2.3.3
Advisory Committees	Non-Governmental Organization	Advise and make recommendations to the department about formulation and implementation of a comprehensive cancer prevention and control.	1.2.3
Agencies on Aging	Non-Governmental Organization	Registered dietitians deliver programs to low-income seniors on healthy eating to prevent and/or manage chronic conditions such as type 2 diabetes, heart disease, etc. In 2016-2017, Supplemental Nutrition Assistance Program (SNAP) staff will assist in delivering the Walk with Ease Program to senior groups.	1.2.1, 1.4.4
Alcohol Drug Rehabilitation Facilities	Non-Governmental Organization	Conduct SNAP-Ed programs for adults served by the agencies at rehabilitation facilities.	1.2.1, 1.4.4
Alere Wellbeing/Optum	Private Business Organization	DHEC partners with Alere Wellbeing/Optum to provide smoking Quitline services to the residents of S.C., including evidence based counseling, nicotine replacement therapy, healthcare provider referral, materials, education and training.	1.2.5
Alliance for a Healthier Generation	Non-Governmental Organization	DHEC serves as an intermediary for the Alliance's Healthy Schools Program. DHEC utilizes the national evidence- based tools and resources provided by the Alliance for a Healthier Generation to assist schools and school districts with implementation of nutrition and physical activity policies and practices to improve student health.	1.4.4
Alliance for a Healthier South Carolina	Non-Governmental Organization	DHEC is a launching partner for the Alliance's Health Equity Call to Action. In addition, DHEC's Office of Minority Health (OMH) attends regularly held meetings and utilizes partnerships and resources provided by the Alliance to accomplish its objective.	1.2.6
Alta Planning + Design	Private Business Organization	DHEC funds Alta Planning + Design to develop or implement community plans that promote walking and increase access to healthy foods in fifteen targeted counties, with a specific emphasis on communities with health disparities.	1.4.4
American Cancer Society – Cancer Action Network (ACS- CAN)	Non-Governmental Organization	ACS-CAN collaborates in the development and evaluation of the State Tobacco Plan and the implementation of its various initiatives. Promote the efforts of the Smoking Prevention and Cessation Program to decision makers to educate on the benefits of the program.	1.2.5
American College of Radiology	Professional Association		3.6.1, 3.6.2, 3.6.3
American College of Radiology	Professional Association	Bridges federal, state and local entities.	3.6.1, 3.6.2, 3.6.3
American College of Radiology	Professional Association	Serves patients and society by empowering members to advance the practice, science and professions of radiological care.	3.6.2
American Heart Association (AHA)	Non-Governmental Organization	Trained staff from AHA will provide at least 4-6 trainings in S.C. to medical practice staff with trainings focusing on promoting two new initiatives. DHEC will work with existing partners to increase the reach when marketing the trainings.	1.2.1, 1.2.5
American Heart Association (AHA)	Non-Governmental Organization	AHA collaborates in the development and evaluation of the State Tobacco Plan and the implementation of its various initiatives. Promote the efforts of the Smoking Prevention and Cessation Program to decision makers to educate on the benefits of the program.	1.2.5
American Heart Association (AHA)	Non-Governmental Organization	Serves on Stroke Advisory Council and provides guidance and direction to the program.	3.3.4

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American Heart Association (AHA)	Non-Governmental Organization	Advocates for funding to support the Stroke Act and program.	3.3.4
American Lung Association (ALA)	Non-Governmental Organization	ALA collaborates in the development and evaluation of the State Tobacco Plan and the implementation of its various initiatives. Promote the efforts of the Smoking Prevention and Cessation Program to decision makers to educate on the benefits of the program.	1.2.5
American Red Cross	Non-Governmental Organization	DHEC, the S.C. Department of Social Services, and the American Red Cross collaborate regularly regarding shelter planning and operations and conduct exercises and operate shelters as needed. DHEC supports the Multi-Agency Sheltering Task Force under a public health emergency preparedness grant. The Task Force identifies stakeholders and vulnerable populations requiring shelter; DHEC and partners will identify transportation needs and transportation resources. DHEC and the American Red Cross will work with local governments and NGOs to identify potential shelter locations.	1.6.1, 1.6.2
Arthritis Foundation	Non-Governmental Organization	The Office of Healthy Aging promotes the Foundation's evidence-based interventions, and provides consultation and technical assistance to a variety of the partners engaged in the foundation's program in an effort to expand program offerings across the state.	1.2.1
Ascellon Corporation	Private Business Organization	Contracts with the Department to complete Medicare Certification surveys of skilled nursing facilities to meet CMS State Agency Performance Standards.	3.2.1
Association for Professionals in Infection Control and Epidemiology (APIC) Palmetto	Professional Association	APIC Palmetto has worked with DHEC in accomplishing the educational goals related to infection prevention and control in healthcare settings. The opportunity to train Infection Preventionists in healthcare associated infection (HAI) surveillance and monitoring during the regional meetings of APIC Palmetto has been very beneficial. APIC also participates in the Hospital Infection Disclosure Act (HIDA) Advisory Committee to determine the HAIs that should be publicly reported.	1.3.1, 1.5.4
Association of Clean Water Administrators (ACWA)	Professional Association	As a member of ACWA, DHEC participates in national calls, webinars, surveys, and work groups conducted by ACWA covering a wide array of clean water programs.	2.4.1, 2.4.2, 2.4.3, 2.4.5
Association of Food and Drug Officials (AFDO)	Professional Association	DHEC participates in AFDO, which is an international, non-profit organization that is in the forefront of streamlining and simplifying regulations by either drafting regulatory rules or by commenting on government proposals. By developing a broad base of support for new approaches, AFDO has become a recognized voice in determining the rules and shape of the regulatory playing field of the future. The consensus that AFDO develops is key to advancing uniform laws, regulations, and guidelines that result in more efficient regulation and less confusion among industry in the marketplace.	2.2.2
Association of Maternal and Child Health Programs (AMCHP)	Professional Association	The AMCHP is a national resource, partner and advocate for state public health leaders and others working to improve the health of women, children, youth and families, including those with special health care needs. MCH partners with AMCHP for quality improvement, workforce development, training, and advocacy.	1.1.1
Association of State and Territorial Dental Directors (ASTDD)	Professional Association	DHEC and the Division of Oral Health led by the Division Director (serving as the SC State Dental Director) participate in ASTDD task forces and subcommittees that focus on development of best practices, policies and resources for state's oral health programs. The ASTDD provides technical assistance to state oral health programs through funding provided by the Center for Disease Control and Prevention.	1.1.5
Association of State and Territorial Health Officials (ASTHO)	Professional Association	As a member of ASTHO, DHEC participates in routine updates and annual meetings. DHEC staff sit on several ASTHO committees and the agency regularly benefits from ASTHO guidance and public health best practice.	
Association of State and Territorial Solid Waste Management Officials (ASTSWMO)	Professional Association	DHEC participates in ASTSWMO task forces and subcommittees that focus on particular program elements, including, but not limited to, hazardous waste, Superfund, and UST.	2.3.2, 2.3.4
Association of State Dam Safety Officials (ASDSO)	Professional Association	DHEC participates in ASDSO, the association that brings together representatives of all of the state programs across the country to provide information to improve state programs. The organization provides training as well as monitors activity at the federal level in order to represent the best interest of states.	2.4.4
Association of State Drinking Water Administrators (ASDWA)	Professional Association	As a member of ASDWA, DHEC participates in national calls, webinars, surveys, and work groups conducted by ASDWA covering a wide array of drinking water programs.	2,4.1, 2.4.2

Association of State Wetland Managers (ASWM)	Professional Association	DHEC participates in ASWM, which represents states, tribes, federal and nonprofit partners to better understand and	
		protect wetland resources. The organization provides training and education to the members and monitors activities	
		related to wetland resources.	
		DHEC partners with the ACC, which was formed in response to the federal Low-Level Radioactive Waste Policy Act of	2.3.2
Atlantic Compact Commission (ACC)	Professional Association	1980. DHEC regulates the Barnwell disposal site that the ACC uses to dispose of radioactive waste.	
-		Provide hearing screening and/or diagnostic testing and recommendations for hearing systems for children with	1.1.1
Audiologists	Private Business Organization	hearing impairments.	
		reening importants.	1.1.1
	Duiunte Business Onnetication	Provide follow-up screening and/or diagnostic testing for newborns that are referred on the inpatient newborn	1.1.1
Audiologists	Private Business Organization	hearing screening. Report results and recommendations, if applicable, to the newborn hearing screening program.	
	Non-Governmental	DHEC partners with Baby & Me Tobacco Free to implement a program to support and incentivize pregnant smokers	1.1.3, 1.2.5
Baby & Me Tobacco Free	Organization	to guit smoking both prenatally and post-partum to improve birth outcomes and reduce healthcare costs.	
	organization		
	Non-Governmental	Provide awareness and information regarding tobacco use and exposure. Assess and document the tobacco use of	1.1.3, 1.2.5
Baby & Me Tobacco Free	Organization	pregnant, postpartum and breastfeeding WIC Nutrition Program participants. Refer and provide materials to client	
	Organization	request to the S.C. Tobacco Quitline.	
Beaufort Jasper Hampton Comprehensive Health Services,	Non-Governmental	Provide WHC and in the Lawrence to Public Use Mr. Paris	1.1.3
Inc.	Organization	Provide WIC services in the Lowcountry Public Health Region.	
			1.1.5
Beaufort Jasper Hampton Comprehensive Health Services,	Non-Governmental	Provide preventive dental services in S.C. public schools and learning centers through the DHEC Dental Prevention	
inc.	Organization	Program. Provide outreach and educational materials at community and school events throughout the school year.	
	organization	Serve as a link for care coordination with school nurses for students needing emergency dental care.	
		DHEC partners with BFG to design, implement and evaluate media campaigns and educational strategies to change	1.2.5
Beverage and Food Group Communications (BFG)	Private Business Organization	social norms about tobacco use among youth in S.C.	1.2.5
			1.4.4
BlueCross BlueShield Foundation of S.C.	Private Business Organization	DHEC receives funding from the Foundation to coordinate the implementation of the S.C. HtnessGram System.	1.4.4
		Work to ensure Best Chance Network (BCN), WISEWOMAN services are accessible in the community and that	1.2.3
BlueCross BlueShield S.C.	Private Business Organization		1.2.5
		information, education and training is available, implemented and disseminated. [2016-2017]	351 353
Bureau of Ocean and Energy Management (BOEM)	Federal Government		2.5.1, 2.5.2
		reasonably foreseeable coastal effects.	
Businesses	Private Business Organization	Community Teams work with business worksites to become referral and/or delivery systems for health aging	1.4.4
D0311633C3	Thrate pushess of Bullinetion	programming and to become active sites for the National DPP.	
Camp Burnt Gin – Children with Special Health Care Needs	State Covernment	S.C. Oral Health Coalition members provide training that supports positive oral health behaviors and education, DHEC	1.1.5
Camp Burnt Gin – Children with Special Health Care Needs	state Government	educational materials and other resources for camp counselors, campers and their families	
		DHEC provides education and training to support implementation of a provider referral system to connect their	1.2.5
Cancer Centers	Private Business Organization	tobacco using patients with effective tobacco treatment services.	
			1.2.1
	Non-Governmental	promoting the American Medical Association/Centers for Disease Control and Prevention Prevent Diabetes STAT	
Care Coordination Institute (CCI)		Toolkit to medical practices within the network to support identification and referral of pat ents with prediabetes to	
	Organization	a S.C. National Diabetes Prevention Program.	
			2,3.3
Carolina Recycling Association (CRA)	Professional Association		2,3,3
		promote waste reduction and recycling.	

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Carolinas Center for Medical Excellence (CCME)	Non-Governmental Organization	CCME has worked closely with DHEC through the HIDA Advisory Committee and South Caro ina Alliance for Infection Prevention (SCHAIP) in several projects related to reduction in HAI infections. CCME has plaved a critical role in implementing a coordinated, effective approach to infection prevention initiatives in SC. CCME is also working to track <i>Clostridium difficile</i> infections in nursing homes and is collaborating with DHEC in our efforts for assessing IC practices in long term care facilities. They partnered with DHEC in organizing statewide training on antimicrobial stewardship.	1,3.1, 1.5.4
Carolinas Integrated Sciences and Assessments (CISA)	Professional Association	improve the assessment of climate-related vulnerabilities and impacts, and provide timely and relevant information and tools for decision makers. CISA is one of ten NOAA-funded Regional Integrated Sciences and Assessments (RISA) teams in the country.	2.5.2, 2.5,3, 2,5.4
Centers for Disease Control and Prevention (CDC)	Federal Government	implementation and quality assurance for the community water fluoridation program, public health dental prevention program, SC Oral Health Coalition, SC Oral Health Advisory Council, the development and enhancement of partnerships, development of policies and implementation of the State Oral Health Plan.	1.1.5
Centers for Disease Control and Prevention (CDC)	Federal Government	Fiscal resources allocated by CDC through the PHHSBG are used to support state-wide efforts to (1) address Sexual Violence Prevention and (2) enhance Health Promotion (state and regional obesity prevention, state Community Health Improvement, and regional community engagement directed towards active living, health eating and injury and violence free living) efforts.	1.2.1, 1.2.2, 1.4.4
Centers for Disease Control and Prevention (CDC)	Federal Government	CDC provides funding for cooperative agreements in support of policy, systems and environmental work, the implementation of evidence based strategies in support of arthritis interventions, type 2 diabetes prevention and diabetes self-management education and training, strategies to build and enhance environments supportive of healthy eating and active living, and support for improving clinical systems that address identification and monitoring of individuals with the conditions of pre-hypertension and prediabetes.	1.2.1, 1.2.4, 1.2.6, 1.4.4
Centers for Disease Control and Prevention (CDC)	Federal Government	Manage funding they provide to administer the cooperative agreement to reduce the burden of arthritis.	1.2.1, 1.4.4
Centers for Disease Control and Prevention (CDC)	Federal Government	CDC provides funding to DHEC for implementation of nutrition and physical activity best practices in child care, schools, communities, and worksites.	1.2.1, 1.4.4
Centers for Disease Control and Prevention (CDC)	Federal Government	The Division of Cancer Prevention and Control is partially funded by the CDC and aims to reduce the burden of cancer for all South Carolinians and provides best practices and guidance to achieve outcomes.	1.2.3
Centers for Disease Control and Prevention (CDC)	Federal Government	CDC provides grant funding and technical assistance to address tobacco use in SC.	1.2.5
Centers for Disease Control and Prevention (CDC)	Federal Government	Fiscal resources allocated by CDC through the National Violent Death Reporting System (NVDRS) Grant support data abstraction of violent death cases obtained from local coroner and law enforcement files.	1,2.7
Centers for Disease Control and Prevention (CDC)	Federal Government	CDC provides grants to support efforts to address Zika in S.C. [2016-2017]	1.3.1
Centers for Disease Control and Prevention (CDC)	Federal Government	DHEC works with the CDC on a formal basis for a number of grant funded activities, national outbreaks and on an ad hoc basis as questions arise or additional assistance is needed.	1.3.1
Centers for Disease Control and Prevention (CDC)	Federal Government	CDC provides funding to DHEC for implementation if the Epidemiology and Laboratory Capacity (ELC) Cooperative Agreement to improve the public health system, via three cornerstones: 1) epidemiology, 2) laboratory and 3) health information systems, to effectively detect and prevent emerging infectious diseases. The ELC program currently covers more than 20 specific categorical disease areas, approximately 45 discrete projects.	1.3.1, 1.4.5
Centers for Disease Control and Prevention (CDC)	Federal Government	Receive funding for HIV/AIDS surveillance activities and shares HIV/AIDS morbidity and mortality data for national reporting and surveillance comparison purposes. Receive potential duplicate cases in other states fcr de-duplication process.	1.3.4
Centers for Disease Control and Prevention (CDC)	Federal Government	The CDC's Division of STD Prevention - Receive funding for surveillance, partner services and disease intervention activities. Shares grant deliverables outcomes for continued funding. Share STD morbidity data for national reporting and surveillance comparison purposes.	1.3.4
Centers for Disease Control and Prevention (CDC)	Federal Government	The CDC's DTBE partially funds the S.C. State Tuberculosis Control Program.	1.4.6

Centers for Disease Control and Prevention (CDC)	Federal Government	The SC Central Cancer Registry is funded by the CDC National Program of Cancer Registries 'NPCR) to collect all newly diagnosed cancer cases occurring in SC annually, process, analyze, and prepare them for dissemination throughout the state; reporting back to CDC the annual caseload information for use in national publications of cancer incidence for the U.S.	1.5.3, 1.5.5, 1.5.6
Centers for Disease Control and Prevention (CDC)	Federal Government	The BRFSS, SC Pregnancy Risk Assessment Monitoring System (PRAMS), and the SC Environmental Public Health Tracking (EPHT) program are CDC-funded, DHEC run projects. Funding is used to conduct and support the surveillance, tracking, outreach and data dissemination activities of these programs.	1.5.4, 1.5.5
Centers for Disease Control and Prevention (CDC)	Federal Government	Foodborne outbreak data is submitted to CDC.	2.2.3
Centers for Disease Control and Prevention (CDC)	Federal Government	CDC provides technical assistance in support of monitoring and assessing threats to the general population from a chemical/radiological release.	2.2.3
Centers for Disease Control and Prevention (CDC)	Federal Government	DHEC notifies the CDC of rabies cases.	2.2.3
Centers for Disease Control and Prevention (CDC)	Federal Government	Works collaboratively with the Prescription Monitoring Program to administer a CDC grant to improve the state's ability to identify and stop diversion of controlled substances.	3.5.3
Charleston Resilience Network (CRN)	Professional Association	DHEC is a founding partner organization of the CRN, a volunteer-based effort composed of public and private sector stakeholder organizations with the Charleston metropolitan area that have a collective interest in the resilience of communities, critical infrastructure and socio-economic continuity to episodic natural disasters and chronic coastal hazards.	2.5.2, 2.5.3, 2.5.4
Children's Trust of S.C.	Non-Governmental Organization	DHEC Division of Children's Health partners with Children's Trust to provide training on Adverse Childhood Experiences (ACEs)	1.1.1
Children's Trust of S.C.	Non-Governmental Organization	DHEC staff work with Children's Trust to educate the public about safer sleeping practices for infants.	1.1.4
Children's Trust of S.C.	Non-Governmental Organization	Outreach to MIECHV home visitation programs. Collaboration to increase awareness of the prevention of abuse and neglect for dental providers—Prevent Abuse and Neglect through Dental Awareness (PANDA) training and coalition.	1.1.5
Children's Trust of S.C.	Non-Governmental Organization	DHEC Division of Injury and Violence Prevention (DIVP) and its Child Passenger Safety (CPS) Program collaborates with Children's Trust of SC and its state-wide Safe Kids Coalitions are the topic areas of water safety, safe sleep, child passengers safety, etc.	1.2.2
Children's Trust of S.C.	Non-Governmental Organization	The Trust provides financial support to DHEC-run S.C. BRFSS for inclusion of adverse childhood experiences. DHEC provides appropriate SC BRFSS data sets and statistics, as necessary.	1.5.4
Children's Trust of S.C.	Non-Governmental Organization	The BRFSS coordinates with Children's Trust of SC regarding funding and inclusion of questions related to adverse childhood experiences (ACEs) on the BRFSS survey. These questions have been included for 2014, 2015, and 2016 survey years.	1.5.4, 1.5.5, 1.5.6
ChildSmiles Dental, Inc.	Private Business Organization	Provides preventive dental services in S.C. public schools and learning centers under the DHEC Dental Prevention program, provides outreach and educational materials at community and school events. Provides care coordination for students needing emergency dental care with school nurses.	1.1.5
City of Charleston	Local Government	DHEC works with the City of Charleston on efforts including the Charleston Resilience Network and abandoned and derelict vessel (ADV) removal operations. In 2015-2016, DHEC contracted with the City of Charleston to remove 12 ADV from area waters, totaling over 90 tons.	2.5.1, 2.5.2, 2.5.3, 2.5.4
Classy Smiles, Inc.	Non-Governmental Organization	Provides preventive dental services in S.C. public schools and learning centers under the DHEC Dental Prevention program, provides outreach and educational materials at community and school events. Provides care coordination for students needing emergency dental care with school nurses.	1.1.5
Clemson University	Higher Education Institute	Collaborate on the delivery of SNAP initiatives and share resources. Meet periodically to share resources/ideas and participate in joint trainings with DSS.	1.2.1, 1.4.4

