



HEALTH

	FISCAL YEAR 2022-23				THREE MONTHS ENDED 09-30-23				NINE MONTHS ENDING 06-30-24			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
PART I: EXPENDITURES & POSITIONS												
RESEARCH & DEVELOPMENT COSTS												
POSITIONS												
EXPENDITURES (\$1,000's)												
OPERATING COSTS												
POSITIONS	5,285.12	5,255.77	- 29.35	1	5,475.62	5,282.46	- 193.16	4	5,475.62	5,791.96	+ 316.34	6
EXPENDITURES (\$1000's)	1,428,150	1,539,391	+ 111,241	8	434,737	382,707	- 52,030	12	1,178,013	1,306,762	+ 128,749	11
TOTAL COSTS												
POSITIONS	5,285.12	5,255.77	- 29.35	1	5,475.62	5,282.46	- 193.16	4	5,475.62	5,791.96	+ 316.34	6
EXPENDITURES (\$1000's)	1,428,150	1,539,391	+ 111,241	8	434,737	382,707	- 52,030	12	1,178,013	1,306,762	+ 128,749	11
					FISCAL YEAR 2022-23				FISCAL YEAR 2023-24			
	PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%
PART II: MEASURES OF EFFECTIVENESS												
1. MORTALITY RATE (PER THOUSAND)	8	8	+ 0	0	8	8	+ 0	0	8	8	+ 0	0
2. AVERAGE LIFE SPAN OF RESIDENTS	81	80	- 1	1	81	80	- 1	1	81	80	- 1	1

VARIANCE REPORT NARRATIVE FY 2023 AND FY 2024

PROGRAM TITLE: HEALTH

05

PART I - EXPENDITURES AND POSITIONS

Specific variances are discussed in detail in the lowest level program narratives.

PART II - MEASURES OF EFFECTIVENESS

No significant variances.

	FISCAL YEAR 2022-23				THREE MONTHS ENDED 09-30-23				NINE MONTHS ENDING 06-30-24			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
PART I: EXPENDITURES & POSITIONS												
RESEARCH & DEVELOPMENT COSTS												
POSITIONS												
EXPENDITURES (\$1,000's)												
OPERATING COSTS												
POSITIONS	605.37	471.37	- 134.00	22	608.37	461.37	- 147.00	24	608.37	549.87	- 58.50	10
EXPENDITURES (\$1000's)	253,321	380,000	+ 126,679	50	112,477	84,924	- 27,553	24	195,924	263,979	+ 68,055	35
TOTAL COSTS												
POSITIONS	605.37	471.37	- 134.00	22	608.37	461.37	- 147.00	24	608.37	549.87	- 58.50	10
EXPENDITURES (\$1000's)	253,321	380,000	+ 126,679	50	112,477	84,924	- 27,553	24	195,924	263,979	+ 68,055	35
	FISCAL YEAR 2022-23				FISCAL YEAR 2023-24							
	PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%				
PART II: MEASURES OF EFFECTIVENESS												
1. ACTIVE TB CASES - PROPORTRN COMPL RECOM THERAPY (%)	97	86	- 11	11	97	88	- 9	9				
2. % CHILDREN AGE 5 YEARS MEETING IMMUNIZATION REQ	90	93	+ 3	3	90	93	+ 3	3				
3. % OF PERSONS WITH DD/ID RECEIVING DD SERVICES	13	13	+ 0	0	13	13	+ 0	0				
4. % OF PERSONS IN HSH RECEIVING DENTAL TREATMENTS	95	90	- 5	5	95	90	- 5	5				

VARIANCE REPORT NARRATIVE FY 2023 AND FY 2024

PROGRAM TITLE: HEALTH RESOURCES

05 01

PART I - EXPENDITURES AND POSITIONS

Specific variances are discussed in detail in the lowest level program narratives.

PART II - MEASURES OF EFFECTIVENESS

See lowest level programs for explanation of significant variances.

VARIANCE REPORT

PROGRAM TITLE:

COMMUNICABLE DISEASE & PUBLIC HEALTH NURSING

12/5/23

PROGRAM-ID:

PROGRAM STRUCTURE NO: 050101

	FISCAL YEAR 2022-23				THREE MONTHS ENDED 09-30-23				NINE MONTHS ENDING 06-30-24			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
PART I: EXPENDITURES & POSITIONS												
RESEARCH & DEVELOPMENT COSTS												
POSITIONS												
EXPENDITURES (\$1,000's)												
OPERATING COSTS												
POSITIONS	287.87	238.87	- 49.00	17	291.87	236.87	- 55.00	19	291.87	287.87	- 4.00	1
EXPENDITURES (\$1000's)	53,472	85,942	+ 32,470	61	16,496	22,911	+ 6,415	39	44,582	78,700	+ 34,118	77
TOTAL COSTS												
POSITIONS	287.87	238.87	- 49.00	17	291.87	236.87	- 55.00	19	291.87	287.87	- 4.00	1
EXPENDITURES (\$1000's)	53,472	85,942	+ 32,470	61	16,496	22,911	+ 6,415	39	44,582	78,700	+ 34,118	77
	FISCAL YEAR 2022-23				FISCAL YEAR 2023-24							
	PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%				
PART II: MEASURES OF EFFECTIVENESS												
1. NEW ACTIVE TB CASE RATE PER 100,000 RESIDENTS	6.5	6.9	+ 0.4	6	7.1	8.6	+ 1.5	21				
2. % ACTIVE TB CASES COMPLETG RECOMMENDED THERAPY	97	86	- 11	11	97	88	- 9	9				
3. NEWLY DIAGNOSED HANSEN'S DISEASE CASES PER 100,000	.62	1.04	+ 0.42	68	1	1	+ 0	0				
4. % CHILDREN AGE 5 YEARS MEETING IMMUNIZATION REQ	90	83	- 7	8	90	83	- 7	8				
5. NEWLY REPORTED HIV CASES PER 100,000	4.0	5.7	+ 1.7	43	3.3	5.9	+ 2.6	79				

VARIANCE REPORT NARRATIVE FY 2023 AND FY 2024

PROGRAM TITLE: COMMUNICABLE DISEASE & PUBLIC HEALTH NURSING

05 01 01

PART I - EXPENDITURES AND POSITIONS

Specific variances are discussed in detail in the lowest level program narratives.

PART II - MEASURES OF EFFECTIVENESS

See lowest level program narratives for explanation of significant variances.

PROGRAM TITLE: COMMUNICABLE DISEASE & PUBLIC HEALTH NURSING
 PROGRAM-ID: HTH-100
 PROGRAM STRUCTURE NO: 05010101

	FISCAL YEAR 2022-23				THREE MONTHS ENDED 09-30-23				NINE MONTHS ENDING 06-30-24			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
PART I: EXPENDITURES & POSITIONS												
RESEARCH & DEVELOPMENT COSTS												
POSITIONS												
EXPENDITURES (\$1,000's)												
OPERATING COSTS												
POSITIONS	242.87	208.87	- 34.00	14	246.87	207.87	- 39.00	16	246.87	246.87	+ 0.00	0
EXPENDITURES (\$1000's)	43,770	39,509	- 4,261	10	14,017	9,059	- 4,958	35	37,145	37,145	+ 0	0
TOTAL COSTS												
POSITIONS	242.87	208.87	- 34.00	14	246.87	207.87	- 39.00	16	246.87	246.87	+ 0.00	0
EXPENDITURES (\$1000's)	43,770	39,509	- 4,261	10	14,017	9,059	- 4,958	35	37,145	37,145	+ 0	0

	FISCAL YEAR 2022-23				FISCAL YEAR 2023-24			
	PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%
PART II: MEASURES OF EFFECTIVENESS								
1. NEW ACTIVE TB CASE RATE PER 100,000 RESIDENTS	6.5	6.9	+ 0.4	6	7.1	8.6	+ 1.5	21
2. % ACTIVE TB CASES COMPLETING RECOMMENDED THERAPY	97	86	- 11	11	97	88	- 9	9
3. % NON-ACTIVE TB CASES COMPLETG RECOMMENDED THERAPY	87	97	+ 10	11	86	89	+ 3	3
4. SYPHILIS CASE RATE WOMEN 15-44 YRS OLD PER 100,000	4000	76.4	- 3923.6	98	4800	85.5	- 4714.5	98
5. NEWLY REPORTED HIV CASES PER 100,000	4.0	5.7	+ 1.7	43	3.3	5.9	+ 2.6	79
6. NEWLY DIAGNOSED HANSEN'S DISEASE CASES PER 100,000	.62	1.04	+ 0.42	68	1	1	+ 0	0
7. % OUTPATIENTS W/NEW COMPLICATIONS FR HANSEN'S DIS	0	1.15	+ 1.15	0	.4	.4	+ 0	0
8. ANNL KALAUPAPA REGISTRY PATIENT CARE/RESIDENT DAYS	2180	2096	- 84	4	2200	2200	+ 0	0
9. % COMPLETED NURSING CONSULTATIONS FOR DOE STUDENTS	100	100	+ 0	0	100	100	+ 0	0
10. % PHN ENROLLD ELDERS >60YR W/O FALL RE HOSPITALZNS	100	99	- 1	1	95	100	+ 5	5

PART III: PROGRAM TARGET GROUP								
1. RESIDENT POPULATION, STATE OF HAWAII (IN THOUS)	1430	1430	+ 0	0	1400	1400	+ 0	0
2. CONTACTS OF INFECTIOUS TB CASES	150	404	+ 254	169	800	505	- 295	37
3. CLASS B IMMIGRANTS	90	280	+ 190	211	150	433	+ 283	189
4. WOMEN 15-44 YEARS OF AGE	65000	261931	+ 196931	303	65000	263000	+ 198000	305
5. CONTACTS OF HIV CASES FR DOH HIV COUNSEL/TESTG SVC	25	25	+ 0	0	25	25	+ 0	0
6. PATIENTS ON THE KALAUPAPA REGISTRY	9	8	- 1	11	8	8	+ 0	0
7. CONTACTS OF HANSEN'S DISEASE CASES	1113	1113	+ 0	0	1190	1113	- 77	6
8. OUTPATIENTS W/HANSEN'S DISEASE-RELATED DISABILITIE	106	107	+ 1	1	115	107	- 8	7
9. CHILDREN IN DOE SCHOOLS	180000	168634	- 11366	6	179000	168000	- 11000	6
10. POPULATION > 60 YEARS OLD	360000	384397	+ 24397	7	450000	410000	- 40000	9

PART IV: PROGRAM ACTIVITY								
1. # INDIVIDUALS RECEIVG COUNSELG/EVALUATION/SCREENG	53872	59697	+ 5825	11	56871	53901	- 2970	5
2. # INDV RCVG EVAL FOR SUSPECTD EXPOSURE TO COMM DIS	8811	8428	- 383	4	9830	9277	- 553	6
3. # INDIVIDUALS RECEIVG TREATMENT FOR COMM DISEASES	2342	5706	+ 3364	144	2513	2620	+ 107	4
4. # OUTPATIENT VISITS/EVAL BY PHYS/NURSES/SW/PARAMED	92717	80671	- 12046	13	92687	84776	- 7911	9
5. # LABORATORY TESTS OBTAINED AND REVIEWED	25132	24285	- 847	3	26835	24724	- 2111	8
6. # WOMEN 15-44 RECVG SEROLOGICAL EVALUATN SYPHILIS	4000	860	- 3140	79	4500	963	- 3537	79
7. # PATIENTS PROVIDED HIV-RELATD DRUG TREATMT ASSIST	435	405	- 30	7	450	435	- 15	3
8. # STERILE SYRINGES EXCHANGED	1400000	689918	- 710082	51	1000000	700000	- 300000	30
9. # PHN CONTACTS COMPLETG CONSULTS FOR DOE STUDENTS	15000	27353	+ 12353	82	14000	27000	+ 13000	93
10. # OF PHN CONTACTS FOR PHN-ENROLLED ELDERS > 60 Y/O	5000	5276	+ 276	6	6000	6000	+ 0	0

VARIANCE REPORT NARRATIVE FY 2023 AND FY 2024

05 01 01 01
HTH 100

PROGRAM TITLE: COMMUNICABLE DISEASE & PUBLIC HEALTH NURSING

PART I - EXPENDITURES AND POSITIONS

In FY 23: The position variance is almost entirely due to recruitment challenges. The expenditure variance is primarily due to federal grants budgeted with higher estimated ceiling than the actual expenditure.

In FY 24: For the first three months of FY 24, the position variance is primarily due to the position recruitment challenge and new vacancies. The expenditure variance is due to a delay in execution and encumbrance of several contracts.

PART II - MEASURES OF EFFECTIVENESS

Item 1: The variance is due to an increase in immigration to Hawaii from countries that have high rates of tuberculosis (TB) and are the origination of many of our active TB cases. Immigration had decreased during the COVID-19 pandemic but is now increasing and projected to continue in an upward trend. The case rate of 6.9 per 100,000 residents is based on 100 diagnosed TB cases for FY 22-23. We project an increase to 125 cases Statewide for this FY 23-24, bringing the case rate up to 7.1 per 100,000 residents. The projected increase in cases and case rate is based on the projection of gradual increase of Class B immigrants, many of whom come from countries with high rates of TB. The variance for FY 23-24 is due to a higher estimated case rate than we expect to see. A smaller case rate of new active TB cases is generally considered a positive health outcome.

Item 2: The variance is due to a decreased proportion of people with active TB completing treatment. The lower than planned 86% treatment completion rate is due to 10 deaths (before even starting medications or during treatment) and some patients not completing treatment. In addition, many new active TB cases have multiple drug resistances and require longer treatment, which delays their treatment completion and requires increased resources for case management and ensuring treatment completion. Staffing shortages in the TB branch have limited our ability to find some patients who fall out of care and return them to

care for treatment completion.

Item 3: This variance is due to a better-than-expected rate of treatment completion for patients with latent TB (LTBI). 97% of case contacts, B1 immigrants, and Survey patients received and completed LTBI treatment. This is a positive health outcome and directly related to the hard work of the TB Branch staff.

Item 4: This variance is due to an error in planned targets. This measure of effectiveness (MOE) was recently changed to look at effectiveness of work related to syphilis cases in women aged 15-44 years. The current planned targets reflect the previous MOE which was Chlamydia case rates in women 18-22 years old. For the current MOE the FY 23-24 planned case rate for syphilis case rate in women should be 90 per 100,000 people. This reflects a pattern of rapidly increasing syphilis cases in women in Hawaii. With this new, accurate planned target, the variance for FY 23-24 would be 5%.

Item 5: The variance for FY 22-23 reflects a slightly higher case rate of newly diagnosed Human Immunodeficiency Virus (HIV) infections in Hawaii. The increase is due to delayed reporting of cases from prior years, planned targets that were made without accurate data based on years with under-reported cases, and a possible slow increase in new cases. While the percentage of variance reported is significant, the numbers of affected persons is very small, making accurate projections difficult. It is important to view trends in HIV morbidity several years at a time. Changes from one year to the next may not be indicative of the overall trend. The planned case rate of 3.3 new HIV cases for FY 23-24 reflects a number of years of decreasing cases but case rates are unlikely to drop to that level next year. The Communicable Disease and Public Health Nursing Division (CDPHND) will continue to monitor.

Item 6: Newly Diagnosed Hansen's Disease Cases per 100,000: As new case detection fluctuates yearly (low of 10 to high of 25), it is expected that a variance will occur since the numbers of affected persons is very small, making accurate projections difficult. Last year's positive variance reflects an increase in case finding of new Hansen's Disease cases, due

VARIANCE REPORT NARRATIVE FY 2023 AND FY 2024

05 01 01 01
HTH 100

PROGRAM TITLE: COMMUNICABLE DISEASE & PUBLIC HEALTH NURSING

to an increase in active outreach efforts with travel restrictions due to COVID-19 pandemic no longer in place. Cases found through contact investigation and referrals from prior patient's families and education efforts increased. Referrals from primary care physicians with whom the program has been collaborating continued. The program plans to resume in person group outreach in FY 23-24 and expects increased outreach efforts to lead to more case identification. CDPHND will continue to monitor.

Item 7: Percent of Outpatients with New Complications from Hansen's Disease: Variance reflects overly optimistic projection of having no patients with new complications from Hansen's disease due to less new patients noted during the COVID-19 pandemic. When the pandemic travel restrictions decreased and outreach increased, more cases have been identified and started on treatment. Multibacillary patients tend to have more complications (immune reactions) due to higher bacterial load indicating treatment is working. However, it can increase the percent of patients experiencing these complications. These outpatients are monitored closely by the Department of Health Program program nurses and medical providers.

PART III - PROGRAM TARGET GROUPS

Item 2: Contacts of infectious TB cases: This variance is due to difficulty in advance estimation of TB case contacts. The number varies dramatically depending on how many TB cases, their nature, and the ever changing definition of who qualifies as a "contact." For example, The Centers for Disease Control and Prevention recently changed the criteria for being a contact of a person with active TB on a flight. Contact investigation is now only required for airplane passengers on flights eight hours or longer is limited to passengers seated around the patient rather than the entire plane. The FY 22-23 variance is due to an underestimation of potential contacts, and the FY 23-24 variance is due to an overestimation of potential contacts in the planned target. It is expected that the number of contacts will increase this year due to an expected increase in active cases; however, the increase is not expected

to be as dramatic as the planned targets. CDPHND will continue to monitor and is re-evaluating future projections to account for these changes.

Item 3: This variance is due to an increase in the number of Class B immigrants entering Hawaii. This increase is likely related to overall immigration increases related to the easing of restrictions in the post COVID-19 pandemic world and changing economic and climatic conditions. CDPHND will continue to monitor and is re-evaluating future projections to account for these changes.

Item 4: This variance is due to an error in that the new planned targets were not updated to reflect the new population being evaluated. Past population was women 18-25 (for chlamydia) while the current population is women 15-44 (for syphilis). CDPHND will work to update the planned targets for future reports.

Item 6: Patients on the Kalaupapa Registry: The variance in FY 22-23 is due to the passing of one patient.

PART IV - PROGRAM ACTIVITIES

Item 1: The number of individuals receiving direct services from CDPHND including screening, and evaluation increased in FY 22-23. The variance is thought to be a consequence of public health resources being diverted to COVID-19 pandemic efforts in recent years. Since resources over the past few years were diverted, need was growing, and with resources rebounding in FY 22-23, CDPHND has seen an increased need for services. It is expected that the need for services will level out in FY 23-24. The ability of the CDPHND programs to adjust to the increased need is reflective of the hard work and efficient efforts of the Division. CDPHND will continue to monitor and is re-evaluating future projections to account for projected changes in need.

Item 3: The number of individuals receiving direct services from CDPHND including treatment increased significantly in FY 22-23.

VARIANCE REPORT NARRATIVE FY 2023 AND FY 2024

05 01 01 01
HTH 100

PROGRAM TITLE: COMMUNICABLE DISEASE & PUBLIC HEALTH NURSING

The variance is thought to be a consequence of public health resources being diverted to COVID-19 pandemic efforts in recent years. Now that resources for other communicable diseases and programs is rebounding, the need is increased more than planned. The ability of the CDPHND programs to adjust to the increased need is reflective of the hard work and efficient efforts of the Division. CDPHND will continue to monitor and is re-evaluating future projections to account for projected changes in need.

positive public health outcome. The variance for FY 23-24 reflects the expectation that the PHNs will be able to continue to do more consults for DOE students than previously planned. CDPHND will continue to monitor and is re-evaluating future projections to account for these changes.

Item 4: There was a decrease in outpatient visits and evaluations by providers from planned targets in FY 22-23. This variance is likely due to a combination of changes in scheduling protocols at the Sexually Transmitted Infections Clinic (From walk-in to scheduled) as well as a shift in the Public Health Nursing's (PHN) focus to capacity building in communities. In addition, there have been less community wide vaccination events, which has led to a decrease in numbers of PHN outpatient visits. CDPHND will continue to monitor.

Item 6: This variance is due to an error in planned targets in that they were not updated when the metric was changed from women 18-25 with chlamydia to women 15-44 receiving testing for syphilis. Syphilis testing in women is expected to increase next year. A more accurate planned target for FY 23-24 would be 1000, leading to a variance of 3.7%. CDPHND will work to update the planned targets for future reports.

Item 8: This variance is due to years of level funding for the syringe exchange program that has not kept up with inflation. While numbers of syringes exchanged has slightly decreased since 2021, the number of visits to the syringe exchange program has increased, indicating a continual need for increased services. CDPHND is exploring options for enhancing funding and partnerships to grow this program and hopefully decrease the variance in coming years.

