CALIFORNIA CAN'T WAIT

PUBLIC HEALTH EQUITY AND READINESS OPPORTUNITY (HERO) INITIATIVE

The California Can't Wait Coalition is a broad-based group of 84 organizations dedicated to protecting the health and safety of our communities and delivering health equity. Led by local public health departments, county governments, frontline workers, and community advocates, we urge the Legislature to remain committed to investing \$300M annually to rebuild our public health workforce and infrastructure, with \$200M dedicated to local public health departments.

Our Coalition also calls on the Legislature to dedicate a portion of the robust budget surplus to support various one-time funding requests to address public health workforce recruitment and retention challenges and provide our existing workforce with upward mobility opportunities to facilitate a pipeline of trained public health professionals.

BUDGET REQUEST PROPOSAL DESCRIPTION

PUBLIC HEALTH WORKFORCE CAPACITY

\$300M Ongoing GF

Local and State Public Health Workforce

Pursuant to the FY 21-22 state budget agreement, dedicate \$300M ongoing to rebuild our public health workforce, with \$200M dedicated to local public health departments.

PUBLIC HEALTH RECRUITMENT AND RETENTION

\$120M one-time (over 3 years)

Public Health Recruitment and Retention Stipend

Provide stipends for positions that the local health department deems hard to recruit and retain. Positions may include but are not limited to epidemiologists, public health laboratory directors, health officers, public health nurses, infectious disease specialists, food and disease surveillance, and information systems/data analysts. Stipends could support loan repayment, sign on bonuses, longevity bonuses, or other recruitment or retention strategies, and would include a \$10M set-aside for rural and Central Valley counties.

\$10M one-time (over 3 years)

Waive Public Health Nurse Certification Fees

Waive public health nurse certification and recertification fees for 3 years. Funds would go directly to the Board of Registered Nursing (BRN) to cover the BRN costs previously funded through fees.

Rationale: Public health nurses are required to pay for an additional certification, but do not make as much as their counterparts who are also Registered Nurses working in different settings.

"Over the past decade local and state health departments have lost 20% of their workforce, and local health department budgets shrank by as much as 24%. Almost all funding sources for local health departments have been declining at the same time that public health threats are growing – such as natural disasters, Zika, Ebola and now COVID-19."

SOURCE: Public Health Alliance of Southern California, "Investing in our Local Health Departments: How Our Funding Decisions Today Will Determine California's Future." June 2020

PROPOSAL DESCRIPTION

PUBLIC HEALTH TRAINING AND PIPELINE INVESTMENTS

\$12.8M one-time (over 4 years)

Incumbent Worker Upskill Training

Establish the Public Health Workforce Career Ladder Education and Development Program to provide education and training for existing employees within the public health workforce. This will help both new and long-standing workers to obtain employment that requires an advanced degree. Participants should be required to stay within the public health workforce for five years following completion of the program and maintain eligibility for educational grants and complimentary stipends to offset up to 12 hours per workweek to complete educational requirements.

Local public health employers willing to grant existing employees the requisite time off will be eligible for enhanced grants to hire additional employees necessary to support the goals of the program.

Examples: Lab assistants seeking to become microbiologists, Bachelor of Science in Nursing (BSNs) staff seeking to become infection control nurses and community health workers seeking to become public health investigators.

\$24M one-time (over 3 years)

California Public Health Pathways Training Corps (CA-PHC)

The CA-PHC is a workforce pathway for early-career public health professionals from diverse backgrounds and disproportionately affected communities to conduct communicable disease prevention and control, community engagement, and emergency response activities at local health department host sites. Funding would support larger cohorts and would expand the program to include interns from community colleges, CSUs and UCs.

Estimate: 100 trainees per year for 3 years.

\$6.5M one-time (over 3 years)

California Microbiologist Training

Dedicate one-time funding to increase the number of Public Health Microbiologist Trainees in California, a requirement that must be fulfilled to become a California Certified Public Health Microbiologists (PHM's). PHMs are professional laboratorians that specialize in detecting, isolating, and identifying the microorganisms that are associated with infectious and communicable diseases. In a public health laboratory, PHM's perform analyses on specimens from humans, as well as from water supplies, food and the environment. They also provide laboratory support for the surveillance, control and prevention of communicable diseases and other health hazards in the community.

Estimate: 30 trainees per year for 3 years.

\$6.6M one-time (over 3 years)

Public Health Lab Aspire

The Lab Aspire Program was established in 2006 to address the severe shortage of trained, qualified public health laboratory directors in California. The program trains and prepares qualified professionals to direct local California Public Health Laboratories. The funding would bring the program back to original levels of funding, increase participation, and grow the pipeline of public health laboratory directors.

\$6.5M one-time (over 3 years)

California Epidemiologic Investigation Service (Cal-EIS) Training

Dedicate one-time funding to increase the number of fellows in the California Epidemiologic Investigation Service
Training Program - a one or two-year training program to prepare epidemiologists for public health leadership positions
throughout California. Fellows may be placed in CDPH Offices or in local health departments throughout the state.

Estimate: 100 fellows over 3 years.