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Clemson University	Higher Education Institute	Provide funding to Clemson University to assist with the expansion of the design of outdoor learning environments for child care centers, the evaluation of S.C. Farm to Institution programs, including Farm to Preschool and Farm to school, and the development of an active community environments how-to guide for communities. Clemson University Planning, Development, and Preservation faculty serve on the DHEC-led S.C. Health & Planning Advisory Committee	
Clemson University	Higher Education Institute	DHEC works with South Carolina Meat and Poultry related to meat products in South Carolina.	2.2.2
Clemson University	Higher Education Institute	The Clemson Division of Regulatory Services provides technical assistance and expertise on agricultural property damage on pesticide application concerns.	2.2.3
Clemson University	Higher Education Institute	Fertilizer Advisory Committee to offer input regarding new product registration and land application potential for industrial byproducts and wastes.	2.3.1
Clemson University Department of Pesticide Regulation	Higher Education Institute	DHEC and the Clemson University Department of Pesticide Regulation cooperate regarding mosquito surveys and control measures.	1.6.1, 1.6.4
Clemson University Livestock and Poultry Health (CULPH)	Higher Education Institute	DHEC and CULPH work together to incorporate radiation protection principles into planning for protecting animals and agricultural products.	1.6.1
Clemson University Livestock and Poultry Health (CULPH)	Higher Education Institute	DHEC and CULPH coordinate enhanced surveillance of novel avian influenza virus in wild birds, poultry flocks and poultry workers.	1,6.1
Clemson University Livestock and Poultry Health (CULPH)	Higher Education Institute	DHEC and CULPH exercise emergency response plans involving fixed nuclear facilities.	1.6.4
Clemson University Livestock and Poultry Health (CULPH)	Higher Education Institute	DHEC works with CULPH related to the Necropsy Rabies program and during emergencies related tc agricultural animals,	2.2.2, 2.2.3
Clinical Efforts Against Secondhand Smoke Exposure (CEASE) National Program/Massachusetts General Hospital	Non-Governmental Organization	DHEC works with the CEASE national program to tailor a similar program for pediatric healthcare provider in S.C. to address tobacco use among their patients and patient's families.	1.2,5
Coastal Carolina University	Higher Education Institute	This stakeholder helps DHEC provide a program that offers lessons, support materials, teacher workshops, and classroom presentations to promote composting, recycling, waste reduction, litter prevention, and sustainability.	2.3.3
Coastal Counties and Municipalities	Local Government	DHEC works with coastal counties and municipalities to develop and implement Local Comprehensive Beach Management Plans (LCBMP), which guide the management and stewardship of the beach and beach/dune system. A state-approved LCBMP is required for eligibility to receive state funding for beach renourishment and other enhancement grants. DHEC also works with coastal counties and municipalities in the review of funding assistance to improve and enhance infrastructure.	
Coastal States Organization (CSO)	Professional Association	DHEC participates in the CSO to enhance coordination among state Coastal Zone Management Programs and ensure accurate representation of coastal management issues before the U.S. Congress and federal agencies.	2.5.2, 2.5.3, 2.5.4
Colleges & Universities	Higher Education Institute	Provide training and technical assistance to implement programs; provide up-to-date, culturally appropriate health education information and data.	1.2.1
Colleges & Universities	Higher Education Institute	Collaborate to identify and address quality care issues and access gaps. Assist in identifying approaches to provide coverage and program planning.	1.2.3
Colleges & Universities	Higher Education Institute	Provide approved data to academic researchers upon request to facilitate public health research.	1.5.6
Columbia Marionette Theater	Non-Governmental Organization	The theater travels to approximately 25 schools a year reaching over 6,000 children each year with positive oral health messages and resources. Since the inception of this initiative about 39,000 school-aged children have been reached.	1.1.5
Community Based Organizations	Non-Governmental Organization	Provide training and technical assistance to implement programs; provide up to date, culturally appropriate health education information and data.	1.2.1
Community Based Organizations	Non-Governmental Organízation	Accept required reportable disease lab reports and related information. May receive referral request to assist in diagnosis and/or treatment. Per program priorities, may take actions to initiate and perform active surveillance and disease intervention activities. Provide funding for targeted STD/HIV screening activities.	1.3.2

Community Based Organizations	Non-Governmental Organization	Referrals are made to HIV care centers for ongoing HIV follow up care.	1.4.3
Community Centers	Non-Governmental Organization	SNAP programs are conducted for children and adults served by the agencies and facilities are used for programs free of charge.	1.2.1, 1.4.4
Conference for Food Protection	Professional Association	DHEC participates in the Conference for Food Protection, which provides a formal process whereby members of industry, regulatory, academia, consumer and professional organizations are afforded equal input in the development of Food Safety Guidance.	2.2.4
Conference of Radiation Control Program Directors (CRCPD)	Professional Association	DHEC partners with CRCPD to promote consistency in addressing and resolving radiation protection ssues.	2.3.2
Conference of Radiation Control Program Directors (CRCPD)	Non-Governmental Organization	Offers training and understanding in all radiological areas.	3.6.1, 3.6.2
Conference of Radiation Control Program Directors (CRCPD)	Non-Governmental Organization	Provides guidance to State Radiological Health Programs.	3.6.1, 3.6.2, 3.6.3
Conference of Radiation Control Program Directors (CRCPD)	Non-Governmental Organization	Mission of dedication to Radiation Safety.	3.6.1, 3.6.2, 3.6.3
Conference of Radiation Control Program Directors (CRCPD)	Non-Governmental Organization	Encompasses state and federal programs.	3.6.1, 3.6.2, 3.6.3
Conference of Radiation Control Program Directors (CRCPD)	Non-Governmental Organization	Promotes uniformity of radiation control laws and regulations.	3.6.2
Congregate Meals Sites	Local government	Registered dietitians deliver programs to low-income seniors on healthy eating to prevent and/or manage chronic conditions such as type 2 diabetes, heart disease, etc. In 2016-2017, SNAP staff will assist in delivering the <i>Walk with Ease Program</i> to senior groups.	1.2.1, 1.4.4
Contractors and Consultants	Individual and Professional Association	DHEC works with contractors and consultants on permit applications and other regulatory proposals to meet environmental requirements.	2.1.1, 2.1.2, 2.1.3, 2.1.4, 2.1.5, 2.2.1, 2.2.2, 2.2.3, 2.2.4, 2.3.1, 2.3.2, 2.3.3, 2.3.4, 2.4.1, 2.4.2, 2.4.3, 2.4.4, 2.4.5, 2.5.1, 2.5.2, 2.5.3, 2.5.4
Contractors and Consultants	Individual and Professional Association	For the adaptation of the UST federal regulations, the UST Program is collaborating with stakeholders in 2016-2017 as part of the stakeholder involvement process for regulation development.	2.3.2
Council of Governments (COGs)	State Government	DHEC works with the SC Regional COGs through its Health and Planning efforts, to include engagement in the 2014 SC Health + Planning Toolkit training and the development and dissemination of the 2015 statewide pedestrian planning survey. The Central Midlands COG served as one of the lead community contacts for the Active Community Environments (ACE) Special Projects [2014 – 2015] and continues to participate in the evaluation process; and SC Farm to Institution projects. The Central Midlands COG partnership has also included work on the SC Food Access Task Force. COGs have been engaged in the Alta Planning + Design – pedestrian planning project in select counties of the state.	1.4.4
Council of Governments (COGs)	Local Government	DHEC coordinates with COGs on Air Quality Coalitions.	2.1.3
Council of Governments (COGs)	Local Government	COGs develop regional wastewater management plans that dictate certain aspects of DHEC permitting. COGs provide assistance in allocating water quality loading to local permit holders.	2.4.1
Counties and/or Municipal Governments	Local government	Provide training and technical assistance to implement programs; provide up to date, culturally appropriate health education information and data.	1.2.1
Counties and/or Municipal Governments	Local government	Community teams are currently engaged and in process of assisting counties in developing their Community Health Improvement Plan.	1.2.1
Counties and/or Municipal Governments	Local government	The agency provides accurate, timely, and useful health information on methods to protect the public from exposure to secondhand smoke.	1.2.5
Counties and/or Municipal Governments	Local Government	DHEC works with these partners to provide technical assistance and grant funding to promote recycling.	2.3.3
County and Municipal Public Works Departments	Local government		1.6.4

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County Emergency Management Agencies	Local government	bile excluses regalarity and participated in order open time to the second states and a	1.6.1, 1.6.4
	Individual and Non-	DHEC provides assistance and regulatory guidance to dam owners on an ongoing basis and during emergency	1.6.4, 2.4.4
Dam Owners	Governmental Organization	responses.	
		Detect and respond to disease occurrences via reports received for routine, urgent and immediately notifiable	1.4.5
Daycare Facilities – Licensed and Unlicensed	Private Business Organization	conditions under public health surveillance.	
		Provide education, recommendations, training and guidance, as appropriate, to enhance reporting of sentinel events	1.4.5
Daycare Facilities – Licensed and Unlicensed	Private Business Organization	and also to hinder further disease transmission.	
		Potential South Carolina Oral Health Coalition member. Planning collaboration to increase awareness of the	1.1.5
		prevention of abuse and neglect for dental providers-Prevent Abuse and Neglect through Dental Awareness	
Delta Dental of Missouri and South Carolina	Non-Governmental	(PANDA) training program. Planning collaboration on public awareness campaign in SC "Dentist By 1" piloted in	
	Organization	Missouri. [2016-2017] Provides standards based Oral Health Curriculum and materials for 121 public schools in	
		South Carolina.	
		Coalition member. Provides educational materials and supplies for the Oral Health Needs Assessment and provides	1.1.5
DentaQuest	Private Business Organization	support to dental providers that participate in the DHEC Dental Prevention Program.	
	Non-Governmental	DHEC works with the DAC to ensure that people with prediabetes achieve optimal health and delay or prevent the	1.2.1
Diabetes Advisory Council of S.C. (DAC)	Organization	onset of type 2 diabetes.	
		DHEC assists DSC in the development of guidelines for the management of diabetes and supporting adherence to	1.2.1
		evidence-based standards for education and care. The DSC is committed to lowering the burden of diabetes in the	
	Higher Education Institute	state through translation of evidence-based standards of clinical practice, and patient and community education	
Diabetes Initiative of S.C. (DSC)		centered on blood glucose control, blood pressure control, healthy eating, physical activity, and foot care. The two	
		entities also partner on evidence-based professional education opportunities to enhance the lifelong learning	
		process of physicians, nurses, pharmacists, dietitians and other health care professionals to advance the quality and	1
		safety of patient care.	
		The Don't Waste Food SC/Food Recovery Initiative involves partners such as DHEC, Harvest Hope Food Bank, SC Food	2.3.3
	Professional Association and	Bank Association, Loaves & Fishes, SC Department of Commerce, SC Department of Agriculture and many others.	
Don't Waste Food SC/Food Recovery Stakeholders	Non-Governmental	The centerpiece of this effort is the Don't Waste Food SC campaign that is designed to promote this issue and offer	
	Organization	assistance to various stakeholders through prevention, donation, and composting.	
	Non-Governmental	Collaborate with S.C. Cancer Division Comprehensive Cancer Control Program to identify and disseminate	1.2.3
Donate Life	Organization	information regarding organ donorship.	
		Dr. Rushton is the Medical Director of the S.C. DHHS Quality through Technology and Innovation in Pediatrics (QTIP)	1.1.1
		program and serves in the Early Childhood Comprehensive Systems State Leadership Team and provides ideas and	
Dr. Francis Rushton	Individual	information regarding quality care in pediatrics and gains partnerships and perspective on from a variety of early	
		childhood sectors. Also takes in planning and facilitating for planning Coordinated Access of Children's Health	
		(CATCH) meetings. [2015-2016]	
		Dr. Rushton collaborated with the Division of Oral Health to provide training on the integration of oral health	1.1.5
Dr. Francis Rushton	Individual	prevention services into medical practices through QTIP. He and Lynn Martin of S.C. DHHS serve on the Project	
		Advisory Board for the HRSA Perinatal and Infant Oral Health Quality Improvement Expansion grant. [2015-2016]	
		The Diabetes Prevention Program staff identify eligible organizations that have the capacity to implement the	1.2.1
		National DPP and have them collaborate with ESMMSC to receive support and resources fcr program	
	Non-Governmental	implementation. ESMMSC assists in the provision of professional development opportunities to region and central	
Eat Smart Move More S.C. (ESMMSC)	Organization	office staff supporting the establishment and sustainability of the National DPP sites in each of the four communities	•
		These professional development opportunities will include skill-building for staff on educational and outreach	
		strategies, resource development and facilitation skills for coalition and partnership building.	1

	L	DHEC collaborates with ESMMSC to promote open community use as a strategy to increase physical activity	1.2.2, 1.4.4
Eat Smart Move More S.C. (ESMMSC)	Non-Governmental Organization	opportunities in communities. DHEC and ESMMSC also work together to promote the incorporation of healthy eating and active living best practice policy recommendations into county comprehensive planning efforts, and engage HYPE Teams (youth lead) in the utilization of environmental and system changes strategies directed towards the	1.2.2, 1.4.4
	Organization	creation of injury and violence free living environments. DHEC serves on ESMMSC's Let's Go Advisory Committee and holds a position on the ESMMSC Board.	
Eat Smart Move More S.C. (ESMMSC)	Non-Governmental Organization	The Bureau of Community Health and Chronic Disease Prevention programs work with ESMM to implement various activities related to, Community Linkages, WISEWOMAN, and Healthy Aging.	1.2.4
Eau Claire Cooperative Health Centers, Inc.	Non-Governmental Organization	Collaborate to provide trainings for staff to integrate oral health services into medical homes, to certify providers to be reimbursed by Medicaid for applying fluoride varnish and to increase parent knowledge, and continue to provide technical assistance and resources as needed for twelve sites.	1.1.5
Educational Institutions	Local government	Detect and respond to disease occurrences via reports received for routine, urgent and immediately notifiable conditions under public health surveillance.	1.4.5
Educational Institutions	Local government	Provide education, recommendations, training and guidance, as appropriate, to enhance reporting of sentinel events and also to hinder further disease transmission.	1.4.5
Educational Institutions	Higher Education Institute and K-12 Education Institute	DHEC works with these partners to provide technical assistance and grant funding to promete recycling.	2.3.3
EdVenture Children's Museum	Non-Governmental Organization	Provide logistic support for the S.C. Oral Health (SC OH) Coalition, Perinatal and Infant Oral Health Quality Improvement (PIOHQI) grant and Division of Oral Health (DOH) meetings. Utilizes DHEC oral health education robotic characters in child health educational activities at the museum. Provides oral health education for children integrated with existing health curriculum. Member of the SC Oral Health Coalition.	1.1.5
Electronics Recycling Coordination Clearinghouse (ERCC)	Professional Association	ERCC provides DHEC with an opportunity to interact with other states on issues related to the recycling and proper management of electronic scrap.	2.3.3
Elementary Schools	к-12	Elementary school children in K-5 th grade receive the Taking Charge in Meadowland Program that teaches children nutrition and physical activity concepts through the story of a an unhealthy mouse's journey to health.	1.2.1, 1.4.4
Elementary Schools	K-12	DHEC's Division of Injury and Violence Prevention (DIVP) and its Child Passenger Safety (CPS) Program collaborates with Safe Routes to School and the SCDOT to conduct school transportation safety assessments which address all modes of transport to and from schools.	1.2.7
Facilities Possessing Hazardous and Regulated Materials	Private Business Organization	DHEC provides advice and regulatory guidance to facilities possessing hazardous and regulated materials during emergency responses.	1.6.4
Faith Based Organizations/Communities	Non-Governmental Organization	Provide training and technical assistance to implement programs; provide up to date, culturally appropriate health education information and data.	1.2.1
Faith Based Organizations/Communities	Non-Governmental Organization	SNAP initiatives are requested by faith-based organizations for their members and the communities Facilities are used for SNAP initiatives free of charge. Assist in recruiting participants for the programs.	1.2.1
Faith Based Organizations/Communities	Non-Governmental Organization	DHEC provides awareness and educational information on the National DPP and DSME to faith-based organizations. The Diabetes Prevention Program staff provide technical assistance on how the organization can become a National DPP or DSME site and offer the program(s) to their members. If the organization is interested in having their members participate in an established, off-site program, staff will facilitate collaboration with the established site.	1.2.1
Faith Based Organizations/Communities	Non-Governmental Organization	Community Teams engage the faith communities in various ways including presentation, technical assistance with development and adoption of smoke-free and healthy eating policies, adoption of breast-feeding policies using the mother-friendly toolkit and/or the faith and health resource guides, trail development, promotion and development of church and community gardens and access to other need-based resources. Community team partners with faith-based organizations conducting the Soulfully Fit Health Ministry training. The trained leaders then serve as a lialson between the Community Team and the church and conduct assessments and health-related activities in the church.	1.4.4