Item 9: The variance is due to the result of the PHN Branch's quality improvement plan for data entry and their ability to complete more consults for the Department of Education (DOE) students. This is a

PROGRAM TITLE: DISEASE OUTBREAK CONTROL
 PROGRAM-ID: HTH-131
 PROGRAM STRUCTURE NO: 05010102

	FISCAL YEAR 2022-23				THREE MONTHS ENDED 09-30-23				NINE MONTHS ENDING 06-30-24			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
PART I: EXPENDITURES & POSITIONS												
RESEARCH & DEVELOPMENT COSTS												
POSITIONS												
EXPENDITURES (\$1,000's)												
OPERATING COSTS												
POSITIONS	45.00	30.00	- 15.00	33	45.00	29.00	- 16.00	36	45.00	41.00	- 4.00	9
EXPENDITURES (\$1000's)	9,702	46,433	+ 36,731	379	2,479	13,852	+ 11,373	459	7,437	41,555	+ 34,118	459
TOTAL COSTS												
POSITIONS	45.00	30.00	- 15.00	33	45.00	29.00	- 16.00	36	45.00	41.00	- 4.00	9
EXPENDITURES (\$1000's)	9,702	46,433	+ 36,731	379	2,479	13,852	+ 11,373	459	7,437	41,555	+ 34,118	459

	FISCAL YEAR 2022-23				FISCAL YEAR 2023-24			
	PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%
PART II: MEASURES OF EFFECTIVENESS								
1. % E.COLI, HAV, ETC. INVESTIGATED 24HRS AFTR RPT	100	100	+ 0	0	100	100	+ 0	0
2. % RPTD FOODBORNE DIS. OUTBREAK W/ ETIOLOGY ID	100	100	+ 0	0	100	100	+ 0	0
3. % CHILDREN AGE 5 YEARS MEETING IMMUNIZATION REQ	90	93	+ 3	3	90	93	+ 3	3
4. % ADOLESCENTS MEETING IMMUNIZATION REQUIREMENTS	80	85	+ 5	6	85	85	+ 0	0
5. % HBV CARRIERS' INFANTS WHO START HBV VAX SERIES	95	100	+ 5	5	95	95	+ 0	0
6. % SKILD NURS FAC W INFECTN CONTRL/RESP SURVEY DONE	80	94	+ 14	18	85	85	+ 0	0
7. % CASES INFECTD W MULTIDRUG-RESIST ORGANSM INVESTG	100	100	+ 0	0	100	100	+ 0	0
8. % LABORATORY REPORT VOLUME RECEIVED THRU ELR	99.98	99.8	- 0.18	0	99.98	99.98	+ 0	0
9. % HLTHCARE PROVIDR/FAC CASE RPT VOL RCVD THRU EICR	2	0	- 2	100	10	NO DATA	- 10	100

PART III: PROGRAM TARGET GROUP								
1. # HAWAII RESIDENTS (1000'S)	1431	1440	+ 9	1	1431	1501	+ 70	5
2. # VISITORS TO HAWAII (1000'S)	9661	8427	- 1234	13	9661	9634	- 27	0
3. # CHILDREN AGE FIVE YEARS (1000'S)	17	17	+ 0	0	17	17	+ 0	0
4. # OF ADOLESCENTS (1000'S)	144	147	+ 3	2	144	146	+ 2	1
5. # OF BIRTHS EXCLUDING MILITARY (100'S)	150	149	- 1	1	150	148	- 2	1
6. # CHILDREN BORN TO HEP B SURF ANTGN+ WOMEN (100'S)	1.5	0.8	- 0.7	47	1.5	0.8	- 0.7	47
7. # OF LICENSED SKILLED NURSING FACILITIES	46	46	+ 0	0	46	46	+ 0	0
8. # OF LICENSED HEALTHCARE FACILITIES	26	26	+ 0	0	26	26	+ 0	0
9. # OF CLINICAL LABORATORIES OPERATING IN HAWAII	38	38	+ 0	0	35	10	- 25	71
10. # OF LICENSED HEALTHCARE PROVIDERS	3300	3027	- 273	8	3350	3102	- 248	7

PART IV: PROGRAM ACTIVITY								
1. # HI RESIDENTS ENTERED, MAINTAINED IN IMMUN REGISTRY	2168946	1340838	- 828108	38	3517345	792628	- 2724717	77
2. # SCH CHILDN SURVEYED FOR IMMUN COVERAGE (1000'S)	17	16.8	- 0.2	1	17	17	+ 0	0
3. # PERINATAL HEPATITIS B INFECTED INFANTS	0	0	+ 0	0	0	0	+ 0	0
4. # INFECTIOUS DISEASE CASES INVESTIGATED	100000	50014	- 49986	50	50000	50000	+ 0	0
5. # INFECTIOUS DISEASE OUTBREAKS IDENTIFIED	500	393	- 107	21	100	400	+ 300	300
6. # HLTHCARE ASSOCIATD INFECTN OUTBREAKS INVESTIGATD	60	160	+ 100	167	50	100	+ 50	100
7. # PROVIDR/FAC RPTG SYND SURV THRU ESS/BIOS PLATFORM	15	17	+ 2	13	21	23	+ 2	10
8. # INFECTIOUS +VAC PREV DIS E-LAB RPTS RCVD(1000'S)	4178.87	2367.8	- 1811.07	43	4095.29	1493.4	- 2601.89	64
9. # RPTABL DISEASE CASE RPTS GENER THRU EICR(1000'S)	118.451	45.415	- 73.036	62	110	68.48	- 41.52	38

VARIANCE REPORT NARRATIVE FY 2023 AND FY 2024

05 01 01 02
HTH 131

PROGRAM TITLE: DISEASE OUTBREAK CONTROL

PART I - EXPENDITURES AND POSITIONS

Programs continue to experience challenges in recruiting, hiring, and retaining qualified individuals given noncompetitive civil service salaries. During the pandemic, temporary exempt positions have sometimes filled more quickly than permanent State positions, leaving us with vacancies in permanent positions despite growing personnel expenditures. Additionally, recruitment for some positions that require redescription has been held up due to delays in completing needed reorganization during pandemic response. Variances in expenditures are primarily attributed to COVID-19 federal funding received in FY 19 and FY 20 with expanded authority to spend through 2026. Expenditures exceed appropriations for FY 23 and FY 24 because of differences in which core recurring federal funds and supplemental emergency funds are dealt with through the state budgeting process.

PART II - MEASURES OF EFFECTIVENESS

Item 6: Demand from skilled nursing facilities for infection control and response assessments was higher than anticipated in FY 23.

Item 9: Once fully implemented, Electronic Initial Case Reporting (eICR) will allow providers to automatically capture and report case information to the Department of Health, enabling rapid investigation of diseases and conditions of concern. While eICR signals are being received from Hawaii healthcare providers, remaining challenges include defining triggers that make a new report worthy of investigation, without creating redundancy in workflows. This measure will be counted as zero until eICRs can be used to trigger investigation actions. Based on current implementation timelines, this should occur midway through FY 24.

PART III - PROGRAM TARGET GROUPS

Item 2: The number of visitors to Hawaii was lower than expected in FY 23, likely reflecting ongoing impacts of the COVID-19 pandemic and post-pandemic recovery.

Item 6: The decline in number of infants born to mothers who are Hepatitis B (HepB) carriers may be attributable, in part, to continuous HepB prevention strategies that have been implemented for many years. Additionally, birth rates have declined nationwide including in Hawaii. The goal is to minimize the number of children born to mothers who are carriers of HepB. Lower planned numbers will reflect more appropriately the reduction in number of HepB infected women who are giving birth.

Item 9: At the height of COVID-19, the number of on-island testing facilities increased to support a surge in testing needs. In FY 23-24, the number of clinical laboratories operating and reporting within Hawaii is decreasing as laboratory-based testing demand has dropped off and self-testing has become more available and popular.

PART IV - PROGRAM ACTIVITIES

Item 1: The 38% (FY 23) and 77% (FY 24) decrease in doses administered and captured in the Hawaii Immunization Registry is mostly due to a drop in COVID-19 vaccinations (COVID-19 vaccines accounted for previous increase). Decreased vaccine uptake could be attributable to multiple factors such as change in public sentiment due to misinformation and disinformation, people less concerned about getting serious outcomes from COVID-19 disease, and fewer COVID-19 providers administering the vaccine with the commercialization of the COVID-19 vaccine.

Item 2: There is an error in the order of magnitude of the number of students surveyed. The current magnitude is in 1000's, but it should be in 10,000's instead. The data has been consistent in the number of students near to the 170,000 planned number. We will need to change moving forward from 1000's to 10,000's.

Items 4 and 5: The Disease Outbreak Control Division (DOCD) has seen large fluctuations in the number of infectious disease cases and outbreaks investigated over the last several years, primarily due to COVID-19. Decreases in COVID-19 laboratory-based testing and

VARIANCE REPORT NARRATIVE FY 2023 AND FY 2024

05 01 01 02
HTH 131

PROGRAM TITLE: DISEASE OUTBREAK CONTROL

reporting as well as changes in COVID-19 investigation practices have led to an overall reduction in total number of infectious disease cases and outbreaks investigated. However, numbers are still well above pre-pandemic levels.

Item 6: The number of healthcare associated infection outbreaks investigated increased dramatically during the COVID-19 pandemic, from less than a dozen on average annually to hundreds during the peak of the pandemic. While we had estimated this number to decrease after vaccines became widely available, factors that led to reported and investigated outbreak numbers being higher than anticipated during FY 23 include: during the national standard was still for long term care facilities to report even a single case as an outbreak; and healthcare facilities have continued to test and identify outbreaks more aggressively than other settings. With consideration to change outbreak reporting thresholds for healthcare facilities in FY 24, the number of outbreaks reported and investigated might decline, but it is hard to predict as COVID-19 incidence continues to fluctuate and a future surge could have a large effect on the estimated number.

Item 7: With the establishment of a Syndromic Surveillance team, including an epidemiologist, data scientists, and a coordinator, DOCD was able to onboard more providers than previously anticipated.

Item 8: Decreases in electronic laboratory reporting (ELR) volume is primarily attributable to decreased demand for COVID-19 testing. However, COVID-19 still contributes to a substantially higher volume of total electronic laboratory reports received on an annual basis post-pandemic compared to pre-pandemic.

Item 9: Actual volume of eICR was lower than anticipated in FY 23 because initial estimates were made when COVID-19 reporting was at its peak. Based on a projection of Q1 data, estimated eICR volume in FY24 will increase as new providers are onboarded and send eICR to the Hawaii State Department of Health.

STATE OF HAWAII

VARIANCE REPORT

REPORT V61

PROGRAM TITLE: EMERGENCY MEDICAL SVCS & INJURY PREV SYS
 PROGRAM-ID: HTH-730
 PROGRAM STRUCTURE NO: 050103

12/5/23

	FISCAL YEAR 2022-23				THREE MONTHS ENDED 09-30-23				NINE MONTHS ENDING 06-30-24			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
PART I: EXPENDITURES & POSITIONS												
RESEARCH & DEVELOPMENT COSTS												
POSITIONS												
EXPENDITURES (\$1,000's)												
OPERATING COSTS												
POSITIONS	10.00	7.00	- 3.00	30	10.00	6.00	- 4.00	40	10.00	10.00	+ 0.00	0
EXPENDITURES (\$1000's)	30,203	142,808	+ 112,605	373	19,127	553	- 18,574	97	57,384	75,958	+ 18,574	32
TOTAL COSTS												
POSITIONS	10.00	7.00	- 3.00	30	10.00	6.00	- 4.00	40	10.00	10.00	+ 0.00	0
EXPENDITURES (\$1000's)	30,203	142,808	+ 112,605	373	19,127	553	- 18,574	97	57,384	75,958	+ 18,574	32

	FISCAL YEAR 2022-23				FISCAL YEAR 2023-24			
	PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%
PART II: MEASURES OF EFFECTIVENESS								
1. % RESPONSES MEETING RESPONSE TIME STD - OAHU	90	78	- 12	13	90	75	- 15	17
2. % RESPONSES MEETING RESPONSE TIME STD - KAUAI	90	95	+ 5	6	90	95	+ 5	6
3. % RESPONSES MEETING RESPONSE TIME STD - HAWAII	90	90	+ 0	0	90	90	+ 0	0
4. % RESPONSES MEETING RESPONSE TIME STD - MAUI	90	87	- 3	3	90	87	- 3	3
5. % INCR IN COMM COAL/PARTN INITIATD & SPPT INJ PREV	0	0	+ 0	0	0	0	+ 0	0
6. % INCR IN NO. OF PERSONS TRAINED IN INJ PREVENTION	0	262	+ 262	0	0	0	+ 0	0
7. % SUICIDES & ATTEMPTD SUICIDES PER 100000 RESIDENT	103	86	- 17	17	104	70	- 34	33
PART III: PROGRAM TARGET GROUP								
1. GENERAL DE FACTO POPULATION (THOUSANDS)	1622	1540	- 82	5	1629	1526	- 103	6
2. # OF HIGH RISK CARDIAC CASES	5521	5653	+ 132	2	5627	5536	- 91	2
3. # OF HIGH RISK TRAUMA CASES	4543	4785	+ 242	5	4669	4971	+ 302	6
4. # OF HIGH RISK PEDIATRIC CASES	408	399	- 9	2	399	387	- 12	3
5. # OF CARDIOPULMONARY ARREST CASES	1136	1230	+ 94	8	1149	1231	+ 82	7
6. # OF LICENSED GROUND AMBULANCE SERVICE PROVIDERS	8	8	+ 0	0	8	8	+ 0	0
7. # OF LICENSED AIR AMBULANCE SERVICE PROVIDERS	2	2	+ 0	0	2	2	+ 0	0
8. # OF YOUTHS UNDER 24 AND SENIORS 65 YRS AND OLDER	680982	702840	+ 21858	3	684800	710312	+ 25512	4
PART IV: PROGRAM ACTIVITY								
1. ADM/ENFORCING STATE EMS RULES & REGS (STAFF-DAYS)	260	260	+ 0	0	260	260	+ 0	0
2. ADM/MAINT EMS COMM SYSTEM (% TIME SYSTEM OPERATNL)	100	100	+ 0	0	100	100	+ 0	0
3. ADM/MAINT EMS/INJ PREV DATA COLL/EVAL (STAFF-DAYS)	260	260	+ 0	0	260	260	+ 0	0
4. # OF RESPONSES TO EMERGENCY AMBULANCE CALLS	149500	169088	+ 19588	13	151409	170914	+ 19505	13
5. # OF PATIENTS BILLED FOR EMERGENCY AMBULANCE SVC	87835	96607	+ 8772	10	88474	93408	+ 4934	6
6. % OF AMBULANCE SERVICE REVENUES COLLECTED	67	65	- 2	3	67	67	+ 0	0
7. ADM/MAINT EMS QUAL ASSUR & QUAL IMPRV PRG (ST-DYS)	312	312	+ 0	0	312	312	+ 0	0
8. ADM/MAINT STATE HTH EMG PREP PLAN/EXR PARTC (ST-D)	1	1	+ 0	0	1	1	+ 0	0
9. # OF PEOPLE TRAINED IN INJURY PREVENTION	1800	6507	+ 4707	262	1800	1800	+ 0	0
10. # COMM COAL/TSKFRC/PRTRNSHP INIT/SUPPT IN INJ PREV	68	66	- 2	3	68	68	+ 0	0

VARIANCE REPORT NARRATIVE FY 2023 AND FY 2024

05 01 03
HTH 730

PROGRAM TITLE: EMERGENCY MEDICAL SVCS & INJURY PREV SYS

PART I - EXPENDITURES AND POSITIONS

Permanent position vacancies as of June 30, 2023, are the Public Health Educator V (Position No. (PN) 41807), Public Health Educator IV (PN 121173), and Office Assistant (OA) III (PN 24843) and due to retirement as of April 1, 2022, the Administrative Specialist IV (PN 27391). The program continues to actively recruit for these vacancies. The variance in FY 23 is due to reduction of operational funds replaced by use of American Rescue Plan Act (ARPA) funds to make up the final cost of Statewide ambulance services that is made up of ARPA, State Emergency Medical Services and Injury Prevention System Branch (EMSIPSB) operational funds, and special funds that equal the actual cost of the four counties (Honolulu, Maui, Kauai, and Hawaii) ambulance services contracts that are overseen and administered by the EMSIPSB. The final amount in expenditures was due to addressing Collective Bargaining Agreements and Cost of Living Adjustment to these ambulance contracts and was the main reason between the budgeted and actual cost that contributed to the 373% difference. The difference after the 1st quarter was due to a large sum of contract encumbrances that were actualized in the first quarter and not the second quarter as anticipated. The adjustment projected in the nine months ending June 30, 2024, is due to cost-of-living adjustments and collective bargaining for emergency contracts anticipated.

PART II - MEASURES OF EFFECTIVENESS

Item 1: The percentage of responses meeting the response time for Oahu has dropped from the planned 90 to 78 (13%). This has many contributing factors including a larger amount of population on Oahu, versus the outer islands. Simply put, there is a significant correlation between call volume and response times, most pronounced for the City & County of Honolulu. The number of calls goes up over time, but without a commensurate increase in resources (Emergency Medical Services (EMS) stations, rigs, personnel), this results in lowered compliance with response time standards.

Item 7: The variance is due to the pilot project initiated under suicide

prevention that offered an online course to train Department of Education staff to recognize signs of "at-risk" students. This online course has been successful in tracking those that have successfully completed training modules and providing statistical information to determine the number of individuals who have been trained. Due to the success of this training application, the Injury Prevention System is looking to expand access to this module via the Emergency Medical Services and Injury Prevention System Branch website. National media attention and the above efforts mentioned have brought more awareness to mental health wellness that people are seeking assistance, and with the reduction in numbers that this has assisted in reduction of suicides attempts.

PART III - PROGRAM TARGET GROUPS

No significant variances.

PART IV - PROGRAM ACTIVITIES

Item 4: 911 ambulance responses increased over the planned volume based on historical trends. FY 23 was during the tail end of the COVID-19 pandemic. The pandemic dramatically increased the burden on hospitals and EMS. FY 23 also ushered in the time where masks mandates were relaxed, increasing COVID cases, flu cases and other illnesses that were decreased in numbers prior year, which is expected to continue in FY 24.

Item 5: The increase in the billing is due to the second OA III position being temporarily filled and having two clerks managing the program's billing process.

Item 9. The increase in the number of individuals trained coincides with Part II, Item 7, and is due to the online training module that assisted lay persons to identify individuals "at-risk" and how to approach a situation to seek out professional assistance to prevent suicide and its ability to track and provide a report on the number of individuals who had successfully completed training with a self-paced test on information presented. The program is seeking to purchase additional licenses to expand the learning tool.

PROGRAM TITLE: FAMILY HEALTH SERVICES
 PROGRAM-ID: HTH-560
 PROGRAM STRUCTURE NO: 050104

	FISCAL YEAR 2022-23				THREE MONTHS ENDED 09-30-23				NINE MONTHS ENDING 06-30-24						
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%			
PART I: EXPENDITURES & POSITIONS															
RESEARCH & DEVELOPMENT COSTS															
POSITIONS															
EXPENDITURES (\$1,000's)															
OPERATING COSTS															
POSITIONS	236.50	174.50	-	62.00	26	233.50	168.50	-	65.00	28	233.50	179.00	-	54.50	23
EXPENDITURES (\$1000's)	102,940	104,337	+	1,397	1	60,285	60,285	+	0	0	42,898	42,898	+	0	0
TOTAL COSTS															
POSITIONS	236.50	174.50	-	62.00	26	233.50	168.50	-	65.00	28	233.50	179.00	-	54.50	23
EXPENDITURES (\$1000's)	102,940	104,337	+	1,397	1	60,285	60,285	+	0	0	42,898	42,898	+	0	0

	FISCAL YEAR 2022-23				FISCAL YEAR 2023-24					
	PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%		
PART II: MEASURES OF EFFECTIVENESS										
1. % PRETERM BIRTHS	NO DATA	10.2	-	-10.2	0	NO DATA	10.2	-	-10.2	0
2. % UNINSURED INDV REC SUBSIDIZED PRIMARY CARE - POS	25.85	14.34	-	11.51	45	25.85	14.34	-	11.51	45
3. % CHILDREN (0-21) W/SP HTH CARE NEEDS W/MEDICAL HM	95	99	+	4	4	95	99	+	4	4
4. % LIVE BIRTHS SCRND FOR METAB DISORDERS & HEMOGLOB	99	99.5	+	0.5	1	99	99	+	0	0
5. % WIC ENROLLD WI&C TO 5 YRS OLD PARTICIPATD IN PRG	96	97.9	+	1.9	2	97	95	-	2	2
6. % WIC ENROLLED WOMEN WHO INITIATE BREASTFEEDING	87	89.3	+	2.3	3	88	90	+	2	2
7. % PRENATAL SMOKING	5	4.6	-	0.4	8	5	4.6	-	0.4	8
8. % CHILDN 0-3 YRS W/ DEV DELAY BIO RISK RCV EI SVCS	3.05	3.1	+	0.05	2	3.05	3.2	+	0.15	5
9. % CHILDN ENROLLED IN HOME VISITG PROG W/ MEDI HOME	92	94	+	2	2	92	94	+	2	2

PART III: PROGRAM TARGET GROUP										
1. # LIVE BIRTHS	NO DATA	15354	-	-15354	0	NO DATA	15354	-	-15354	0
2. # UNINSURED INDIVIDUALS	54462	48833	-	5629	10	54462	48833	-	5629	10
3. # CHILDREN WITH SPECIAL HEALTH NEEDS	40000	40000	+	0	0	40000	40000	+	0	0
4. # LIVE BIRTHS (SCREENED FOR METABOLIC DISORDERS)	16000	15110	-	890	6	16000	16000	+	0	0
5. # WIC ENROLLED WI&C UP TO 5 YRS OLD	42000	42292	+	292	1	42000	42792	+	792	2
6. # WIC ENROLLED PREGNANT & POST-PARTUM WOMEN	12000	11840	-	160	1	12000	12340	+	340	3
7. # PREGNANT WOMEN	10	18331	+	18321	183210	10	18331	+	18321	183210
8. # CHILDN 0-3 YRS REFERD FOR EARLY INTERVENTN SVCS	3358	3286	-	72	2	3370	3550	+	180	5
9. # CHILDREN ENROLLED IN A HOME VISITING PROGRAM	700	525	-	175	25	737	525	-	212	29

PART IV: PROGRAM ACTIVITY										
1. # PREG WOMEN SRVD BY WIC & PERINATAL SUP POS CONTR	5800	6250	+	450	8	5800	6250	+	450	8
2. # UNINSURED INDV RCVDOH SUBSIDIZED PRIM CARE POS	14076	7003	-	7073	50	14076	7003	-	7073	50
3. # CSHN 0-21/FAMILY/PROVIDER GIVEN HTH INFO BY CSHN	1000	106476	+	105476	10548	1000	102700	+	101700	10170
4. # LIVE BIRTH RCV FU FOR METAB DISORDERS & HEMOGLOB	500	591	+	91	18	500	500	+	0	0
5. # WIC WI&C TO 5 YRS OLD ISSUED WIC FOOD BENEFITS	40000	41392	+	1392	3	40000	41722	+	1722	4
6. # WIC PREGNANT/POSTPARTUM RCVG BREASTFDG CONTACTS	11000	19414	+	8414	76	11000	20414	+	9414	86
7. # PREGNANT WOMEN SERVED BY WIC 7 PERINATAL SUP POS	5800	6250	+	450	8	5800	6250	+	450	8
8. # CHILDN 0-3 YRS W/ DEV DELAYS BIO RISK RCVDF IPSP	1898	1805	-	93	5	1950	1850	-	100	5
9. # CHILDN ENROLLED IN HOME VISTG PRG W/MEDICAL HOME	644	496	-	148	23	678	496	-	182	27

VARIANCE REPORT NARRATIVE FY 2023 AND FY 2024

05 01 04
HTH 560

PROGRAM TITLE: FAMILY HEALTH SERVICES

PART I - EXPENDITURES AND POSITIONS

The variance in position counts for FY 23 and for the first quarter of FY 24 is primarily due to the difficulties in filling vacant positions since the beginning of the COVID-19 pandemic. This is consistent with State and national trends. By the end of FY 24, the Family Health Services Division (FHSD) anticipates reducing vacancies by filling multiple positions currently in recruitment, but the anticipated vacancy rate will continue to exceed 10% moving into FY 25.

