



Date: March 18, 2022

To: Assembly Member Dr. Joaquin Arambula  
Chair, Assembly Budget Subcommittee No. 1

From: Michelle Gibbons, Executive Director

Re: March 21 Hearing: 4265 California Department of Public Health (CDPH)

The County Health Executives Association of California (CHEAC), representing local health departments throughout the state, writes to provide input on key proposals from the Governor's January Budget:

**Issue 5: Foundation for The Future of Public Health**

In keeping with the budget agreement secured by the Legislature last year, the Governor's January Budget proposes \$300 million in ongoing State General Fund for state and local health departments. CHEAC supports the Governor's budget proposal providing \$100 million ongoing to the state and \$200 million ongoing to local health departments which will allow local health departments to sustain positions added during the COVID-19 pandemic and expand local health department staffing.

CHEAC also supports the proposed allocation methodology provided in the spending plan with a base of \$350,000 to every local health department and the remainder allocated based on 50 percent population, 25 percent race/ethnicity, and 25 percent poverty. We believe this formula distributes funding with equity as the priority.

**Issue 6: Covid-19 Emergency Response and Operations**

CHEAC supports the Governor's proposal to provide \$760.8 million in FY 2022-23 to support COVID-19 response efforts. As the COVID-19 pandemic continues, ongoing response efforts are necessary to protect the health of our communities.

Local health departments support efforts to increase vaccination rates and access to timely testing in the community, including through the placement and expansion of OptumServe testing sites. During instances where supplies may be limited, local health departments rely on the state's purchasing power as demonstrated by the deployment of over-the-counter antigen tests to increase community access. Lastly, during the recent surge, local health department staffing was impacted by COVID-19 cases. In these instances, having additional staff deployed to local health jurisdictions that can be used flexibly to support vaccination, testing, and contact tracing efforts in vulnerable settings is essential to ensuring services continue without significant interruption.

The deployment of resources into local health jurisdictions is effective when done in coordination with the local health department. By leveraging local health departments' local expertise and knowledge of diverse needs, the risk for duplication of services and activities is minimized. We encourage the state to reinforce this approach in the deployment of additional resources.

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**Issue 7: Disease Surveillance Readiness, Response, Recovery, and Maintenance of IT Operations**

CHEAC supports the continuation of systems stood up during the pandemic, such as the CalCONNECT system. However, we would recommend that CDPH dedicate funding to assess the current public health information technology system landscape and create a plan to modernize and ensure interoperability of these systems across the state and local levels.

**Issue 9: Climate and Health Surveillance Program**

CHEAC supports the Governor's proposal to provide \$10 million to CDPH to establish a monitoring program to track emerging or intensified climate-sensitive health impacts and diseases and create real-time notifications for local public health departments, providers, and at risk-patients.

Climate change can impact health in many ways, including illness, injury, and death from extreme weather events. It impacts social and environmental determinants of health, such as safe drinking water, sufficient food, and secure shelter. California must have the capability to track data on disease risks and disease occurrence, as well as the capacity to model and forecast climate-related health effects.

**Issue 10: Public Health Regional Climate Planning**

CHEAC supports the proposed investment of \$25 million in 2022-23 to provide grants to develop regional Climate and Health Resilience Plans. Local health departments prepare for and respond to the health effects of climate change events such as wildfires, flooding, and heat waves/heat-related illness.

CHEAC continues to have outstanding questions around how the state will ensure coordination of these efforts given the unique role and expertise of local health departments in preparedness and response activities. It will be critical to ensure that grant-supported efforts of community partners are not duplicative, and we encourage the state to coordinate these activities through local health departments. CHEAC looks forward to partnering with the state on these grant funding details.

**Issue 13: Alzheimer's Healthy Brain Initiative**

CHEAC supports the proposed investment of \$10 million one-time General Fund to continue the Healthy Brain Initiative in the existing six local health jurisdictions and expand in up to six additional local health jurisdictions.

Cognitive decline, ranging from mild cognitive impairment to dementia, can have significant and costly implications for an individual's overall health and wellbeing. The CDC Healthy Brain Initiative details a comprehensive, multidisciplinary path forward in promoting cognitive health, addressing cognitive impairment, and meeting needs of caregivers. The Initiative's action agenda items provide further guidance on risk identification and reduction, education and training, policy and partnership development, and monitoring and evaluation to more expeditiously slow, stop, or prevent the development of this costly condition.

By strengthening state and local public health capacity, developing partnerships, and integrating cognitive health into existing public health efforts, California can make progress in reducing risk for cognitive decline amongst our residents.

**Issue 22: California Home Visiting Expansion**

CHEAC supports the Governor's Budget proposal to provide \$37.5 million ongoing General Fund to expand the California Home Visiting Program (CHVP). In California, 29 local home visiting programs operate throughout the state providing one-on-one support to pregnant and newly-parenting families with risk factors such as domestic violence, inadequate income, unstable housing, education less than 12 years, substance misuse, and depression and/or mental illness. Local health department public health nurses or paraprofessionals work with families for the first three years of an infant's life to prevent child abuse and neglect, support positive parenting, improve maternal and child health, and promote child development and school readiness utilizing evidence-based approaches.

This proposal would increase the number of families and children that would receive this intensive and specialized attention. CHEAC encourages CDPH, in consultation with local health departments, to explore additional models that may be implemented to ensure we are reaching our most vulnerable families. CHEAC also encourages CDPH to utilize this funding to first ensure existing programs are adequately funded before expanding to new jurisdictions.

**Issue 23: Black Infant Health (BIH) Program**

CHEAC supports the Governor's proposed investment of \$12.5 million ongoing General Fund to address African American infant morbidity and mortality. Local health departments administer the BIH program on behalf of the state. Programs may leverage community partnerships to reach target populations, and engagement of community-based organizations happens through the local health department to ensure appropriate implementation of the program and attainment of goals.

CHEAC would encourage CDPH to provide ongoing technical assistance to local health departments and facilitation of best practice sharing across BIH programs. We also encourage CDPH to ensure existing programs are adequately funded to ensure the maximum impact.

**Issue 24: Books for Low-Income Children**

CHEAC supports the Governor's proposal to provide \$10 million in FY 2022-23 to support an early childhood literacy program for participants in the Women, Infants, and Children (WIC) Program and would welcome technical assistance efforts to support successful local implementation and increased participation.

Should you have any questions about the above items, please contact CHEAC Executive Director Michelle Gibbons at [mgibbons@cheac.org](mailto:mgibbons@cheac.org) or 916-327-7540. Thank you.

cc: Honorable Members, Assembly Budget Subcommittee No. 1  
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