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Non-Governmental	parent mentors. In 2015-2016, provided training opportunities for program staff through an annual conference and	
Organization	other events as well as participated in the arrangement of the Title V Family Advisory Board. Refers families to the	
	program for needed services.	
	Work together to ensure that all of their participants (expecting young mothers) are provided with health	1.1.1
Non-Governmental	information and resources needed during and after pregnancy. Sign all participants up for Text4baby to provide	
	them with critical health and safety information. DHEC information and resources are provided during childbirth	
	classes. DHEC participate in conferences and meetings, as well as exhibit information.	
		1.6.1
Federal Government		
	FEMA provides guidance for and coordination of emergency operations following a major cisaster, manmade or	2.2.3
Federal Government		
Federal Government		2.4.4
		1.2.3, 1.4.4
	and outcomes of the S.C. Cancer Report Card. The Comprehensive Cancer Control Program largely supports the S.C.	
Federal Government	Cancer Aliance which oversees grantee implementation of the cancer control plan and serves as an advocacy unit.	1
Federal Government		1.5.5
1		1.2.1
Federal Government		
		1.2.1
Non-Governmental	based interventions being promoted: implement interventions and make referrals to local programs; provide training	
Organization		
		1.2.1, 1.2.6
Non-Governmental	DHEC and the divisions within the BCHCDP and how DHEC could partner with them and/or provide technical	
Organization	assistance on disease prevention/management interventions, including those related to health systems and	
Organization	assistance on disease prevention/management interventions, including those related to health systems and community-clinical linkages	
Organization	community-clinical linkages.	1.2.1, 1.2.6
Organization Non-Governmental	community-clinical linkages. The WISEWOMAN Program contracts with FQHCs to provide cardiovascular disease risk screening, health coaching	1.2.1, 1.2.6
	community-clinical linkages. The WISEWOMAN Program contracts with FQHCs to provide cardiovascular disease risk screening, health coaching services, and referrals to TOPS National DPP for low-income, un-or underinsured women ages 40-64 who are also	1.2.1, 1.2.6
Non-Governmental Organization	community-clinical linkages. The WISEWOMAN Program contracts with FQHCs to provide cardiovascular disease risk screening, health coaching services, and referrals to TOPS National DPP for low-income, un-or underinsured women ages 40-64 who are also enrolled in the Best Chance Network.	1.2.1, 1.2.6
Non-Governmental Organization Non-Governmental	community-clinical linkages. The WISEWOMAN Program contracts with FQHCs to provide cardiovascular disease risk screening, health coaching services, and referrals to TOPS National DPP for low-income, un-or underinsured women ages 40-64 who are also enrolled in the Best Chance Network. In 2016-2017, registered dietitians will work with FQHCs to deliver programs to low-income adults on healthy eating	
Non-Governmental Organization	 community-clinical linkages. The WISEWOMAN Program contracts with FQHCs to provide cardiovascular disease risk screening, health coaching services, and referrals to TOPS National DPP for low-income, un-or underinsured women ages 40-64 who are also enrolled in the Best Chance Network. In 2016-2017, registered dietitians will work with FQHCs to deliver programs to low-income adults on healthy eating to prevent and/or manage chronic conditions such as type 2 diabetes, heart disease, etc. 	1.2.1, 1.4.4
Non-Governmental Organization Non-Governmental	community-clinical linkages. The WISEWOMAN Program contracts with FQHCs to provide cardiovascular disease risk screening, health coaching services, and referrals to TOPS National DPP for low-income, un-or underinsured women ages 40-64 who are also enrolled in the Best Chance Network. In 2016-2017, registered dietitians will work with FQHCs to deliver programs to low-income adults on healthy eating to prevent and/or manage chronic conditions such as type 2 diabetes, heart disease, etc. Provide breast and cervical screenings for women between the ages of 30-64, 200% of poverty level, and uninsured	
Non-Governmental Organization Non-Governmental Organization	 community-clinical linkages. The WISEWOMAN Program contracts with FQHCs to provide cardiovascular disease risk screening, health coaching services, and referrals to TOPS National DPP for low-income, un-or underinsured women ages 40-64 who are also enrolled in the Best Chance Network. In 2016-2017, registered dietitians will work with FQHCs to deliver programs to low-income adults on healthy eating to prevent and/or manage chronic conditions such as type 2 diabetes, heart disease, etc. 	1.2.1, 1.4.4
Non-Governmental Organization Non-Governmental Organization Non-Governmental Organization	community-clinical linkages. The WISEWOMAN Program contracts with FQHCs to provide cardiovascular disease risk screening, health coaching services, and referrals to TOPS National DPP for low-income, un-or underinsured women ages 40-64 who are also enrolled in the Best Chance Network. In 2016-2017, registered dietitians will work with FQHCs to deliver programs to low-income adults on healthy eating to prevent and/or manage chronic conditions such as type 2 diabetes, heart disease, etc. Provide breast and cervical screenings for women between the ages of 30-64, 200% of poverty level, and uninsured or underinsured patients with high deductible health plan to increase access to screening and re-screening services.	1.2.1, 1.4.4
Non-Governmental Organization Non-Governmental Organization Non-Governmental Organization Non-Governmental Non-Governmental	community-clinical linkages. The WISEWOMAN Program contracts with FQHCs to provide cardiovascular disease risk screening, health coaching services, and referrals to TOPS National DPP for low-income, un-or underinsured women ages 40-64 who are also enrolled in the Best Chance Network. In 2016-2017, registered dietitians will work with FQHCs to deliver programs to low-income adults on healthy eating to prevent and/or manage chronic conditions such as type 2 diabetes, heart disease, etc. Provide breast and cervical screenings for women between the ages of 30-64, 200% of poverty level, and uninsured or underinsured patients with high deductible health plan to increase access to screening and re-screening services. DHEC provides education and training to support implementation of a provider referral system to connect their	1.2.1, 1.4.4
Non-Governmental Organization Non-Governmental Organization Non-Governmental Organization Non-Governmental Organization Non-Governmental Organization Non-Governmental Organization	community-clinical linkages. The WISEWOMAN Program contracts with FQHCs to provide cardiovascular disease risk screening, health coaching services, and referrals to TOPS National DPP for low-income, un-or underinsured women ages 40-64 who are also enrolled in the Best Chance Network. In 2016-2017, registered dietitians will work with FQHCs to deliver programs to low-income adults on healthy eating to prevent and/or manage chronic conditions such as type 2 diabetes, heart disease, etc. Provide breast and cervical screenings for women between the ages of 30-64, 200% of poverty level, and uninsured or underinsured patients with high deductible health plan to increase access to screening and re-screening services. DHEC provides education and training to support implementation of a provider referral system to connect their tobacco using patients with effective tobacco treatment services.	1.2.1, 1.4.4 1.2.3 1.2.5
Non-Governmental Organization	community-clinical linkages. The WISEWOMAN Program contracts with FQHCs to provide cardiovascular disease risk screening, health coaching services, and referrals to TOPS National DPP for low-income, un-or underinsured women ages 40-64 who are also enrolled in the Best Chance Network. In 2016-2017, registered dietitians will work with FQHCs to deliver programs to low-income adults on healthy eating to prevent and/or manage chronic conditions such as type 2 diabetes, heart disease, etc. Provide breast and cervical screenings for women between the ages of 30-64, 200% of poverty level, and uninsured or underinsured patients with high deductible health plan to increase access to screening and re-screening services. DHEC provides education and training to support implementation of a provider referral system to connect their	1.2.1, 1.4.4
Non-Governmental Organization Non-Governmental Organization Non-Governmental Organization Non-Governmental Organization Non-Governmental Organization Non-Governmental Organization	community-clinical linkages. The WISEWOMAN Program contracts with FQHCs to provide cardiovascular disease risk screening, health coaching services, and referrals to TOPS National DPP for low-income, un-or underinsured women ages 40-64 who are also enrolled in the Best Chance Network. In 2016-2017, registered dietitians will work with FQHCs to deliver programs to low-income adults on healthy eating to prevent and/or manage chronic conditions such as type 2 diabetes, heart disease, etc. Provide breast and cervical screenings for women between the ages of 30-64, 200% of poverty level, and uninsured or underinsured patients with high deductible health plan to increase access to screening and re-screening services. DHEC provides education and training to support implementation of a provider referral system to connect their tobacco using patients with effective tobacco treatment services. Referrals are made to HIV care centers for ongoing HIV follow up care.	1.2.1, 1.4.4 1.2.3 1.2.5 1.4.3
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Non-Governmental Organization Private Business Organization	community-clinical linkages. The WISEWOMAN Program contracts with FQHCs to provide cardiovascular disease risk screening, health coaching services, and referrals to TOPS National DPP for low-income, un-or underinsured women ages 40-64 who are also enrolled in the Best Chance Network. In 2016-2017, registered dietitians will work with FQHCs to deliver programs to low-income adults on healthy eating to prevent and/or manage chronic conditions such as type 2 diabetes, heart disease, etc. Provide breast and cervical screenings for women between the ages of 30-64, 200% of poverty level, and uninsured or underinsured patients with high deductible health plan to increase access to screening and re-screening services. DHEC provides education and training to support implementation of a provider referral system to connect their tobacco using patients with effective tobacco treatment services. Referrals are made to HIV care centers for ongoing HIV follow up care. DHEC exercises regularly and participates in SEOC operations with Fixed Nuclear Facility operators.	1.2.1, 1.4.4 1.2.3 1.2.5 1.4.3 1.6.1, 1.6.4
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Non-Governmental Organization Private Business Organization	community-clinical linkages. The WISEWOMAN Program contracts with FQHCs to provide cardiovascular disease risk screening, health coaching services, and referrals to TOPS National DPP for low-income, un-or underinsured women ages 40-64 who are also enrolled in the Best Chance Network. In 2016-2017, registered dietitians will work with FQHCs to deliver programs to low-income adults on healthy eating to prevent and/or manage chronic conditions such as type 2 diabetes, heart disease, etc. Provide breast and cervical screenings for women between the ages of 30-64, 200% of poverty level, and uninsured or underinsured patients with high deductible health plan to increase access to screening and re-screening services. DHEC provides education and training to support implementation of a provider referral system to connect their tobacco using patients with effective tobacco treatment services. Referrals are made to HIV care centers for ongoing HIV follow up care. DHEC exercises regularly and participates in SEOC operations with Fixed Nuclear Facility operators.	1.2.1, 1.4.4 1.2.3 1.2.5 1.4.3 1.6.1, 1.6.4
	Organization Image: Second	Non-Governmental Darent mentors. In 2015-2016, provided training opportunities for program staff through an annual conference and other events as well as participated in the arrangement of the Title V Family Advisory Board. Refers families to the program for needed services. Non-Governmental Work together to ensure that all of their participants (expecting young mothers) are provided with health information and resources needed during and after pregnancy. Sign all participants up for TextAbaby to provide them with critical health and safety information. DHEC information and resources are provided during childbirth classes. DHEC participate in conferences and meetings, as well as exhibit information. Federal Government DHEC meets frequently with FEMA representatives under the aegis of SCEMD emergency planning and participates with FEMA provides guidance for and coordination of emergency operations following a major cisaster, manmade or natural, to include Fixed Nuclear Facilities. Federal Government FEMA offers the state a federal grant focused on dam safety. Federal Government CHCDP operates under the guidance of the CDC six cancer priorities, S.C. Cancer Control Plan goals and objectives, and outcomes of the S.C. Cancer Report Card. The Comprehensive Cancer Control Plan goals and objectives, and outcomes of the S.C. Cancer Report Card. The Comprehensive Cancer Control Plan and serves as an advocacy unit. Ob Federal Government DHEC Vital Statistics provides verifications of birth, death, marriage and divorce to federal agencies. Federal Government DHEC Vital Statistics provides verifications of binth, death, marriage and divorce to federal agencies. <

ree Medical Clinics/Labs	Non-Governmental Organization	Provide breast and cervical screenings for women between the ages of 30-64, 200% of poverty level, and uninsured or underinsured patients with high deductible health plan to increase access to screening and re-screening services.	1.2.3
ree Medical Clinics/Labs	Non-Governmental Organization	The agency provides education and training to support implementation of a provider referral system to connect their tobacco using patients with effective tobacco treatment services.	
eorgia Department of Health, HIV Surveillance Program	State Government	DHEC participates in routine data exchange to improve data quality and completeness of the HIV Surveillance System in both states.	
Seorgia Department of Public Health Women, Infants and Children (WIC) Nutrition Program	State Government	Partner to detect dual participation in local WIC agencies that serve populations along the state line where residents of either state commonly travel back and forth across the state line. Exchange list of program participants in an electronic file while preserving the confidentially of all data that can identify participants.	
Greenville Health System (GHS)	Private Business Organization	Developing partnership with GHS to create an Adolescent Teen Center in Greenville County.	1.4.2
Greenville Health System (GHS)	Private Business Organization	DHEC and GHS cooperate via grant funding in establishing a dedicated patient containment area and acquiring personal protective equipment for responding to possible Ebola outbreaks.	1.6.2
Greenville Health System (GHS)	Non-Governmental		3.5.3
Greenwood Genetic Center	Organization Non-Governmental Organization		1.1.1
Greenwood Genetic Center	Non-Governmental Organization	Ensures that screen positive infants receive timely diagnostic testing and specialty medical care. Provides consultation on technical aspects of newborn blood spot testing and follow up processes. Reviews the newborn blood spot test panel and assist the program in implementing new conditions as recommended by national experts.	1.1.1
Greenwood Genetic Center	Non-Governmental Organization	Greenwood Genetic Center provides a contracted clinical geneticist to consult with the S.C. Birth Defects Program to ensure that complete and accurate data for birth defects occurring in S.C. are collected.	1.1.4
Greenwood Genetic Center	Non-Governmental Organization	The Greenwood Genetic Center receives referrals from the S.C. Birth Defects Program to enroll women who have pregnancies affected by neural tube defects into their neural tube defect prevention program.	1.1.4
Head Start Centers and Preschool Programs	Federal Government	Tiny Tastes See How It Grows Programs are delivered to children in Head Start and Preschool Programs exposing children to a variety of fruits and vegetables.	1.2.1, 1.4.4
Health Management Solutions (HMS)	Private Business Organization	Collaborates with the Department to identify program improvements and secure resources to enhance quality and performance.	3.2.1
Health Promotion Specialists	Private Business Organization	Provides preventive dental services in S.C. public schools and learning centers under the DHEC Dental Prevention program, provides outreach and educational materials at community and school events. Provides care coordination for students needing emergency dental care with school nurses.	1.1.5
Health Resources and Services Administration (HRSA)	Federal Government	Houses the federal Title V Maternal and Child Health Block Grant Program, the nation's oldest federal-state partnership. It aims to improve the health and well-being of women (particularly mothers) and children. South Carolina receives funding through the Block Grant to provide programs and services.	1.1.1, 1.1.4, 1.1.5
Healthcare and Regulatory Attorneys	Individuals	These partners submit Certificate of Need (CON) applications to the Department for review and coordinates communication between the Department and regulated community when reviewer questions arise.	3.4.2
Healthcare Consultants	Individuals	Coordinates public comments from multiple stakeholders to provide to the Department during Plan review periods.	3.4.1
Healthcare Consultants	Individuals	This partner disseminates regulatory information to members of the regulated community to assist in the application process.	3.4.2
Healthcare Consultants	Individuals	Acts as an intermediary between the Department and the regulated community to coordinate sharing of information.	3.4.2
Healthcare Executives	Individuals	This partner provides public comment on State Health Plan recommendations and updates.	3.4.1
Healthcare Planners	Individuals	This partner provide public comment on State Health Plan recommendations and updates.	3.4.1

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Healthcare Planners	Individuals	Responds to Department requests for information regarding market trends, analyses, or to provide expert opinion to CON staff.	3.4.1
Healthcare Planners	Individuals	Utilize the State Health Plan at the hospital/system level to meet the public need, as determined by the State Health Plan, and prevent duplication of services.	3.4.1, 3.4.2
Healthcare Professional Volunteers	Individuals	DHEC maintains a registry of health care volunteers for deployment during emergency response.	1.6,3
Healthcare Providers	Private Business Organization	Provides breast and cervical screenings for women between the ages of 30-64, 200% of poverty level, and uninsured or underinsured patients with high deductible health plan to increase access to screening and re-screening services.	1.2.3
Healthcare Providers	Private Business Organization	The agency provides education and training to support implementation of a provider referral system to connect their tobacco using patients with effective tobacco treatment services.	1.2.5
Healthcare Providers	Private Business Organization	Reduces vaccine preventable diseases and increase immunization rates to reduce the burden of diseases in the community.	1.3.1
Healthcare Providers	Individuals	This partner provides public comments on State Health Plan recommendations and updates.	3.4.1
Help Me Grow	Non-Governmental Organization	Partner to help build reach of Help Me Grow services in the following counties: Berkeley, Charlestor, Dorchester, Florence, Greenville, and Pickens [2015-2016]	1.1.1
Hold Out the Life Line	Non-Governmental Organization	Hold Out the Life Line partners with DHEC to provide resources and information to faith communities across the state about tobacco use, chronic diseases, strategies to prevent them and services to help with them.	1.2.5
Hospital Systems (MUSC, Palmetto Health, Greenville Health System)	Non-Governmental Organization	Provide multi-disciplinary clinics for children with craniofacial disorders.	1.1.1
Hospital-Based Community Programs	Non-Governmental Organization	Registered dietitians deliver programs to low-income seniors on healthy eating to prevent and/or manage chronic conditions such as type 2 diabetes, heart disease, etc.	1.2.1, 1.4.4
Hospitals	Non-Governmental Organization	The Bureau of Laboratories works with all hospitals in the state. Those hospitals collect specimens from all newborns and send them to the BOL for metabolic screening.	1.1.1
Hospitals	Non-Governmental Organization	Ensures that specimens for newborn blood spot screening are collected accurately and submitted promptly. Provides education to parents about the newborn blood spot screening process by use of the required pamphlet provided by DHEC.	1.1.1
Hospitals	Non-Governmental Organization	Ensures that all newborns are screened for hearing loss prior to discharge. Making timely referrals for follow up for newborns that do not pass the inpatient hearing screening. Reports results and referral information if applicable to the newborn hearing screening program.	1,1,1
Hospitals	Private Business Organization	Provides breast and cervical screenings for women between the ages of 30-64, 200% of poverty level, and uninsured or underinsured patients with high deductible health plan to increase access to screening and re-screening services.	1.2.3
lospitals	Private Business Organization	The agency provides education and training to support implementation of a provider referral system to connect their tobacco using patients with effective tobacco treatment services.	1.2.5
lospitals	Private Business Organization		1.3.1
lospitals	Private Business Organization	Certifications, nutrition education, breastfeeding peer counseling services and referral to registered dietitian for high risk participants are conducted in selected hospitals throughout the state.	1.4.1
lospitals	Private Business Organization	Partnerships (MOAs) with hospitals to provide WIC services currently at select hospitals in the State. Partnerships with local hospitals to provide EIC outreach to post-partum mothers.	1.4.1
lospitals	Private Business Organization		1.4.2
iospitals	Private Business Organization		1.4.4
lospitals	Private Business Organization	Ensures suspect and confirmed cases of TB are reported and referred to the Agency for clinical evaluation and	1.4.6

Private Business Organization	MOAs with local hospitals for x-ray and interpretation of x-ray to assist with diagnosis and treatment.	1.4.6
Private Business Organization	DHEC Vital Statistics provides training and regulatory guidance for birth, death, induced termination of pregnancy and fetal death registration.	1.5.1
Private Business Organization	DHEC Central Cancer Registry provides training to all hospital cancer registrars statewide on the current national standards for cancer data collection, staging of cancer, and recording cancer treatment information.	1.5.3, 1.5.4
Private Business Organization	DHEC works with the health care community to ensure that required emergency plans are current and monitors emergency preparation and post-event recovery.	1.6.1, 1.6.4
Private Business Organization	DHEC provides advice and regulatory guidance to hospitals during emergency responses.	1.6.4
Private Business Organization	These partners detect and respond to disease occurrences via reports received for routine, urgent and immediately notifiable conditions under public health surveillance.	1.3.1
Local government	SNAP-Ed programs are conducted for children, teenagers and adults served by the agencies and facilities are used for programs free of charge.	1.2.1, 1.4.4
Non-Governmental Organization	Monitor and participate in code and standard development and professional development opportunities.	3.1.4
Professional Association	In line with DHEC's desire to be the premiere state food protection agency, a DHEC representative has been selected to participate as a Fellow with IFPTI. IFPTI provides fellowships and training programs at no cost for public health agencies. This fellowship will strengthen state expertise that we may in turn share with our customers.	2.2.2
Professional Association	The IMCC is a multi-state governmental organization that provides an opportunity for DHEC to work with and learn from other states regarding mining issues.	2.3.1, 2.3.2
Professional Association	DHEC is a voting member of the ISSC. This organization works with FDA to develop criteria for the national shellfish sanitation program. (2.4.3, 2.4.5
Private Business Organization	Detect and respond to disease occurrences via reports received for routine, urgent and immediately notifiable conditions under public health surveillance.	1.3.1
Private Business Organization	Ensures that HIV/AIDS laboratory tests are performed timely and accurately. Provide STS with HIV/AIDS lab results per requirements listed on Reportable Conditions.	1.3.4
Private Business Organization	Ensures suspect and confirmed cases of TB are reported and referred to the Agency for clinical evaluation and management.	1.4.6
Non-Governmental Organization	DHEC participates with various land conservation organizations as funds are available to help restore, enhance, and preserve/conserve sensitive natural, historic and cultural resources.	2.5.2, 2.5.3, 2.5.4
Non-Governmental Organization	Works collaboratively with the Prescription Monitoring Program to administer a grant to improve the state's ability to identify and stop diversion of prescription drugs.	3,5.3
Non-Governmental Organization	Provides preventive dental services in S.C. public schools and learning centers through an MDA with the DHEC Dental Prevention Program. Provides outreach and educational materials at community and school events. Provides care coordination for students needing emergency dental care with school nurses.	1.1.5
Non-Governmental Organization	Collaborates with the coalitions to strengthen cancer prevention and control efforts for breast and cervical cancer as outlined in the S.C. Cancer Plan for population-based and systems changes efforts in the state.	1,2.3
Local government	DHEC Vital Statistics provides verifications of birth, death, marriage and divorce for the purpose of criminal investigations.	1.5.5
Local Government		3.5.3
	Private Business Organization Non-Governmental Organization Professional Association Professional Association Professional Association Private Business Organization Private Business Organization Private Business Organization Private Business Organization Non-Governmental Organization Non-Governmental Organization Non-Governmental Organization Non-Governmental Organization Non-Governmental Organization Local governmental Organization	Private Business Organization DHEC Vital Statistics provides training and regulatory guidance for birth, death, induced termination of pregnancy and fetal death registration. Private Business Organization DHEC Central Cancer Registry provides training to all hospital cancer registrars statewide on the current national standards for cancer data collection, staging of cancer, and recording cancer treatment information Private Business Organization DHEC works with the health care community to ensure that required emergency plans are current and monitors emergency preparation and post-event recovery. Private Business Organization DHEC provides advice and regulatory guidance to hospitals during emergency responses. Private Business Organization These partners detect and respond to disease occurrences via reports received for routine, urgent and immediately notifiable conditions under public health surveillance. Local governmental SNAP-Ed programs are conducted for children, teenagers and adults served by the agencies and facilities are used for programs free of charge. Non-Governmental Monitor and participate in code and standard development and professional development opportunities. In line with DHEC's desire to be the preminer state food protection agency. a DHEC representative has been selected to participate as a fellow with IPHT. IPHT provides flowships and training programs of no cost for public health agencies. This fellowship will strengthen state expertise that we may in turn share with our customers. Professional Association The IMCC is a multi-tate governmental orga