There was a 1.36%, or \$1,397,000 variance in FY 23 expenditures primarily attributed to a small percentage of expenditures being recorded outside of the State fiscal year.

PART II - MEASURES OF EFFECTIVENESS

Item 1: The percentage of preterm births data was omitted by mistake in 2022. The data has been provided for the 2023 report. Historically FHSD's Title X program provided this data but the measure is percentage of preterm births, not percentage of preterm births among pregnant women served by the Title X program. FHSD is reporting the percentage of preterm births for the whole State. The data comes from the National Vital Statistics System.

Item 2: Percentage is based on Part IV Item 2 divided by Part III Item 2. The variance is due to fewer uninsured individuals seeking primary care services in FY 23.

PART III - PROGRAM TARGET GROUPS

Item 1: The data for the percentage of live births was omitted by mistake in 2022. The data has been provided for the 2023 report. Historically FHSD's Title X program provided this data but the measure is percentage of live births, not percentage of live births among pregnant women served by the Title X program. The data is from 2022, the latest available data,

sourced by the Department of Health's birth records.

Item 2: The response is from 2022 data as 2023 data is not available yet. The variance is due to less known uninsured individuals which may be attributed to the Affordable Care Act which has decreased the number of uninsured Americans.

Item 7: The planned target for 2022 was an error, but the number cannot be corrected; thus, remains in the report. The actual target population numbers of pregnant women in 2021 (latest available data for births, fetal deaths, and induced terminations of pregnancy) is accurate. When permitted, the planned targets will be revised.

Item 9: Contracted home visiting providers have faced an acute shortage of staff to provide services to families. This is consistent with State and national trends in both home visiting and the larger early childhood community. In addition to increased vacancies, the time to hire replacements has increased substantially, leaving providers understaffed for significant periods of time. The program did not anticipate such a prolonged staff shortage, and the lack of staff on hand significantly reduced the number of children who could be served in FY 23.

PART IV - PROGRAM ACTIVITIES

Item 2: The number of uninsured individuals receiving subsidized primary care through contracted services was lower in FY 23 and FY 24 due to less people seeking services due to fears of COVID-19. Additionally, the Affordable Care Act has decreased the number of uninsured Americans which means that fewer uninsured are seeking subsidized services.

Item 3: The tremendous increase is due to the Children and Youth with Special Health Needs Program (CYSHNP) - which includes the Hawaii Childhood Lead Poisoning Prevention Program (HICLPPP) exceeding expectations with an outreach and media campaign that expanded to over 103,952 contacts, which contributed to this large increased capacity and variance. This number of families targeted helps bring awareness to

VARIANCE REPORT NARRATIVE FY 2023 AND FY 2024

05 01 04
HTH 560

PROGRAM TITLE: FAMILY HEALTH SERVICES

communities by means of print, television, and social media outreach. This has provided more outreach to communities where increased access to care is needed.

Item 4: This increase in follow-up for metabolic disorders is attributed to the updated newborn screening panels. The screening for additional disorders resulted in an increase in number of infants needing follow-up for metabolic disorders. The Newborn Metabolic Screening program is responsible to ensure all the babies born are provided proper follow up and care.

Item 6: Activity and reporting mechanisms have been revised to better reflect actual measurement of program activities. The high variance is due to the previous planned number being too conservative.

Item 9: Contracted home visiting providers have faced an acute shortage of staff to provide services to families. This is consistent with State and national trends in both home visiting and the larger early childhood community. In addition to increased vacancies, the time to hire replacements has increased substantially, leaving providers understaffed for significant periods of time. The program did not anticipate such a prolonged staff shortage, and the lack of staff on hand significantly reduced the number of children who could be served in FY 23. The FY 24 numbers are anticipated to be similar to FY 23 due to the current hiring challenges.

PROGRAM TITLE: CHRONIC DISEASE PREVENTION & HEALTH PROMOTION
 PROGRAM-ID: HTH-590
 PROGRAM STRUCTURE NO: 050105

	FISCAL YEAR 2022-23				THREE MONTHS ENDED 09-30-23				NINE MONTHS ENDING 06-30-24			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
PART I: EXPENDITURES & POSITIONS												
RESEARCH & DEVELOPMENT COSTS												
POSITIONS												
EXPENDITURES (\$1,000's)												
OPERATING COSTS												
POSITIONS	49.00	31.00	- 18.00	37	51.00	30.00	- 21.00	41	51.00	51.00	+ 0.00	0
EXPENDITURES (\$1000's)	63,250	43,813	- 19,437	31	15,893	586	- 15,307	96	47,680	62,987	+ 15,307	32
TOTAL COSTS												
POSITIONS	49.00	31.00	- 18.00	37	51.00	30.00	- 21.00	41	51.00	51.00	+ 0.00	0
EXPENDITURES (\$1000's)	63,250	43,813	- 19,437	31	15,893	586	- 15,307	96	47,680	62,987	+ 15,307	32

	FISCAL YEAR 2022-23				FISCAL YEAR 2023-24			
	PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%
PART II: MEASURES OF EFFECTIVENESS								
1. % BABIES EXCLUSIVELY BREASTFED THROUGH 6 MO.	28	26.6	- 1.4	5	28.3	28.3	+ 0	0
2. % YOUTH MEETING PHYSICAL ACTIVITY RECOMMENDATIONS	15.0	18.3	+ 3.3	22	15.2	15.2	+ 0	0
3. % YOUTH MEETING NUTRITION RECOMMENDATIONS	14	13.8	- 0.2	1	14.2	14.2	+ 0	0
4. % YOUTH USING TOBACCO PRODUCTS	25.9	11.9	- 14	54	25.7	25.7	+ 0	0
5. % ADULTS RCV'D RECOMMENDED DIABETES SCREENING	62.0	53.2	- 8.8	14	62.6	62.6	+ 0	0
6. % ADULTS RCV'D RECOMMENDED COLORECTAL CANCER SCREE	77.9	77.1	- 0.8	1	78.6	78.6	+ 0	0
7. % WOMEN RCV'D RECOMMENDED BREAST CANCER SCREENING	84.5	83.7	- 0.8	1	85.4	85.4	+ 0	0
8. % ADULTS WHOSE HYPERTENSION IS UNDER CONTROL	56.5	57.5	+ 1	2	57.0	57	+ 0	0
9. % ADULTS WHOSE DIABETES IS UNDER CONTROL	63.2	64.3	+ 1.1	2	63.9	63.9	+ 0	0
10. %EMERGENCY DEPT VISITS FOR ASTHMA (PER 10,000 PPL)	19.2	36.1	+ 16.9	88	19.0	19	+ 0	0

PART III: PROGRAM TARGET GROUP								
1. TOTAL # HAWAII CHILDREN (0-17) RESIDENTS	311481	297326	- 14155	5	318563	318563	+ 0	0
2. TOTAL # HAWAII ADULT (18-64+) RESIDENTS	859623	848505	- 11118	1	864396	864396	+ 0	0
3. TOTAL # HAWAII ADULT (65+) RESIDENTS	294839	294365	- 474	0	307374	307374	+ 0	0
4. TOTAL # LOW-INCOME RESIDENTS IN HAWAII	305807	300752	- 5055	2	310895	310895	+ 0	0
5. # HAWAII RESIDENTS WHO SPEAK ENGLISH < VERY WELL	152423	139563	- 12860	8	154514	154514	+ 0	0
6. # NATIVE HAWAIIAN, FILIPINO, OTHER PACIFIC ISLANDR	439850	473148	+ 33298	8	446445	446445	+ 0	0
7. # HAWAII SEXUAL OR GENDER MINORITY ADULTS	68113	77715	+ 9602	14	69134	69134	+ 0	0
8. # HAWAII YOUTH WITH OVERWEIGHT OR OBESITY	20116	18483	- 1633	8	20365	20365	+ 0	0
9. # HAWAII ADULTS WITH OVERWEIGHT OR OBESITY	664035	689151	+ 25116	4	667182	667182	+ 0	0
10. # HAWAII ADULTS WITH 1 OR MORE CHRONIC CONDITIONS	700608	689151	- 11457	2	703929	703929	+ 0	0

PART IV: PROGRAM ACTIVITY								
1. # YOUTH & ADULTS REACHED THRU SOCIAL-MARKETING CAM	610216	603413	- 6803	1	619620	619620	+ 0	0
2. # COALITIONS SUPPORTED	75	80	+ 5	7	75	75	+ 0	0
3. % DOE SCHOOLS MEETING WELLNESS GUIDELINES	82.4	81.6	- 0.8	1	83.2	83	- 0.2	0
4. # WEBSITE VISITS TO HHDW, HHM, START LIVING HEALTH	135000	159675	+ 24675	18	135000	135000	+ 0	0
5. # YOUTH & ADULTS REACHED THROUGH TOBACCO CESSATION	965	962	- 3	0	974	974	+ 0	0
6. # TRANGS 4 COMMUNITY PARTNERS ON CHRONIC DIS PRVTN	600	247	- 353	59	600	600	+ 0	0
7. # PARTICIPANTS REACHED THRU CHRONIC DIS. PRVTN TRN	4600	3990	- 610	13	4600	4600	+ 0	0
8. # HEALTH SYSTEM INITIATIVES SUPPORTED	60	64	+ 4	7	60	60	+ 0	0
9. # BUILT ENVIRONMENT INITIATIVES SUPPORTED	40	38	- 2	5	40	40	+ 0	0
10. # BUILT ENVIRONMENT INITIATIVES SUPPORTED	250	238	- 12	5	250	250	+ 0	0

VARIANCE REPORT NARRATIVE FY 2023 AND FY 2024

05 01 05
HTH 590

PROGRAM TITLE: CHRONIC DISEASE PREVENTION & HEALTH PROMOTION

PART I - EXPENDITURES AND POSITIONS

FY 22-23 Expenditure/31% variance: P-fund S-225 Preventive Health and Health Services Block Grant appropriation \$6,829,854 belongs to HTH 907, causing variance error of 99%; U-fund appropriation ceiling \$1,188,304, expenditure \$887,971 so variance was 25% from the Department of Human Services Supplemental Nutrition Assistance Program Education (SNAP-Ed) contract & payment delays; B-fund ceiling is \$48,706,356, S335 tobacco settlement FY 23 revenue was \$40,512,842 and expenditure \$40,515,480, and S337 organ & tissue donor special fund expenditure was \$80,000, so variance was 17%; A-fund appropriation \$6,536,328 had 10% restriction, variance with restriction was 5%, no restriction variance is 15%.

FY 23-24 Quarter 1 Expenditure/96% variance: B-fund S-335 happens in Q4; P-fund S-225 assignment error; A-fund delays in contracting due to conflicting priorities and vacancies.

FY 23-24 Quarters 2-3 Expenditure/32% variance: P-fund S-225 assignment error resulting in 99% variance; B-fund revenue anticipated to be below appropriation ceiling.

Position variance in FY 23 and FY 24 is due to employees returning to the continent, recruited to higher paying positions, retirement, and reinstatement of 3 positions into the budget that were de-funded. Recruitment for civil service positions is challenging due to significant delays in receiving quality certification lists with interested and responsive candidates; and interested applicants having difficulty applying because civil service jobs are listed broadly by class descriptions and the job openings are not constantly posted but delisted for long intervals on <https://www.governmentjobs.com/careers/hawaii>. The program is also relying on other recruiting avenues, such as job posting websites, contracting for hire, and job fairs. Six (6) positions are filled with 89-day hires awaiting to be on the cert lists, and two (2) are pending reorganization. Positions are also being downgraded to recruit and train people up.

PART II - MEASURES OF EFFECTIVENESS

Item 2: This increase may have been due in part to street closures and low levels of traffic during the COVID-19 pandemic that allowed youth to safely be active outside.

Item 4: Percentage of youth using tobacco products dropped 54% in FY 23. Contributors to decrease may be improved prevention efforts, and effect of pandemic because youth were not able to socialize in-person with peers until schools reopened in 2021, and a Youth Risk Behavior Survey (YRBS) was conducted in the fall semester instead of traditional spring period, so cohorts were younger.

Item 5: Percentage of adults receiving recommended diabetes screening decreased due to change in national recommendations that lowered the age group to adults 35 to 70 years, so data cannot be trended.

Item 10: Per 10,000 people emergency department visits for asthma increased in part since asthma program is no longer funded through a federal asthma cooperative agreement and does not receive general funds. Number expected to decrease, in part with asthma education campaign with partners and training curriculum updates through temporary COVID-19 grant funding.

PART III - PROGRAM TARGET GROUPS

Item 7: Number of Hawaii sexual or gender minority adults is calculated from responses to a series of questions in the 2021 Behavioral Risk Factors Surveillance System and extrapolated from Census report of resident populations.

PART IV - PROGRAM ACTIVITIES

Item 4: Number of website visits to Hawaii Health Data Warehouse, Hawaii Health Matters (HHM), Start Living Healthy, and Healthy Hawaii Strategic Plan (HHSP), especially for HHM, <https://www.hawaiihealthmatters.org/> and the Healthy Hawaii Strategic Plan 2030, <https://hhsp.hawaii.gov/>. The HHM had increased featured

VARIANCE REPORT NARRATIVE FY 2023 AND FY 2024

05 01 05
HTH 590

PROGRAM TITLE: CHRONIC DISEASE PREVENTION & HEALTH PROMOTION

contents that drew more users, and the HHSP has been convening partnerships across program areas to prepare for the Fall 2023 HHSP Summit open to all stakeholders.

Item 6: Number of trainings for community partners in chronic disease prevention decreased due to reductions by the program to the contract that funded Department of Education (DOE) health/physical education resource teachers and trainings, and reductions to tobacco prevention and education trainings with reduced program capacity due to two retirements and delay in postings of vacant positions outside of program control.

Item 7: Number of participants reached through chronic disease prevention trainings decreased due to significantly fewer trainings offered by DOE and reduced trainings offered for tobacco prevention stakeholders.

PROGRAM TITLE: HEALTH RESOURCES ADMINISTRATION
 PROGRAM-ID: HTH-595
 PROGRAM STRUCTURE NO: 050106

	FISCAL YEAR 2022-23				THREE MONTHS ENDED 09-30-23				NINE MONTHS ENDING 06-30-24						
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%			
PART I: EXPENDITURES & POSITIONS															
RESEARCH & DEVELOPMENT COSTS															
POSITIONS															
EXPENDITURES (\$1,000's)															
OPERATING COSTS															
POSITIONS	22.00	20.00	-	2.00	9	2.00	2.00	+	0.00	0	2.00	2.00	+	0.00	0
EXPENDITURES (\$1000's)	3,456	3,100	-	356	10	40	40	+	0	0	241	210	-	31	13
TOTAL COSTS															
POSITIONS	22.00	20.00	-	2.00	9	2.00	2.00	+	0.00	0	2.00	2.00	+	0.00	0
EXPENDITURES (\$1000's)	3,456	3,100	-	356	10	40	40	+	0	0	241	210	-	31	13
					FISCAL YEAR 2022-23				FISCAL YEAR 2023-24						
					PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%			
PART II: MEASURES OF EFFECTIVENESS															
1. % MOE HRA PROG SHOWING BENEFICIAL CHGS (PL VS ACT)					85	71	-	14	16	85	84	-	1	1	
PART III: PROGRAM TARGET GROUP															
1. PERSONNEL IN HEALTH RESOURCES ADMINISTRATION					801	801	+	0	0	801	800	-	1	0	

VARIANCE REPORT NARRATIVE FY 2023 AND FY 2024

05 01 06
HTH 595

PROGRAM TITLE: HEALTH RESOURCES ADMINISTRATION

PART I - EXPENDITURES AND POSITIONS

FY 23 variance is primarily attributed to challenges in establishing, recruiting, and filling positions.

FY 24 variance is attributed to residual funds relating to HTH 596 that are requested to be transferred to HTH 596 in the FY 25 Supplemental Budget.

PART II - MEASURES OF EFFECTIVENESS

Item 1: Most outcomes were as planned and the Administration continues to strive for best practices and outcomes.

PART III - PROGRAM TARGET GROUPS

No significant variances.

PART IV - PROGRAM ACTIVITIES

None.

PROGRAM TITLE: OFFICE OF MEDICAL CANNABIS CNTRL & REGULATN
 PROGRAM-ID: HTH-596
 PROGRAM STRUCTURE NO: 050107

	FISCAL YEAR 2022-23				THREE MONTHS ENDED 09-30-23				NINE MONTHS ENDING 06-30-24			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
PART I: EXPENDITURES & POSITIONS												
RESEARCH & DEVELOPMENT COSTS												
POSITIONS												
EXPENDITURES (\$1,000's)												
OPERATING COSTS												
POSITIONS					20.00	18.00	- 2.00	10	20.00	20.00	+ 0.00	0
EXPENDITURES (\$1000's)					636	549	- 87	14	3,139	3,226	+ 87	3
TOTAL COSTS												
POSITIONS					20.00	18.00	- 2.00	10	20.00	20.00	+ 0.00	0
EXPENDITURES (\$1000's)					636	549	- 87	14	3,139	3,226	+ 87	3

	FISCAL YEAR 2022-23				FISCAL YEAR 2023-24			
	PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%
PART II: MEASURES OF EFFECTIVENESS								
1. AVG TURNAROUND TIME TO ISSUE MEDICAL CANNABIS CARD	5	3	- 2	40	5	3	- 2	40
2. % MED CANNABIS CARDS ISSUED TO PATIENTS PRIORT DEB	3	5	+ 2	67	3	5	+ 2	67
3. % DISPENSARIES INSPECTED AT LEAST QUARTERLY	100	100	+ 0	0	100	100	+ 0	0
4. % DISPENSARIES REMAING IN COMPLIANCE HAR 11-850	100	100	+ 0	0	100	100	+ 0	0
5. % OF DISPENSARY LICENSES RENEWED	100	100	+ 0	0	100	100	+ 0	0
PART III: PROGRAM TARGET GROUP								
1. ALL IN-STATE MEDICAL CANNABIS REGISTRY APPLICANTS	34500	31886	- 2614	8	34500	32500	- 2000	6
2. INDV W/ PRIORITY DEBIL MED CONDIT APPLYG TO REG	2020	1824	- 196	10	2020	1800	- 220	11
3. LICENSED MEDICAL CANNABIS DISPENSARIES	8	8	+ 0	0	8	8	+ 0	0
PART IV: PROGRAM ACTIVITY								
1. # NEW IN-STATE PATIENT APPLICATIONS PROCESSED	8400	6976	- 1424	17	8400	6500	- 1900	23
2. # OUT-OF-STATE PATIENT APPLICATIONS PROCESSED	3200	3170	- 30	1	3200	3200	+ 0	0
3. # IN-STATE PATIENT RENEWALS PROCESSED	17250	14077	- 3173	18	17250	15000	- 2250	13
4. # CERTIFYING MEDICAL PROVIDERS REGISTERED	360	420	+ 60	17	360	420	+ 60	17
5. # LAW ENFORCEMT VERIFIED VALID 329 REGISTRATN PERF	125	155	+ 30	24	125	155	+ 30	24
6. # DISPENSARY FACILITY INSPECTIONS CONDUCTED	180	201	+ 21	12	180	210	+ 30	17
7. # DISPENSARY LICENSES ISSUED & RENEWED	8	8	+ 0	0	8	8	+ 0	0
8. # TESTING FACILITY CERTIFICATIONS ISSUED & RENEWED	4	3	- 1	25	4	2	- 2	50
9. # CRIMINAL HISTORY BACKGROUND CHECKS PERFORMED	2000	497	- 1503	75	2000	600	- 1400	70
10. # VISITS TO THE DOH MEDICAL CANNABIS WEBSITE	87000	64420	- 22580	26	87000	64000	- 23000	26

VARIANCE REPORT NARRATIVE FY 2023 AND FY 2024

05 01 07
HTH 596

PROGRAM TITLE: OFFICE OF MEDICAL CANNABIS CNTRL & REGULATN

PART I - EXPENDITURES AND POSITIONS

The FY 24 full-time equivalent and expenditure variances are primarily attributed to challenges in establishing, recruiting, and filling positions.

PART II - MEASURES OF EFFECTIVENESS

Item 1: The variance is due to ongoing enhancements made to the Registry program aimed at streamlining application processing and reducing turnaround times.