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		The March of Dimes collaborates in the development and evaluation of the State Tobacco Plan and the	1.2.3
	Non-Governmental	implementation of its various initiatives, in particular those that address tobacco use during pregnancy and	
March of Dimes	Organization	secondhand smoke in the home. In addition, partners with DHEC on the implementation of the Baby and Me	
	Organization	Tobacco Free program to support and incentivize pregnant smokers to quit both prenatally and post-partum to	
		improve birth outcomes and reduce healthcare costs.	
	Non-Governmental	The Foundation is partnering with the DOH on an outreach initiative to reach school-aged children in grades K-12	1.1.5
Marcus Lattimore Foundation	Organization	with preventive oral health messages.	
	Non-Governmental		1.4.2
Mary Black Foundation	Organization	Contract to support teen pregnancy efforts in Spartanburg County.	
	Organization	Accept required reportable disease lab reports and related information. May receive referral request to assist in	1.3.2
A - disal Casial Casting Requires Control and	Private Business Organization	diagnosis and/or treatment. Per program priorities, may take actions to initiate and perform active surveillance and	
Medical and Social Services Provider Stakeholders	Private Business Organization	disease intervention activities.	
		Community teams are providing technical assistance to contracted medical practices to help them implement and	1.2.4
Medical Practices	Private Business Organization	Community teams are providing technical assistance to contracted medical plactices to help them implement and	1.2.4
		sustain policies, protocols and enhancements around diabetes prevention and care.	
		DHEC and MUSC cooperate via grant funding (Hospital Preparedness Program Ebola Preparedness and Response	1.6.2
Medical University of South Carolina (MUSC)	Higher Education Institute	Activities) to expand MUSC's capability to receive and manage high risk infectious disease patients; DHEC administers	
		the grant and monitors grantee activities.	
		Works collaboratively with the Prescription Monitoring Program to administer a grant to improve the state's ability	3.5.3
Medical University of South Carolina (MUSC)	Higher Education Institute	to identify and stop diversion of prescription drugs.	
Midwifery Advisory Council	Professional Association	DHEC Vital Statistics provides consultation and regulatory guidance for birth registration to midwives.	1.5.1
Midwifery Advisory Council	State Government	Consult with for advice and guidance on health and safety issues.	3.1.1, 3.1.2, 3.1.3
Midwifery Advisory Council	State Government	The MASC, in which DHEC participates, provides a forum for interacting with, and educating the regulated	2.3.1, 2.3.2
Mining Association of South Carolina (MASC)	Professional Association	community regarding mining and reclamation activities.	
	and the second	The agency provides accurate, timely, and useful health information to protect non-smoking residents from exposure	125
Multi-Unit Housing Companies, Managers and Residents	Private Business Organization		1.2.0
		to secondhand smoke and linkage to services to help tobacco users quit.	125
Multi-Unit Housing Companies, Managers and Residents	Private Business Organization	Community teams conduct smoke-free presentations and training to multi-unit housing managers and residents.	1.2.5
Municipal Separate Storm Sewer Systems (MS4s)	Local Government	DHEC authorizes MS4s to conduct stormwater construction application review within their jurisdiction.	2.4.1, 2.4.2
Municipal Separate Storm Sewer Systems (MS45)	Local Government	DHEC works collaboratively with the MUSC Boeing Center for Children's Wellness to provide assistance to Bamberg	1.4.4
MUSC Boeing Center for Children's Wellness	Higher Education Institute	School Districts One and Two.	
		MUSC collaborates in supporting state tobacco control, particularly the SC CAN Quit oncology initiative designed to	1.2.5
MUSC Hollings Cancer Center	State Government	MUSE collaborates in supporting state tobacco control, particularly the second dut biology initiative designed to	1.2.5
		improve the Standard of Care for treatment of cancer patients who use tobacco.	1.1.5
MUSC James B. Edwards College of Dental Medicine	Higher Education Institute	Supports evaluation of performance on the CDC state dental prevention grant and the State Oral Health Plan along	1.1.5
Mode James B. Edwards conege of Dental Medicine	Thigher cadeator instruct	with the SC OH Advisory Council.	
		Collaborates with DOH through an academic-public health partnership for oral health in support of achieving the	1.1.5
MUSC James B. Edwards College of Dental Medicine		goals and objectives of the State Oral Health Plan. Supports evaluation of performance on the CDC state dental	
		prevention grant and the State Oral Health Plan.	
		Partner to detect dual participation in local WIC agencies that serve populations along the state line where residents	1.1.4
N.C. Department of Health and Human Services Nutrition	State Government	of either state commonly travel back and forth across the state line. Exchange list of program participants in an	
Services Branch		electronic file while preserving the confidentially of all data that can identify participants.	
			1.4.4
	1	DHEC provides funding to and coordinates in-state opportunities for the N.C. State University College of Design. NC	
N.C. State University	Higher Education Institute	State provides design assistance to five child care centers in Florence and five child care centers in Spartanburg to	
		create outdoor learning environments that promote physical activity and incorporate fruit and vegetable gardens.	
			11 7 1 1 7 7 1 7 2 1 7 5 1 7 6 1 7 7
		Chronic Disease programs receive targeted technical assistance and program staff support NACDD program quality	1.2.1, 1.2.2, 1.2.3, 1.2.5, 1.2.6, 1.2.7
National Association of Chronic Disease Directors (NACDD) Professional Association	Chronic Disease programs receive targeted technical assistance and program staff support NACDD program quality improvement work.	1.2.1, 1.2.2, 1.2.3, 1.2.5, 1.2.6, 1.2.7

National Association of State Land Reclamationists (NASLR)	Professional Association	DHEC partners with the NASLR to promote the proper restoration of mined areas.	2,3.2
National Association of State Public Health Veterinarians	Professional Association	DHEC assists with a compendium used to make recommendations for animal protection.	2.2.2
National Conference for Interstate Milk Shipment (NCIMS)	Professional Association	DHEC works with NCIMS on routine inspections, monitoring, and enforcement for the dairy industry	2.2.2
National Fire Protection Association (NFPA)	Professional Association	Monitors and participates in code and standard development and professional development opportunities.	3.1.4
National Oceanic and Atmospheric Administration (NOAA)	Federal Government	DHEC works with NOAA to implement the state's Coastal Zone Management Program, which protects sensitive natural resources while promoting responsible development within the eight county Coastal Zone.	2.5.1, 2.5.2
National Tuberculosis Control Association (NTCA)	Non-Governmental Organization	Ensure the SC Tuberculosis Control Program is utilizing current standard of care and best practices for overall TB control practices. Provides clinical training for physician and nursing staff working the Tuberculosis Control Program. [2016-2017]	1.4.6
New Morning Foundation	Non-Governmental Organization	DHECs Office of Minority Health is a part of the leadership team which provides guidance and oversight to a project In Orangeburg focused on reducing teen pregnancy disparities.	1.2.6
Non-profit entities providing Abstinence Education programming	Professional Association	Partner with non-profit entities that are awarded State and Federal funds for abstinence education programming through a competitive grant application process.	1.1.2
Non-profit entities providing Abstinence Education programming	Non-Governmental Organization	The Agency provides accurate, timely, and useful health information to protect non-smoking residents from exposure to secondhand smoke and linkage to services to help tobacco users quit.	1.2.5
Nurse-Family Partnership (NFP)	Private Business Organization	Each region works with a Community Advisory Board (CAB) to increase referral sources for the NFP program. The CAB is composed of a variety of community partners, based on their connections in the community.	1.4.7
Nurse-Family Partnership (NFP)	Private Business Organization	Each DHEC region is an implementing entity for the NFP Program. The program delivers nurse education and assessment through a home visitation program to first-time, high-risk mothers.	1.4.7
Nurse-Family Partnership (NFP)	Private Business Organization	NFP National Service Office: Supports communities in implementing and sustaining the program by providing consultation on business development, nursing practice, program quality support, marketing and communication, and public policy and government affairs. In South Carolina, this entity is working extensively with state partners in all sites to implement the Pay for Success Program	1.4.7
Nurse-Family Partnership (NFP)	Private Business Organization	NFP Pay for Success: DHEC and the state's other five NFP implementing agencies are participating in the nation's first Pay for Success initiative focused on improving health outcomes for first-time mothers and children living in poverty. The project will expand NFP services to an additional 3,200 first-time, low-income mothers across the state.	1.4.7
Nursing Homes and Residential Care Facilities	Private Business Organization	Detect and respond to disease occurrences via reports received for routine, urgent and immediately notifiable conditions under public health surveillance.	1.3.1, 1.4.5
Nursing Homes and Residential Care Facilities	Private Business Organization	DHEC works with the health care community to ensure that required emergency plans are current.	1.6.1
Nursing Homes and Residential Care Facilities	Private Business Organization	DHEC provides advice and regulatory guidance to nursing homes and residential care facilities during emergency responses.	1.6.4
Office of Rural Health	State Government	Office of Rural Health partnered with DHEC in organizing a statewide training on antimicrobial stewardship. They offered to fund staff from critical access hospitals to attend this training.	1.3.1
Office of the State Archeologist	State Government	The State Archeologist provides to DHEC maps and technical information on historical sites that may be damaged/destroyed during the monitoring or cleanup of a chemical/oil release.	2.2.3
Organization of Agreement States (OAS)	Professional Association	DHEC partners with OAS to promote and foster uniformity of radiation laws and regulations and to promote cooperative interaction with the NRC.	2.3.2
Organization of Agreement States (OAS)	Professional Association	Provides a mechanism for the Agreement States to work with each other and with the NRC on regulatory issues associated with their respective agreements.	3.6.1, 3.6.2, 3.6.3
Orthodontists	Private Business Organization	Provides orthodontic services to children with moderate-to-severe malocclusions and craniofacial abnormalities.	1.1.1

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Other States	State Government	DHEC Central Cancer Registry is a member of the CDC's National Interstate Data Exchange Application System (N- IDEAS) in order to share cancer diagnoses occurring in SC back to the resident state so each new cancer case can be included in the incidence counts for the appropriate state to ensure accuracy for data evaluation. Other member states share SC resident cases back to DHEC Central Cancer Registry.	1,5.3, 1.5.4, 1.5.6
Other States	State Government	DHEC Vital Statistics is a member of the State and Territorial Exchange of Vital Events (STEVE) system in order to share vital event data occurring in SC back to the resident state so each vital event can be included in statistics for the appropriate state to ensure accuracy for data evaluation. Other member states share SC resident vital events back to DHEC Vital Statistics to allow for more accurate statistical representation of the health of residents of SC.	1.5.5, 1.5.6
Other States	State Government	DHEC coordinates with neighboring states on permitting actions and ambient air monitoring.	2.1.1, 2.1.3, 2.1.4
Oxbow Encounter CHART	Private Business Organization	DHEC partners with Oxbow to provide and maintain the Encounter CHART bi-directional web-based application that allows providers to refer patients to specific and local community-based lifestyle change support organizations and other community resources that will support lifestyle change.	1.2.1
Palmetto Health Hematology and Oncology Department	Non-Governmental Organization	Partners to provide in-kind resources for the blood disorders session at the program's residential summer program.	1.1.1
Palmetto Health Medical Center	Non-Governmental Organization	Works collaboratively with the Prescription Monitoring Program to administer a grant to improve the state's ability to identify and stop diversion of prescription drugs.	3.5.3
Palmetto Health System	Private Business Organization		1,6.2
Palmetto Healthy Start	Non-Governmental Organization	Work together to ensure that all of their participants (expecting young mothers) are provided with health information and resources needed during and after pregnancy. Sign all participants up for Text4baby to provide them with critical health and safety information. DHEC information and resources are provided during childbirth classes. DHEC participate in conferences and meeting as well as exhibit information.	1.1.1
Palmetto Poison Center	Non-Governmental Organization	The Palmetto Poison Center is a sentinel reporting partner for the conditions present on DHEC's List of Reportable Conditions and also provides the Division of Acute Disease Epidemiology with Toxidromes for use in DHEC's Syndromic Surveillance System.	1.3.1
Palmetto Pride	Non-Governmental Organization		2.3.3
Parks and Recreation Departments	Local government	Provide training and technical assistance to implement programs, provide up-to-date, culturally appropriate health education information and data.	1.2.1
Parks and Recreation Departments	Local government	SNAP-Ed programs are conducted for children and teenagers served by the agencies. The Summer Food Service Program is frequently offered through Parks and Recreation Programs to provide meals to children and youth in low- income areas. [2015-2016]	1.2.1, 1.4.4
Parks and Recreation Departments	Local government	Provides training, resources and technical assistance to implement evidence based interventions, culturally appropriate health education materials, and updated data regarding arthritis and other health conditions	1.2.1, 1.4.4
Parks and Recreation Departments	Local government	Community Teams work with parks and recreation centers to become referral and/or delivery systems for health aging programming and to become active sites for the National DPP.	1.4.4
PASOs	Non-Governmental Organization	PASOs helps the Latino community and service providers work together for strong and healthy families. PASOS provides education, support and grassroots leadership development for participants. Partner to develop <i>Promotores</i> skills on parenting including developmental screening and referral, developmental milestones, the importance of reading together early with their children, understanding quality child care and what that looks like. [2015-2016]	1.1.1
PASO5	Non-Governmental Organization	Contracts with PASOs to educate and engage Latino families throughout the state with a particular focus on seven highly populated counties, focusing on the enrollment of pregnant women, infant and children age 1-5, postpartum and breastfeeding women.	1.1.3

PASOs

PASOs

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1.1.4 Partners to monitor trends in participation of the Hispanic and Latino population of the state. PASOs is an outreach program connects Latino families with systems of care and piloted Midlands Oral Health 1.1.5 initiative for Latino families. Reviews educational materials to ensure cultural and linguistic competence and assist with outreach to Latino communities. SNAP programs will be delivered and conducted for Latino children, teens and adults served by this organization. 1.2.1, 1.4.4 [2016-2017] DHEC's DIVP and its CPS Program collaborates with PASOs to educate parents and caregivers in the proper use of 1.2.2 child safety restraints.

PASOs	Non-Governmental	DHEC's OMH plans to work with PASOs to better serve the growing Hispanic/Latino population throughout the state.	1.2.6
	Organization	The OMH Director is also a member of the PASOs advisory board. [2016-2017]	
	Non-Governmental	F F F F F F F F F F F F F F F F F F F	1.4.2
PASOs	Organization	also offered to address family planning methods, reproductive anatomy, reproductive life plans, recognizing and	
	Organization	preventing STI's and HIV/AIDS as well as resources for treatment.	
Patient Organizations	Non-Governmental	The Agency provides education and training to support implementation of a provider referral system to connect their	1.2.5
Fatient Organizations	Organization	tobacco using patients with effective tobacco treatment services.	
		S.C. physicians complete cause of death information as part of the death registration process for vital statistics. Vital	1.5.1
Physicians	Private Business Organization	Statistics staff provide education and consultation to physicians in the state on the correct processes regarding	
		completion of medical certification on death certificates.	
	Non-Governmental	Detects and responds to disease occurrences via reports received for routine, urgent and immediately notifiable	1.4.5
Places of Worship	Organization	conditions under public health surveillance.	
	Non-Governmental	Provides education, recommendations, training and guidance, as appropriate, to enhance reporting of sentinel	1.4.5
Places of Worship	Organization	events and also to hinder further disease transmission.	
Protection and Advocacy for People with Disabilities	Professional Association	Coordinates sharing information if any concerns arise from inspections and investigations.	3.1.2, 3.1.3
		DHEC provides advice and regulatory guidance to public and private water and sewer operators during emergency	1.6.4
Public and Private Water and Sewer Operators	Private Business Organization	responses.	
	Non-Governmental		1.2.3
Public Partnerships	Organization	training is available, implemented and disseminated.	
			2.3.2
Public Service Commission of S.C. (PSC)	State Government	DHEC licenses.	
		The 15 Rape Crisis Centers provide crisis intervention, 24-hour hotline services and hospital accompaniment,	1.1.2
		medical/legal advocacy, information and referral to the direct and secondary victims of sexual assault. They also	
Rape Crisis Centers	Non-Governmental	promote public awareness, education, and risk reduction of sexual violence. The Sexual Violence Program at DHEC	
hape alibia activela	Organization	provides oversight of implementation of the Standards and Outcomes for Sexual Assault Centers, fund	
		administration, and technical assistance to the Centers.	
	Non-Governmental		1.2.7
Rape Crisis Centers	Organization	The PHHSBG from CDC supports these state-wide efforts to address sexual violence prevention.	1
	longanization	DHEC works with other states and local air programs on areas of common interest through regional and national air	2.1.1, 2.1.2, 2.1.3, 2.1.4
Regional and National Associations	Professional Association	organizations.	C.1.1, Z.1.2, Z.1.3, Z.1.4
	Non-Governmental	UIBAITZATIONS.	1 6.1, 1.6.2
Regional Health Care Coalitions		DHEC works with the health care coalitions to develop and maintain emergency response planning.	1-0.1, 1.0.2
	Organization	Detects and responds to disease occurrences via reports received for routine, urgent and immediately notifiable	1.4.5
Restaurants	Private Business Organization		1.4.5
		conditions under public health surveillance. Provides education, recommendations, training and guidance, as appropriate, to enhance reporting of sentinel	1.4.5
Restaurants	Private Business Organization		1.4.0
		events and also to hinder further disease transmission.	
Richland County First Steps	Non-Governmental	DOH is represented on county Health Advisory Board and provides training and resources on an ongoing basis.	1.1.5
· · · · · · · · · · · · · · · · · · ·	Organization		

Rural Infrastructure Authority (RIA)	State Government	Office of Local Governments with the RIA sets loan policies and executes loan agreements to build needed water and wastewater infrastructure.	2.4.1
S.C. Academy of Nutrition and Dietetics (SCAND)	Professional Association	DHEC and SCAND partner to promote the Nutritional Counseling Program to health care providers to improve access to weight management counseling by licensed dietitians for children and adults with obesity.	
S.C. Aging Network	Non-Governmental Organization	Provide training and technical assistance to implement programs, provide up-to-date, culturally appropriate health education information and data.	1.2.1
S.C. Alliance for Health, Physical Education, Recreation, and Dance	Non-Governmental Organization	DHEC provides funding to the S.C. Alliance for Health, Physical Education, Recreation, and Dance to provide physical education and physical activity professional development opportunities for schools and school districts statewide.	1.4.4
S.C. Alliance of YMCA	Non-Governmental Organization	Partner with S.C. WISEWOMAN program to provide cardiovascular and lifestyle change programs to eligible participants. [2016-2017]	1.2.3
S.C. Asthma Alliance	Non-Governmental Organization	Provides asthma evaluation and epidemiological support to alliance in support of their missions and objectives.	1.2.4, 1.5.4
S.C. Athletic Trainers Association	Professional Association	FTOMOES Education of Achieve Hamer Regulation.	3.3.1
S.C. Athletic Trainers Association	Professional Association	Supports Department with funding for athletic trainer certification employee and meeting support with funding from fees collected for credentialing.	3.3.1
S.C. Attorney General's Office	State Government	Works collaboratively with DHEC's Bureau of Drug Control to enforce the S.C. Controlled Substances Act and decrease the diversion of controlled substances.	3.5.3
S.C. Beginnings	Non-Governmental Organization	Accepts referrals from the newborn hearing screening program for infants who are diagnosed with confirmed hearing loss to provide parent education and guidance. Shares information with the newborn hearing screening program.	1,1.1
S.C. Birth Outcomes Initiative (SCBOI)	Non-Governmental Organization	DHEC partners with other entities supporting the Birth Outcome Initiative to address issues identified leading to poor birth outcomes, including tobacco use during pregnancy and post-partum.	1.2.5
S.C. Birth Outcomes Initiative (SCBOI)	Non-Governmental Organization	SCBOI is an effort with DHEC and more than 100 stakeholders to improve the health outcomes for newborns not only in the Medicaid program but throughout the state's population. The Division of Women's Health is very supportive of the initiative to allow inpatient postpartum insertion of LARCs, therefore reducing health disparities.	1.4.2, 1.5.5
S.C. Board of Dentistry	State Government	Assists DHEC's Bureau of Drug Control in verifying professional licensure, which supports Drug Control in issuing controlled substance registrations to authorized practitioners and health care entities.	3.5.1
S.C. Board of Dentistry	State Government	Works collaboratively with DHEC's Bureau of Drug Control to enforce the S.C. Controlled Substances Act and decrease the diversion of controlled substances.	3.5.3
S.C. Board of Medical Examiners	State Government	Assists DHEC's Bureau of Drug Control in verifying professional licensure, which supports Drug Control in issuing controlled substance registrations to authorized practitioners and health care entities.	3.5.1
S.C. Board of Medical Examiners	State Government	Works collaboratively with DHEC's Bureau of Drug Control to enforce the S.C. Controlled Substances Act and decrease the diversion of controlled substances.	3.5.3
S.C. Board of Nursing	State Government	Assists DHEC's Bureau of Drug Control in verifying professional licensure, which supports Drug Control in issuing controlled substance registrations to authorized practitioners and health care entities.	3.5.1
S.C. Board of Nursing	State Government	Works collaboratively with DHEC's Bureau of Drug Control to enforce the S.C. Controlled Substances Act and decrease the diversion of controlled substances.	3.5,3
S.C. Board of Optometry	State Government	Assists DHEC's Bureau of Drug Control in verifying professional licensure, which supports Drug Control in issuing controlled substance registrations to authorized practitioners and health care entities.	3.5.1
S.C. Board of Optometry	State Government	Works collaboratively with DHEC's Bureau of Drug Control to enforce the S.C. Controlled Substances Act and decrease the diversion of controlled substances.	3.5.3
S.C. Board of Pharmacy	State Government	Assists the Bureau of Drug Control in verifying professional licensure, which supports Drug Control in issuing controlled substance registrations to authorized practitioners and health care entities.	3.5.1

S.C. Board of Pharmacy	State Government	Works collaboratively with DHEC's Bureau of Drug Control to enforce the S.C. Controlled Substances Act and	3.5.3
	state dovernment	decrease the diversion of controlled substances.	
S.C. Board of Podiatry Examiners	State Government	Assists the Bureau of Drug Control in verifying professional licensure, which supports Drug Control in issuing	3.5.1
S.C. Board of Podiad y Examiners	State Government	controlled substance registrations to authorized practitioners and health care entities.	
S.C. Board of Podiatry Examiners	State Government	Works collaboratively with DHEC's Bureau of Drug Control to enforce the S.C. Controlled Substances Act and	3.5.3
S.C. Board of Podiatry Examiners	state Government	decrease the diversion of controlled substances.	
C.C. Devel - OV-to increase Markinsk Superioren	Shada Causanaa a	Assists the Bureau of Drug Control in verifying professional licensure, which supports Drug Control in issuing	3.5.1
S.C. Board of Veterinary Medical Examiners	State Government	controlled substance registrations to authorized practitioners and health care entities.	
		Works collaboratively with DHEC's Bureau of Drug Control to enforce the S.C. Controlled Substances Act and	3.5.3
S.C. Board of Veterinary Medical Examiners	State Government	decrease the diversion of controlled substances.	
S.C. Building Codes Council	State Government	Coordinates and promotes enforcement of state-adopted codes and standards.	3.1.4
		Promotes a common understanding and uniform enforcement of codes and standards among other authorities	3.1.4
S.C. Building Codes Council	State Government	having jurisdiction.	
S.C. Building Codes Council	State Government	Coordinates participation in joint outreach and educational opportunities.	3.1.4
		PREP Funding is provided to DHEC by the U.S. DHHS-FYSB. DHEC collaborates with the SC Campaign to administer	1.2.6
	1	grants for 3 counties which will provide for the county-wide replication of teen pregnancy prevention/HIV/STI best	
S.C. Campaign to Prevent Teen Pregnancy (the Campaign)	Non-Governmentai	practices, including evidence based programs and adult preparation topics. The purpose of this opportunity is to	
	Organization	implement coordinated, sustainable teen pregnancy prevention best practices in counties that have been identified	
		as high need.	
	Non-Governmental	Partnership with the Campaign in Dillon, Darlington, Anderson, Orangeburg and Aiken Counties to concentrate	1.4.2
S.C. Campaign to Prevent Teen Pregnancy (the Campaign)	Organization	efforts on adolescents.	
		DHEC and the Campaign have been collaborative partners for more than 20 years. DHEC contracts with the	1.4.2
	Non-Governmental	Campaign to provide training and education for advocates, healthcare practitioners, parents, adolescents and the	
S.C. Campaign to Prevent Teen Pregnancy (the Campaign)	Organization	general public. The Campaign hosts an annual training opportunity for teen pregnancy prevention advocates	
		statewide and provides outreach and marketing for DHEC.	
	Non-Governmental		1.5.5
S.C. Campaign to Prevent Teen Pregnancy (the Campaign)	Organization	DHEC Vital Statistics produces teen pregnancy statistics annually for the Campaign.	
		Plan and Implement the CATCH annual meeting which provides agency updates and partnership outcomes from a	1.1.1
S.C. Chapter of the American Academy of Pediatrics	Professional Association	variety of child serving agencies. [2015-2016]	
			1.1.5
S.C. Chapter of the American Academy of Pediatrics	Professional Association	Collaboration to expand previous QTIP program oral health integration successes previously funded by CMS and S.C.	
		DHHS statewide. Develop and disseminate oral health integration training. Member PIOHQI Project Advisory Board.	
		SCCADVASA provides education and training to member agencies and professionals regarding sexual violence	1.1.2
S.C. Coalition Against Domestic Violence & Sexual Assault	Non-Governmental	services and prevention. The agency also provides technical assistance and consultation to programs as they	
(SCCADVASA)	Organization	implement the Standards and Outcomes developed for the Sexual Assault Centers.	
		The BCHCDP administers the PHHSBG with a portion of the annual grant allocation used to support state-wide efforts	1.2.7
S.C. Coalition Against Domestic Violence & Sexual Assault	Non-Governmental	to address Sexual Violence Prevention in coordination with MCH and SCCADVASA for the purpose of establishing and	
(SCCADVASA)	Organization	maintaining injury and violence free living environments.	
		DHEC works closely with SCCADVASA on preventing reproductive coercion, interpersonal violence, and human	1.4.2
S.C. Coalition Against Domestic Violence & Sexual Assault	Non-Governmental	trafficking with reciprocal training and technical assistance between the two agencies. All DHEC clinics refer to the	
(SCCADVASA)	Organization	local sexual assault centers for direct services, counseling for primary and secondary victims, as necessary. Victims of	
	-	domestic violence are also referred for shelter and/or counseling.	
S.C. Commission for the Blind	State Government	DHEC inspects Commission for the Blind retail food establishments.	2.2.2
S.C. Commission of Hearing Aid Specialists	State Government	Coordinate the written and practical examinations for hearing aid specialist applicants for licensure.	3.1.1

Consult with for advice and guidance on health and safety issues.

3.1.1, 3.1.2, 3.1.3

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S.C. Commission of Hearing Aid Specialists

State Government

S.C. Coroner's Association (SCCA)	Non-Governmental Organization	S.C. Coroners provide data related to violent death and its circumstances. This data is linked to abstraction completed on violent death incidents in S.C. as prescribed by the guidance of the CDC and national standards. DHEC has a contract with the SCCA which allows for greater access to documentation on identified violent deaths. Routine correspondence is shared with coroner's offices to capture circumstances surrounding each incident of violent death.	1,2.7
S.C. Coroner's Association (SCCA)	Professional Association	SC Coroners complete cause of death information as part of the death registration process for vital statistics. Vital Statistics staff work with the SCCA to educate coroners in the state on the correct processes regarding completion of death certificates.	1.5.1, 1.5.5
S.C. Coroner's Association (SCCA)	Professional Association	DHEC works regularly with the SCCA to plan for mass fatality management.	1.6.1
S.C. Coroner's Association (SCCA)	Professional Association	DHEC and SCCA coordinate via grant funding (Public Health Emergency Preparedness Grant) to facilitate information sharing regarding mass fatalities. The SCCA will work with the county coroners to adopt a statewide tool for collecting ante- and post-mortem data from a mass fatality event. DHEC will update the State Mass Fatality Plan to include the data collection system.	1.6.2
S.C. Coroner's Association (SCCA)	Professional Association	DHEC provides advice and regulatory guidance to the coroners regarding mass fatality management during emergency responses.	1.6.4
S.C. Criminal Justice Academy	State Government	Works with DHEC's Bureau of Drug Control to train investigators that will enforce the S.C. Controlled Substances Act and decrease the diversion of controlled substances.	3.5.3
S.C. Dental Association (SCDA)	Professional Association	Partners to (1) address local challenges to community water fluoridation; (2) sponsor traveling oral health outreach activities for schools and Head Start Centers; (3) co-sponsor the annual Oral Health Forum and the Carlos Salinas Award; (4) provide administrative support for SC OH Coalition; (5) support the learning collaborative, network expansion and the evaluation of the PIOHQI grant; and (6) support DOH outreach and education activities related to all grant deliverables.	1.1.5
S.C. Dental Screening Associates	Private Business Organization	Provides preventive dental services in S.C. public schools and learning centers under the DHEC Dental Prevention program. Provides outreach and educational materials at community and school events. Provides care coordination for students needing emergency dental care with school nurses.	1.1.5
S.C. Department of Agriculture (SCDA)	State Government	Authorize Framers' Markets/Farm Stands/Farmers - The DHEC WIC, DSS and Department of Agriculture work simultaneously with each other in providing this seasonal FMNP. The program increases fruit and vegetable intake, provides direct income to local farmers, and promotes community-based farmers markets. Local farmers are reimbursed for the face value of the checks, which enhances their earnings and supports their participation in farmers' markets.	1.1.3
S.C. Department of Agriculture (SCDA)	State Government	USDA funds state-level SNAP Nutrition Education initiatives and program guidance,	1.2,1
S.C. Department of Agriculture (SCDA)	State Government	SNAP staff work with Farmers/Farmers Market to promote produce grown in S.C. during May – October. Food demonstrations and taste-testing are conducted at farmers markets using recipes developed for S.C. produce.	1.2.1, 1.4.4
S.C. Department of Agriculture (SCDA)	State Government	DHEC provides funding, technical assistance, and coordination of efforts to the SCDA to expand farmers' market services in health disparate areas of the state, to inventory farmers' markets and roadside markets in the state, and to implement the S.C. Farm to Institution Program.	1.4.4
S.C. Department of Agriculture (SCDA)	State Government	DHEC and SCDA work together on jurisdictional issues associated with farmers markets, wholesale packaging, and other topics.	2.2.2
S.C. Department of Agriculture (SCDA)	State Government	SCDA coordinates food embargos and provides analytical support for inspection of food products affected by chemical releases.	2.2.3
S.C. Department of Agriculture (SCDA)	State Government	DHEC and SCDA work together to calibrate laboratory balance weights.	2.2.4
S.C. Department of Alcohol and Other Drug Abuse Services (DAODAS)	State Government	Coordinate sharing information on the licensure status of health facilities and services.	3.1.1
S.C. Department of Alcohol and Other Drug Abuse Services (DAODAS)	State Government	Coordinate sharing information if any concerns arise from inspections and investigations.	3.1.2, 3.1.3
S.C. Department of Alcohol and Other Drug Abuse Services (DAODAS)	State Government	Works collaboratively with the Prescription Monitoring Program and Vital Statistics to obtain statistics that may be used to assist DAODAS in reducing the negative consequences of substance use and addictions.	3.5.3

S.C. Department of Archives and History	State Government	Per S.C. law, DHEC Vital Statistics provides death records over 50 years past the date of death and birth records over 100 years past the date of birth to Archives to support public viewing of the records.	1.5.5
S.C. Department of Archives and History	State Government	Act.	2.5.2, 2.5.4
S.C. Department of Archives and History (Archives)	State Government	DHEC consults Archives in consideration of any archeological concerns at a potential location of miring or solid waste activity.	
5.C. Department of Commerce	State Government	DHEC works with Commerce to ensure Commerce projects are consistent with the Coastal Tidelands and Wetlands Act and to assist and provide guidance to potential new industries looking to locate in the Coastal Zone.	2.5.1, 2.5,2, 2,5.4
S.C. Department of Commerce (Commerce)	State Government	DHEC and Commerce work together on the economic impact of recycling in South Carolina, recycling markets, and studies (for example, cost of recycling versus disposal).	2.3.3
S.C. Department of Corrections	State Government	Operate the DHEC Specialty Care Clinic at Kirkland Correctional Institute by providing physician services and discounted HIV medications through a grant.	1.3.2
S.C. Department of Corrections	State Government	Ensure targeted testing and evaluation of corrections population to identify TB infection and TB cases. Report suspect and confirmed cases, referring as indicated to the Agency for clinical evaluation and management.	1,4.6
S.C. Department of Corrections	State Government	DHEC inspects milk, dairy, and cafeteria facilities under our jurisdiction.	2.2.2
S.C. Department of Corrections	State Government	DHEC inspects foodborne illness complaints.	2.2.3
S.C. Department of Corrections	State Government	Works collaboratively with DHEC's Bureau of Drug Control to enforce the S.C. Controlled Substances Act and decrease the diversion of controlled substances.	3.5.3
S.C. Department of Disabilities and Special Needs	State Government	Coordinate sharing information on the licensure status of health facilities and services.	3.1.1
S.C. Department of Disabilities and Special Needs	State Government	Coordinate sharing information if any concerns arise from inspections and investigations.	3.1.2, 3.1.3
S.C. Department of Education	State Government	DHEC and SCDE provide joint funding for the State School Nurse Consultant position in DHEC to provide nursing leadership, consultation, and technical assistance for school health services statewide.	1.1.1
S.C. Department of Education	State Government	DOH provides school nurse oral health orientation, training on the basic screening survey process and linkage with the school-based dental prevention providers that work under a Memoranda of Agreement with DHEC. Collaborates to plan and conduct a statewide Oral Health Needs Assessment every 5 years to meet CDC grant deliverable. Provides technical expertise for inclusion of standards based oral health education.	1.1.5
S.C. Department of Education	State Government	The Agency collaborates with SCDE to implement the Youth Risk Behavior Survey and Youth Tobacco Survey in selected schools across the state.	1.2.5
S.C. Department of Education	State Government	DHEC collaborates with the SCDE to assist schools and school districts with development and implementation of wellness policies, to implement the S.C. FitnessGram system, to implement the S.C. Farm to School Program, and to provide quality physical education and daily physical activity for students.	1.4.4
S.C. Department of Education	State Government	Collaborates with the S.C. Cancer Division Comprehensive Cancer Program to identify ways to increase access to comprehensive high quality care.	1.4.4
S.C. Department of Education	State Government	DHEC investigates foodborne illness outbreaks associated with SCDE facilities.	2.2.2
S.C. Department of Education (SCDE)	State Government	DHEC conducts summer feeding inspections under contract for SCDE.	2.2.2
S.C. Department of Health and Human Services	State Government	Provides funding for hemophilia factor, orthodontia and hearing services.	1.1.1
S.C. Department of Health and Human Services	State Government	Provides funding for newborn hearing screening and follow up services for Medicaid covered infants.	1.1.1
S.C. Department of Health and Human Services	State Government	Collaborates with DHEC on enhancing birth outcomes for the Medicaid population.	1.1.4
S.C. Department of Health and Human Services	State Government	Provides funding for to support a portion of the contracts between DHEC and the Regional Perinatal Center hospitals.	1.1.4
S.C. Department of Health and Human Services	State Government	Collaborated with DOH to develop a training and toolkit for pediatric offices to integrate oral health activities into medical homes, and that certifies medical practices to bill Medicaid for applying fluoride varnish for children. Advisory Council member.	1.1.5
S.C. Department of Health and Human Services	State Government	Partnership to provide navigation of BCN patients with positive cancer findings to obtain coverage under the Breast and Cervical Treatment Act through S.C. DHHS-Medicaid.	1.2.3

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S.C. Department of Health and Human Services	State Government	S.C. DHHS collaborates with DHEC on a shared action plan to strengthen cessation service provision and use of available resources to support quitting among the Medicaid population.	1.2.5
5.C. Department of Health and Human Services	State Government	The Quitline manager is a member of the joint-agency SBIRT project team working to implement an evidenced-based approach to the screening, identification, intervention and treatment of substance abuse (drug and alcohol), domestic violence, depression and smoking for pregnant women. The Quitline manager provides guidance and technical assistance on the SBIRT component to address tobacco cessation intervention.	1.2.5
S.C. Department of Health and Human Services	State Government	Provides funding for reproductive health and follow up services for Medicaid eligible clients.	1.4.2
S.C. Department of Health and Human Services	State Government	DHEC Vital Statistics shares data on deaths occurring in the state to allow S.C. DHHS to mark individuals receiving Medicaid benefits as deceased and to support S.C. DHHS estate recovery program.	1.5.5
S.C. Department of Health and Human Services	State Government	Coordinate sharing information on the licensure status of health facilities and services.	3.1.1
5.C. Department of Health and Human Services	State Government	Coordinate sharing information if any concerns arise from inspections and investigations.	3.1.2, 3.1.3
S.C. Department of Health and Human Services (S.C. DHHS)	State Government	Worked collaboratively with the Prescription Monitoring Program to improve the state's ability to identify and stop diversion of prescription drugs.	3.5.3
S.C. Department of Justice	State Government	Operates a Specialty Care Clinic for HIV patients at Kirkland Correctional Facility.	1.3.2
S.C. Department of Labor, Licensing and Regulation	State Government	DHEC Vital Statistics provides training for funeral directors regarding death registration for license certification and collaborates with the Funeral Service Board on the suspension and license revocations for funeral homes and funeral directors related to violations of law/regulation on death registration.	1.5.1
S.C. Department of Labor, Licensing and Regulation	State Government	S.C. EPHT program has an agreement with SC Occupational Safety and Health Administration within LLR to share information on adults with elevated blood lead levels to assist with monitoring worksite lead exposure.	1,5.4, 1.5.5
S.C. Department of Labor, Licensing and Regulation	State Government	DHEC consults with the health professional licensing boards regarding health care volunteers, standards of practice, and health care delivery during emergencies.	1.6.1
S.C. Department of Labor, Licensing and Regulation	State Government	DHEC assists LLR with a contact summary for all state licensed veterinarians for rabies.	2.2.2
S.C. Department of Labor, Licensing and Regulation	State Government	DHEC works with LLR on workplace complaints.	2.2.2
S.C. Department of Labor, Licensing and Regulation	State Government	Coordinates sharing information if any concerns arise from inspections and investigations.	3.1.2, 3.1.3
S.C. Department of Labor, Licensing and Regulation	State Government	Assists DHEC's Bureau of Drug Control in verifying professional licensure, which supports Drug Control in issuing controlled substance registrations to authorized practitioners and health care entities.	3.5.1
S.C. Department of Labor, Licensing and Regulation	State Government	Works collaboratively with DHEC's Bureau of Drug Control to enforce the S.C. Controlled Substances Act and decrease the diversion of controlled substances.	3.5.3
S.C. Department of Labor, Licensing and Regulation (LLR)	State Government	LLR- Panel for Dietetics licenses dietitians in S.C. assuring consumers receive credible nutrition information and counseling from appropriately licensed professionals.	1.2.1
S.C. Department of Mental Health	State Government	DHEC provides accurate, timely, and useful health information and resources to support the implementation of tobacco-free worksites among the DMH.	1.2.5
S.C. Department of Mental Health	State Government	DHEC and DMH work together to incorporate mental health into ESF-8 Health and Medical needs during emergency planning and emergency response.	1.6.1, 1.6.4
S.C. Department of Mental Health	State Government	Coordinates sharing information on the licensure status of health facilities and services.	3.1.1
S.C. Department of Mental Health	State Government		3.1.2, 3.1.3
S.C. Department of Mental Health	State Government	Works collaboratively with DHEC's Bureau of Drug Control to enforce the S.C. Controlled Substances Act and decrease the diversion of controlled substances.	3.5.3
S.C. Department of Mental Health (DMH)	State Government	Collaborates with DHEC Division of Children's Health to increase availability of trained therapists to work with young children and their families.	1.1.1
S.C. Department of Motor Vehicles (DMV)	State Government	DHEC Vital Statistics shares data on deaths occurring in the state to allow DMV to mark individuals who were issued driver's license/identification cards as deceased to help reduce identity fraud.	1.5,5
S.C. Department of Natural Resources	State Government	DHEC Vital Statistics provide a matching service to DNR for individuals with hunting/fishing licenses to remove deceased individuals from their mailing list.	1.5.5
S.C. Department of Natural Resources	State Government	DNR provides law enforcement personnel to support field operations.	2.2.3
S.C. Department of Natural Resources	State Government	DNR provides wildlife and fisheries technical expertise in determining environmental impact of a chemical/oil release.	2.2.3