Item 2: The variance is due to an increase in the number of patients applying with a diagnosis of malignant neoplasm as well as a slight decrease in the number of registered patients.

PART III - PROGRAM TARGET GROUPS

Item 2: The variance is due to an overall decrease in the number of registered patients resulting from registration system glitches. Transition to a replacement system is planned.

PART IV - PROGRAM ACTIVITIES

Item 1: The variance is due to an overall decrease in the number of registered patients resulting from registration system glitches. Transition to a replacement system is planned.

Item 3: The variance is due to an overall decrease in the number of registered patients resulting from registration system glitches. Transition to a replacement system is planned.

Item 4: The variance is due to an increase in medical providers willing to certify patients for medical cannabis registrations.

Item 5: The variance is due to higher than anticipated subject verification

and grow site verification requests from law enforcement agencies.

Item 6: The number of dispensary inspections increased because of statutory amendments allowing for the expansion of dispensary facilities from two to four.

Item 8: The variance is due to two testing facilities closing.

Item 9: The decrease in the number of background checks performed is due to the stability of the workforce in the Medical Cannabis industry in Hawaii. There appears to be a steady work force in place for the dispensaries, which in turn cuts down on the need for new hires and new criminal background checks.

Item 10: The planned number of visits to the Department of Health medical cannabis website was overestimated.

	FISCAL YEAR 2022-23				THREE MONTHS ENDED 09-30-23				NINE MONTHS ENDING 06-30-24			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
PART I: EXPENDITURES & POSITIONS												
RESEARCH & DEVELOPMENT COSTS												
POSITIONS												
EXPENDITURES (\$1,000's)												
OPERATING COSTS												
POSITIONS	2,835.25	3,354.79	+ 519.54	18	2,835.25	3,357.09	+ 521.84	18	2,835.25	3,374.09	+ 538.84	19
EXPENDITURES (\$1000's)	729,406	716,742	- 12,664	2	208,338	187,837	- 20,501	10	629,570	618,120	- 11,450	2
TOTAL COSTS												
POSITIONS	2,835.25	3,354.79	+ 519.54	18	2,835.25	3,357.09	+ 521.84	18	2,835.25	3,374.09	+ 538.84	19
EXPENDITURES (\$1000's)	729,406	716,742	- 12,664	2	208,338	187,837	- 20,501	10	629,570	618,120	- 11,450	2

	FISCAL YEAR 2022-23				FISCAL YEAR 2023-24			
	PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%
PART II: MEASURES OF EFFECTIVENESS								
1. OCCUPANCY RATE - ACUTE CARE	54.66	73.61	+ 18.95	35	55	74.36	+ 19.36	35
2. OCCUPANCY RATE - LONG-TERM CARE	81.07	79.00	- 2.07	3	81	88.00	+ 7	9
3. AVERAGE LENGTH OF STAY - ACUTE CARE	5.6	8.7	+ 3.1	55	5.6	7.5	+ 1.9	34
4. AVERAGE LENGTH OF STAY - LONG TERM CARE	447.9	374.70	- 73.2	16	447.9	400.1	- 47.8	11

VARIANCE REPORT NARRATIVE FY 2023 AND FY 2024

PROGRAM TITLE: HOSPITAL CARE

05 02

PART I - EXPENDITURES AND POSITIONS

Specific variances are discussed in detail in the lowest level program narratives.

PART II - MEASURES OF EFFECTIVENESS

Items 1, 3, and 4: The variances are due to the COVID-19 pandemic. During the height of COVID-19, patients deferred care and now patients are starting to schedule procedures that were postponed.

VARIANCE REPORT

PROGRAM TITLE: HAWAII HEALTH SYSTEMS CORP - CORP OFFICE
 PROGRAM-ID: HTH-210
 PROGRAM STRUCTURE NO: 050201

	FISCAL YEAR 2022-23				THREE MONTHS ENDED 09-30-23				NINE MONTHS ENDING 06-30-24			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
PART I: EXPENDITURES & POSITIONS												
RESEARCH & DEVELOPMENT COSTS												
POSITIONS												
EXPENDITURES (\$1,000's)												
OPERATING COSTS												
POSITIONS	54.50	77.75	+ 23.25	43	54.50	75.75	+ 21.25	39	54.50	75.75	+ 21.25	39
EXPENDITURES (\$1000's)	17,509	16,454	- 1,055	6	4,379	3,921	- 458	10	13,130	13,588	+ 458	3
TOTAL COSTS												
POSITIONS	54.50	77.75	+ 23.25	43	54.50	75.75	+ 21.25	39	54.50	75.75	+ 21.25	39
EXPENDITURES (\$1000's)	17,509	16,454	- 1,055	6	4,379	3,921	- 458	10	13,130	13,588	+ 458	3
					FISCAL YEAR 2022-23				FISCAL YEAR 2023-24			
	PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%
PART II: MEASURES OF EFFECTIVENESS												
1. BOARD APPROVED OPERATING EXPENSE BUDGET TO ACTUAL		17092	16454	- 638	4		17022	17509	+ 487	3		

VARIANCE REPORT NARRATIVE FY 2023 AND FY 2024

05 02 02
HTH 211

PROGRAM TITLE: KAHUKU HOSPITAL

PART I - EXPENDITURES AND POSITIONS

No significant variances.

PART II - MEASURES OF EFFECTIVENESS

Item 3: The variance is a result of the rising number of patients admitted for rehabilitation services, leading to a swift turnover of patients.

PART III - PROGRAM TARGET GROUPS

No significant variances.

PART IV - PROGRAM ACTIVITIES

Item 1: See Part II, Item 3.

PROGRAM TITLE: KAHUKU HOSPITAL
 PROGRAM-ID: HTH-211
 PROGRAM STRUCTURE NO: 050202

	FISCAL YEAR 2022-23				THREE MONTHS ENDED 09-30-23				NINE MONTHS ENDING 06-30-24			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
PART I: EXPENDITURES & POSITIONS												
RESEARCH & DEVELOPMENT COSTS												
POSITIONS												
EXPENDITURES (\$1,000's)												
OPERATING COSTS												
POSITIONS	0.00	0.00	+ 0.00	0	0.00	0.00	+ 0.00	0	0.00	0.00	+ 0.00	0
EXPENDITURES (\$1000's)	1,800	1,800	+ 0	0	405	405	+ 0	0	1,395	1,395	+ 0	0
TOTAL COSTS												
POSITIONS	0.00	0.00	+ 0.00	0	0.00	0.00	+ 0.00	0	0.00	0.00	+ 0.00	0
EXPENDITURES (\$1000's)	1,800	1,800	+ 0	0	405	405	+ 0	0	1,395	1,395	+ 0	0
	FISCAL YEAR 2022-23				FISCAL YEAR 2023-24							
	PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%				
PART II: MEASURES OF EFFECTIVENESS												
1. OCCUPANCY RATE - ACUTE CARE	94.2	91.2	- 3	3	94	89	- 5	5				
2. OCCUPANCY RATE - LONG-TERM CARE	0	0	+ 0	0	0	0	+ 0	0				
3. AVERAGE LENGTH OF STAY - ACUTE CARE (DAYS)	35	26	- 9	26	35	25	- 10	29				
4. AVERAGE LENGTH OF STAY - LONG-TERM CARE (DAYS)	0	0	+ 0	0	0	0	+ 0	0				
5. AVERAGE OPERATING COST PER PATIENT DAY(EXCL EQUIP)	3505	3512	+ 7	0	3500	3500	+ 0	0				
6. AVERAGE PATIENT REVENUE PER PATIENT DAY	6369	6507	+ 138	2	6300	6300	+ 0	0				
PART III: PROGRAM TARGET GROUP												
1. EST. POPULATION OF SERVICE AREA (RESIDENTS)	22500	22899	+ 399	2	22500	22800	+ 300	1				
PART IV: PROGRAM ACTIVITY												
1. NUMBER OF IN-PATIENT ADMISSIONS - ACUTE CARE	192	263	+ 71	37	195	275	+ 80	41				
2. NUMBER OF IN-PATIENT DAYS - ACUTE CARE	7000	6992	- 8	0	7000	7000	+ 0	0				
3. NUMBER OF EMERGENCY ROOM VISITS	6601	7135	+ 534	8	6500	7000	+ 500	8				
4. NUMBER OF ADMISSIONS - LONG-TERM CARE	0	0	+ 0	0	0	0	+ 0	0				
5. NUMBER OF PATIENT DAYS - LONG-TERM CARE	0	0	+ 0	0	0	0	+ 0	0				

VARIANCE REPORT NARRATIVE FY 2023 AND FY 2024

05 02 02
HTH 211

PROGRAM TITLE: KAHUKU HOSPITAL

PART I - EXPENDITURES AND POSITIONS

No significant variances.

PART II - MEASURES OF EFFECTIVENESS

Item 3: The variance is a result of the rising number of patients admitted for rehabilitation services, leading to a swift turnover of patients.

PART III - PROGRAM TARGET GROUPS

No significant variances.

PART IV - PROGRAM ACTIVITIES

Item 1: See Part II, Item 3.

PROGRAM TITLE: HAWAII HEALTH SYSTEMS CORPORATION - REGIONS
 PROGRAM-ID: HTH-212
 PROGRAM STRUCTURE NO: 050203

	FISCAL YEAR 2022-23				THREE MONTHS ENDED 09-30-23				NINE MONTHS ENDING 06-30-24			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
PART I: EXPENDITURES & POSITIONS												
RESEARCH & DEVELOPMENT COSTS												
POSITIONS												
EXPENDITURES (\$1,000's)												
OPERATING COSTS												
POSITIONS	2,340.75	2,901.04	+ 560.29	24	2,340.75	2,938.34	+ 597.59	26	2,340.75	2,938.34	+ 597.59	26
EXPENDITURES (\$1000's)	646,353	648,534	+ 2,181	0	186,887	171,058	- 15,829	8	541,023	556,852	+ 15,829	3
TOTAL COSTS												
POSITIONS	2,340.75	2,901.04	+ 560.29	24	2,340.75	2,938.34	+ 597.59	26	2,340.75	2,938.34	+ 597.59	26
EXPENDITURES (\$1000's)	646,353	648,534	+ 2,181	0	186,887	171,058	- 15,829	8	541,023	556,852	+ 15,829	3
	FISCAL YEAR 2022-23				FISCAL YEAR 2023-24							
	PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%				
PART II: MEASURES OF EFFECTIVENESS												
1. AVERAGE OPERATING COST PER PATIENT DAY (EXCL EQPT)	2903	3095	+ 192	7	2900	3267	+ 367	13				
2. AVERAGE PATIENT REVENUE PER PATIENT DAY	2466	2549	+ 83	3	2400	2553	+ 153	6				
3. OCCUPANCY RATE - ACUTE CARE	54.66	73.61	+ 18.95	35	55	74.36	+ 19.36	35				
4. OCCUPANCY RATE - LONG-TERM CARE	81.07	79	- 2.07	3	81	88	+ 7	9				
PART III: PROGRAM TARGET GROUP												
1. EST. POPULATION OF SERVICE AREA - EAST HAWAII	116932	120377	+ 3445	3	117000	121244	+ 4244	4				
2. EST. POPULATION OF SERVICE AREA - WEST HAWAII	84829	80252	- 4577	5	84000	80637	- 3363	4				
3. EST. POPULATION OF SERVICE AREA - MAUI	NO DATA	NO DATA	+ 0	0	NO DATA	NO DATA	+ 0	0				
4. EST. POPULATION OF SERVICE AREA - KAUAI	73234	73298	+ 64	0	73000	73298	+ 298	0				
5. EST. POPULATION SERVICE AREA OVER 65 - EAST HAWAII	26878	27517	+ 639	2	27000	27517	+ 517	2				
6. EST. POPULATION SERVICE AREA OVER 65 - WEST HAWAII	18940	18301	- 639	3	19000	18301	- 699	4				
7. EST. POPULATION SERVICE AREA OVER 65 - MAUI	NO DATA	NO DATA	+ 0	0	NO DATA	NO DATA	+ 0	0				
8. EST. POPULATION SERVICE AREA OVER 65 - OAHU	185680	188040	+ 2360	1	186000	188040	+ 2040	1				
9. EST. POPULATION SERVICE AREA OVER 65 - KAUAI	15802	15513	- 289	2	16000	15513	- 487	3				
PART IV: PROGRAM ACTIVITY												
1. NUMBER OF IN-PATIENT ADMISSIONS - ACUTE CARE	11270	12052	+ 782	7	11300	14163	+ 2863	25				
2. NUMBER OF IN-PATIENT DAYS - ACUTE CARE	74013	104521	+ 30508	41	74000	105581	+ 31581	43				
3. NUMBER OF BIRTHS	1680	1597	- 83	5	1600	1624	+ 24	2				
4. NUMBER OF ADMISSIONS - LONG-TERM CARE	383	334	- 49	13	350	362	+ 12	3				
5. NUMBER OF PATIENT DAYS - LONG-TERM CARE	132854	125151	- 7703	6	133000	144838	+ 11838	9				
6. NUMBER OF EMERGENCY ROOM (ER) VISITS	88440	89601	+ 1161	1	80000	87500	+ 7500	9				

VARIANCE REPORT NARRATIVE FY 2023 AND FY 2024

05 02 03
HTH 212

PROGRAM TITLE: HAWAII HEALTH SYSTEMS CORPORATION - REGIONS

PART I - EXPENDITURES AND POSITIONS

The variances in positions are due to control over the establishment of new positions that were given to the Hawaii Health Systems Corporation.

PART II - MEASURES OF EFFECTIVENESS

Item 1: The variance in FY 24 can be attributed to lingering effect of the COVID-19 pandemic that is raising food prices and medical care. As well as, reclassification of bed type and new or expanded services provide at some facilities.

Item 3: The variance in Acute Care occupancy rate can be contributed to patients who deferred care during the peak of COVID-19 are scheduling procedures that were postponed. Also waitlisted patients occupying acute care beds are unable to transfer to a long-term care facility due to lack of available beds.

PART III - PROGRAM TARGET GROUPS

No significant variances.

PART IV - PROGRAM ACTIVITIES

Items 1 and 2: See Part II, Item 3.

Item 4: The FY 23 variance in the number of admissions - long-term care, can be attributed to staffing shortages.

PROGRAM TITLE: ALII COMMUNITY CARE
 PROGRAM-ID: HTH-213
 PROGRAM STRUCTURE NO: 050204

	FISCAL YEAR 2022-23				THREE MONTHS ENDED 09-30-23				NINE MONTHS ENDING 06-30-24			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
PART I: EXPENDITURES & POSITIONS												
RESEARCH & DEVELOPMENT COSTS												
POSITIONS												
EXPENDITURES (\$1,000's)												
OPERATING COSTS												
POSITIONS	0.00	0.00	+ 0.00	0	0.00	0.00	+ 0.00	0	0.00	0.00	+ 0.00	0
EXPENDITURES (\$1000's)	3,500	3,500	+ 0	0	875	875	+ 0	0	2,625	2,625	+ 0	0
TOTAL COSTS												
POSITIONS	0.00	0.00	+ 0.00	0	0.00	0.00	+ 0.00	0	0.00	0.00	+ 0.00	0
EXPENDITURES (\$1000's)	3,500	3,500	+ 0	0	875	875	+ 0	0	2,625	2,625	+ 0	0
	FISCAL YEAR 2022-23				FISCAL YEAR 2023-24							
	PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%				
PART II: MEASURES OF EFFECTIVENESS												
1. OCCUPANCY RATE - ASSISTED LIVING	NO DATA	57	+ 57	0	NO DATA	57	+ 57	0				
PART III: PROGRAM TARGET GROUP												
1. ESTIMATED POPULATION SERVICE AREA - MAUI COUNTY	NO DATA	164000	+ 164000	0	NO DATA	164000	+ 164000	0				
PART IV: PROGRAM ACTIVITY												
1. NUMBER OF UNITS OCCUPIED - ASSISTED LIVING	NO DATA	67	+ 67	0	NO DATA	67	+ 67	0				

**VARIANCE REPORT NARRATIVE
FY 2023 AND FY 2024**

**05 02 04
HTH 213**

PROGRAM TITLE: ALII COMMUNITY CARE

PART I - EXPENDITURES AND POSITIONS

No significant variances.

PART II - MEASURES OF EFFECTIVENESS

No significant variances.

PART III - PROGRAM TARGET GROUPS

No significant variances.

PART IV - PROGRAM ACTIVITIES

No significant variances.

STATE OF HAWAII

PROGRAM TITLE:

MAUI HEALTH SYSTEM, A KFH LLC

PROGRAM-ID:

HTH-214

PROGRAM STRUCTURE NO:

050206

VARIANCE REPORT

REPORT V61

12/5/23

	FISCAL YEAR 2022-23				THREE MONTHS ENDED 09-30-23				NINE MONTHS ENDING 06-30-24			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
PART I: EXPENDITURES & POSITIONS												
RESEARCH & DEVELOPMENT COSTS												
POSITIONS												
EXPENDITURES (\$1,000's)												
OPERATING COSTS												
POSITIONS	0.00	0.00	+ 0.00	0	0.00	0.00	+ 0.00	0	0.00	0.00	+ 0.00	0
EXPENDITURES (\$1000's)	8,923	0	- 8,923	100	0	0	+ 0	0	22,000	0	- 22,000	100
TOTAL COSTS												
POSITIONS	0.00	0.00	+ 0.00	0	0.00	0.00	+ 0.00	0	0.00	0.00	+ 0.00	0
EXPENDITURES (\$1000's)	8,923	0	- 8,923	100	0	0	+ 0	0	22,000	0	- 22,000	100

VARIANCE REPORT NARRATIVE FY 2023 AND FY 2024

05 02 06
HTH 214

PROGRAM TITLE: MAUI HEALTH SYSTEM, A KFH LLC

PART I - EXPENDITURES AND POSITIONS

No significant variances.

PART II - MEASURES OF EFFECTIVENESS

No measures have been developed for this program.

PART III - PROGRAM TARGET GROUPS

No program target groups have been developed for this program.

PART IV - PROGRAM ACTIVITIES

No program activities have been developed for this program.

PROGRAM TITLE: HHSC - OAHU REGION
 PROGRAM-ID: HTH-215
 PROGRAM STRUCTURE NO: 050207

	FISCAL YEAR 2022-23				THREE MONTHS ENDED 09-30-23				NINE MONTHS ENDING 06-30-24			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
PART I: EXPENDITURES & POSITIONS												
RESEARCH & DEVELOPMENT COSTS												
POSITIONS												
EXPENDITURES (\$1,000's)												
OPERATING COSTS												
POSITIONS	440.00	376.00	- 64.00	15	440.00	343.00	- 97.00	22	440.00	360.00	- 80.00	18
EXPENDITURES (\$1000's)	51,321	46,454	- 4,867	9	15,792	11,578	- 4,214	27	49,397	43,660	- 5,737	12
TOTAL COSTS												
POSITIONS	440.00	376.00	- 64.00	15	440.00	343.00	- 97.00	22	440.00	360.00	- 80.00	18
EXPENDITURES (\$1000's)	51,321	46,454	- 4,867	9	15,792	11,578	- 4,214	27	49,397	43,660	- 5,737	12

	FISCAL YEAR 2022-23				FISCAL YEAR 2023-24			
	PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%
PART II: MEASURES OF EFFECTIVENESS								
1. OCCUPANCY RATE - LONG TERM CARE	84	76	- 8	10	84	80	- 4	5
2. AVERAGE LENGTH OF STAY - LONG TERM CARE (DAYS)	397	322	- 75	19	397	360	- 37	9
3. OCCUPANCY RATE - TUBERCULOSIS	0	0	+ 0	0	0	0	+ 0	0
4. AVERAGE LENGTH OF STAY - TUBERCULOSIS	0	0	+ 0	0	0	0	+ 0	0
5. AVERAGE OPERATING COST PER PATIENT DAY (EXCL EQUIP)	720	715	- 5	1	720	803	+ 83	12
6. AVERAGE PATIENT REVENUE PER PATIENT DAY	386.5	309	- 77.5	20	390	331	- 59	15

PART III: PROGRAM TARGET GROUP								
1. ESTIMATE POPULATION OF SERVICE AREA OVER AGE 65	185680	188040	+ 2360	1	186000	188040	+ 2040	1

PART IV: PROGRAM ACTIVITY								
1. NUMBER OF ADMISSIONS - LONG TERM CARE	96	199	+ 103	107	96	182	+ 86	90
2. NUMBER OF PATIENT DAYS - LONG TERM CARE	36700	64069	+ 27369	75	36000	68967	+ 32967	92
3. NUMBER OF PATIENT DAYS - ADULT DAY CARE	6875	10754	+ 3879	56	6800	26308	+ 19508	287
4. NUMBER OF ADMISSIONS - TUBERCULOSIS	0	0	+ 0	0	0	0	+ 0	0
5. NUMBER PATIENT DAYS - TUBERCULOSIS	0	48	+ 48	0	0	0	+ 0	0

VARIANCE REPORT NARRATIVE FY 2023 AND FY 2024

05 02 07
HTH 215

PROGRAM TITLE: HHSC - OAHU REGION

PART I - EXPENDITURES AND POSITIONS

The Hawaii Health Systems Corporation - Oahu Region was established by Act 248, SLH 2022. During FY 23 and FY 24 1st Quarter and 2nd to 4th Quarters, the Oahu Region's actual and estimated expenditures were below the the appropriated amount. The Special Fund appropriation represents the ceiling of the expenditure and is not the cash collected. This occurred for two primary reasons. First, the fringe benefits rate assessed on payroll remained at 52% throughout the fiscal year, which was much lower than the Administration advised budgeted rate of 63%. Additionally, the Oahu Region's facilities unfortunately experienced unprecedented levels of vacancies due to numerous retirements, lateral transfers and our inability under the current healthcare workforce shortage to replace these vital positions. The impact on our operations has been so severe that we have been forced to slow, and sometimes pause, our admissions and repeatedly turn away community members in desperate need of long-term care. As a result the patient days decreased. Through new recruitment and incentive programs that we have instituted with Healthcare Association of Hawaii and other partners - including becoming an established Certified Nursing Aide training site - we are hopeful that we will be able to fill our staffing needs and return to normal operating capacity in the latter half of FY 24 and FY 25.