S.C. Department of Natural Resources	State Government	DHEC partners with DNR regarding surface water impact of mining and solid waste activities to flora and fauna.	2.3.1
S.C. Department of Natural Resources	State Government	DHEC and DNR work together on surface water quantity modeling. DNR has a role in providing technical comments for several DHEC water programs.	2.4.1, 2.4.3
C. Department of Natural Resources	State Government	DHEC works with DNR on programmatic initiatives including living shorelines monitoring and assessment, regional sediment management planning and abandoned and derelict vessel identification and removal. DHEC works with DNR to ensure the wise management of natural resources in the coastal zone.	2.5.1, 2.5.2, 2.5.3, 2.5.4
.C. Department of Natural Resources (DNR)	State Government	DNR provides boats and personnel to clear lakes/water bodies following a chemical/oil release.	2.2.3
.C. Department of Parks, Recreation and Tourism	State Government	DHEC works with PRT to ensure their projects and efforts on state managed parklands are consistent with the Coastal Tidelands and Wetlands Act.	2.5.1, 2.5.2, 2.5.3, 2.5.4
.C. Department of Parks, Recreation and Tourism (PRT)	State Government	DHEC works with PRT to set up recycling programs at each of South Carolina's state parks and historical sites as well as three of the state's largest airports through Recycling on the Go Program.	2.3.3
C. Department of Probation, Pardon and Parole	State Government	DHEC Vital Statistics provides verifications of birth, death, marriage and divorce for the purpose of investigations.	1.5.5
.C. Department of Probation, Pardon and Parole	State Government	Works collaboratively with DHEC's Bureau of Drug Control to enforce the S.C. Controlled Substances Act and decrease the diversion of controlled substances.	3.5.3
5.C. Department of Public Safety	State Government	DHEC's Division of Injury and Violence Prevention (DIVP) supports DPS program efforts directed towards child passenger and adult safety (vehicle occupant protection), and maintains a revenue agreement with DPS to support the CPS Program.	1.2.2
.C. Department of Public Safety	State Government	DPS provides support and emergency transportation of environment samples if necessary,	2.2.3
6.C. Department of Public Safetγ	State Government	DPS provides law enforcement assistance in the shadowing of spent nuclear fuel shipments into and through the state.	2.2.3
.C. Department of Public Safety (DPS)	State Government	DPS provides law enforcement resources to control traffic during an emergency.	2.2.3
.C. Department of Revenue	State Government	DHEC assists DOR with SC Business One Stop.	2.2.2
S.C. Department of Revenue	State Government	DHEC partners with DOR in administering the revenue collections for the SC Drycleaning Facility Restoration Trust Fund, the SUPERB Account, and SUPERB Financial Responsibility Fund as well as the Solid Waste Trust Fund.	2.3.4
S.C. Department of Revenue (DOR)	State Government	DHEC works with DOR on liquor license issues.	2.2.2
S.C. Department of Social Services	State Government	Seniors Farmers' Market Program - DHEC WIC, DSS and Department of Agriculture work simultaneously with each other in providing this seasonal Farmers' Market Nutrition Program "FMNP." The program increases fruit and vegetable intake, provides direct income to local farmers, and promotes community-based farmers markets. Local farmers are reimbursed for the face value of the checks, which enhances their earnings and supports their participation in farmers' markets.	1.1.3
5.C. Department of Social Services	State Government	Data Sharing Agreement – Agreement with DHEC/WIC and DSS to exchange information regarding potential clients.	1.1.4
S.C. Department of Social Services	State Government	DSS contracts with DHEC/Office of Professional and Community Nutrition Services to provide SNAP Nutrition Education Programs in eighteen (18) counties.	1.2.1
5.C. Department of Social Services	State Government	DHEC's Division of Injury and Violence Prevention (DIVP) and its Child Passenger Safety (CPS) Program collaborates with DSS to trainings child protective workers and foster parents in the proper use of child safety restraints.	1.2.2
S.C. Department of Social Services	State Government	DHEC's Division of Injury and Violence Prevention (DIVP) and its Child Passenger Safety (CPS) Program patterns with DOT to provide school transportation safety assessment in coordination with Safe Routes to School.	1.2.2
S.C. Department of Social Services	State Government	State Child Fatality Review Committee - DHEC provides technical support to the State Child Fatality Review Committee, under contract with DSS, and generates the Committee annual report, which guides prevention efforts across the state that address child fatalities (non-motor vehicle related).	1.2.7
S.C. Department of Social Services	State Government	DHEC works with DSS regarding outbreaks involving child care facilities.	1.3.1
S.C. Department of Social Services	State Government	SNAP - DHEC collaborates with the SDSS to expand and promote acceptance of SNAP/EBT, healthy bucks, and senior nutrition benefits vouchers at farmers' markets across the state.	1.4.4

5.C. Department of Social Services	State Government	Division of Early Care and Education – DHEC provides funding to DSS to provide data on the implementation of nutrition and physical activity standards for child care centers and to expand nutrition and physical activity standards to other types of child care provider groups (i.e. family and group child care home providers). DHEC works with DSS to assure the standards meet national best practice standards and to provide training and technical assistance to child care providers on nutrition and physical activity to help them comply with the standards. DHEC also collaborates with DSS in the state's efforts to implement outdoor learning environments and Farm to Preschool in the early care and education setting.	1.4.4
5.C. Department of Social Services	State Government	DHEC Vital Statistics provides birth data to support investigation of child support obligations and certified copies of birth certificates for paternity determination, child support obligations and adoptions.	1.5.2, 1.5.5
.C. Department of Social Services	State Government	DHEC Vital Statistics shares data on deaths occurring in the state to allow DSS to mark individuals receiving SNAP benefits as deceased.	1.5.5
C. Department of Social Services	State Government	DHEC supports DSS during shelter operations; as such, DHEC works regularly with DSS to identify and establish shelters, develop procedures, train staff, and operate shelters during emergencies.	1,6.1, 1.6.4
.C. Department of Social Services	State Government	DHEC investigates foodborne illness outbreaks.	2.2.2
.C. Department of Social Services	State Government	Coordinate sharing information on the licensure status of health facilities and services.	3.1.1
.C. Department of Social Services (DSS)	State Government	DHEC conducts lead evaluations for environmental factors for potential foster homes.	2,2.2
5.C. Department of Transportation	State Government	DHEC worked with DOT's Safe Routes to School Program during the development of a statewide plan to promote open community use of school recreational areas. DHEC has shared its work on pedestrian planning with DOT and intends to collaborate in the next year to provide professional development on healthy eating and active living best practice policy recommendations to DOT staff, Councils of Governments, and Metropolitan Planning Organizations.	1.4.4
C. Department of Transportation	State Government	DOT provides highway barricades and support to close highways/roads during an emergency and cleanup operations.	2.2.3
S.C. Department of Transportation	State Government	The DHEC Dam Safety Program works with DOT when roads are located on or downstream of dams in two categories. When the dam is regulated, DHEC oversees permitting and construction of any dam repair. When the dam is not regulated by DHEC, DHEC staff work to advise DOT and the dam owner as requested. {	2.4.4
S.C. Department of Transportation	State Government	DHEC works with SC DOT to ensure transportation projects are consistent with the Coastal Tidelands and Wetlands Act.	2.5.1, 2.5.2, 2.5.4
.C. Department of Transportation (DOT)	State Government	DOT provides technical support and information to DHEC on safe roads to travel during an emergency.	2.2.3
.C. Disaster Recovery Office (SCDRO)	State Government	DHEC is a partner with the SCDRO and provides individuals with information on mosquito control around their homes and information on mold following the October 2015 flood.	1.6.1
.C. Election Commission	State Government	DHEC Vital Statistics shares data on deaths occurring in the state to allow SCEC to mark individuals on the voter registration list as deceased.	1.5.5
5.C. Emergency Management Division	State Government	DHEC maintains the Mass Casualty Annex to the State Emergency Operations Plan and participates in review and revision of a number of other sections and supporting plans which involve DHEC. DHEC also maintains the Agency emergency plan and supporting standard operating procedures.	1.6.3
C. Emergency Management Division	State Government	DHEC responds to emergencies which require activation of the SEOC, and to public health outbreak investigations and responses. DHEC staff train for and participate regularly in State and regional exercises.	1.6.4
.C. Emergency Management Division	State Government	EMD coordinates emergency operations by the state with local resources.	2.2.3
.C. Emergency Management Division	State Government	DHEC works with SC EMD to identify opportunities for pre-hazard mitigation strategy development and disaster recovery planning and implementation.	2.5.1, 2.5.2, 2.5.4
.C. Emergency Management Division (EMD)	State Government	DHEC has responsibilities under state emergency operations plans for ESF-8 health and medical, ESF-10 hazardous materials, ESF-6 sheltering, ESF-3 public works, and ESF-17 Agriculture. DHEC participates in plan writing, plan review, exercises, and emergency responses, and assigns staff to represent the agency at the SEOC.	1.6.1
5.C. Emergency Medical Services (EMS) Advisory Council	State Government	Provides guidance and recommendations as statutorily outlined to the Department on issues related to training and certification of all levels of EMT.	3.3.1, 3.3.2

S.C. Emergency Medical Services Advisory Council	State Government	Advocates for trauma center expansion and provide advice and counseling on trauma-related regulations and statute.	3.3.3
S.C. EMS Association	Professional Association	Provides public comment on training and certification of all levels of EMT.	3.3.1, 3.3.2
S.C. EMS Association	Professional Association	Provides feedback from association members on processes and procedures of the Department	3.3.1, 3.3.2
S.C. EMS Association	Professional Association	Advocates for trauma center expansion and provide advice and counseling on trauma related regulations and statute.	3.3.3
S.C. EMS Educator's Association	Professional Association	Provides feedback from association members on processes and procedures of the Department.	3.3.2
S.C. EMS Educator's Association	Professional Association	Provides public comment on training and certification of all levels of EMT.	3.3.2
S.C. EMS for Children Advisory Council	State Government	Provides advice and recommendations to the Department EMS for Children program to reduce morbidity and mortality among S.C. pre-hospital pediatric patients.	3.3.5
S.C. EMS Regional Offices	Non-Governmental Organization	Participates in every advisory council for the Department.	3.3.1, 3.3.2
S.C. EMS Regional Offices	Non-Governmental Organization	Provides public comment and guidance on training and certification of all levels of EMT.	3.3.1, 3.3.2
S.C. EMS Regional Offices	Non-Governmental Organization	Provides training to EMTs and paramedics and receives funding from the Department through the General Assembly to provide training.	3.3.2
S.C. Firefighters Association	Professional Association	Provides public comment on training and certification of all levels of EMT.	3.3.1, 3.3.2
S.C. Firefighters Association	Professional Association	Provides feedback from association members on processes and procedures of the Department.	3.3.1, 3.3.2
S.C. First Steps	State Government	DHEC is required by statute to have a member on each county's First Steps Board.	1.1.1
S.C. First Steps	State Government	BabyNet Program – Accept referrals from the newborn hearing screening program for infants who are diagnosed with a confirmed hearing loss. Share data with the newborn hearing screening program for stakeholder reporting and program evaluation.	1.1.1
S.C. First Steps	State Government	BabyNet accepts referrals from the S.C. Birth Defects Program for infants born with birth defects that qualify them for BabyNet services.	1.1.4
S.C. First Steps	State Government	Early Head Start Child Care Partnership – Provides certified oral health training to the Early Head Start – Child Care Partnerships initiative that was created to expand Early Head Start services within infant-toddler child care settings across 12 counties.	1.1.5
S.C. Forestry Commission	State Government	DHEC works with the Forestry Commission to develop strategies for controlled burns.	2.1.3, 2.4
S.C. Forestry Commission	State Government	The Forestry Commission provides technical support and earth moving equipment to include fire suppression equipment during an emergency.	2.2.3
S.C. Forestry Commission	State Government	The Forestry Commission supports emergency operations through assumption and practice of Incident Command System operations.	2.2.3
S.C. Forestry Commission	State Government	DHEC implements the statewide forestry Best Management Practices education and inspection program administered by the Forestry Commission using federal grant funds.	2.4.2, 2.4.3
S.C. Funeral Directors Association	Professional Association	DHEC Vital Records coordinates routinely with the funeral directors on the issuance of death certificates.	1.5.1
S.C. Funeral Directors Association	Professional Association	DHEC Vital Statistics works routinely with funeral directors on the registration and issuance of death certificates. Vital Statistics staff regularly attend the SCFDA Annual Meeting and Mid-Winter Conference, as well as region meetings to educate funeral directors regarding the registration of death records.	1.5.1, 1.5.2
S.C. Funeral Directors Association	Professional Association	DHEC works regularly with the S.C. Funeral Directors Association to plan for mass fatality management.	1.6.1
S.C. Funeral Directors Association	Professional Association	DHEC provides advice and regulatory guidance to the S.C. Funeral Directors Association regarding mass fatality management during emergency responses.	1.6.4
S.C. Hands & Voices		Accepts referrals from the newborn hearing screening program for infants who are diagnosed with confirmed hearing loss to provide parent to parent support.	1.1.1
S.C. Head Start Collaboration Office	State Government	DOH provides technical assistance and training to provide support for implementation of the HS Oral Health Standards. Head Start (1) co-sponsors annual OH Forum; (2) links DOH with the Head Start Health Coordinators Network; and (3) assists with the integration of oral health messaging into health programs.	1.1.5

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S.C. Hospital Association	Non-Governmental	Collaborates with the S.C. Cancer Division Comprehensive Cancer Program to identify ways to increase access to	1.2.3
	Organization	comprehensive high quality care.	1.2.5
S.C. Hospital Association	Non-Governmental	DHEC provides accurate, timely, and useful health information and resources to support the implementation of	1.2.5
	Organization	tobacco-free worksites among the S.C. cabinet agencies and DMH. Collaborates and partners for subject matter expertise and support to their membership to enhance disease	1.3.1
S.C. Hospital Association	Non-Governmental	surveillance and response activities.	1.5.1
	Organization	SCHA works closely with DHEC through the HIDA Advisory Committee to determine the HAIs that should be publicly	1.3.1, 1.5.4
		reported. SCHA and DHEC participate in projects related to improvement in quality of patient care. SCHA participate	1.3.1, 1.3.4
S.C. Hospital Association	Non-Governmental	in conducting a statewide training on antimicrobial stewardship and have committed to help in other statewide	
S.C. Hospital Association	Organization	activities related to improvement in infection control (IC) practices in healthcare settings and antibiotic resistance	
		projects.	
		DHEC provides funding to the Working Well program to provide tools, professional development, and technical	1.4.4
S.C. Hospital Association	Non-Governmental	assistance to worksites to improve employee health through worksite nutrition and physical activity policies and	
	Organization	practices.	
	Non-Governmental	DHEC consults frequently with the SCHA regarding planning, grant administration, and emergency response by SCHA	1.6.1
S.C. Hospital Association	Organization	member hospitals.	
	Non-Governmental	DHEC and SCHA coordinate via grant funding to facilitate information sharing regarding bed availab lity and medical	1.6.2
S.C. Hospital Association	Organization	surge capability among hospitals. SCHA works with member hospitals. DHEC administers the grant and monitors	
	Organization	grantee and hospital activities.	
S.C. Hospital Association	Professional Association	Provides feedback from association members on processes and procedures of the Department.	3.3.1, 3.3.2
S.C. Hospital Association	Professional Association	Provides public comment on training and certification of all levels of EMT.	3.3.1, 3.3.2
S.C. Hospital Association	Professional Association	Advocates for trauma center expansion and provide advice and counseling on trauma related regulations and statute.	3.3.3
	Professional Association	Provides advice and recommendation to the Department EMS for Children program to reduce morbidity and	3.3.5
S.C. Hospital Association		mortality among S.C. pre-hospital pediatric patients.	
	Non-Governmental Organization	Supports the program in improving performance related to timeliness of newborn blood spot screening services.	1.1.1
S.C. Hospital Association (SCHA)		Works in partnership to provide hospitals with data related to national quality indicators for newborn blood spot	
sie. Hospital Association (serie)		screening. Assists the program in providing training and technical assistance targeted toward national quality	
		indicators to hospitals.	
S.C. Inspector General	State Government	Works with DHEC's Bureau of Drug Control to identify ways to increase the use of the Prescription Monitoring	3.5.3
		Program, which was instrumental in forming the Governor's Prescription Drug Abuse Prevention Council,	252254
S.C. Institute of Archeology and Anthropology	State Government	DHEC works with the Institute of Archeology and Anthropology to ensure projects are consistent with the Coastal	2.5.2, 2.5.4
	Nue Coursestal	Tidelands and Wetlands Act. DHEC's DIVP supports S.C. Institute of Medicine and Public Health around Elderly Falls and serves on associated work	1 2 7
S.C. Institute of Medicine and Public Health	Non-Governmental Organization	groups.	1.2.7
	organization	DHEC works with the S.C. Institute of Medicine and Public Health to coordinate and monitor the S.C. Obesity Action	1.4.4
S.C. Institute of Medicine and Public Health	Non-Governmental	Plan. DHEC also works with S.C. Institute of Medicine and Public Health to implement strategic planning for the	
set institute of medicine and rubic fredition	Organization	outdoor learning environments project and the S.C. Farm to Institution Program.	
S.C. Institute of Medicine and Public Health		Assist with Community Health Improvement planning, the preparation and distribution of County Health Rankings.	1.4.4
	Non-Governmental	Partners on statewide Obesity Action Plan. Assists with creating partnerships and linkage to local / state groups for	
	Organization	community assessment work.	
	State Government	DHEC Vital Statistics provides verifications of birth, death, marriage and divorce for the purpose of criminal	1.5.5
S.C. Law Enforcement Division	state Government	investigations.	
S.C. Law Enforcement Division	State Government	DHEC refers intentional contamination to SLED for investigation/prosecution.	2.2.2
S.C. Law Enforcement Division	State Government	SLED provides law enforcement support to emergency operations.	2.2.3
S.C. Law Enforcement Division	State Government	SLED coordinates and supports responses to bomb and terrorism threats.	2.2.3