PART II - MEASURES OF EFFECTIVENESS

Items 1 and 2: The occupancy rate and average length of stay for Long Term Care for FY 23 were lower than the budgeted amount by 10% and 19% respectively, due to the unprecedented levels of vacant staffing positions. As result of this shortage of healthcare work force and certain limited COVID-19 restrictions placed to prevent outbreaks, admissions and patient days were severely impacted. See Part I for explanation of lower admission and patient days.

Item 5: The average patient revenue per patient day for FY 23 and FY 24 were lower than the budgeted amount by 20% and 15%, due to the increase in Medicaid patients from 80% to 86%, which pays a lower reimbursements rate than Medicare.

Item 6: The estimated average operating cost per patient day increased for FY 24 by 12% due to the expected increase in fringe benefit rate from 52% to 64% from the 1st quarter and the filling of the vacant staffing position. See Part I for explanation of vacant staffing position.

PART III - PROGRAM TARGET GROUPS

No significant variances.

PART IV - PROGRAM ACTIVITIES

Item 1: The budgeted and estimated amount for number of admissions for Leahi and Maluhia should be 192 instead of 96. It was inadvertently reflected at average of both facilities. As result of 1st quarter actual admissions being under the budgeted amount, the estimated amount for FY 24 was lowered. See Part I for explanation of lower admissions.

Item 2: The number of patient days Long Term Care for Leahi and Maluhia budgeted and estimated amount should be 73,400 instead of 36,700. It was inadvertently reflected at average of both facilities. As result of 1st quarter patient days being under the budgeted amount, the estimated amount for FY 24 was lowered. See Part I for explanation of lower patient days.

Item 3: The number of patient days - Adult Day Health for Leahi and Maluhia budgeted and estimated amount should be 13,750 instead of 6,875. It was inadvertently reflected at average of both facilities. As result of 1st quarter days being higher than the budgeted amount, due to laxer COVID-19 restrictions, the estimated amount for FY 24 was increased. See Part I for explanation of lower patient days.

VARIANCE REPORT

PROGRAM TITLE: BEHAVIORAL HEALTH

PROGRAM-ID:

PROGRAM STRUCTURE NO: 0503

	FISCAL YEAR 2022-23				THREE MONTHS ENDED 09-30-23				NINE MONTHS ENDING 06-30-24			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
PART I: EXPENDITURES & POSITIONS												
RESEARCH & DEVELOPMENT COSTS												
POSITIONS												
EXPENDITURES (\$1,000's)												
OPERATING COSTS												
POSITIONS	1,369.50	1,068.61	- 300.89	22	1,507.00	1,078.00	- 429.00	28	1,507.00	1,358.00	- 149.00	10
EXPENDITURES (\$1000's)	377,188	380,660	+ 3,472	1	96,512	97,317	+ 805	1	299,155	366,592	+ 67,437	23
TOTAL COSTS												
POSITIONS	1,369.50	1,068.61	- 300.89	22	1,507.00	1,078.00	- 429.00	28	1,507.00	1,358.00	- 149.00	10
EXPENDITURES (\$1000's)	377,188	380,660	+ 3,472	1	96,512	97,317	+ 805	1	299,155	366,592	+ 67,437	23
					FISCAL YEAR 2022-23				FISCAL YEAR 2023-24			
	PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%
PART II: MEASURES OF EFFECTIVENESS												
1. % OF INDIVIDUALS SUCCESSFULLY COMPLETING TX SVCS	40	43	+ 3	8	40	43	+ 3	8	40	43	+ 3	8
2. # OF INDIVS SRVD BY DIVS OF THE BEHAVIORAL HTH ADM	100	16151	+ 16051	16051	100	17200	+ 17100	17100	100	17200	+ 17100	17100

VARIANCE REPORT NARRATIVE FY 2023 AND FY 2024

PROGRAM TITLE: BEHAVIORAL HEALTH

05 03

PART I - EXPENDITURES AND POSITIONS

Specific variances are discussed in detail in the lowest level program narratives.

PART II - MEASURES OF EFFECTIVENESS

Item 2: Planned numbers should be 17,531 for three months ended 9-30-23 and 17,490 for nine months ending 6-30-24. No significant variances.

STATE OF HAWAII

PROGRAM TITLE: ADULT MENTAL HEALTH - OUTPATIENT
 PROGRAM-ID: HTH-420
 PROGRAM STRUCTURE NO: 050301

VARIANCE REPORT

REPORT V61
 12/5/23

	FISCAL YEAR 2022-23				THREE MONTHS ENDED 09-30-23				NINE MONTHS ENDING 06-30-24						
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%			
PART I: EXPENDITURES & POSITIONS															
RESEARCH & DEVELOPMENT COSTS															
POSITIONS															
EXPENDITURES (\$1,000's)															
OPERATING COSTS															
POSITIONS	179.50	139.50	-	40.00	22	232.00	161.50	-	70.50	30	232.00	232.00	+	0.00	0
EXPENDITURES (\$1000's)	72,604	70,419	-	2,185	3	19,358	22,818	+	3,460	18	62,378	72,573	+	10,195	16
TOTAL COSTS															
POSITIONS	179.50	139.50	-	40.00	22	232.00	161.50	-	70.50	30	232.00	232.00	+	0.00	0
EXPENDITURES (\$1000's)	72,604	70,419	-	2,185	3	19,358	22,818	+	3,460	18	62,378	72,573	+	10,195	16
					FISCAL YEAR 2022-23				FISCAL YEAR 2023-24						
	PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%							
PART II: MEASURES OF EFFECTIVENESS															
1. % CONSUMERS WITH HOUSING	95	94	-	1	1	95	95	+	0	0					
2. % CONSUMERS SOCIALLY OR VOCATIONALLY ENGAGED	6	6.4	+	0.4	7	7	7	+	0	0					
3. % SATISFIED CONSUMERS	92	92	+	0	0	92	93	+	1	1					
PART III: PROGRAM TARGET GROUP															
1. EST PREVAL ADULTS WITH SERIOUS MENTAL ILLNESS	61297	62857	+	1560	3	61172	62794	+	1622	3					
2. # PERSONS UTILIZING THE HAWAII CARES LINE	107040	113417	+	6377	6	110251	119088	+	8837	8					
PART IV: PROGRAM ACTIVITY															
1. # CONSUMERS SERVED: CMHCS	2381	2462	+	81	3	2381	2391	+	10	0					
2. # CONSUMERS SERVED: POS PROGRAMS	5550	5382	-	168	3	5606	5083	-	523	9					
3. # ELIGIBILITY DETERMINATIONS PERFORMED	1450	1450	+	0	0	1450	1450	+	0	0					
4. # CONSUMERS SERVED: SPEC RESIDENTIAL SERVICES	65	61	-	4	6	68	63	-	5	7					
5. # CONSUMERS SERVED: GROUP HOME SERVICES	850	678	-	172	20	850	670	-	180	21					
6. # OF CONSUMERS SERVED: CRISIS MOBILE OUTREACH	4796	4206	-	590	12	5036	4416	-	620	12					

VARIANCE REPORT NARRATIVE FY 2023 AND FY 2024

05 03 01
HTH 420

PROGRAM TITLE: ADULT MENTAL HEALTH - OUTPATIENT

PART I - EXPENDITURES AND POSITIONS

FY 23: At the end of the fiscal year, vacancies were due to difficulties in hiring and retaining qualified individuals. The expenditure variance is attributed to vacancy savings and delays in the execution of purchase of service (POS) contracts.

FY 24: At the end of the 1st quarter, the position variance is attributed to difficulties in hiring and retaining qualified individuals and positions still being classified based on the reorganization. The 1st quarter expenditure variance and the expenditure variance at the end of the fiscal year are attributed to purchase of service contract expenditures from non-appropriated federal funds.

PART II - MEASURES OF EFFECTIVENESS

No significant variances.

PART III - PROGRAM TARGET GROUPS

No significant variances.

PART IV - PROGRAM ACTIVITIES

Item 5. FY 23 and FY 24: The variances are attributed to a decrease in the number of available group home beds.

Item 6. FY 23: The variance is attributed to COVID-19 protocols resulting in telephone triaging instead of crisis mobile outreach (CMO) teams being sent out, staffing shortages, and individuals being directly admitted to Stabilization Intensive Case Management services instead of being referred to Licensed Crisis Residential Services through CMO services.

FY 24: The variance is attributed to individuals being directly admitted to Stabilization Intensive Case Management services or Behavioral Health Crisis Center services instead of being referred to Licensed Crisis Residential Services through CMO services.

PROGRAM TITLE: ADULT MENTAL HEALTH - INPATIENT
 PROGRAM-ID: HTH-430
 PROGRAM STRUCTURE NO: 050302

	FISCAL YEAR 2022-23				THREE MONTHS ENDED 09-30-23				NINE MONTHS ENDING 06-30-24			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
PART I: EXPENDITURES & POSITIONS												
RESEARCH & DEVELOPMENT COSTS												
POSITIONS												
EXPENDITURES (\$1,000's)												
OPERATING COSTS												
POSITIONS	721.00	574.11	- 146.89	20	843.00	586.00	- 257.00	30	843.00	713.00	- 130.00	15
EXPENDITURES (\$1000's)	91,256	101,073	+ 9,817	11	23,900	23,802	- 98	0	74,080	104,000	+ 29,920	40
TOTAL COSTS												
POSITIONS	721.00	574.11	- 146.89	20	843.00	586.00	- 257.00	30	843.00	713.00	- 130.00	15
EXPENDITURES (\$1000's)	91,256	101,073	+ 9,817	11	23,900	23,802	- 98	0	74,080	104,000	+ 29,920	40
	FISCAL YEAR 2022-23				FISCAL YEAR 2023-24							
	PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%				
PART II: MEASURES OF EFFECTIVENESS												
1. % CLIENTS DISCHARGED TO COMMUNITY-BASED SVCS	72	60	- 12	17	70	65	- 5	7				
2. % CLIENTS TREATED/DISCH W/CONT COMM TENURE > 12 MO	34	23	- 11	32	33	30	- 3	9				
3. % CLIENTS TRANSFERRED TO A CONTRACT FACILITY	18	8	- 10	56	15	14	- 1	7				
PART III: PROGRAM TARGET GROUP												
1. # PENAL COMMITMENT PATIENTS	300	496	+ 196	65	330	360	+ 30	9				
2. # CIVIL COMMITMENT PATIENTS	4	2	- 2	50	5	3	- 2	40				
PART IV: PROGRAM ACTIVITY												
1. # NEW ADMISSIONS	135	195	+ 60	44	140	150	+ 10	7				
2. # READMISSIONS	198	303	+ 105	53	200	215	+ 15	8				
3. # DISCHARGES	275	462	+ 187	68	350	380	+ 30	9				
4. # FORENSIC/COURT-ORDERED ADMISSIONS	330	497	+ 167	51	330	360	+ 30	9				

VARIANCE REPORT NARRATIVE FY 2023 AND FY 2024

05 03 02
HTH 430

PROGRAM TITLE: ADULT MENTAL HEALTH - INPATIENT

PART I - EXPENDITURES AND POSITIONS

FY 23 Positions: As of June 30, 2023, there were a total of 147.00 vacant positions. Some key vacancies in Human Resources Unit have affected the ability for the Hawaii State Hospital (HSH) to facilitate effective recruitment and hiring.

FY 24 Positions: As of September 30, 2023, there were a total of 257 vacant positions. The increase in vacancy is due to new positions received in FY24. Some key vacancies in Human Resources Unit have affected the ability for HSH to facilitate effective recruitment and hiring. The vacancy is predicted to remain high at the end of FY24 since the vacancies in Human Resources Unit.

FY 23 Expenditures: As of June 30, 2023, HSH had \$9,817,007 deficit due to high cost of agency contracts and locum tenens contracts. High overtime has also caused the deficit.

FY 24 Expenditures: HSH estimates to have \$29,821,911 deficit in FY24 due to the high cost of agency contracts and locum tenens contracts. In addition, outstanding bills for the goods and services received in FY23 are paid in FY24 funds. HSH also estimates to have a high overtime in FY24, but the overtime is predicted to be lower than FY23 as a result of filling positions.

PART II - MEASURES OF EFFECTIVENESS

Item 1: For FY 23, the percentage of patients discharged to community-based services was 60%, 17% less than the planned percentage of 72%. This is generally consistent with expectations.

Item 2: For FY 23, the percentage of patients treated and discharged with continued commitment tenure more than 12 months was 23%, 32% less than planned percentage of 34%. This is generally consistent with expectations.

Item 3: For FY 23, the percentage of clients transferred to a contract facility was 8%, 56% less than the planned percentage of 18%. This lower percentage was generally in line with expectations.

PART III - PROGRAM TARGET GROUPS

Item 1: For FY 23, the number of penal commitment patients was 496, 196 more than the planned number of 300 patients. This increase is due to the implementation of Act 026, SLH 2020 that results in more defendants are eligible for admission to the hospital.

Item 2: For FY 23, the number of civil commitment patients was two, two less than the planned four. This decrease was due to a decrease in patient flow through the legal system related to COVID-19.

Item 2: For FY 24, the estimated number of civil commitment patients is three, two less than the planned five. This decrease was based on a decrease in patient flow through the legal system related to COVID-19.

PART IV - PROGRAM ACTIVITIES

Items 1-4: For FY 23, the number of admissions and discharges are higher than the planned due to the implementation of Act 026, SLH 2020, that results in more defendants being eligible for admission to the hospital. The tenure of these patients is short term.

PROGRAM TITLE: ALCOHOL & DRUG ABUSE DIVISION
 PROGRAM-ID: HTH-440
 PROGRAM STRUCTURE NO: 050303

	FISCAL YEAR 2022-23				THREE MONTHS ENDED 09-30-23				NINE MONTHS ENDING 06-30-24						
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%			
PART I: EXPENDITURES & POSITIONS															
RESEARCH & DEVELOPMENT COSTS															
POSITIONS															
EXPENDITURES (\$1,000's)															
OPERATING COSTS															
POSITIONS	29.00	19.00	-	10.00	34	29.00	20.00	-	9.00	31	29.00	27.00	-	2.00	7
EXPENDITURES (\$1000's)	36,401	46,880	+	10,479	29	10,413	10,627	+	214	2	26,103	41,529	+	15,426	59
TOTAL COSTS															
POSITIONS	29.00	19.00	-	10.00	34	29.00	20.00	-	9.00	31	29.00	27.00	-	2.00	7
EXPENDITURES (\$1000's)	36,401	46,880	+	10,479	29	10,413	10,627	+	214	2	26,103	41,529	+	15,426	59

	FISCAL YEAR 2022-23				FISCAL YEAR 2023-24					
	PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%		
PART II: MEASURES OF EFFECTIVENESS										
1. % OF INDIVIDUALS SUCCESSFULLY COMPLETING TX SVCS	40	43	+	3	8	40	43	+	3	8
2. # INDIVIDUALS OBTAIN/MAINTAIN THEIR SA PROF CERT	970	986	+	16	2	970	985	+	15	2
3. % ATTENDEES RPTING SATISFACTION W/ TRNG EVENTS	96	98	+	2	2	96	97	+	1	1
4. # SA TX PROGS THAT OBTAIN/MAINTAIN ACCREDITATION	21	17	-	4	19	21	19	-	2	10
PART III: PROGRAM TARGET GROUP										
1. INDIVIDUALS IN NEED OF SA TREATMENT SVCS	90868	153000	+	62132	68	90868	155000	+	64132	71
2. INDIVIDUALS WHO ARE SEEKING SA CERTIFICATION	310	300	-	10	3	310	300	-	10	3
3. # SA DIRECT SVC STAFF THAT CAN BENEFIT FR SA TRNGS	1400	1350	-	50	4	1400	1400	+	0	0
4. # OF SA TREATMENT PROGS THAT REQUIRE ACCREDITATION	21	17	-	4	19	21	19	-	2	10
PART IV: PROGRAM ACTIVITY										
1. # OF INDIVIDUALS RECEIVING TREATMENT SVCS	4600	6036	+	1436	31	4600	7000	+	2400	52
2. # OF INDIVIDUALS RECEIVE CURRICULUM-BASE PREV SVCS	3700	4761	+	1061	29	3700	5000	+	1300	35
3. # PROVIDED INFO RE STATUS OF SA CERT/RECERT APP	440	480	+	40	9	440	480	+	40	9
4. # SA CERT PROFS-OTHER SA STAFF ENROLLED IN TRNG	1700	1678	-	22	1	1700	1700	+	0	0
5. # OF SA TREATMENT PROGS REVIEWED FOR ACCREDITATION	21	12	-	9	43	21	19	-	2	10

VARIANCE REPORT NARRATIVE FY 2023 AND FY 2024

05 03 03
HTH 440

PROGRAM TITLE: ALCOHOL & DRUG ABUSE DIVISION

PART I - EXPENDITURES AND POSITIONS

The FY 23 and FY 24 variances in vacant positions are due to the difficulty and length of time it takes to hire qualified staff at civil service salaries.

The FY 23 and FY 24 variances in expenditures are due to receiving additional federal short-term grants.

PART II - MEASURES OF EFFECTIVENESS

Item 4: The decreased variance of 19% for FY 23 attributed to number of providers that sustain hardship and did not continue to render services. The estimated variance of 10% for FY 24 is attributed to an anticipation of number provider entities obtaining accreditation.

PART III - PROGRAM TARGET GROUPS

Item 1: The increased variance of 68% in FY 23 is due to the various news reports on the increase of fentanyl and the effects of using fentanyl mixed with other drugs. Providing this additional information on drug use/abuse makes the community aware of how damaging the effects of drug use has on people. The increase in percentages in FY 24 is anticipated due to the new drug Xylazine, which has already affected our islands. Xylazine is mixed with other opiates and may have caused a couple of overdosed deaths, thus some of the substance users may seek treatment in fear of dying of a drug overdose.

Item 4: The decrease in variance of 19% for FY 23 is an indication of the struggling economy to main operations and decrease in workforce. The estimate variance of 10% for FY 24 is an estimate based on number of agencies inquired accreditation.

PART IV - PROGRAM ACTIVITIES

Item 1: The increased variance of 31% in FY 23 are due to the treatment programs operating post Covid-19. In addition, with the local ads/commercials on the television, provides an extra resource (Hawaii CARES-Aloha United Way) on where the community can receive services. In FY 24, there may be an increase due to the additional number of people in the Criminal Justice System and the required treatment condition that needs to be completed in order to be compliant in the Criminal Justice System.

Item 2: The increased variance of 29% for FY 23 and estimated variance of 35% for FY 24 are attributed to: 1) the implementation of evidence-based curriculum regardless of funding source; 2) the implementation of effective outreach, recruitment, and tracking strategies used by prevention providers to increase and sustain program enrollment; and 3) the expansion of service areas to provide curriculum-based prevention services to additional individuals.

Item 5. The decrease in variance of 43% for FY23 and the estimate of variance increase to 10% for FY24 are due to: 1) challenges with filling staff vacancies; 2) number of provider entities not able to sustain program; and 3) number of provider entities that inquire, leading to an assumption that the number will increase in FY24.

PROGRAM TITLE: CHILD & ADOLESCENT MENTAL HEALTH
 PROGRAM-ID: HTH-460
 PROGRAM STRUCTURE NO: 050304

	FISCAL YEAR 2022-23				THREE MONTHS ENDED 09-30-23				NINE MONTHS ENDING 06-30-24			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
PART I: EXPENDITURES & POSITIONS												
RESEARCH & DEVELOPMENT COSTS												
POSITIONS												
EXPENDITURES (\$1,000's)												
OPERATING COSTS												
POSITIONS	188.50	157.00	- 31.50	17	188.50	155.50	- 33.00	18	188.50	170.00	- 18.50	10
EXPENDITURES (\$1000's)	63,223	59,500	- 3,723	6	18,065	15,977	- 2,088	12	46,173	48,261	+ 2,088	5
TOTAL COSTS												
POSITIONS	188.50	157.00	- 31.50	17	188.50	155.50	- 33.00	18	188.50	170.00	- 18.50	10
EXPENDITURES (\$1000's)	63,223	59,500	- 3,723	6	18,065	15,977	- 2,088	12	46,173	48,261	+ 2,088	5

	FISCAL YEAR 2022-23				FISCAL YEAR 2023-24			
	PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%
PART II: MEASURES OF EFFECTIVENESS								
1. % OF YOUTH RECEIVING IN-HOME SERVICES	53	54	+ 1	2	53	54	+ 1	2
2. % OF YOUTH RECV OUT/HOME THERAP FOSTER HOME SVCS	6	4	- 2	33	6	5	- 1	17
3. % OF YOUTH RECV OUT/HOME COMM BASED RESIDTL SVCS	4	5	+ 1	25	4	5	+ 1	25
4. % OF YOUTH RECV OUT/HOME HOSPIT BASED RESIDTL SVCS	3	3	+ 0	0	3	3	+ 0	0
5. % OF YOUTH RECV OUT/HOME OUT OF STATE SERVICES	1	1	+ 0	0	1	1	+ 0	0
6. AVE # OF DAYS YOUTH ENROLLED IN IN-HOME SVCS	237	222	- 15	6	237	232	- 5	2
7. AVE # OF DAYS YOUTH ENRO OUT/HOME THERAP FOST HOME	303	186	- 117	39	303	200	- 103	34
8. AVE # OF DAYS YOUTH ENRO OUT/HOME COMM BASED RESID	145	118	- 27	19	145	138	- 7	5
9. AVE # OF DAYS YOUTH ENRO OUT/HOME HOSP BASED SVCS	63	65	+ 2	3	63	58	- 5	8
10. AVE # OF DAYS YOUTH ENRO OUT/HOME OUT OF STATE SVC	425	290	- 135	32	425	365	- 60	14
PART III: PROGRAM TARGET GROUP								
1. # OF YOUTH WITH MEDICAID ENROLLMENT AND TREATMENT	1847	1580	- 267	14	1847	1800	- 47	3
2. # OF YOUTH WITH EDUCATIONALLY-LINKED TREATMENT	167	58	- 109	65	167	160	- 7	4
3. # OF YOUTH WITH JUDICIALLY ENCUMBERED TREATMENT	93	231	+ 138	148	93	88	- 5	5
4. # OF YOUTH AGE 12 AND UNDER	553	697	+ 144	26	553	697	+ 144	26
5. # OF YOUTH WITH OTHER FUNDED TREATMENT	16	11	- 5	31	16	15	- 1	6
PART IV: PROGRAM ACTIVITY								
1. TOTAL AMT (IN 1,000'S) BILLED FOR CONTRACTED SVCS	32000	29248	- 2752	9	32000	29248	- 2752	9
2. TOTAL AMT REIMB (1,000'S) BY MEDCD FOR CONTRA SVC	12000	4884	- 7116	59	12000	10500	- 1500	13
3. % OF CONTRACTED SVCS COSTS WHICH FED REIMB RECVD	35	17	- 18	51	35	28	- 7	20
4. TOTAL # OF YOUTH SERVED	2350	1794	- 556	24	2350	2300	- 50	2
5. TOTAL # OF YOUTH SERVED WITH CONTRACTED SERVICES	1425	1127	- 298	21	1425	1375	- 50	4

VARIANCE REPORT NARRATIVE FY 2023 AND FY 2024

05 03 04
HTH 460

PROGRAM TITLE: CHILD & ADOLESCENT MENTAL HEALTH

PART I - EXPENDITURES AND POSITIONS

The variance in the number of filled positions is due to a delay in getting a reorganization completed and the establishment and filling of Behavioral Health Initiative positions.