S.C. Law Enforcement Division	State Government	Works with DHEC's DIVP to coordinate the sharing of information obtained from child death cases investigated by SLED and reviewed by the SCFAC.	3.1.3
S.C. Law Enforcement Division	State Government	Works collaboratively with DHEC's Bureau of Drug Control to enforce the S.C. Controlled Substances Act and decrease the diversion of controlled substances.	3.5.3
S.C. Law Enforcement Division (SLED)	State Government	DHEC Vital Statistics coordinates with SLED regarding the sharing of child fatality information to support the SCFAC.	1.5.5
S.C. Lieutenant Governor's Office on Aging	State Government	Collaborates to implement grants to address the burden of arthritis through partnerships with Area Agencies on Aging and Councils on Aging.	1.2.1
S.C. Lieutenant Governor's Office on Aging	State Government	Registered dietitians deliver programs to low-income seniors on healthy eating to prevent and/or manage chronic conditions such as type 2 diabetes, heart disease, etc. In 2016-2017, SNAP staff will assist in delivering the Walk with Ease Program to senior groups.	1.2.1, 1.4.4
S.C. Lieutenant Governor's Office on Aging	State Government	Coordinate sharing information with the State Long Term Care Ombudsman's Office on the licensure status of health facilities and services.	3.1.1
S.C. Lieutenant Governor's Office on Aging	State Government	Coordinate sharing information with the State Long Term Care Ombudsman's Office if any concerns arise from inspections and investigations.	3.1.2, 3.1.3
S.C. Magistrates' Offices	State Government	Works collaboratively with DHEC's Bureau of Drug Control to enforce the S.C. Controlled Substances Act and decrease the diversion of controlled substances.	3.5.3
S.C. Meat and Poultry Inspection Division	State Government	DHEC notifies this state agency regarding investigations involving meat and poultry.	1.3.1
S.C. Medical Association	Professional Association	Collaborates and partners for subject matter expertise and support to their membership to enhance disease surveillance and response activities.	1.3.1
S.C. Medical Control Committee	State Government		3.3.1
S.C. Medical Control Committee	State Government	Conducts medical control workshops twice annually to train new medical control physicians to meet statutory requirements.	3.3.1
S.C. Medical Control Committee	State Government	Sets guidelines for training programs that meet or exceed national standards and best practices.	3.3.2
S.C. Medical Laboratories and Radiologists	Private Business Organization	Provides breast and cervical screenings for women between the ages of 30-64, 200% of poverty level, and uninsured or underinsured patients with high deductible health plan to increase access to screening and re-screening services.	1.4.4
S.C. Medical Providers	Private Business Organization	Detects and respond to disease occurrences via reports received for routine, urgent and immediate y notifiable conditions under public health surveillance.	1.3.1
S.C. Medical Providers	Private Business Organization	Provides guidance on reportable conditions and testing algorithms. Provides access to medical charts to confirm cases of HIV/AIDS. Sends HIV/AIDS lab reports to STS. Ensures that specimens for HIV/AIDS testing is collected properly and submitted promptly. Ensures that high risk candidates are screened and tested. Collects information needed to report case to CDC.	1.3.4
S.C. Morticians Association	Professional Association	DHEC Vital Statistics works routinely with morticians on the registration and issuance of death certificates. Vital Statistics staff regularly attend SCMA meetings to educate funeral directors regarding the registration of death records.	1.5.1, 1.5.2
S.C. Morticians Association	Professional Association	DHEC works regularly with the S.C. Morticians Association to plan for mass fatality management.	1.6.1
S.C. Morticians Association	Professional Association	DHEC provides advice and regulatory guidance to the S.C. Morticians Association regarding mass fatality management during emergency responses.	1.6.4
S.C. Municipalities	Local government	Provides training and technical assistance to implement programs. Provides up to date, culturally appropriate health education information and data.	
S.C. Municipalities	Local government	The Agency provides accurate, timely, and useful health information on methods to protect the public from exposure to secondhand smoke.	1.2.5
S.C. National Guard (NG)	State Government	The NG provides transportation, law enforcement, and heavy equipment during emergencies.	2.2.3
S.C. National Guard 43rd Weapons of Mass Destruction Civil Support Team (CST)	State Government	The CST provides hazardous material monitoring, identification, and communication support during emergencies.	2.2.3

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S.C. Office of Regulatory Staff (ORS)	State Government	DHEC partners with ORS on radioactive waste disposal rates and the Extended Care Fund for the Barnwell Low-Level	2.3.2
		Radioactive Waste Disposal Site. MOA to facilitate data linkage with administrative data of other state agencies for the identification of vulnerable	1.1.4
S.C. Office of Revenue and Fiscal Affairs	State Government	individuals who are jointly eligible for WIC. [2016-2017]	
5.C. Office of Revenue and Fiscal Affairs	State Government	Supports DOH data collection, analysis and reporting through a secure server.	1.1.5
S.C. Office of Revenue and Fiscal Affairs	State Government	DHEC works closely with RFA for the implementation of the dental prevention program by collecting and linking the data from dental providers.	1.1.5
S.C. Office of Revenue and Fiscal Affairs	State Government	RFA is working with DHEC to conduct an in-depth analysis of Clostridium difficile (C. diff) infections within S.C. to help in understanding the risk factors for C. diff infections. RFA also participates in the HIDA Advisory Committee to determine the HAIs that should be publicly reported.	
S.C. Office of Revenue and Fiscal Affairs	State Government	Provides aggregate hospitalization data for displaγ on the S.C. EPHT web portal and for submission to the CDC per EPHT grant requirements. Also provides data for surveillance of hospitalizations related to chronic conditions and to meet CDC grant deliverables for grants.	1,5.4, 1.5.5
S.C. Office of Revenue and Fiscal Affairs	State Government	DHEC Vital Statistics shares vital event data with RFA to allow for linkage with other health data for research purposes.	1.5.6
S.C. Office of Revenue and Fiscal Affairs (RFA)	State Government	Health and Demographics Section – provides data linkage and consultation services for data collection and epidemiologic analyses efforts.	1.1.4
S.C. Office of Rural Health	State Government	Implements of population health and systems changes mechanisms in rural clinics and hospitals to increase breast and cervical cancer screenings, re-screening rates and diagnostic services. [2016-2017]	1.2.3
S.C. Office of State Fire Marshal	State Government	Coordinate and promote enforcement of state-adopted codes and standards.	3.1.4
S.C. Office of State Fire Marshal	State Government	Promote a common understanding and uniform enforcement of codes and standards among other authorities having jurisdiction.	3.1.4
S.C. Office of State Fire Marshal	State Government	Coordinate participation in joint outreach and educational opportunities.	3.1.4
S.C. Pharmacy Association	Non-Governmental Organization	The DHEC Region Clinical Coordinators assist S.C. Pharmacy Association in engaging community pharmacists in the 1422 communities to provide hypertension medication/self-management education to patients within their customer base.	1.2,1
S.C. Pharmacy Association	Professional Association	SCPA partners with DHEC in organizing a statewide training on antimicrobial stewardship in acute care and long term care settings.	1.3.1
S.C. Pharmacy Association	Professional Association	SCPhA maintains the Rx Alert Network to distribute health notifications to pharmaceutical care practice sites. DHEC issues health notifications via Rx Alert.	1.6.1, 1.6.2
S.C. Pharmacy Association (SCPhA)	Professional Association	DHEC and SCPhA cooperate via grant funding to monitor inventories of Medical Countermeasures pharmaceuticals in the State. SCPhA polls member pharmacies and distributors; DHEC administers the grant and incorporates SCPhA findings into state plans.	1.6.2
S.C. Primary Health Care Association	Non-Governmental Organization	Collaborates to include oral health as part of the SCPHA programmatic agenda and to increase dental community participation in public health activities.	1.1.5
S.C. Primary Health Care Association (SCPHCA)	Non-Governmental Organization	The SCPHCA provides support for Community Health Center medical and dental practices in integrating services for pregnant women and infants into the existing system of care. The SCPHCA will integrate the perinatal medical office training into their annual Clinical Network training to support integration of oral health into medical homes. Member of the Project Advisory Board for the PIOHQI.	1.1.5
S.C. Public Housing Authorities	Local government	The Agency provides accurate, timely, and useful health information to protect non-smoking residents from exposure to secondhand smoke and linkage to services to help tobacco users quit.	1.2.5
S.C. Public Schools	K-12	Partner with S.C. Public Schools to conduct school safety transportation assessments at the school site. Findings of the assessments are presented to the schools to assist with planning efforts to improve overall school safety.	1.2.7
S.C. Radiation Quality Standards Association	Professional Association	Develop and/or administer examinations that assess the knowledge and skills underlying the tasks typically required by professional practice in the modality.	3.6.1
S.C. Radiation Quality Standards Association	Professional Association	Adopt and uphold standards for education in the radiation sciences in S.C.	3.6.2

.C. Radiation Quality Standards Association	Professional Association	Adopt and uphold standards of professional behavior consistent with the level of responsibility required by	3.6.2, 3.6.3
c. Rediation Quality Standards Association		professional practice.	
		The S.C. Regional Perinatal Center hospitals (Greenville Memorial, Spartanburg Regional, Palmetto Health Richland,	1.1.4
C. Regional Perinatal Center Hospitals	Private Business Organization	McLeod, and MUSC) accept high-risk pregnancies and neonates referred to them from other hospitals in their	
c. Regional Permatal Center Hospitals	r invate business organization	regions and provide educational opportunities to the hospitals in their region. These hospitals report referral and	
		education data to the DHEC MCH at least quarterly for review and analysis.	
.C. Renal Advisory Council	State Government	Consult with for advice and guidance on health and safety issues.	3.1.1, 3.1.2, 3.1.3
.C. Residential Care Committee	State Government	Partner to consult for advice and guidance on health and safety issues.	3.1.1, 3.1.2, 3.1.3
		DHEC works with this association to promote green practices and offer certification to hotels, motels, restaurants,	2.3.3
.C. Restaurant and Lodging Association	Professional Association	bars and venues through S.C. Green Hospitality Alliance.	
		DHEC works with SCRWA to provide technical assistance to public drinking water and wastewater systems in the	2.4.1, 2.4.2
.C. Rural Water Association	Professional Association	state.	
.C. Rural Water Association (SCRWA)	Professional Association	DHEC works with small public water systems on compliance.	2.2.2
		The agency provides accurate, timely, and useful health information and resources to support the implementation of	1.2.5
.C. School Districts	K-12	model tobacco-free school district policies.	-
		Region staff engage the school communities through active participation on School Coordinated School Health	1.4.4
		Advisory Committees. Community Teams also promote active participation in the Alliance for a Healthier Generation	
		among schools/school districts. Community Teams support access to fresh fruits and vegetables and provide	
.C. School Districts	Local government	technical assistance to city and county officials with walk-ability assessments, community forums and promotion of	
		safe, complete streets that enhance opportunities for physical activity. Community Teams use county health status	
		to solicit requests and distribute health education materials on numerous topics.	1 4 7
S.C. School Districts	Local government	Partnership with schools in the provision of school-located vaccination clinics,	1.4.7
6.C. School for the Deaf for the Deaf and the Blind Early ntervention Program	State Government	Provides early intervention services for infants and children diagnosed with a confirmed hearing loss,	1.1.1
	State Government	DHEC works with S.C. Sea Grant Consortium on coastal education, outreach and technical support to municipal	2.5.2, 2.5.3, 2.5.4
S.C. Sea Grant Consortium		governments. Coordinated projects include marine debris prevention and removal, Charleston Resi ience Network	
		and the identification of research and information needs associated with long-term coastal planning.	
		S.C. sheriffs and other law enforcement municipalities provide data related to violent death and its circumstances.	1.2.7
		This data is linked to abstraction completed on violent death incidents in S.C. as prescribed by the guidance of the	
S.C. Sheriff's Association (SCSA)	Non-Governmental	CDC and national standards. The agency has a contract with the SCCA which allows for greater access to	
	Organization	documentation on identified violent deaths. Routine correspondence is shared with sheriff's offices to capture	
		circumstances surrounding each incident of violent death.	
		DHEC Vital Statistics provides verifications of birth, death, marriage and divorce for the purpose of criminal	1.5.5
5.C. Sheriff's Offices	Local government	investigations.	
		Works collaboratively with DHEC's Bureau of Drug Control to enforce the S.C. Controlled Substances Act and	3.5.1, 3.5.2, 3.5.3
S.C. Sheriff's Offices	Local Government	decrease the diversion of controlled substances.	5.5.2, 5.5.2, 5.5.5
		SCSRC has worked closely with DHEC through the HIDA Advisory Committee to determine the HAIs that should be	1.3.1, 1.5.4
5.C. Society for Respiratory Care (SCSRC)	Professional Association		1.3.1, 1.3.4
,		publicly reported.	1.2.1
S.C. Society of Health Systems Pharmacists (SCSHP)	Professional Association	SCSHP partnered with DHEC in organizing a statewide training on antimicrobial stewardship focused on acute care	1.3.1
so society of neuror systems i narmatists (see in)		and long term care settings.	
S.C. Solicitor's Offices	State Government	DHEC Vital Statistics provides verifications of birth, death, marriage and divorce for the purpose of criminal	1.5.5
	state government	investigations.	
C. C. Baite de Officer	State Covernment	Works collaboratively with DHEC's Bureau of Drug Control to enforce the S.C. Controlled Substances Act and	3.5.3
5.C. Solicitor's Offices	State Government	decrease the diversion of controlled substances.	
		The SWAC advises DHEC on use of Solid Waste Trust Fund and the preparation of the South Carolina Solid Waste	2.3.3
5.C. Solid Waste Advisory Council (SWAC)	Professional Association	Management Plan.	

	the second se		
S.C. State Cabinet Agencies	State Government	DHEC provides accurate, timely, and useful health information and resources to support the implementation of tobacco-free worksites among the S.C. cabinet agencies.	1.2.5
S.C. State Geologist	State Government	The State Geologist is consulted by DHEC regarding site suitability and seismic evaluation for mining and solid waste programs.	2.3.1
S.C. State Health Planning Committee	State Government	Discusses, creates, and approves the State Health Plan no less than every two (2) years, as outlined in statute.	3.4.1
S.C. State Ports Authority (SPA)	State Government	The SPA supports emergency response operations that involve hazardous materials entering the state from marine transportation.	2.2.3
S.C. State Ports Authority (SPA)	State Government	DHEC works with SPA to ensure port projects are consistent with the Coastal Tidelands and Wetlands Act.	2.5.2, 2.5.2, 2.5.4
S.C. State University	Higher Education Institute		1.2.1, 1.4.4
S.C. Stroke Advisory Council	State Government	Provides guidance and direction to the program.	3.3.4
S.C. Tobacco Free Collaborative (SCTFC)		SCTFC collaborates in the development and evaluation of the State Tobacco Plan and the implementation of its various initiatives.	1.2.5
S.C. Trauma Advisory Council	State Government	Provides advice and recommendation to the Department to reduce morbidity and mortality among trauma patients.	3.3.3
S.C. Trauma Advisory Council	State Government	Advocates for trauma center expansion and provide advice and counseling on trauma-related regulations and statute and feedback from member hospitals.	3.3.3
S.C. Wing, Civil Air Patrol	State Government	South Carolina Wing provides air support and technical assistance during an emergency.	2.2.3
S.C. Witness Project	Non-Governmental Organization	Contract with the S.C. Witness project to recruit, educate and refer S.C. women for breast and cervical cancer screening and rescreening. Recognized as an evidence-based best practice program, the S.C. Witness Project targets reduction of health disparities statewide. [2016-2017]	1.4.4
S.C. Youth Suicide Prevention Initiative	Non-Governmental Organization	The S.C. Youth Suicide Initiative supports statewide youth suicide prevention by strengthening screening and referrals and increase social awareness of this issue. The SCVDRS program, with support from DHEC Vital Statistics, provides baseline data on varying youth age groups affected by suicide while exploring circumstances and risk factors that were attributed to deaths of S.C. youth.	
S.C. Office of Rural Health	State Government	Provides public comment and guidance on training and certification of all levels of EMT, particularly to the needs of the rural communities.	3.3.2
S.C. Office of Rural Health	State Government	Participates on EMS advisory council for the Department.	3.3.2
S.C. Office of Rural Health	State Government	Provides funding for training to EMTs and paramedics in rural areas of the state.	3.3.2
Safe Kids Coalition	Non-Governmental Organization	Partner with the Safe Kids Coalition to conduct educational presentations, classes, and safety seat inspections to increase seat belt and child safety seat restraint use in S.C.	1.2.7
School Districts in Spartanburg, Cherokee and Union Counties	Local government	Completes yearly BMI studies and reports with schools.	1.4.4
Senior Centers	Non-Governmental Organization	Registered dietitians deliver programs to low-income seniors on healthy eating to prevent and/or manage chronic conditions such as type 2 diabetes, heart disease, etc. In 2016-2017, SNAP staff will assist in delivering the <i>Walk with Ease Program</i> to senior groups.	1.2.1, 1.4.4
Senior Housing	Private Business Organization	Provide training & technical assistance to implement programs; provide up-to-date, culturaily appropriate health education information and data.	1.2.1
Senior Service Organizations	Non-Governmental Organization	Community Teams provide health education information and presentations on fall prevention, heat/sun and water safety, seatbelt promotion and brain injury awareness.	1.2.2
Share Our Strength (SOS)	Non-Governmental Organization	SOS is the national organizations administering the Cooking Matters programs delivered by the SNAP-Ed Team.	1.2.1, 1.4.4
Sickle Cell Community Based Organizations	Non-Governmental Organization	Provide sickle cell screening, counseling, community outreach and education on sickle cell disease. Provide educational symposiums to medical professionals on issues pertaining to the treatment of sickle cell disease.	1.1.1
Solid Waste Association of North America (SWANA)	Professional Association	DHEC participates in SWANA, which provides a forum for interacting with, and educating the waste disposal and recycling communities through trainings, meetings and conferences.	2.3.2, 2.3.3
South East American Indian Council	Non-Governmental Organization	Contract with the South East American Indian Council to recruit, educate and refer S.C. American Indian women for breast and cervical cancer screening and rescreening to target reduction of health disparities statewide.	1.4.4

Southeast National Tuberculosis Center (SNTC)	Federal Government	Ensures medical treatment of TB cases, especially drug-resistant cases, is adequate for disease elimination. Provides on-demand clinical consultation. Provides clinical training for physician and nursing staff working the Tuberculosis Control Program.	1.4.6
Southeast Recycling Development Council, EPA Region 4	Professional Association	DHEC works with this Council to promote recycling and market development in the region.	2.3.3
Southeast Tuberculosis Controllers Association	Professional Association	Ensures inter-state standard of care and best practices for TB surveillance, testing, evaluation and treatment through regular peer group communications and meetings. Provides training for physician and nursing staff working the Tuberculosis Control Program.	1.4.6
Southeastern Affordable Housing Management Association (SAHMA)	Non-Governmental Organization	The Agency provides accurate, timely, and useful health information to protect non-smoking residents from exposure to secondhand smoke and linkage to services to help tobacco users quit.	1.2.5
Spartanburg Regional Medical Center (SRMC)	Private Business Organization	DHEC and SRMC cooperate via grant funding to enhance SRMC's capability to screen high risk infectious disease patients; DHEC administers the grant and monitors grantee activities.	1.6.2
Specialty Care Providers	Private Business Organization	Ensure that screen positive infants receive timely diagnostic testing and specialty medical care. Provide consultation on technical aspects of newborn blood spot testing and follow up processes.	1.1.1
Specialty Care Providers	Private Business Organization	Ensure that children with special health care needs receive specialty medical care.	1.1.1
State Agencies	State Government	DHEC exercises regularly in SEOC operations with other state agencies.	1.6.1, 1.6.4
State Agencies	State Government	For the adaptation of the UST federal regulations, the UST Program is collaborating with stakeholders in 2016-2017 as part of the stakeholder involvement process for regulation development.	2.3.2
State Agencies	State Government	DHEC works with state agencies to promote waste reduction, recycling, and buying recycled through the Green Government Initiative.	2.3.3
State Alliance for Adolescent Sexual Health (SAASH)	Non-Governmental Organization	SAASH is comprised of multiple stakeholders and has a Steering Committee with strong leadership from DHEC members. This collaboration is vitally important because health and education disparities have a negative impact on S.C.'s youth. SAASH is taking a lead role in working to improve comprehensive sexual health education policies, raise awareness of prevention of STI/HIV as well as the availability of HPV vaccine and the use of condoms along with other contraception.	1.4.2
State Government	State Government	CHCDP operates under the guidance of the CDC six cancer priorities, S.C. Cancer Control Plan goals and objectives, and outcomes of the S.C. Cancer Report Card. The Comprehensive Cancer Control Program largely supports the S.C. Cancer Alliance which oversees grantee implementation of the cancer control plan and serves as an advocacy unit.	1.2.3, 1.4.4
State Waste Tire Committee (WTC)	Professional Association	The State WTC advises DHEC on the uses of the Waste Tire Grant Fund.	2.3.3
Statewide Health Systems	Private Business Organization	DHEC partners with statewide health systems to promote quality improvement in health care practices across the state. Partners to promote the adoption of standardized quality measures among medical practices to include assisting with the development of policies to require documentation of all blood pressures and A1C's in the EHR to improve reporting of the NCQA Physician Quality Reporting System or NQF.	1.2.1
SUPERB Advisory Committee (SAC)	Professional Association	SAC is established by the SUPERB Act to study and provide recommendations to DHEC of the SUPERB program, SUPERB funds and regulatory requirements applicable to UST. SAC comprises of 14 members from various backgrounds – industry associations, environmental groups, state agencies and general public.	2.3.2
SUPERB Advisory Committee (SAC)	Professional Association	For the adaptation of the UST federal regulations, the UST Program is collaborating with stakeholders in 2016-2017 as part of the stakeholder involvement process for regulation development.	2.3.2
Susan G. Komen Breast Cancer Foundation	Non-Governmental Organization	Work to ensure BCN, WISEWOMAN services are accessible in the community and that information, education and training is available, implemented and disseminated.	1.2.3
Take Off Pounds Sensibly (TOPS) Chapters	Non-Governmental Organization	Partner with S.C. WISEWOMAN program to provide cardiovascular and lifestyle change programs to eligible participants.	1.2.3