The shortage of expenditures is due to the vacancies and restrictions implemented by the Governor and late release of funds. In addition, Purchase Of Service cost reimbursement contracts must be encumbered in full at the beginning of the new fiscal year, but our first quarter allotment is not enough to cover that.

PART II - MEASURES OF EFFECTIVENESS

Item 2: This is a positive variance in that the percentage of youth in and out of home/therapeutic foster home services decreased. Our goal is for youth to receive services in their home whenever possible.

Item 3: The percentage of youth receiving community based residential services is so small that staying below a 10% variance is difficult. However, this variance is partially due to shortages in lower levels of care. Our recent rate study indicates that low reimbursement rates may be behind this workforce shortage, and the Child and Adolescent Mental Health Division (CAMHD) will be requesting funding during this legislative session to increase provider rates.

Item 7: This is a positive indicator in that the number of days that youth are placed out of their home has decreased. This improvement may be due to active review of clients' length of stay in out of home placements. The CAMHD hopes to continue this trend through active clinical oversight.

Item 8: This is a positive indicator in that the number of days that youth are placed out of their home has decreased. This improvement may be due to active review of clients' length of stay in out of home placements. The CAMHD hopes to continue this trend through active clinical oversight.

Item 10: This is a positive indicator in that the number of days that youth

are placed out of State has decreased. In addition, CAMHD has decreased the total number of youth placed out of state. CAMHD strives to serve as many youth in Hawaii and in their homes as possible.

PART III - PROGRAM TARGET GROUPS

Item 1: While CAMHD fell short of the targeted number of youth with Medicaid enrollment and treatment, it is promising that we were so close to the 10% variance cut off considering we are still trying to recover our census to approximate pre-pandemic levels.

Item 2: Despite the re-opening of schools after COVID-19, the number of youth referred to us for services linked to Individualized Educational Plan remains lower than expected. It may be that these youth are being served via their Medicaid eligibility and therefore the Department of Education (DOE) is not referring them under the Individuals with Disabilities Education Act, or that schools are able to meet more of the needs using their School Based Behavioral Health system.

Item 3: The Hawaii Youth Correctional Facility is reporting a record high proportion (close to 80%) of incarcerated youth have mental health challenges, and there are more youth being identified in the juvenile justice system as needing behavioral health support. We are working to support those systems.

Item 4: This is a positive indicator in that CAMHD aims for earlier identification of mental health issues in order to improve the chances for a reduced need for restrictive services and better outcomes later in life.

Item 5: This is a positive indicator as it means that the majority of youth served by CAMHD were able to be served by our usual funding streams, without relying on grant funding.

PART IV - PROGRAM ACTIVITIES

Item 2: CAMHD had fewer youth eligible for Medicaid services. In addition, the MedQuest Division had IT issues that delayed payments that

VARIANCE REPORT NARRATIVE FY 2023 AND FY 2024

05 03 04
HTH 460

PROGRAM TITLE: CHILD & ADOLESCENT MENTAL HEALTH

were payable, which were received early in FY 24.

Item 3: See item 2.

Item 4: CAMHD's census of youth served has still not recovered to pre-pandemic levels. We contracted for community outreach services to assist with identifying youth in need of services, but this new program has not reached all the islands yet. CAMHD is hoping to get this program fully operational in FY24. CAMHD is also working on strengthening our partnership with DOE to provide support to more students.

Item 5: Same as item 4.

PROGRAM TITLE: DEVELOPMENTAL DISABILITIES
 PROGRAM-ID: HTH-501
 PROGRAM STRUCTURE NO: 050305

	FISCAL YEAR 2022-23				THREE MONTHS ENDED 09-30-23				NINE MONTHS ENDING 06-30-24			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
PART I: EXPENDITURES & POSITIONS												
RESEARCH & DEVELOPMENT COSTS												
POSITIONS												
EXPENDITURES (\$1,000's)												
OPERATING COSTS												
POSITIONS	211.00	150.00	- 61.00	29	214.00	153.00	- 61.00	29	214.00	214.00	+ 0.00	0
EXPENDITURES (\$1000's)	107,302	89,033	- 18,269	17	24,686	21,056	- 3,630	15	90,117	93,747	+ 3,630	4
TOTAL COSTS												
POSITIONS	211.00	150.00	- 61.00	29	214.00	153.00	- 61.00	29	214.00	214.00	+ 0.00	0
EXPENDITURES (\$1000's)	107,302	89,033	- 18,269	17	24,686	21,056	- 3,630	15	90,117	93,747	+ 3,630	4
	FISCAL YEAR 2022-23				FISCAL YEAR 2023-24							
	PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%				
PART II: MEASURES OF EFFECTIVENESS												
1. % OF PERSONS WITH D/ID RCVNG DD SRVCS	13	13	+ 0	0	13	13	+ 0	0				
2. # ADULTS CHOOSING THEIR OWN LIVING ARRANGEMENTS	2760	2786	+ 26	1	2760	2795	+ 35	1				
3. % ADULT FOSTER HOMES RE-CERTIFIED PRIOR TO EXP CER	90	100	+ 10	11	90	100	+ 10	11				
4. % PERSONS IN HSH RECEIVING DENTAL TREATMENTS	95	90	- 5	5	95	90	- 5	5				
5. % PERSONS WHO COMPLETE DENTAL TREATMENT	45	42	- 3	7	45	42	- 3	7				
PART III: PROGRAM TARGET GROUP												
1. # OF PERSONS SUBMTG APPLICATIONS EGBL FOR DD SRVC	125	138	+ 13	10	125	135	+ 10	8				
2. # OF PEOPLE IN HI WHO SUSTAINED NEUROTRAUMA INJURY	575	575	+ 0	0	575	575	+ 0	0				
3. # AUTHORIZED POSITIONS (PERM & TEMP)	3260	3353	+ 93	3	3260	3353	+ 93	3				
4. # OF KEY COMMUN STAKEHLDRS FOR PHP OR ER ACT	40	75	+ 35	88	40	75	+ 35	88				
PART IV: PROGRAM ACTIVITY												
1. # UNDUPLICATED INDIVS RECVG STATE-FUNDED SUPPORTS	110	110	+ 0	0	110	110	+ 0	0				
2. # OF NEW APPLICANTS FOR DD SERVICES	200	177	- 23	12	200	175	- 25	13				
3. # OF PERSONS RECEIVING HCBS-DD/ID WAIVER	2900	3060	+ 160	6	2900	3080	+ 180	6				
4. % OF ADULT FOSTER HOME RECERTIFIED FREE OF MED ERR	90	90	+ 0	0	90	90	+ 0	0				
5. # OF PERSONS W/DD EMPLOYED IN COMPETITIVE INTEGRA	177	170	- 7	4	177	170	- 7	4				
6. % ADVRS EVNT REPTS W/PLAN TO PREVENT ADVERSE EVENT	95	99	+ 4	4	95	95	+ 0	0				
7. # OF PERSONS RECEIVING CASE MANAGEMENT SERVICES	3300	3560	+ 260	8	3300	3565	+ 265	8				
8. # PERSONS IN HSH RECEIVING DENTAL TREATMENT	240	137	- 103	43	240	130	- 110	46				
9. # PERSONS RECEIVING DENTAL TREATMENT AT DOH CLINIC	1450	1057	- 393	27	1450	1100	- 350	24				

VARIANCE REPORT NARRATIVE FY 2023 AND FY 2024

05 03 05
HTH 501

PROGRAM TITLE: DEVELOPMENTAL DISABILITIES

PART I - EXPENDITURES AND POSITIONS

The variances in position counts for FY 23 was due to the inability to fill eleven positions, six pending the Department of Health, Human Resources Office (HRO) Classification to establish positions, three pending position redescription, and two positions were to be abolished. The remaining fifty positions are actively recruited.

The variance in position counts for FY 24 was due to the inability to fill eleven positions, nine pending HRO Classification to establish positions and two pending position redescriptions. The remaining fifty positions are actively recruited.

The expenditure variance for FY 23 was due to the increase in Federal Medical Assistance Percentage (FMAP). In response to the COVID-19 pandemic, section 60008 of the Families First Coronavirus Response Act (FFCRA) provided a temporary increase of 6.2% to each qualifying State's FMAP. This decreased the State's portion of the expenditures incurred for the 1915(c) Home and Community-Based Services (Waiver Services).

The expenditure variance for FY 24 was due to the vacancies and delay in processing the State's portion of the Waiver Services for the last week of September.

PART II - MEASURES OF EFFECTIVENESS

Item 3: The Developmental Disabilities Division (DDD) met this measure at 100% in FY 23 which resulted in a 10% variance between the planned and actual data. DDD continues to implement strategies to ensure adult foster homes are recertified prior to the expiration of the certificate.

PART III - PROGRAM TARGET GROUPS

Item 1: The variance was due to most intake applicants in FY 23 meeting the eligibility criteria. The trend is expected to continue in FY 24.

Item 3 and Item 4 are from another program.

Item 4: Percent of Key Community Stakeholders engaged in Public Health Preparedness or Emergency Response activity remained level. Stakeholders participated in all-hazards planning, prevention and mitigation actions, community outreach/education, and other emergency preparedness and response efforts.

PART IV - PROGRAM ACTIVITIES

Item 2: The decrease in new applicants for DD services was due to lack of follow-through on the part of applicants. Since the implementation of policy 4.01 effective May 24, 2021, applicants must first submit documents to meet with an intake worker. After meeting with the intake worker, a signed application for DD services must be submitted for the intake process to move forward.

Item 8: The decrease in the actual persons receiving dental treatment is due to Hawaii State Hospital (HSH) admittance of court admitted patients. The decrease in the estimated persons receiving dental treatment for FY 24 is based on the actual number of patients treated in FY 23 and past HSH admittance of court admitted patients.

Item 9: The decrease in the actual persons receiving dental treatment is due the COVID-19 pandemic (patients deferring dental treatment) and vacant/dissolved positions (dentist and dental assistants) which significantly decreased our clinics' operational capacity to treat patients this fiscal year. The decrease in the estimated persons receiving dental treatment is based on current/projected vacant positions (dentist and dental assistants) which significantly decreases our clinics' operational capacity to treat more patients in FY 24. We are actively recruiting to fill the vacant positions to maintain our established patients and accept new patients.

PROGRAM TITLE: BEHAVIORAL HEALTH ADMINISTRATION
 PROGRAM-ID: HTH-495
 PROGRAM STRUCTURE NO: 050306

	FISCAL YEAR 2022-23				THREE MONTHS ENDED 09-30-23				NINE MONTHS ENDING 06-30-24						
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%			
PART I: EXPENDITURES & POSITIONS															
RESEARCH & DEVELOPMENT COSTS															
POSITIONS															
EXPENDITURES (\$1,000's)															
OPERATING COSTS															
POSITIONS	40.50	29.00	-	11.50	28	0.50	2.00	+	1.50	300	0.50	2.00	+	1.50	300
EXPENDITURES (\$1000's)	6,402	13,755	+	7,353	115	90	3,037	+	2,947	3,274	304	6,482	+	6,178	2,032
TOTAL COSTS															
POSITIONS	40.50	29.00	-	11.50	28	0.50	2.00	+	1.50	300	0.50	2.00	+	1.50	300
EXPENDITURES (\$1000's)	6,402	13,755	+	7,353	115	90	3,037	+	2,947	3,274	304	6,482	+	6,178	2,032
					FISCAL YEAR 2022-23				FISCAL YEAR 2023-24						
	PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%			
PART II: MEASURES OF EFFECTIVENESS															
1. # OF INDIVIDUALS SERVED BY THE DIVISIONS OF BHA	17531	16151	-	1380	8	17490	17200	-	290	2					
PART III: PROGRAM TARGET GROUP															
1. RESIDENT POPULATION OF HAWAII	1437390	1433238	-	4152	0	1433379	1432000	-	1379	0					
PART IV: PROGRAM ACTIVITY															
1. # OF INDIVIDUALS SERVED IN BH PREVENTION SERV/PROG	NO DATA	NO DATA	+	0	0	NO DATA	NO DATA	+	0	0					
2. # OF INDIVIDUALS SERVED IN BH TREATMENT/SERVI PROG	17531	16151	-	1380	8	17490	17200	-	290	2					

VARIANCE REPORT NARRATIVE FY 2023 AND FY 2024

05 03 06
HTH 495

PROGRAM TITLE: BEHAVIORAL HEALTH ADMINISTRATION

PART I - EXPENDITURES AND POSITIONS

FY 23: At the end of the fiscal year, vacancies were due to positions still being classified based on the reorganization and difficulties in filling positions. The expenditure variance is attributed to expenditures from non-appropriated federal funds.

FY 24: The position variances are a result of a legislative adjustment that erroneously transferred out 1.50 full-time equivalent positions twice. The expenditure variances are attributed to expenditures from non-appropriated federal funds.

PART II - MEASURES OF EFFECTIVENESS

No significant variance.

PART III - PROGRAM TARGET GROUPS

No significant variance.

PART IV - PROGRAM ACTIVITIES

Item 1: FY 23, FY 24: Data is not available for all Behavioral Health Administration divisions.

VARIANCE REPORT

PROGRAM TITLE: ENVIRONMENTAL HEALTH

12/5/23

PROGRAM-ID:

PROGRAM STRUCTURE NO: 0504

	FISCAL YEAR 2022-23				THREE MONTHS ENDED 09-30-23				NINE MONTHS ENDING 06-30-24			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
PART I: EXPENDITURES & POSITIONS												
RESEARCH & DEVELOPMENT COSTS												
POSITIONS												
EXPENDITURES (\$1,000's)												
OPERATING COSTS												
POSITIONS	276.00	203.00	- 73.00	26	280.00	208.00	- 72.00	26	280.00	277.00	- 3.00	1
EXPENDITURES (\$1000's)	46,947	36,640	- 10,307	22	8,446	7,382	- 1,064	13	26,237	27,227	+ 990	4
TOTAL COSTS												
POSITIONS	276.00	203.00	- 73.00	26	280.00	208.00	- 72.00	26	280.00	277.00	- 3.00	1
EXPENDITURES (\$1000's)	46,947	36,640	- 10,307	22	8,446	7,382	- 1,064	13	26,237	27,227	+ 990	4
					FISCAL YEAR 2022-23				FISCAL YEAR 2023-24			
	PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%				
PART II: MEASURES OF EFFECTIVENESS												
1. % FOOD SERVICE ESTABLISHMENTS RCVG "PASS" PLACARD		85	88	+ 3	4		85	85	+ 0	0		
2. % OF REQUESTS FOR SERVICES MET (STATE LAB SVCS)		100	100	+ 0	0		100	100	+ 0	0		

VARIANCE REPORT NARRATIVE FY 2023 AND FY 2024

PROGRAM TITLE: ENVIRONMENTAL HEALTH

05 04

PART I - EXPENDITURES AND POSITIONS

Specific variances are discussed in detail in the lowest level program narratives.

PART II - MEASURES OF EFFECTIVENESS

No significant variances.

PROGRAM TITLE: ENVIRONMENTAL HEALTH SERVICES
 PROGRAM-ID: HTH-610
 PROGRAM STRUCTURE NO: 050401

	FISCAL YEAR 2022-23				THREE MONTHS ENDED 09-30-23				NINE MONTHS ENDING 06-30-24			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
PART I: EXPENDITURES & POSITIONS												
RESEARCH & DEVELOPMENT COSTS												
POSITIONS												
EXPENDITURES (\$1,000's)												
OPERATING COSTS												
POSITIONS	160.00	111.00	- 49.00	31	159.00	114.00	- 45.00	28	159.00	158.00	- 1.00	1
EXPENDITURES (\$1000's)	12,798	11,024	- 1,774	14	3,583	2,624	- 959	27	10,042	10,927	+ 885	9
TOTAL COSTS												
POSITIONS	160.00	111.00	- 49.00	31	159.00	114.00	- 45.00	28	159.00	158.00	- 1.00	1
EXPENDITURES (\$1000's)	12,798	11,024	- 1,774	14	3,583	2,624	- 959	27	10,042	10,927	+ 885	9

	FISCAL YEAR 2022-23				FISCAL YEAR 2023-24			
	PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%
PART II: MEASURES OF EFFECTIVENESS								
1. % OF HOMES, BUSINESSES RCVD VECTOR ASSTNC & OUTRCH	98	100	+ 2	2	98	98	+ 0	0
2. % FOOD ESTABLISHMENTS RECEIVING "PASS" PLACARD	85	88	+ 3	4	85	85	+ 0	0
3. % FOOD ESTABMTS RCVG "CONDITIONAL PASS" PLACARD	15	12	- 3	20	15	15	+ 0	0
4. % FOOD ESTABLISHMENTS RECEIVING "CLOSED" PLACARD	1	1	+ 0	0	1	1	+ 0	0
5. % FARMS W/ VIOLATIVE PESTICIDE RESIDUES	5	0	- 5	100	5	5	+ 0	0
6. % FOOD ESTABMTS W/RISK FACTORS FOODBORNE ILLNESS	15	12	- 3	20	15	15	+ 0	0
7. % AIR-CONDITIOND/VENTILATD FACILITIES IN COMPLIANC	80	74	- 6	8	80	80	+ 0	0
8. % NOISE PERMITS IN COMPLIANCE (IRH)	98	100	+ 2	2	98	100	+ 2	2
9. % RADIATION FACILITIES IN COMPLIANCE (IRH)	70	92	+ 22	31	70	90	+ 20	29
10. % ASBESTOS RENOV/DEMO (NESHAP) PROJS IN COMPLIANCE	90	86	- 4	4	90	90	+ 0	0

PART III: PROGRAM TARGET GROUP								
1. # OF HOMES, BUSINESSES RCVD VECTOR ASSTNC & OUTRCH	3800	4179	+ 379	10	3800	3800	+ 0	0
2. # FOOD ESTABLISHMENTS	10400	10586	+ 186	2	10500	10600	+ 100	1
3. POPULATION OF HAWAII	1420000	1434000	+ 14000	1	1300000	1432000	+ 132000	10
4. # TEMPORARY FOOD ESTABLISHMENT PERMITTEES	5000	7245	+ 2245	45	6000	7300	+ 1300	22
5. # FARMS WITH VIOLATIVE PESTICIDE RESIDUES	3	0	- 3	100	20	5	- 15	75
6. # LICENSED RADIOLOGIC TECHNOLOGISTS (IRH)	1500	1976	+ 476	32	1500	1900	+ 400	27
7. # TATTOO SHOPS	240	255	+ 15	6	275	255	- 20	7
8. # SITES WITH A NOISE PERMIT	450	477	+ 27	6	450	475	+ 25	6
9. # OF RADIATION FACILITIES (IRH)	1100	1149	+ 49	4	1100	1150	+ 50	5
10. # ASBESTOS RENOVATN/DEMOLITN (NESHAP) PROJS (IRH)	700	643	- 57	8	700	700	+ 0	0

PART IV: PROGRAM ACTIVITY								
1. # INSPECTIONS OF AHERA SOURCES (IRH)	100	104	+ 4	4	100	100	+ 0	0
2. # ROUTINE INSPECTIONS OF FOOD ESTABLISHMENTS	12000	12561	+ 561	5	12000	13000	+ 1000	8
3. # FOOD SAFETY INSPECTIONS W/ 2/MORE MAJOR VIOLATNS	1400	1434	+ 34	2	1000	1400	+ 400	40
4. # AS-BUILT AC/VENTILATION INSPECTIONS (IRH)	55	30	- 25	45	60	55	- 5	8
5. # FOOD PRODUCTS SAMPLED FOR PESTICIDE RESIDUE	90240	0	- 90240	100	240	50	- 190	79
6. # FOODBORNE ILLNESS INVESTIGATIONS CONDUCTED	150	164	+ 14	9	150	160	+ 10	7
7. # VECTOR COMPLAINT INSPTNS& SITE SURVEYS CONDUCTED	1400	1016	- 384	27	1400	1400	+ 0	0
8. # NOISE PERMIT INSPECTIONS (IRH)	1100	1356	+ 256	23	1100	1200	+ 100	9
9. # INSPECTIONS OF RADIATION FACILITIES (IRH)	225	99	- 126	56	225	140	- 85	38
10. # FOOD SAFETY CLASSES CONDUCTED	400	285	- 115	29	400	300	- 100	25

VARIANCE REPORT NARRATIVE FY 2023 AND FY 2024

05 04 01
HTH 610

PROGRAM TITLE: ENVIRONMENTAL HEALTH SERVICES

PART I - EXPENDITURES AND POSITIONS

The variances in the number of positions filled for FY 23 and for the first three months of FY 24 are primarily due to the lengthy recruitment process and difficulty in filling positions as well as five positions that were unfunded (salaries deleted by Act 9, SLH 2020) during FY 23. Act 164, SLH 2023, restored the salaries for four positions so they can be filled in FY 24. Most of the five new positions that were established in mid-FY 23 were not filled until FY 24.

For expenditures, the variances for FY 23 and FY 24 first quarter are primarily due to vacancy savings. The variance for FY 24 second-fourth quarters is due to the anticipated filling of all funded positions.

PART II - MEASURES OF EFFECTIVENESS

Item 3: The variance for FY 23 is only a 3% improvement change, but it appears to be a large variance due to small numbers. The program continues to focus on reducing risk factors in the regulated community.

Item 5: The FY 23 variance is due to significant staff turnover and vacancies, with no filled positions available to conduct inspection activities and no filled positions at the State Laboratory to conduct the sampling analysis. The Department of Health (DOH) is addressing the staffing shortage and is filling vacant positions to achieve this measure of effectiveness going forward.

Item 6: The variance for FY 23 is a slight improvement in actual change in percent of food facilities with multiple risk factors from 15% to 12%. The program continues to focus on reducing risk factors.

Item 9: The variances are due to the focus on required inspections only, due to lack of staff to perform the usual number of inspections. Facilities for which annual inspections are required are more likely to comply with regulations.

PART III - PROGRAM TARGET GROUPS

Item 1: The FY 23 variance is due to an increase of travel-related arbovirus cases imported to Hawaii. The increase of arbovirus cases necessitated an increase in outreach and response.

Item 3: The FY 24 variance is due to the higher-than-expected population growth.

Item 4: The variances reflect the increase in special events as COVID-19 and crowd restrictions diminish, leading to an increase in temporary food permits.

Item 5: The FY 23 variance is due to significant staff turnover and vacancies, with no filled positions available to conduct inspection activities and no filled positions at the State Laboratory to conduct the sampling analysis. DOH is addressing the staffing shortage and is filling vacant positions to achieve the target group measure going forward.

Item 6: The variances are due to the increasing number of Licensed Radiologic Technologists that healthcare facilities have been able to hire.

PART IV - PROGRAM ACTIVITIES

Item 3: The variance in FY 24 is due to an underestimation of the number of major violations observed. The FY 24 amount should be close to the FY 23 amount.

Item 4: The variance for FY 23 is due to the vacancy of one of the two Indoor Air Quality Unit staff during FY 23.

Item 5: The variances are due to significant staff turnover and vacancies, with no filled positions available to conduct inspection activities and no filled positions at the State Laboratory to conduct the sampling analysis. In addition, the planned FY 23 number was incorrectly input last year, resulting in a typographical error. DOH is addressing the staffing shortage and is filling vacant positions to achieve the program activity measure

VARIANCE REPORT NARRATIVE FY 2023 AND FY 2024

05 04 01
HTH 610

PROGRAM TITLE: ENVIRONMENTAL HEALTH SERVICES

going forward.

Item 7: The FY 23 variance was due to a loss of Vector Control Inspectors Statewide due to retirements and resignations as well as the diversion of resources to outreach and assistance related to arbovirus cases. The number of inspections is expected to stay relatively level unless there are adverse weather conditions that increase the abundance of disease-carrying vectors.

Item 8: The variance for FY 23 is likely due to a combination of increased construction and roadway improvement projects and effective ongoing construction outreach Statewide by the Noise Section.

Item 9: The variances are due to vacancies in the Radiation Section.

Item 10: The variances are due to the significant reduction in the demand for food safety classes. Nearly all food establishments statewide are short-staffed, and this has resulted in a lowered demand for the mandated food safety classes and certifications.

PROGRAM TITLE: STATE LABORATORY SERVICES
 PROGRAM-ID: HTH-710
 PROGRAM STRUCTURE NO: 050402

	FISCAL YEAR 2022-23				THREE MONTHS ENDED 09-30-23				NINE MONTHS ENDING 06-30-24			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
PART I: EXPENDITURES & POSITIONS												
RESEARCH & DEVELOPMENT COSTS												
POSITIONS												
EXPENDITURES (\$1,000's)												
OPERATING COSTS												
POSITIONS	72.00	57.00	- 15.00	21	74.00	58.00	- 16.00	22	74.00	74.00	+ 0.00	0
EXPENDITURES (\$1000's)	23,741	18,531	- 5,210	22	2,152	2,047	- 105	5	9,005	9,110	+ 105	1
TOTAL COSTS												
POSITIONS	72.00	57.00	- 15.00	21	74.00	58.00	- 16.00	22	74.00	74.00	+ 0.00	0
EXPENDITURES (\$1000's)	23,741	18,531	- 5,210	22	2,152	2,047	- 105	5	9,005	9,110	+ 105	1

	FISCAL YEAR 2022-23				FISCAL YEAR 2023-24			
	PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%
PART II: MEASURES OF EFFECTIVENESS								
1. % OF FALSE POSITIVE LAB TEST RESULTS	0	0	+ 0	0	0	0	+ 0	0
2. % OF FALSE NEGATIVE LAB TEST RESULTS	0	0	+ 0	0	0	00	+ 0	0
3. % OF REQUESTS FOR SERVICES MET	100	100	+ 0	0	100	100	+ 0	0
4. % PROFICIENCY TESTS PERFRMD MEETG PROFICIENCY STDS	100	100	+ 0	0	100	100	+ 0	0

PART III: PROGRAM TARGET GROUP								
1. OTHER DEPARTMENT OF HEALTH PROGRAMS	9	9	+ 0	0	9	9	+ 0	0
2. OTHER GOVERNMENT AGENCIES	7	7	+ 0	0	7	7	+ 0	0
3. # OF CLINICAL LAB PERSONNEL APPLYING FOR LICENSURE	180	175	- 5	3	180	180	+ 0	0
4. # OF LICENSED CLINICAL LABORATORY PERSONNEL	1400	1350	- 50	4	1400	1400	+ 0	0
5. # OF LABS PERFORMING CLINICAL DIAGNOSTIC TESTING	780	775	- 5	1	780	780	+ 0	0
6. # OF LABS PERFORMING SUBSTANCE ABUSE TESTING	3	3	+ 0	0	3	3	+ 0	0
7. # OF LABS PERFORMING ENVIRONMENTAL TESTING	16	16	+ 0	0	16	16	+ 0	0
8. # OF LABS PERFORMING MEDICAL MARIJUANA TESTING	3	2	- 1	33	3	1	- 2	67

PART IV: PROGRAM ACTIVITY								
1. DRINKING WATER (WORK TIME UNITS)	400000	608600	+ 208600	52	400000	400000	+ 0	0
2. WATER POLLUTION (WORK TIME UNITS)	325000	335800	+ 10800	3	325000	325000	+ 0	0
3. SEXUALLY TRANSMITTED DISEASE (WORK TIME UNITS)	320000	310000	- 10000	3	320000	320000	+ 0	0
4. OTHER COMMUNICABLE DISEASES (WORK TIME UNITS)	575000	572000	- 3000	1	575000	575000	+ 0	0
5. FOOD AND DRUGS (WORK TIME UNITS)	300000	129060	- 170940	57	300000	300000	+ 0	0
6. AIR POLLUTION (WORK TIME UNITS)	680000	362064	- 317936	47	680000	370000	- 310000	46
7. # OF LABORATORY INSPECTIONS	30	28	- 2	7	30	28	- 2	7
8. # OF LAB PERSONNEL RECEIVING FORMAL LAB TRAINING	110	101	- 9	8	110	101	- 9	8

VARIANCE REPORT NARRATIVE FY 2023 AND FY 2024

05 04 02
HTH 710

PROGRAM TITLE: STATE LABORATORY SERVICES

PART I - EXPENDITURES AND POSITIONS

The -21% variance in positions in FY 23 has not changed much from the prior year. Although positions were filled, many were filled internally which created another unfilled position. Also, the recruitment process remains slow and the pool of qualified candidates is limited due to private sector competition that offers more competitive pay and are thus able to hire more experienced and qualified candidates leaving higher level positions vacant longer. Additionally, the State Laboratories Division (SLD) long tenured employees continued to retire during FY 23.

There is a -22% variance in expenditures in FY 23 because more time is needed to spend the capital improvement project (CIP) operating funds that were appropriated per Act 88, SLH 2021, as amended by Act 248, SLH 2022. The \$14,000,000 appropriated as CIP Operating funds have an extended lapse date of June 30,2024. These funds should be encumbered and/or expended by the lapse date.

The -22% variance in positions in the 3-months ended September 30, 2023, is due to slow approval and recruitment process and the lack of available qualified candidates.

PART II - MEASURES OF EFFECTIVENESS

No significant variances.

PART III - PROGRAM TARGET GROUPS

Item 8: The -33% variance is due to the closure of one medical marijuana testing laboratory.

PART IV - PROGRAM ACTIVITIES

Item 1: The 52% variance is due to Water Infrastructure for Improvement to the Nation (WIIN) Act which funded a project for testing lead in schools. The project required much more water testing that was not anticipated in the estimate.

Item 5: The -57% variance is due to vacancies in the Food and Drug Branch and lack of samples being delivered to the Food Section for testing. Also, the State Laboratories, Environmental Health Analytical Services Branch, Food Section staff of three all retired during this time. Since then, all three positions have been filled.

Item 6: The -47% decrease in Air Pollution Work Time Units (WTU) is due to a change in the methods used for Air Pollution WTU time reporting. Air Pollution monitoring work is now being completed by the Clean Air Branch. A reorganization is currently being conducted.

PROGRAM TITLE: HEALTH CARE ASSURANCE
 PROGRAM-ID: HTH-720
 PROGRAM STRUCTURE NO: 050403

	FISCAL YEAR 2022-23				THREE MONTHS ENDED 09-30-23				NINE MONTHS ENDING 06-30-24						
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%			
PART I: EXPENDITURES & POSITIONS															
RESEARCH & DEVELOPMENT COSTS															
POSITIONS															
EXPENDITURES (\$1,000's)															
OPERATING COSTS															
POSITIONS	44.00	35.00	-	9.00	20	47.00	36.00	-	11.00	23	47.00	45.00	-	2.00	4
EXPENDITURES (\$1000's)	10,408	7,085	-	3,323	32	2,711	2,711	+	0	0	7,190	7,190	+	0	0
TOTAL COSTS															
POSITIONS	44.00	35.00	-	9.00	20	47.00	36.00	-	11.00	23	47.00	45.00	-	2.00	4
EXPENDITURES (\$1000's)	10,408	7,085	-	3,323	32	2,711	2,711	+	0	0	7,190	7,190	+	0	0
	FISCAL YEAR 2022-23				FISCAL YEAR 2023-24										
	PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%							
PART II: MEASURES OF EFFECTIVENESS															
1. % FACILITIES MTG MINIMUM LICENSURE/CERTIFICATN REQ	100	100	+	0	0	100	100	+	0	0	100	100	+	0	0
2. % OF UNLICENSED SETTINGS BROUGHT INTO COMPLIANCE	100	100	+	0	0	100	100	+	0	0	100	100	+	0	0
3. % COMPLAINTS INVESTGTD & CORRECTV ACTION COMPLETED	100	100	+	0	0	100	100	+	0	0	100	100	+	0	0
PART III: PROGRAM TARGET GROUP															
1. HOSPITALS AND CRITICAL ACCESS HOSPITALS	29	29	+	0	0	29	29	+	0	0	29	29	+	0	0
2. SKILL NURS(SNF), INTERM CARE FAC (ICF) AND ICF-ID	45	45	+	0	0	45	45	+	0	0	45	45	+	0	0
3. ADULT RESIDENTIAL/FOSTER/COMMUNITY HOMES/DAY CARE	1710	1705	-	5	0	715	1710	+	995	139	715	1710	+	995	139
4. ESRD AND HOSPICE FACILITIES AND AGENCIES	48	48	+	0	0	48	48	+	0	0	48	48	+	0	0
5. SPCL TREATMENT FACILITIES/THERAPEUTIC LIVING PROGS	38	38	+	0	0	38	38	+	0	0	38	38	+	0	0
6. CASE MGMT AGENCIES AND DIETICIANS	216	223	+	7	3	215	225	+	10	5	215	225	+	10	5
7. CLINICAL LABORATORIES	990	919	-	71	7	990	925	-	65	7	990	925	-	65	7
8. HOME HLTH AGENCIES/HOME CARE AGENCIES	165	168	+	3	2	165	175	+	10	6	165	175	+	10	6
9. AMBULATORY SURGICAL CENTERS	23	23	+	0	0	23	23	+	0	0	23	23	+	0	0
PART IV: PROGRAM ACTIVITY															
1. NUMBER OF STATE LICENSING SURVEYS	3800	3455	-	345	9	3800	3500	-	300	8	3800	3500	-	300	8
2. NUMBER OF MEDICARE CERTIFICATION SURVEYS	105	112	+	7	7	105	105	+	0	0	105	105	+	0	0
3. NUMBER OF STATE COMPLAINT INVESTIGATIONS	125	208	+	83	66	125	130	+	5	4	125	130	+	5	4
4. NUMBER OF FEDERAL COMPLAINT INVESTIGATIONS	75	68	-	7	9	75	80	+	5	7	75	80	+	5	7
5. NUMBER OF INVESTIGATIONS OF UNLICENSED ACTIVITIES	25	34	+	9	36	25	25	+	0	0	25	25	+	0	0

VARIANCE REPORT NARRATIVE FY 2023 AND FY 2024

05 04 03
HTH 720

PROGRAM TITLE: HEALTH CARE ASSURANCE

PART I - EXPENDITURES AND POSITIONS

In FY 23, the Office of Health Care Assurance (OHCA) was unable or did not fill 9.00 full-time equivalent (FTE) vacant positions of an authorized 44.00 positions which amounted to a 20% variance. The vacancies included positions to be impacted by a program reorganization and, therefore, purposely not filled.

For FY 24, the 2023 legislature approved 3.00 FTEs which increased the budgeted positions to 47.00. For the first quarter of FY 24, OHCA continued to have difficulties filling vacant positions and with an additional three authorized positions which cannot be established for six months, the actual variance increased to 11.00 vacancies, for a 23% variance. OHCA filled the Administrative Specialist IV position effective November 7, 2023, and anticipates filling several more positions that are in recruitment. In addition, by the end of FY 24, OHCA anticipates the reorganization to be completed and vacancies reduced to just 2.00 FTE, or an 4% variance.

There was a 32% variance in expenditures. \$3,323,000 out of a \$10,408,000 operating budget was unspent primarily due to the Administrative Specialist IV position vacancy which caused delays in executing contracts and conducting procurements in FY 23. Additionally, due to the timing of contract executions, many expenditures were recorded outside of the state fiscal year 2023. Vacant positions also contributed to the budget variance.

PART II - MEASURES OF EFFECTIVENESS

No variances between the planned and actual percentages.

PART III - PROGRAM TARGET GROUPS

Item 3: Please correct the FY 24 Planned count. There's no way the number of the licensees would decline to 715 in FY 24 from 1,710 in FY 23. As a result, the FY 24 Estimated count should remain as stated.

Other Items: No significant changes in the program target group, i.e.,

numbers of licensed or certified health care providers. Notwithstanding the recent pandemic the overall number of providers remained stable with new providers taking the place of those who ceased operations or retired. OHCA anticipates a slight increase in the overall number of licensed providers during FY 24 when more new providers become licensed.

PART IV - PROGRAM ACTIVITIES

Item 3: The number of complaints is difficult to predict. OHCA received more complaints on State-licensed only facilities than anticipated.

Item 5: The number of investigations on unlicensed activities is difficult to predict. OHCA may have received more complaints leading to these investigations as a result of increased public awareness from press releases issued on enforcement action initiated by OHCA.

	FISCAL YEAR 2022-23				THREE MONTHS ENDED 09-30-23				NINE MONTHS ENDING 06-30-24						
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%			
PART I: EXPENDITURES & POSITIONS															
RESEARCH & DEVELOPMENT COSTS															
POSITIONS															
EXPENDITURES (\$1,000's)															
OPERATING COSTS															
POSITIONS	199.00	158.00	-	41.00	21	245.00	178.00	-	67.00	27	245.00	233.00	-	12.00	5
EXPENDITURES (\$1000's)	21,288	25,349	+	4,061	19	8,964	5,247	-	3,717	41	27,127	30,844	+	3,717	14
TOTAL COSTS															
POSITIONS	199.00	158.00	-	41.00	21	245.00	178.00	-	67.00	27	245.00	233.00	-	12.00	5
EXPENDITURES (\$1000's)	21,288	25,349	+	4,061	19	8,964	5,247	-	3,717	41	27,127	30,844	+	3,717	14
	FISCAL YEAR 2022-23				FISCAL YEAR 2023-24										
	PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%							
PART II: MEASURES OF EFFECTIVENESS															
1. % CERTIF OF NEED APPLIC DOCUMNTNG RELATION TO HSFP	NO DATA	94	+	94	0	95	95	+	0	0					
2. % ACTIV COMPLTD W/IN ESTAB TMEFRM HI STATE DD PLAN	85	100	+	15	18	95	95	+	0	0					

VARIANCE REPORT NARRATIVE FY 2023 AND FY 2024

PROGRAM TITLE: OVERALL PROGRAM SUPPORT

05 05

PART I - EXPENDITURES AND POSITIONS

Specific variances are discussed in detail in the lowest level program narratives.

PART II - MEASURES OF EFFECTIVENESS

See lowest level program narratives for explanation of significant variances.

PROGRAM TITLE: STATE HEALTH PLNG & DVLPMNT AGENCY
 PROGRAM-ID: HTH-906
 PROGRAM STRUCTURE NO: 050501

	FISCAL YEAR 2022-23				THREE MONTHS ENDED 09-30-23				NINE MONTHS ENDING 06-30-24						
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%			
PART I: EXPENDITURES & POSITIONS															
RESEARCH & DEVELOPMENT COSTS															
POSITIONS															
EXPENDITURES (\$1,000's)															
OPERATING COSTS															
POSITIONS	6.00	4.00	-	2.00	33	6.00	5.00	-	1.00	17	6.00	6.00	+	0.00	0
EXPENDITURES (\$1000's)	646	352	-	294	46	154	155	+	1	1	526	525	-	1	0
TOTAL COSTS															
POSITIONS	6.00	4.00	-	2.00	33	6.00	5.00	-	1.00	17	6.00	6.00	+	0.00	0
EXPENDITURES (\$1000's)	646	352	-	294	46	154	155	+	1	1	526	525	-	1	0

	FISCAL YEAR 2022-23				FISCAL YEAR 2023-24					
	PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%		
PART II: MEASURES OF EFFECTIVENESS										
1. % CERTIF OF NEED APPL DOCUMTNG RELATIN TO HSFP	NO DATA	94	-	-94	0	95	95	+	0	0
2. % OF CON APPL APPRVD BASED ON FINDGS REL TO HSFP	NO DATA	94	-	-94	0	95	95	+	0	0
3. % SHCC MTG TIME SPENT ON REVWNG/RECOM ON CON APPL	NO DATA	0	-	0	0	25	25	+	0	0
4. % SHCC MEETG TIME SPENT ON REVWNG/REVSG/APPRV HSFP	NO DATA	30	-	-30	0	35	35	+	0	0
5. % SAC MTG TIME SPENT ON REVWNG/RECOM ON CON APPL	NO DATA	0	-	0	0	35	35	+	0	0
6. % SAC MEETG TIME SPENT ON REVWNG/REVSG/APPRV HSFP	NO DATA	40	-	-40	0	40	40	+	0	0
7. % OF PREVIOUS YEAR'S CON APPROVALS MONITORED	NO DATA	0	-	0	0	100	100	+	0	0
8. % HTH CARE FAC SUBM SEMI-ANN REPTS W/IN SPCFD TIME	NO DATA	93	-	-93	0	95	95	+	0	0
9. % USRS RATG SEMI-ANN REPTS AS HELPFUL/VERY HELPFUL	NO DATA	5	-	-5	0	90	90	+	0	0
10. NUMBER OF SPECIAL REPORTS PUBLISHED	NO DATA	1	-	-1	0	1	1	+	0	0
PART III: PROGRAM TARGET GROUP										
1. ALL THE PEOPLE OF THE STATE OF HAWAII	NO DATA	1460	-	-1460	0	1460	1460	+	0	0
2. VOLUNTEERS INVOLVED IN SHCC/SUB-AREA COUNCILS	NO DATA	147	-	-147	0	140	140	+	0	0
3. PUBLIC AND PRIVATE HEALTH CARE SERVICE PROVIDERS	NO DATA	85	-	-85	0	85	85	+	0	0
4. HEALTH CARE RESEARCHERS, DEVELOPERS AND ANALYSTS	NO DATA	35	-	-35	0	35	35	+	0	0
5. HEALTH CARE FOCUSED ASSOCIATIONS	NO DATA	12	-	-12	0	12	12	+	0	0
PART IV: PROGRAM ACTIVITY										
1. PLNNG, RESEARCH & REVIEW ACTIV (PROF PERSON DAYS)	NO DATA	790	-	-790	0	790	790	+	0	0
2. DATA MANAGEMENT ACTIVITIES (PROF PERSON DAYS)	NO DATA	212	-	-212	0	212	212	+	0	0
3. HSHCC & SAC SUPPORT & TRAINING (PROF PERSON DAYS)	NO DATA	225	-	-225	0	225	225	+	0	0

VARIANCE REPORT NARRATIVE FY 2023 AND FY 2024

05 05 01
HTH 906

PROGRAM TITLE: STATE HEALTH PLNG & DVLPMNT AGENCY

PART I - EXPENDITURES AND POSITIONS

The variances for positions and expenditure in FY 23 are due to two vacant positions; Comprehensive Health Planning Coordinator, which the Department of Human Resources Development will provide a list, and the Governor appointed Administrator.