		Device with Talance the device meterical large in a negliticate answer that compute the backtower day	1.2.1
		Partner with Talance, Inc. to develop customized learning modules to ensure that community health workers stay	1.2.1
		abreast of relevant health information, opportunities for continuing education, training and professional	
Talance Inc.	Private Business Organization	development. Talance, Inc. will set up a learning management system that is accessible 24/7 to DHEC staff to track	
		course development and course completion by individual users and promote the learning modules to contracted	
		medical practices to ensure relevant staff have completed required courses. [2016-2017]	
Text4baby	Non-Governmental	Provide critical health and safety information for mothers, their children and their families in the state of S.C. By	1.1.1
Text4Daby	Organization	using text messaging important information is sent to mothers on a weekly basis.	
		The Diabetes Prevention Program staff contract with DTTAC for them to facilitate two-day National DPP Lifestyle	1.2.1
The Diabetes Training and Technical Assistance Center	Higher Education Institute	Coach training sessions in the DHEC Regions. DTTAC also provides ongoing technical assistance in the form of web-	
(DTTAC) at Emory University		based learning resources.	
	Non-Governmental	Promote a common understanding and uniform enforcement of codes and standards among other authorities having	3.1.4
The Joint Commission	Organization	jurisdiction.	
	Non-Governmental		3.1.4
The Joint Commission	Organization	Coordinate participation in joint outreach and educational opportunities.	
	Organization	TNI develops and maintains the Proficiency Testing program for environmental laboratories used to satisfy DHEC	2.2.1
The NELAC Institute (TNI)	Professional Association	laboratory certification requirements.	
		DHEC and other partners have collaborated over the past 30 years to provide a regionalized system of care for high-	1.4.2
	1 1	risk infants and their mothers. Regional staff not only coordinate services for the mom and baby, but also assist with	1.T.L
	Non-Governmental		
The Perinatal Region Systems of Care Network	Organization	communication, relationship building and increase collaboration of partners involved in perinatal care. DHEC's state	
	organization	coordinator works closely with the four regions to monitor services and implement new programs related to	
		perinatal health. (
	Desferring of Association	Provides advice and recommendation to the Department to reduce morbidity and mortality among trauma patients.	3.3.3
Trauma Association of SC	Professional Association		
		Advocates for trauma center expansion and provide advice and counseling on trauma-related regulations and statute	3.3.3
Trauma Association of SC	Professional Association	and feedback from member hospitals.	
U.S. Department of Health and Human Services (U.S.		DHEC partners closely with Health Resources and Services Administration (HRSA) on funding and service delivery,	1.1.4
DHHS)	Federal Government	particularly related to maternal and child health issues.	
U.S. Department of Health and Human Services (U.S.		Consistently communicates with U.S. DHHS Office of Minority Health and utilizes the technical assistance, training,	1,2.6
DHHS)	Federal Government	consultation, and other resources provided by the office to accomplish the above objectives.	/*
U.S. Department of Health and Human Services (U.S.		U.S. DHHS Centers for Disease Control and Prevention- DHEC meets frequently with CDC representatives under the	1.6.1
DHHS)	Federal Government	aegis of SCEMD emergency planning and participates with CDC during exercises and emergency response.	
		DHEC administers Public Health Emergency Preparedness, Hospital Preparedness Program, and Ebcla Grants to	1.6.2
U.S. Department of Health and Human Services (U.S.	Federal Government		2.012
DHHS)		support response and recovery planning and preparation.	2.3.1. 2.3.2. 2.3.4
U.S. Army Corps of Engineers (USACE)	Federal Government	DHEC partners with USACE regarding wetlands on permit applications and compliance issues regarcing wetlands.	2.3.1, 2.3.2, 2.3.4
, , , , , , , , , , , , , , , , , , , ,			2.4.1
U.S. Army Corps of Engineers (USACE)	Federal Government	DHEC issues Water Quality Certifications and construction in navigable waters for federal 404 and Section 10 permits	2.4.1
ous Army corps of Engineers (conce)		issued by USACE.	
		DHEC reviews proposed activities which require a 404 permit issued by USACE for impacts to water quality through	2.5.1, 2.5.2
U.S. Army Corps of Engineers (USACE)	Federal Government	the 401 Water Quality Certification program and impacts to critical areas and other coastal resources through the	
		Critical Area Permitting program and the Coastal Zone Management Program.	
U.S. Army Corps of Engineers (USACE)		DHEC works with the USACE Silver Jackets Program to conduct research and mapping associated with flooding risk	2.5.2
	Federal Government	analysis and coastal hazard vulnerability assessment.	
U.S. Centers for Medicare and Medicare Services (CMS)	Federal Government	Sets forth the State Agency Performance Standards annually for State Survey Agencies.	3.2.1
		Provides consultative visits by Health Management Solutions (HMS) to work on identifying program improvements	3.2.1
U.S. Centers for Medicare and Medicare Services (CMS)	Federal Government	and securing resources to enhance quality and performance.	
U.C. Centers for Madiense and Madiense Canica, (CMC)	Federal Government	Contracts with to perform federally mandated Medicare Certification surveys of health care facilities.	3.2.1
U.S. Centers for Medicare and Medicare Services (CMS)	Federal Government	DHEC works with the USCG on efforts including ADV removal operations.	2.5.1. 2.5.2
U.S. Coast Guard (USCC)	regeral Government	Infice works with the object on enorth metioning Advirentioval operations.	The set of

U.S. Coast Guard (USCG)	Federal Government	The USCG provides technical assistance to DHEC and federal support/ oversight of threats to coastal waters.	2.2.3
U.S. Department of Agriculture (USDA)	Federal Government	Food Safety and Inspection Service - DHEC notifies the USDA regarding investigations involving meat and poultry.	1.3.1
U.S. Department of Agriculture (USDA)	Federal Government	DHEC works with USDA on meat not produced in South Carolina.	2.2.2
		DHEC collaborates with the USDA Natural Resources Conservation Service (NRCS) to develop conservation plans for	2.4.3
U.S. Department of Agriculture (USDA)	Federal Government	Best Management Practice implementation for agricultural operations and seeks to leverage NRCS EQIP funds with	
		319 grant funds for water quality improvement.	
	Federal Government	DHEC partners with the DoD services to cleanup contamination and facilitate composting and food recovery at	2.3.4
U.S. Department of Defense (DoD)	Federal Government	military installations in South Carolina.	
U.S. Department of Energy (DOE)	Federal Government	DOE provides technical assistance in monitoring and responses to radiological releases.	2.2.3
U.S. Department of Energy (DOE)	Federal Government	DOE provides field sampling personnel and air/mobile radiation monitoring capabilities.	2.2.3
U.S. Department of Interior (DOI)	Federal Government	DHEC coordinates with the DOI Federal Land Managers on air PSD permits.	2.1.1
U.S. Department of Interior (DOI)	Federal Government	DOI provides technical expertise on threats to animals and fish as a result of a chemical release.	2.2.3
U.S. Department of Transportation (USDOT)	Federal Government	DHEC works with the USDOT to ensure transportation projects are consistent with the Coastal Tidelands and Wetlands Act.	2.5.1, 2.5.2, 2.5.4
U.S. Drug Enforcement Agency (DEA)	Federal Government	Works with DHEC's Bureau of Drug Control in issuing controlled substance registrations to authorized practitioners and health care entities.	3.5.1
U.S. Drug Enforcement Agency (DEA)	Federal Government	Partners with Drug Control to conduct inspections and audits to ensure accountability of controlled substances.	3.5.2
		Works collaboratively with DHEC's Bureau of Drug Control to enforce the S.C. Controlled Substances Act and	3.5.3
U.S. Drug Enforcement Agency (DEA)	Federal Government	decrease the diversion of controlled substances.	
U.S. Environmental Protection Agency (EPA)	Federal Government	DHEC works with EPA to develop air Grant Workplans.	2.1.1, 2.1.2, 2.1.3, 2.1.4
U.S. Environmental Protection Agency (EPA)	Federal Government	DHEC reports permitting, compliance, and emissions data to EPA databases.	2.1.1, 2.1.2, 2.1.4
		EPA reviews major DHEC draft permit decisions in federally delegated programs as part of federal oversight. EPA	2.1.1, 2.3.1, 2.4.1, 2.4.2, 2.4.3, 2.4.5
U.S. Environmental Protection Agency (EPA)	Federal Government	provides technical assistance.	
U.S. Environmental Protection Agency (EPA)	Federal Government	DHEC and EPA work together on some compliance inspections.	2.2.2
U.S. Environmental Protection Agency (EPA)	Federal Government	EPA provides specialized sampling and analytical capabilities for chemical and radiological emergencies.	2.2.3, 2.2.4
U.S. Environmental Protection Agency (EPA)	Federal Government	EPA provides technical assistance and federal oversight of threats to inland waters and lands.	2.2.3, 2.2.4
U.S. Environmental Protection Agency (EPA)	Federal Government	DHEC partners with EPA on compliance assistance and assurance through inspections, and enforcement of hazardous waste facilities in South Carolina.	2.3.2
U.S. Environmental Protection Agency (EPA)	Federal Government	DHEC partners with EPA on assessment of hazardous and toxic waste sites as needed for compliance assistance and remediation.	2.3.2 2.3.4
U.S. Environmental Protection Agency (EPA)	Federal Government	DHEC works with EPA to promote recycling and market development in the region.	2.3.3
U.S. Federal Bureau of Investigation (FBI)	Federal Government	DHEC Vital Statistics provides verifications of birth, death, marriage and divorce for the purpose of criminal investigations.	1.5.5
U.S. Federal Bureau of Investigation (FBI)	Federal Government	Works collaboratively with DHEC's Bureau of Drug Control to enforce the S.C. Controlled Substances Act and decrease the diversion of controlled substances.	3.5.3
U.S. Fish and Wildlife Service (USFWS)	Federal Government	DHEC works with USFWS to ensure the wise management of natural resources in the coastal zone.	2.5.1, 2.5.2
U.S. Food and Drug Administration (FDA)	Federal Government	DHEC notifies the FDA regarding investigations involving fruits, vegetables, fish, eggs (everything food except meat and poultry). They work with us on trace back and recall activities.	1.3.1
U.S. Food and Drug Administration (FDA)	Federal Government	FDA audits the Manufactured Food Program.	2.2.2
U.S. Food and Drug Administration (FDA)	Federal Government	DHEC works with FDA on the Food Code and cross jurisdictional issues.	2.2.2
U.S. Food and Drug Administration (FDA)	Federal Government	DHEC works with the FDA on laboratory certification for milk, dairy, and shellfish testing.	2.2.2
U.S. Food and Drug Administration (FDA)	Federal Government	FDA standardizes Retail Food Survey Team Members.	2.2.2
U.S. Food and Drug Administration (FDA)	Federal Government	DHEC works with FDA related to Certified Shellfish Interstate Shippers.	2.2.2
U.S. Food and Drug Administration (FDA)	Federal Government	FDA evaluates the DHEC shellfish sanitation program to ensure consistency with the national shellfish sanitation program.	2.4.3, 2.4.5
U.S. Food and Drug Administration (FDA)	Federal Government	Partner on MQSA.	3.6.1, 3.6.2, 3.6.3
U.S. Food and Drug Administration (FDA)	Federal Government	Ensures Quality Mammography Exams meet both state and federal requirements.	3.6.1, 3.6.2, 3.6.3

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U.S. Food and Drug Administration (FDA)	Federal Government	Promotes Quality Patient Care and Imaging.	3.6.2
U.S. Geological Survey (USGS)	Federal Government	DHEC contracts with USGS to update low-flow statistics for streams and rivers statewide.	2.4.1
U.S. Geological Survey (USGS)	Federal Government	DHEC and USGS share groundwater monitoring data.	2.4.1
U.S. Nuclear Regulatory Commission (NRC)	Federal Government	DHEC meets frequently with NRC representatives under the aegis of SCEMD emergency planning and participates with NRC during exercises and emergency response. (1.6.1
U.S. Nuclear Regulatory Commission (NRC)	Federal Government	DHEC works with the NRC to assume regulatory authority to license and regulate radioisotopes, source material, radioactive waste, and certain quantities of special nuclear material.	2.3.1
J.S. Nuclear Regulatory Commission (NRC)	Federal Government	Ensures Agreement States exercise their licensing and enforcement actions under direction of the governors in a manner that is compatible with the licensing and enforcement programs of the NRC.	3.6.1, 3.6.2, 3.6.3
U.S. Nuclear Regulatory Commission (NRC)	Federal Government	Assists the radiation control programs in technical work and development.	3.6.1, 3.6.2, 3.6.3
U.S. Nuclear Regulatory Commission (NRC)	Federal Government	Ensures that the Agreement States promulgate regulations that are compatible with that of the NF.C.	3.6.1, 3.6.2, 3.6.3
U.S. Social Security Administration	Federal Government	DHEC Vital Statistics has an agreement with SSA to facilitate the SSA Enumeration At Birth, which allows parents to request a Social Security Number for their child when the child's birth record is registered. The recuest is submitted to SSA through a secure electronic process and the SSN Card is mailed to the parents. This is a cost savings benefit to SSA and provides a convenient method for parents to request a child's SSN card.	1.5.1, 1.5.5
U.S. Social Security Administration	Federal Government	DHEC Vital Statistics has an agreement with SSA to facilitate electronic verification of death through the SC electronic vital records system. This is a cost savings benefit for SSA regarding payment of SSA benefits by reducing the amount of time SSA receives death notification.	1.5.1, 1.5.5
U.S. Substance Abuse and Mental Health Services Administration (SAMSHA)	Federal Government	Works collaboratively with the Prescription Monitoring Program to administer a grant to improve the state's ability to identify and stop diversion of prescription drugs.	3.5.3
United Way	Non-Governmental Organization	Provides a service for DHEC by housing the DHEC Care Line. The Care Line is the statewide toll-free information and referral hotline for DHEC. The Care Line toll-free number is used for Public Health Emergencies. United Way/Care Line employees are provided training to be able to provide assistance to callers about a public health emergency.	1.1.1
University Center for Excellence in Developmental Disability Research (UCEDD)	Professional Association	Provide staff capacity training around children with special health care needs issues. [2016-2017]	1.1,1
University of South Carolina (USC)	Higher Education Institute	DSS contracted with USC Center for Nutrition and Health Disparities to evaluate the S.C. SNAP Nutrition education program and services.	1.2.1
University of South Carolina (USC)	Higher Education Institute	The Poison Control Center Provides carbon monoxide poisoning data for the S.C. EPHT web portal and works with staff to communicate carbon monoxide information to the general public through the DHEC website and other media.	1.5.4, 1.5.5
USC – Arnold School of Public Health	Higher Education Institute	Provides research leadership and oversight for the S.C. Muscular Dystrophy Surveillance, Tracking, and Research Network.	1.1.4
USC – Arnold School of Public Health	Higher Education Institute	Provides expertise and assistance to use the IHI Breakthrough Series and QI for the integration of oral health for pregnant women, infants and children into local systems of care through the PIOHQI grant. [2016-2017]	1.1.5
USC – Arnold School of Public Health	Higher Education Institute	Provides expertise and assistance in the use of the IHI Breakthrough Series and QI for the integration of oral health for pregnant women, infants and children into local systems of care through the PIOHQI grant. [2016-2017] Member of the project Advisory Board for the PIOHQI grant.	1.1.5
USC – Arnold School of Public Health	Higher Education Institute	Assists DHEC with devising health priorities plan.	1.2.1
USC – Arnold School of Public Health	Higher Education Institute	USC Arnold School of Public Health collaborates and provides staffing for the Division to support the development and evaluation of the State Tobacco Plan and the implementation of its various initiatives with a special emphasis on the surveillance and evaluation of all Division programs.	1.2.5

USC – Arnold School of Public Health	Higher Education Institute	DHEC consulted with USC Children's Physical Activity Research Group to identify and recommend nutrition and physical activity standards for family and group child care home providers that meet national best practice standards. DHEC also works with USC on the analysis of data collected through the SC FitnessGram System. Evaluation services for the SC FitnessGram project are provided by the USC Arnold School of Public Health. USC Department of Exercise Science is working to develop professional development for physical education and general classroom teachers to increase physical activity during the school day. DHEC is working with them to develop a statewide implementation plan so that this professional development opportunity can be shared across the state.	1.4.4
USC – Arnold School of Public Health	Higher Education Institute	Assists with the development and evaluation of Community Health Improvement / Community Engagement activities. Assists with the establishment of partnerships and linkage to local / state groups for community assessment work.	1.4.4
USC – Arnold School of Public Health	Higher Education Institute	Department of Epidemiology and Biostatistics provides financial support to DHEC-run S.C. BRFSS for inclusion of disability and reactions to race questions (on 2016 S.C. BRFSS survey) and to keep sample size above 10K for continued valid and high quality S.C BRFSS data. DHEC provides appropriate S.C. BRFSS data sets and statistics, as necessary, when final data are received from the CDC.	1.5.4, 1.5.5, 1.5.6
USC School of Medicine	Higher Education Institute	The School of Medicine provides a neurologist to provide clinical oversight and review for muscular dystrophy data collected by the SC Muscular Dystrophy Surveillance, Tracking, and Research Network.	1.1.4
USC School of Medicine Trust D/B/A University Specialty Clinics-Internal Medicine	Higher Education Institute	Medicine Education Trust provides physician services for the DHEC Specialty Care Clinic at Kirkland Correctional Institute. [2016-2017]	1.3.2
USC Specialty/Palmetto Health	Professional Association	Provides a pediatric consultant for the program who advises on eligible conditions and treatments, is the on-call physician when the program's residential summer camp is in session and is available for any medical concerns that arise from the program.	1.1.1
UST Convenience Store Owners	Individual	For the adaptation of the UST federal regulations, the UST Program is collaborating with stakeholders in 2016-2017 as part of the stakeholder involvement process for regulation development.	2.3.2
UST Site Rehabilitation Contractors	Private Business Organization	DHEC facilitates certification of site rehabilitation contractors to conduct assessment and cleanup activities at sites with petroleum release.	2.3.4
Wastewater Utilities	Private Business Organization	DHEC requires issuance of wastewater utility receipt approval or a permit prior to DHEC issuance of a wastewater pretreatment construction permit.	2.4.1
Wastewater Utilities	Private Business Organization	DHEC needs approval from a wastewater utility in order to issue a construction permit for the applicant to attach lines or equipment to the utility infrastructure.	2.4.1
Water Utilities	Private Business Organization	DHEC needs approval from a water utility in order to issue a construction permit for the applicant to attach lines or equipment to the utility infrastructure.	2.4.1

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