The new Administrator was appointed by the Governor in April 2023. The Comprehensive Health Planning Coordinator position is expected to be fill in Q3 or Q4 of FY2 24.

PART II - MEASURES OF EFFECTIVENESS

Due to the impact from the program review in the Executive Biennium Budget, Fiscal Budget 2022-2023, the variance report does not contain planned data for FB 22-23. Therefore, variance between Planned and Actual is not available.

PART III - PROGRAM TARGET GROUPS

Due to the impact from the program review in the Executive Biennium Budget, Fiscal Budget 2022-2023, the variance report does not contain planned data for FB 22-23. Therefore, variance between Planned and Actual is not available.

PART IV - PROGRAM ACTIVITIES

Due to the impact from the program review in the Executive Biennium Budget, Fiscal Budget 2022-2023, the variance report does not contain planned data for FB 22-23. Therefore, variance between Planned and Actual is not available.

PROGRAM TITLE: HEALTH STATUS MONITORING
 PROGRAM-ID: HTH-760
 PROGRAM STRUCTURE NO: 050502

	FISCAL YEAR 2022-23				THREE MONTHS ENDED 09-30-23				NINE MONTHS ENDING 06-30-24			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
PART I: EXPENDITURES & POSITIONS												
RESEARCH & DEVELOPMENT COSTS												
POSITIONS												
EXPENDITURES (\$1,000's)												
OPERATING COSTS												
POSITIONS	37.50	31.50	- 6.00	16	43.50	31.50	- 12.00	28	43.50	31.50	- 12.00	28
EXPENDITURES (\$1000's)	3,442	2,158	- 1,284	37	796	464	- 332	42	2,389	2,721	+ 332	14
TOTAL COSTS												
POSITIONS	37.50	31.50	- 6.00	16	43.50	31.50	- 12.00	28	43.50	31.50	- 12.00	28
EXPENDITURES (\$1000's)	3,442	2,158	- 1,284	37	796	464	- 332	42	2,389	2,721	+ 332	14
	FISCAL YEAR 2022-23				FISCAL YEAR 2023-24							
	PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%				
PART II: MEASURES OF EFFECTIVENESS												
1. % VITAL RECORDS ISSUED WITHIN 10 DAYS FROM REQUEST	75	75	+ 0	0	75	75	+ 0	0				
2. % TARGETED RESEARCH OR STATISTICS REPORTS DISSEM	80	80	+ 0	0	80	80	+ 0	0				
3. MORTALITY RATE (PER THOUSAND)	8	8	+ 0	0	8	8	+ 0	0				
4. AVERAGE LIFE SPAN OF RESIDENTS	81	80	- 1	1	81	80	- 1	1				
PART III: PROGRAM TARGET GROUP												
1. DEPARTMENT OF HEALTH PROGRAMS	85	85	+ 0	0	85	85	+ 0	0				
2. HAWAIIANS AND OTHER ETHNIC GROUPS	1460000	1431600	- 28400	2	1480000	1438000	- 42000	3				
3. VITAL EVENT REGISTRANTS	73000	75000	+ 2000	3	73500	74000	+ 500	1				
4. ADULT POPULATION 18 AND OVER	1107000	1145000	+ 38000	3	1108000	1164780	+ 56780	5				
PART IV: PROGRAM ACTIVITY												
1. # OF MAJOR HEALTH STATISTICS REQUESTS FULFILLED	85	90	+ 5	6	85	90	+ 5	6				
2. # OF VITAL EVENTS REGISTERED	53000	55000	+ 2000	4	53500	55000	+ 1500	3				
3. # OF VITAL RECORD CERTIFICATES ISSUED	300000	350000	+ 50000	17	301000	320000	+ 19000	6				
4. # NEW DATA SETS / STAT ITEMS DISSEM ELECTRONICALLY	8	8	+ 0	0	8	8	+ 0	0				

VARIANCE REPORT NARRATIVE FY 2023 AND FY 2024

05 05 02
HTH 760

PROGRAM TITLE: HEALTH STATUS MONITORING

PART I - EXPENDITURES AND POSITIONS

FY 23: HTH 760 had 10 vacancies that existed in FY23, 4 of which were filled, leaving the remaining 6 FTEs. The variance in cost budgeted vs. actual is due to the vacant positions that were unfulfilled.

FY 24, period ending 09/30/2023: HTH 760 was awarded an additional 6 FTEs, bringing the total to 12 positions to be filled. The initial 6 vacant positions arose due to the inability to hire entry-level and professional-level positions because of the complex nature of the work, where specific skills are required such as statistical methods and personnel management. HTH 760 is currently recruiting staff to fill 100% of those positions. Fulfillment of these positions will decrease the variance between our budgeted and actual costs moving forward.

PART II - MEASURES OF EFFECTIVENESS

No significant variances. HTH 760 was able to reach planned goals for measures of effectiveness. Even with the unexpected fires on Maui, HTH 760 was able to process nearly 1,600 certificates at no charge to the community.

PART III - PROGRAM TARGET GROUPS

HTH 760 will be maintaining planned targets for fiscal year 2024. The planned targets are based on population growth. The total number of adult populations in Hawaii in FY23 was 1,434,000 (up from 1,440,000 in FY22). Based on estimates, the program will service close to 55% and increase slightly higher by about another 5% for FY25.

PART IV - PROGRAM ACTIVITIES

HTH 760 has begun working with the Department of Hawaiian Homelands to better service genealogical requests. Service to the DHHL constituency has been long due to the intensity of the search and the lack of qualified staff. HTH 760 will be training staff from DHHL to assist in completing genealogical requests at the Department of Health. In FY

2023, the legislature approved an archivist (this position will be established by January 2024).

Additionally, HTH 760 is continuing to upgrade its database and ensure protection from breaches. Strict protocols have been set up to maintain the high integrity of the system.

Increase statistical use of data for the Department of Health programs and community to provide trending data and forecasting of potential issues that may affect the community. With this increase, funding has been requested to re-establish 2 research statisticians and 4 positions that are on the books without funding.

PROGRAM TITLE: DEVELOPMENTAL DISABILITIES COUNCIL
 PROGRAM-ID: HTH-905
 PROGRAM STRUCTURE NO: 050503

	FISCAL YEAR 2022-23				THREE MONTHS ENDED 09-30-23				NINE MONTHS ENDING 06-30-24						
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%			
PART I: EXPENDITURES & POSITIONS															
RESEARCH & DEVELOPMENT COSTS															
POSITIONS															
EXPENDITURES (\$1,000's)															
OPERATING COSTS															
POSITIONS	7.50	6.50	-	1.00	13	7.50	6.50	-	1.00	13	7.50	7.50	+	0.00	0
EXPENDITURES (\$1000's)	774	815	+	41	5	197	210	+	13	7	589	576	-	13	2
TOTAL COSTS															
POSITIONS	7.50	6.50	-	1.00	13	7.50	6.50	-	1.00	13	7.50	7.50	+	0.00	0
EXPENDITURES (\$1000's)	774	815	+	41	5	197	210	+	13	7	589	576	-	13	2
	FISCAL YEAR 2022-23				FISCAL YEAR 2023-24										
	PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%							
PART II: MEASURES OF EFFECTIVENESS															
1. % ACTIV COMPLTD W/IN ESTAB TMEFRM HI STATE DD PLAN	85	100	+	15	18	95	95	+	0	0	95	95	+	0	0
2. % CONSUMER SATISFACTION SURVEYS W/SATISFACTION	90	95	+	5	6	90	90	+	0	0	90	90	+	0	0
PART III: PROGRAM TARGET GROUP															
1. ESTIMATE OF PREVALENCE OF INDIVIDUALS W/DEV. DIS.	22619	22755	+	136	1	22619	22619	+	0	0	22619	22619	+	0	0
2. FAMILIES OF INDIVIDUALS WITH DEV. DISABILITIES	22619	22755	+	136	1	22619	22619	+	0	0	22619	22619	+	0	0
3. DEVELOPMENTAL DISABILITIES SERVICE PROVIDERS	70	61	-	9	13	70	70	+	0	0	70	70	+	0	0
PART IV: PROGRAM ACTIVITY															
1. # PUB. AWARENESS/ED/TRNG ACT COORD/CONDTD/CO-SPNRD	25	25	+	0	0	25	25	+	0	0	25	25	+	0	0
2. # INDIVIDUALS W/DD & FAMILY MEMBERS PARTICIPATING	1500	1750	+	250	17	2000	2000	+	0	0	2000	2000	+	0	0
3. # OF SYSTEMS CHANGE ACTIVITIES	10	10	+	0	0	10	10	+	0	0	10	10	+	0	0
4. # LEG MEASURES MONITORED, TRACKED, &PRVD TESTIMONY	20	164	+	144	720	20	20	+	0	0	20	20	+	0	0
5. # COUNTY, FED, STATE POLICIES PROVD COMMENT/RCMMNS	5	4	-	1	20	5	5	+	0	0	5	5	+	0	0
6. # OF CMMNTY ADVISORY GRPS, COALITIONS, ETC PARTICD	100	96	-	4	4	100	100	+	0	0	100	100	+	0	0
7. # INDIVIDUALS W/DD PRTCNG IN SELF-ADVCY ACTIVITIES	1000	1750	+	750	75	1000	1000	+	0	0	1000	1000	+	0	0

VARIANCE REPORT NARRATIVE FY 2023 AND FY 2024

05 05 03
HTH 905

PROGRAM TITLE: DEVELOPMENTAL DISABILITIES COUNCIL

PART I - EXPENDITURES AND POSITIONS

Expenditures: We had additional funds due to carry over of Federal monies from last federal fiscal year.

Positions: The variance is due to a vacancy for one of our positions - the Program Specialist IV on Maui. On June 18, 2021, we received the Governor's approval to fill the position. We are awaiting a recruitment listing from Human Resources Office. Projected to be filled by December 30, 2023.

related legislative measures around telehealth and housing.

Item 5: The variance is due to missing policies around "walkable" communities.

Item 6: No significant change

Item 7: The variance is due to our attempts to do more in person activities and not as many zoom meetings. We are now doing more hybrid meetings to reach a greater number of people next quarter.

PART II - MEASURES OF EFFECTIVENESS

Item 1: The variance is due to us being able to collaborate with more private provider agencies to help us with the implementation of our State plan.

Item 2: The variance is due to a greater number of individuals being educated on our state plan and being satisfied with it.

PART III - PROGRAM TARGET GROUPS

Due to the effects of Covid-19, some providers agencies haven't been able to get back to full capacity, there were nine we weren't able to connect with.

PART IV - PROGRAM ACTIVITIES

Item 1: No significant change.

Item 2: The variance is due to our attempts to do more in person activities and not as many zoom meetings. We are now doing more hybrid meetings to reach a greater number of people next quarter.

Item 3: No significant change

Item 4: The variance is due to an increase in Developmental Disabilities-

PROGRAM TITLE: GENERAL ADMINISTRATION
 PROGRAM-ID: HTH-907
 PROGRAM STRUCTURE NO: 050504

	FISCAL YEAR 2022-23				THREE MONTHS ENDED 09-30-23				NINE MONTHS ENDING 06-30-24						
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%			
PART I: EXPENDITURES & POSITIONS															
RESEARCH & DEVELOPMENT COSTS															
POSITIONS															
EXPENDITURES (\$1,000's)															
OPERATING COSTS															
POSITIONS	142.00	111.00	-	31.00	22	182.00	130.00	-	52.00	29	182.00	182.00	+	0.00	0
EXPENDITURES (\$1000's)	15,742	21,372	+	5,630	36	7,685	4,292	-	3,393	44	23,056	26,449	+	3,393	15
TOTAL COSTS															
POSITIONS	142.00	111.00	-	31.00	22	182.00	130.00	-	52.00	29	182.00	182.00	+	0.00	0
EXPENDITURES (\$1000's)	15,742	21,372	+	5,630	36	7,685	4,292	-	3,393	44	23,056	26,449	+	3,393	15
	FISCAL YEAR 2022-23				FISCAL YEAR 2023-24										
	PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%							
PART II: MEASURES OF EFFECTIVENESS															
1. % ADMIN COSTS IN RELATION TO TOTAL DEPT COST	1	1	+	0	0	1	1	+	0	0	1	1	+	0	0
2. # ADMIN BILLS ENACTED	10	11	+	1	10	10	10	+	0	0	10	10	+	0	0
3. % OF KEY COMM STAKHLDRS ENGAGE IN PHP OR ER ACT	75	75	+	0	0	75	75	+	0	0	75	75	+	0	0
PART III: PROGRAM TARGET GROUP															
1. STATEWIDE POPULATION (THOUSANDS)	1442	1440	-	2	0	1442	1442	+	0	0	1442	1442	+	0	0
2. # OF PROGRAMS & ATTACHED AGENCIES	24	25	+	1	4	24	25	+	1	4	24	25	+	1	4
3. # AUTHORIZED POSITIONS (PERM & TEMP)	3195	3353	+	158	5	3195	3353	+	158	5	3195	3353	+	158	5
4. # OF KEY COMMUN STAKEHLDRS FOR PHP AND EMERG RESPO	65	65	+	0	0	65	65	+	0	0	65	65	+	0	0
PART IV: PROGRAM ACTIVITY															
1. # LEG PROPOSALS TRACKED FOR INFO OR TESTIMONY	1200	1300	+	100	8	1200	1200	+	0	0	1200	1200	+	0	0
2. # ADMIN BILLS INTRODUCED TO BOTH HOUSE & SENATE	15	15	+	0	0	15	15	+	0	0	15	15	+	0	0
3. # KEY COMMUN STAKHLDRS ENGAG 1+ PHP OR ER ACTIVI	52	55	+	3	6	52	52	+	0	0	52	52	+	0	0

VARIANCE REPORT NARRATIVE FY 2023 AND FY 2024

05 05 04
HTH 907

PROGRAM TITLE: GENERAL ADMINISTRATION

PART I - EXPENDITURES AND POSITIONS

Fiscal Year 2022-23: At the end of the fiscal year, there were 31.0 vacant positions in HTH907 due to delays in filling the positions. The expenditure variance at the end of the fourth quarter is due to expenditures from non-appropriated funds.

Fiscal Year 2023-24: At the end of the first quarter, there were 52.0 vacant positions in HTH 907 due to delays in filling the positions. The expenditure variance for the first quarter is due to vacancy savings.

healthcare and medical needs, conducting community outreach and education re: environmental health precautions, mental/behavioral health services, and many more activities to support response and ongoing recovery efforts.

PART II - MEASURES OF EFFECTIVENESS

Item 2: The greater number of enacted measures stems from more effective collaboration with state agencies with shared policy goals (e.g., the Department of Health for vaping control), improved communication with stakeholders due to full in-person hearings, and expanded support from the Governor's Policy Office.

Item 3: Percent of Key Community Stakeholders engaged in Public Health Preparedness (PHP), or Emergency Response activity remained level. Stakeholders participated in all-hazards planning, prevention and mitigation actions, community outreach/education, and other emergency preparedness and response efforts.

PART III - PROGRAM TARGET GROUPS

No significant variances.

PART IV - PROGRAM ACTIVITIES

Item 3: Number of Key Community Stakeholders engaged in 1+ PHP or emergency response activity had slightly decreased as the COVID-19 pandemic cases declined but had an uptick in the first quarter of this year due to the Maui County brushfires. Stakeholders engaged in emergency response efforts including volunteering at shelters, providing personal protective equipment, food and other wraparound services, supporting

PROGRAM TITLE: OFFICE OF LANGUAGE ACCESS
 PROGRAM-ID: HTH-908
 PROGRAM STRUCTURE NO: 050505

	FISCAL YEAR 2022-23				THREE MONTHS ENDED 09-30-23				NINE MONTHS ENDING 06-30-24						
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%			
PART I: EXPENDITURES & POSITIONS															
RESEARCH & DEVELOPMENT COSTS															
POSITIONS															
EXPENDITURES (\$1,000's)															
OPERATING COSTS															
POSITIONS	6.00	5.00	-	1.00	17	6.00	5.00	-	1.00	17	6.00	6.00	+	0.00	0
EXPENDITURES (\$1000's)	684	652	-	32	5	132	126	-	6	5	567	573	+	6	1
TOTAL COSTS															
POSITIONS	6.00	5.00	-	1.00	17	6.00	5.00	-	1.00	17	6.00	6.00	+	0.00	0
EXPENDITURES (\$1000's)	684	652	-	32	5	132	126	-	6	5	567	573	+	6	1
	FISCAL YEAR 2022-23				FISCAL YEAR 2023-24										
	PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%							
PART II: MEASURES OF EFFECTIVENESS															
1. % STATE AGENCIES SUBMITG REVISED LANG ACCESS PLANS	35	65	+	30	86	75	75	+	0	0					
2. % OF STATE AGENCIES MONITORED FOR COMPLIANCE	NO DATA	69	-	-69	0	50	50	+	0	0					
3. % OF SUBMITTED LANGUAGE ACCESS PLANS	NO DATA	100	-	-100	0	90	90	+	0	0					
4. % OF INCOMING TECHNICAL ASSISTANCE REQUESTS	NO DATA	100	-	-100	0	90	90	+	0	0					
5. % OF LANGUAGE ACCESS COMPLAINTS RESOLVED	NO DATA	100	-	-100	0	90	90	+	0	0					
6. % OF NEW RECRUITED INTERPRETERS COMPLETE TRAINING	NO DATA	67	-	-67	0	85	85	+	0	0					
PART III: PROGRAM TARGET GROUP															
1. STATE AGENCIES + STATE-FUNDED ENTITIES	37	40	+	3	8	40	40	+	0	0					
2. LIMITED ENGLISH PROFICIENCY PERSONS & COMMUNITIES	1566	1463	-	103	7	1500	1500	+	0	0					
3. INTERPRETERS AND TRANSLATORS	NO DATA	248	-	-248	0	200	200	+	0	0					
PART IV: PROGRAM ACTIVITY															
1. # OF SITE VISITS CONDUCTED FOR COMPLIANCE	NO DATA	0	-	0	0	150	150	+	0	0					
2. # OF TECHNICAL ASSISTANCE REQUESTS RECEIVED	NO DATA	39	-	-39	0	40	40	+	0	0					
3. # OF INTERAGENCY/COMMUNITY MEETINGS CONDUCTED	20	21	+	1	5	24	24	+	0	0					
4. # PUBLIC COMPLAINTS OF LANGUAGE ACCESS VIOLATIONS	0	1	+	1	0	5	5	+	0	0					
5. # OF OUTREACH, EDUCATION AND TRAINING CONDUCTED	35	36	+	1	3	36	36	+	0	0					
6. # OF MULTILINGUAL MATERIALS DISTRIBUTED	NO DATA	657	+	657	0	1000	1000	+	0	0					

VARIANCE REPORT NARRATIVE FY 2023 AND FY 2024

05 05 05
HTH 908

PROGRAM TITLE: OFFICE OF LANGUAGE ACCESS

PART I - EXPENDITURES AND POSITIONS

Expenditures: No significant variances.

Positions: The variances in the number of positions for the first three months of FY 24 was primarily due the establishment of a new position as authorized by Act 248, SLH 2022, as well as the relatively small full-time equivalent positions that one vacancy will put it into a high percentage variance. The position is currently under recruitment.

PART II - MEASURES OF EFFECTIVENESS

Item 1: Due to the executive memo from the Governor's office and the additional Office of Language Access (OLA) staff tasked with coordinating and implementing program activities, there has been an increased number of State agencies that have revised and updated their existing language access plans.

Items 2, 3, 4, 5, and 6: Due to the review and revision of the program structure, objectives, and performance measures for the fiscal biennium budget for 2023-2025 and the 2026-2029 planning period, these items are new and revised measures of effectiveness that are being implemented for the first time. Therefore, the variance report does not contain planned data for FY 23-24, which means that the variance between 'planned' and 'actual' is not available.

PART III - PROGRAM TARGET GROUPS

Items 1 and 2: No significant variances.

Item 3: Due to the review and revision of the program structure, objectives, and performance measures for the fiscal biennium budget for 2023-2025 and the 2026-2029 planning period, this is a new program target group that is being implemented for the first time. Therefore, the variance report does not contain planned data for FY 2023-2024, which means that the variance between 'planned' and 'actual' is not available.

PART IV - PROGRAM ACTIVITIES

Items 1, 2, and 6: Due to the review and revision of the program structure, objectives, and performance measures for the fiscal biennium budget for 2023-2025 and the 2026-2029 planning period, these items are new and revised program activities that are being implemented for the first time. Therefore, the variance report does not contain planned data for FY 2023-2024, which means that the variance between 'planned' and 'actual' is not available.

Items 3 and 5: No significant variances.

Item 4: While OLA receives many inquiries, it is difficult for OLA to predict the number of official complaints that may be filed with the office.